

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
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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>UFCW UNION LOCAL NO. 655, FOOD EMPLOYER'S JOINT PE</u>	1b Three-digit plan number (PN) ▶	<u>001</u>
2a Plan sponsor's name (employer, if for a single-employer plan) Mailing address (include room, apt., suite no. and street, or P.O. Box) City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions) <u>BOARD OF TRUSTEES OF UFCW LOCAL 655, FOOD EMPLOYERS JOINT PENSION PLAN</u> <u>300 WEIDMAN ROAD</u> <u>BALLWIN, MO 63011-4433</u>		
1c Effective date of plan <u>01/01/1963</u>		
2b Employer Identification Number (EIN) <u>43-6058365</u>		
2c Plan Sponsor's telephone number <u>636-394-6500</u>		
2d Business code (see instructions) <u>445110</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.	10/16/2023	SUSAN PERNEY
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	Filed with authorized/valid electronic signature.	10/16/2023	LEVI EODINS
	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 20172
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) 7606
a(2) Total number of active participants at the end of the plan year		6a(2) 7157
b Retired or separated participants receiving benefits		6b 6280
c Other retired or separated participants entitled to future benefits.....		6c 5844
d Subtotal. Add lines 6a(2) , 6b , and 6c		6d 19281
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.		6e 658
f Total. Add lines 6d and 6e		6f 19939
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item).....		6g
h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested.....		6h
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)		7 25
8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions: 1B		
b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristics Codes in the instructions:		
9a Plan funding arrangement (check all that apply) (1) ☒ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor		9b Plan benefit arrangement (check all that apply) (1) ☒ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor
10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)		
a Pension Schedules (1) ☒ R (Retirement Plan Information) (2) ☒ MB (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary (3) ☐ SB (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary		b General Schedules (1) ☒ H (Financial Information) (2) ☐ I (Financial Information – Small Plan) (3) ☒ 2 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
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For calendar plan year 2022 or fiscal plan year beginning 01/01/2022 and ending 12/31/2022	
A Name of plan UFCW UNION LOCAL NO. 655, FOOD EMPLOYER'S JOINT PE	B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 BOARD OF TRUSTEES OF UFCW LOCAL 655, FOOD EMPLOYERS JOINT PENSION PLAN	D Employer Identification Number (EIN) 43-6058365

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.
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1 Coverage Information:

(a) Name of insurance carrier PRINCIPAL LIFE INSURANCE COMPANY

(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
42-0127290	61271	307436		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
0	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
--

(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	

(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** 3558281**5** Current value of plan's interest under this contract in separate accounts at year end..... **5****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) ▶**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** 3656170**c** Additions: (1) Contributions deposited during the year **7c(1)**
(2) Dividends and credits **7c(2)**
(3) Interest credited during the year **7c(3)** 100693
(4) Transferred from separate account **7c(4)**
(5) Other (specify below) **7c(5)** -181487

▶ RET ALLOCATED, MKT VALUE

(6) Total additions **7c(6)** -80794**d** Total of balance and additions (add lines **7b** and **7c(6)**) **7d** 3575376**e** Deductions:(1) Disbursed from fund to pay benefits or purchase annuities during year **7e(1)** 6665
(2) Administration charge made by carrier **7e(2)** 10430
(3) Transferred to separate account **7e(3)**
(4) Other (specify below) **7e(4)**(5) Total deductions **7e(5)** 17095**f** Balance at the end of the current year (subtract line **7e(5)** from line **7d**) **7f** 3558281

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 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
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For calendar plan year 2022 or fiscal plan year beginning 01/01/2022 and ending 12/31/2022	
A Name of plan UFCW UNION LOCAL NO. 655, FOOD EMPLOYER'S JOINT PE	B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 BOARD OF TRUSTEES OF UFCW LOCAL 655, FOOD EMPLOYERS JOINT PENSION PLAN	D Employer Identification Number (EIN) 43-6058365

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.
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1 Coverage Information:

(a) Name of insurance carrier
THE PRUDENTIAL INSURANCE COMPANY OF AMERICA

(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
22-1211670	68241	030530		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
0	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

(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	

(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	
5	Current value of plan's interest under this contract in separate accounts at year end.....	5	43552082

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..... Specify nature of costs ▶	6d	

e Type of contract: (1) ☐ individual policies (2) ☐ group deferred annuity
(3) ☐ other (specify) ▶

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	
c	Additions: (1) Contributions deposited during the year	7c(1)	
	(2) Dividends and credits.....	7c(2)	
	(3) Interest credited during the year.....	7c(3)	
	(4) Transferred from separate account.....	7c(4)	
	(5) Other (specify below)	7c(5)	
	▶		
	(6) Total additions.....	7c(6)	0
d	Total of balance and additions (add lines 7b and 7c(6))	7d	
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)	
	(4) Other (specify below)	7e(4)	
	▶		
	(5) Total deductions.....	7e(5)	0
f	Balance at the end of the current year (subtract line 7e(5) from line 7d)	7f	

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.	10b	

Specify nature of costs.

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 MB (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6059 of the Internal Revenue Code (the Code). ► File as an attachment to Form 5500 or 5500-SF.	OMB No. 1210-0110 2022 This Form is Open to Public Inspection
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For calendar plan year 2022 or fiscal plan year beginning 01/01/2022 and ending 12/31/2022

► Round off amounts to nearest dollar.
► Caution: A penalty of \$1,000 will be assessed for late filing of this report unless reasonable cause is established.

A Name of plan UFCW UNION LOCAL NO. 655, FOOD EMPLOYER'S JOINT PE	B Three-digit plan number (PN) ► 001
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF BOARD OF TRUSTEES OF UFCW LOCAL 655, FOOD EMPLOYERS JOINT PENSION PLAN	D Employer Identification Number (EIN) 43-6058365

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

1a Enter the valuation date: Month 01 Day 01 Year 2022	
b Assets	
(1) Current value of assets	1b(1) 885603367
(2) Actuarial value of assets for funding standard account	1b(2) 784886152
c (1) Accrued liability for plan using immediate gain methods	1c(1) 769154717
(2) Information for plans using spread gain methods:	
(a) Unfunded liability for methods with bases	1c(2)(a)
(b) Accrued liability under entry age normal method	1c(2)(b)
(c) Normal cost under entry age normal method	1c(2)(c)
(3) Accrued liability under unit credit cost method	1c(3) 769154717
d Information on current liabilities of the plan:	
(1) Amount excluded from current liability attributable to pre-participation service (see instructions)	1d(1)
(2) "RPA '94" information:	
(a) Current liability	1d(2)(a) 1476238499
(b) Expected increase in current liability due to benefits accruing during the plan year	1d(2)(b) 11393673
(c) Expected release from "RPA '94" current liability for the plan year	1d(2)(c) 54633036
(3) Expected plan disbursements for the plan year	1d(3) 56383036

Statement by Enrolled Actuary
To the best of my knowledge, the information supplied in this schedule and accompanying schedules, statements and attachments, if any, is complete and accurate. Each prescribed assumption was applied in accordance with applicable law and regulations. In my opinion, each other assumption is reasonable (taking into account the experience of the plan and reasonable expectations) and such other assumptions, in combination, offer my best estimate of anticipated experience under the plan.

SIGN HERE	
Signature of actuary	Date
WILLIAM GITTERMAN, FSA, MAAA	20-08743
Type or print name of actuary	Most recent enrollment number
SEGAL	312-984-8500
Firm name	Telephone number (including area code)
101 N. WACKER DR. STE 500, CHICAGO, IL 60606-1724	
Address of the firm	

If the actuary has not fully reflected any regulation or ruling promulgated under the statute in completing this schedule, check the box and see instructions ☐

a Current value of assets (see instructions)		2a	902715767
b "RPA '94" current liability/participant count breakdown:		(1) Number of participants	(2) Current liability
(1) For retired participants and beneficiaries receiving payment.....		6747	712682841
(2) For terminated vested participants		5738	444766954
(3) For active participants:			
(a) Non-vested benefits			6064624
(b) Vested benefits.....			312724080
(c) Total active		3931	318788704
(4) Total.....		16416	1476238499
c If the percentage resulting from dividing line 2a by line 2b(4), column (2), is less than 70%, enter such percentage		2c	61.15 %

(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	
07/01/2022	10481389					
07/01/2022	2197558					
			Totals ►	3(b)	12678947	
(d) Total withdrawal liability amounts included in line 3(b) total.....					3(c)	
					3(d)	2197558

a Funded percentage for monitoring plan's status (line 1b(3) divided by line 1c(3)).....	4a	102.0 %
b Enter code to indicate plan's status (see instructions for attachment of supporting evidence of plan's status). If entered code is "N," go to line 5	4b	N
c Is the plan making the scheduled progress under any applicable funding improvement or rehabilitation plan? ☐ Yes ☐ No		
d If the plan is in critical status or critical and declining status, were any benefits reduced (see instructions)? ☐ Yes ☐ No		
e If line d is "Yes," enter the reduction in liability resulting from the reduction in benefits (see instructions), measured as of the valuation date	4e	
f If the plan is in critical status or critical and declining status, and is: • Projected to emerge from critical status within 30 years, enter the plan year in which it is projected to emerge; • Projected to become insolvent within 30 years, enter the plan year in which insolvency is expected and check here..... ☐ • Neither projected to emerge from critical status nor become insolvent within 30 years, enter "9999."	4f	

a	☐ Attained age normal	b	☐ Entry age normal	c	☒ Accrued benefit (unit credit)	d	☐ Aggregate
e	☐ Frozen initial liability	f	☐ Individual level premium	g	☐ Individual aggregate	h	☐ Shortfall
i	☐ Other (specify):						

j	If box h is checked, enter period of use of shortfall method.....	5j	
k	Has a change been made in funding method for this plan year?.....	☐	Yes ☒ No
l	If line k is "Yes," was the change made pursuant to Revenue Procedure 2000-40 or other automatic approval?.....	☐	Yes ☐ No
m	If line k is "Yes," and line l is "No," enter the date (MM-DD-YYYY) of the ruling letter (individual or class) approving the change in funding method	5m	

6 Checklist of certain actuarial assumptions:

a Interest rate for "RPA '94" current liability	6a	2.22 %
	Pre-retirement	Post-retirement
b Rates specified in insurance or annuity contracts	☐ Yes ☐ No ☒ N/A	☐ Yes ☐ No ☒ N/A
c Mortality table code for valuation purposes:		
(1) Males	6c(1)	A
(2) Females	6c(2)	A
d Valuation liability interest rate	6d	7.00 %
e Salary scale	6e	% ☒ N/A
f Withdrawal liability interest rate:		
(1) Type of interest rate	6f(1)	☐ Single rate ☐ ERISA 4044 ☒ Other ☐ N/A
(2) If "Single rate" is checked in (1), enter applicable single rate	6f(2)	%
g Estimated investment return on actuarial value of assets for year ending on the valuation date	6g	11.2 %
h Estimated investment return on current value of assets for year ending on the valuation date	6h	17.6 %
i Expense load included in normal cost reported in line 9b	6i	☐ N/A
(1) If expense load is described as a percentage of normal cost, enter the assumed percentage	6i(1)	%
(2) If expense load is a dollar amount that varies from year to year, enter the dollar amount included in line 9b	6i(2)	1687346
(3) If neither (1) nor (2) describes the expense load, check the box	6i(3)	☐

7 New amortization bases established in the current plan year:

(1) Type of base	(2) Initial balance	(3) Amortization Charge/Credit
1	-27554620	-2827429
3	1282287	131578
4	431774	44305

8 Miscellaneous information:

a If a waiver of a funding deficiency has been approved for this plan year, enter the date (MM-DD-YYYY) of the ruling letter granting the approval	8a	
b Demographic, benefit, and contribution information		
(1) Is the plan required to provide a projection of expected benefit payments? (See instructions) If "Yes," see instructions for required attachment.	☒ Yes ☐ No	
(2) Is the plan required to provide a Schedule of Active Participant Data? (See instructions).	☒ Yes ☐ No	
(3) Is the plan required to provide a projection of employer contributions and withdrawal liability payments? (See instructions) If "Yes," attach a schedule.	☒ Yes ☐ No	
c Are any of the plan's amortization bases operating under an extension of time under section 412(e) (as in effect prior to 2008) or section 431(d) of the Code?	☐ Yes ☒ No	
d If line c is "Yes," provide the following additional information:		
(1) Was an extension granted automatic approval under section 431(d)(1) of the Code?	☐ Yes ☐ No	
(2) If line 8d(1) is "Yes," enter the number of years by which the amortization period was extended ..	8d(2)	
(3) Was an extension approved by the Internal Revenue Service under section 412(e) (as in effect prior to 2008) or 431(d)(2) of the Code?	☐ Yes ☐ No	
(4) If line 8d(3) is "Yes," enter number of years by which the amortization period was extended (not including the number of years in line (2))	8d(4)	
(5) If line 8d(3) is "Yes," enter the date of the ruling letter approving the extension	8d(5)	
(6) If line 8d(3) is "Yes," is the amortization base eligible for amortization using interest rates applicable under section 6621(b) of the Code for years beginning after 2007?	☐ Yes ☐ No	
e If box 5h is checked or line 8c is "Yes," enter the difference between the minimum required contribution for the year and the minimum that would have been required without using the shortfall method or extending the amortization base(s)	8e	

9 Funding standard account statement for this plan year:**Charges to funding standard account:**

a Prior year funding deficiency, if any	9a	
b Employer's normal cost for plan year as of valuation date	9b	5292542

c Amortization charges as of valuation date:

- (1) All bases except funding waivers and certain bases for which the amortization period has been extended
- (2) Funding waivers.....
- (3) Certain bases for which the amortization period has been extended

	Outstanding balance	
9c(1)	214040000	27602248
9c(2)		
9c(3)		

d Interest as applicable on lines 9a, 9b, and 9c.....**9d** 2302635**e** Total charges. Add lines 9a through 9d.....**9e** 35197425**Credits to funding standard account:****f** Prior year credit balance, if any**9f** 112465470**g** Employer contributions. Total from column (b) of line 3.....**9g** 12678947**h** Amortization credits as of valuation date.....

	Outstanding balance	
9h	117305965	20773921

i Interest as applicable to end of plan year on lines 9f, 9g, and 9h.....**9i** 9770486**j** Full funding limitation (FFL) and credits:

- (1) ERISA FFL (accrued liability FFL).....
- (2) "RPA '94" override (90% current liability FFL)
- (3) FFL credit.....

9j(1)	107779558	
9j(2)	537512663	
9j(3)		

k (1) Waived funding deficiency.....**9k(1)****(2)** Other credits.....**9k(2)****l** Total credits. Add lines 9f through 9i, 9j(3), 9k(1), and 9k(2)**9l** 155688824**m** Credit balance: If line 9l is greater than line 9e, enter the difference**9m** 120491399**n** Funding deficiency: If line 9e is greater than line 9l, enter the difference**9n****o** Current year's accumulated reconciliation account:**(1)** Due to waived funding deficiency accumulated prior to the 2022 plan year**9o(1)****(2)** Due to amortization bases extended and amortized using the interest rate under section 6621(b) of the Code:**(a)** Reconciliation outstanding balance as of valuation date.....**9o(2)(a)****(b)** Reconciliation amount (line 9c(3) balance minus line 9o(2)(a))**9o(2)(b)****(3)** Total as of valuation date**9o(3)****10** Contribution necessary to avoid an accumulated funding deficiency. (see instructions.).....**10****11** Has a change been made in the actuarial assumptions for the current plan year? If "Yes," see instructions☒ Yes ☐ No

SCHEDULE C (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Service Provider Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110
		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 UFCW UNION LOCAL NO. 655, FOOD EMPLOYER'S JOINT PE	B Three-digit plan number (PN) ▶	001
C Plan sponsor's name as shown on line 2a of Form 5500 BOARD OF TRUSTEES OF UFCW LOCAL 655, FOOD EMPLOYERS JOINT PENSION PLAN	D Employer Identification Number (EIN) 43-6058365	

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation	
INVESCO TRUST COMPANY	11 GREENWAY PLAZA HOUSTON, TX 77046
46-3793325	

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation	
INVESCO ADVISERS, INC.	1555 PEACHTREE ST NE STE 1800 ATLANTA, GA 30309
58-1707262	

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation	
ENTRUST PARTNERS OFFSHORE LP	375 PARK AVENUE 24TH FLOOR NEW YORK, NY 10152
90-0644478	

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation	
GROSVENOR CAPITAL MANAGEMENT	900 NORTH MICHIGAN AVE, SUITE 1100 CHICAGO, IL 60611
36-3795985	

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

SIGULER GUFF ADVISERS, LLC

200 PARK AVENUE 23RD FLOOR
NEW YORK, NY 10166

13-3855629

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

FIDUCIARY TRUST INTL OF THE SOUTH

300 SOUTHEAST 2ND STREET
FORT LAUDERDALE, FL 33301

65-0080824

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

NEW TOWER TRUST COMPANY

7315 WISCONSIN AVENUE, SUITE 350W
BETHESDA, MD 20814

30-0872552

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

BAIRD ADVISORS

777 EAST WISCONSIN AVENUE
MILWAUKEE, WI 53202

39-6037917

(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)

PRUDENTIAL INSURANCE CO

22-1211670

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28	NONE	254227	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☐ No ☒

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

THE SEGAL COMPANY

101 N WACKER DRIVE, SUITE 500
CHICAGO, IL 60606

13-1975125

(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	NONE	263795	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

VICTORY CAPITAL MANAGEMENT

4900 TIEDMAN ROAD, 4TH FLOOR
BROOKLYN, OH 44144

13-2700161

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 68	NONE	218494	Yes ☒ No ☐	Yes ☒ No ☐	27112	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)

MARCO CONSULTING GROUP

550 WEST WASHINGTON STREET, SUITE 9
CHICAGO, IL 60661

36-3555078

(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	NONE	215792	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

INTECH INVESTMENT MANAGEMENT LLC

2401 PGA BLVD, SUITE 100
PALM BEACH GARDENS, FL 33410

01-0614895

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28	NONE	200472	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

SMITH GRAHAM & CO

6900 JPMORGAN CHASE TOWER 600 TRAVI
HOUSTON, TX 77002

76-0301817

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
51 56	NONE	161302	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☐ No ☒

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

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

BOSTON TRUST WALDEN COMPANY

ONE BEACON STREET
BOSTON, MA 02108

04-2273811

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
19 21 24 25 28 50 51	NONE	144645	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☐ No ☒

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

SUSAN PERNEY

43-6058365

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30	EMPLOYEE	142747	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

SEGAL SELECT INSURANCE SERVICES

333 WEST 34TH STREET
NEW YORK, NY 10001-2402

46-0619194

(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?
53	NONE	137090	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☐ No ☒

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

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

SIERRA INVESTMENT PARTNERS

101 YGNACIO VALLEY ROAD, SUITE 300
WALNUT CREEK, CA 94596

68-0370688

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28	NONE	121913	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

SEGALL BRYANT HAMILL

10 SOUTH WACKER DRIVE, SUITE 3500
CHICAGO, IL 60606

41-1788385

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28	NONE	116662	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

ANDERS MINKLER HUBER HELM LLP

43-0831507

(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	NONE	74326	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)

COMERICA BANK

411 WEST LAFAYETTE BOULEVARD
DETROIT, MI 48226

42-1741646

(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?
18 19 59 72	NONE	59205	Yes ☒ No ☐	Yes ☒ No ☐	9225	Yes ☒ No ☐

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

UFCW LOCAL 655

300 WEIDMAN RD
BALLWIN, MO 63011

43-0477135

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
15	LOCAL	66414	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

TONIA WOLFF

43-6058365

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30	EMPLOYEE	55113	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)

KAITLYN M MCCRARY

43-6058365

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30	EMPLOYEE	39382	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

KATHRYN GEORGE

43-6058365

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30	EMPLOYEE	37343	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

BYRNE SOFTWARE TECHNOLOGIES, INC

16091 SWINGLEY RIDGE ROAD
CHESTERFIELD, MO 63017

43-1385588

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	34051	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)

REINHART LAW OFFICE

1000 NORTH WATER STREET, SUITE 1700
MILWAUKEE, WI 53202

(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	NONE	32447	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

HAMMOND & SHINNERS PC

7730 CARONDELET AVE, SUITE 200
ST. LOUIS, MO 63105

43-1429257

(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	NONE	32118	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

MCI PRINTING INC

10017 OFFICE CENTER AVENUE
ST. LOUIS, MO 63128

43-1606509

(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?
36	NONE	28898	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)

TAMMY DIXON

43-6058365

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30	EMPLOYEE	25750	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

STATE STREET GLOBAL ADVISORS TRUST

ONE LINCOLN ST 33RD FLOOR
BOSTON, MA 02111

81-4017137

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
19	NONE	19952	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☒ No ☐

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

FIRST BANK

11901 OLIVE BLVD
CREVE COEUR, MO 63141

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	19391	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)

WESTERHEIDE & COMPANY

11430 GRAVOIS ROAD
SAPPINGTON, MO 63126

43-1176609

(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?
22	NONE	13540	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.
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For calendar plan year 2022 or fiscal plan year beginning **01/01/2022** and ending **12/31/2022**

A Name of plan UFCW UNION LOCAL NO. 655, FOOD EMPLOYER'S JOINT PE	B Three-digit plan number (PN) ►	001
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 BOARD OF TRUSTEES OF UFCW LOCAL 655, FOOD EMPLOYERS JOINT PENSION PLAN	D Employer Identification Number (EIN) 43-6058365	

Part I	Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs) (Complete as many entries as needed to report all interests in DFEs)
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a Name of MTIA, CCT, PSA, or 103-12 IE: QMA US MID CAP CORE EQUITY		
b Name of sponsor of entity listed in (a): PRUDENTIAL INSURANCE CO.		
c EIN-PN 22-1221670-010	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 43552082
a Name of MTIA, CCT, PSA, or 103-12 IE: INVESCO INTERNATIONAL GROWTH TRUST		
b Name of sponsor of entity listed in (a): STATE STREET BANK AND TRUST		
c EIN-PN 20-2583973-114	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 28333167
a Name of MTIA, CCT, PSA, or 103-12 IE: MULTI-EMPLOYER PROPERTY TRUST		
b Name of sponsor of entity listed in (a): NEW TOWER TRUST COMPANY		
c EIN-PN 52-6218800-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 21823128
a Name of MTIA, CCT, PSA, or 103-12 IE: S&P 500 FLAGSHIP FUND		
b Name of sponsor of entity listed in (a): STATE STREET BANK AND TRUST		
c EIN-PN 04-0025081-004	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 61689713
a Name of MTIA, CCT, PSA, or 103-12 IE: RUSSELL 1000 GROWTH INDEX		
b Name of sponsor of entity listed in (a): STATE STREET BANK AND TRUST		
c EIN-PN 45-6138589-109	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 59436411
a Name of MTIA, CCT, PSA, or 103-12 IE: BARINGS INTL SMALL CAP EQUITY		
b Name of sponsor of entity listed in (a): GLOBAL TRUST COMPANY		
c EIN-PN 30-6617568-003	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 17971197
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
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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>UFCW UNION LOCAL NO. 655, FOOD EMPLOYER'S JOINT PE</u>		B Three-digit plan number (PN) <u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>BOARD OF TRUSTEES OF UFCW LOCAL 655, FOOD EMPLOYERS JOINT PENSION PLAN</u>		D Employer Identification Number (EIN) <u>43-6058365</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	231099	0
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions.....	1b(1)	801475	862241
(2) Participant contributions.....	1b(2)		
(3) Other.....	1b(3)	19832047	18575441
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit).....	1c(1)	13406110	7860356
(2) U.S. Government securities	1c(2)	24410595	24869763
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)	33600324	27043721
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common.....	1c(4)(B)	150780916	94498345
(5) Partnership/joint venture interests	1c(5)	219702447	199348260
(6) Real estate (other than employer real property)	1c(6)	6150136	3031207
(7) Loans (other than to participants).....	1c(7)		
(8) Participant loans.....	1c(8)		
(9) Value of interest in common/collective trusts.....	1c(9)	246647801	189253616
(10) Value of interest in pooled separate accounts	1c(10)	53882205	43552082
(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)	101380756	110557026
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)	3656170	3558281
(15) Other	1c(15)	31164118	25888971

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		70000
f Total assets (add all amounts in lines 1a through 1e)	1f	905646199	748969310

Liabilities

g Benefit claims payable	1g		
h Operating payables	1h	14668	17540
i Acquisition indebtedness	1i		
j Other liabilities	1j	2915764	1461685
k Total liabilities (add all amounts in lines 1g through 1j)	1k	2930432	1479225

Net Assets

l Net assets (subtract line 1k from line 1f)	1l	902715767	747490085
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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)	10481389	
(B) Participants	2a(1)(B)		
(C) Others (including rollovers)	2a(1)(C)		
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		10481389
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	90468	
(B) U.S. Government securities	2b(1)(B)	738538	
(C) Corporate debt instruments	2b(1)(C)	912614	
(D) Loans (other than to participants)	2b(1)(D)		
(E) Participant loans	2b(1)(E)		
(F) Other	2b(1)(F)	2712940	
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		4454560
(2) Dividends: (A) Preferred stock	2b(2)(A)		
(B) Common stock	2b(2)(B)	2381358	
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	3283390	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		5664748
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)	231510465	
(B) Aggregate carrying amount (see instructions)	2b(4)(B)	221950515	
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)		9559950
(5) Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)		
(B) Other	2b(5)(B)	-43182200	
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		-43182200

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		-48656856
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		-8677026
(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)		-14807225
c Other income	2c		-13320991
d Total income. Add all income amounts in column (b) and enter total	2d		-98483651
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	52734213	
(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)		52734213
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)	589563	
(2) Contract administrator fees	2i(2)		
(3) Investment advisory and management fees	2i(3)	2211761	
(4) Other	2i(4)	1206494	
(5) Total administrative expenses. Add lines 2i(1) through (4)	2i(5)		4007818
j Total expenses. Add all expense amounts in column (b) and enter total	2j		56742031
Net Income and Reconciliation			
k Net income (loss). Subtract line 2j from line 2d	2k		-155225682
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: **ANDERS MINKLER HUBER HELM LLP**

(2) EIN: **43-0831507**

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

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

Part IV Compliance Questions

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

During the plan year:

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

	Yes	No	Amount
4a		X	

	Yes	No	Amount
b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)			
4b		X	
c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)			
4c		X	
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)			
4d		X	
e Was this plan covered by a fidelity bond?	X		5000000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		X	
4f		X	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?			
4g		X	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?			
4h		X	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	X		
4i	X		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.)	X		
4j	X		
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?		X	
4k		X	
l Has the plan failed to provide any benefit when due under the plan?		X	
4l		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)		X	
4m		X	
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.		X	
4n		X	

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

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

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

5c Was the plan a defined benefit plan covered under the PBGC insurance program at any time during this plan year? (See ERISA section 4021 and instructions.) ☒ Yes ☐ No ☐ Not determined
If "Yes" is checked, enter the My PAA confirmation number from the PBGC premium filing for this plan year 4869888.

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 UFCW UNION LOCAL NO. 655, FOOD EMPLOYER'S JOINT PE		B Three-digit plan number (PN) ► 001
C Plan sponsor's name as shown on line 2a of Form 5500 BOARD OF TRUSTEES OF UFCW LOCAL 655, FOOD EMPLOYERS JOINT PENSION PLAN		D Employer Identification Number (EIN) 43-6058365
Part I Distributions		
All references to distributions relate only to payments of benefits during the plan year.		
1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions.....		1
2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits): EIN(s): _____ Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.		
3 Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year.....		3 0
Part II Funding Information (If the plan is not subject to the minimum funding requirements of section 412 of the Internal Revenue Code or ERISA section 302, skip this Part.)		
4 Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)? ☐ Yes ☒ No ☐ N/A If the plan is a defined benefit plan, go to line 8.		
5 If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. Date: Month _____ Day _____ Year _____ If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.		
6 a Enter the minimum required contribution for this plan year (include any prior year accumulated funding deficiency not waived).....		6a
b Enter the amount contributed by the employer to the plan for this plan year.....		6b
c Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount).....		6c
If you completed line 6c, skip lines 8 and 9.		
7 Will the minimum funding amount reported on line 6c be met by the funding deadline? ☐ Yes ☐ No ☐ N/A		
8 If a change in actuarial cost method was made for this plan year pursuant to a revenue procedure or other authority providing automatic approval for the change or a class ruling letter, does the plan sponsor or plan administrator agree with the change? ☐ Yes ☒ No ☐ N/A		
Part III Amendments		
9 If this is a defined benefit pension plan, were any amendments adopted during this plan year that increased or decreased the value of benefits? If yes, check the appropriate box. If no, check the "No" box..... ☐ Increase ☐ Decrease ☐ Both ☐ No		
Part IV ESOPs (see instructions). If this is not a plan described under section 409(a) or 4975(e)(7) of the Internal Revenue Code, skip this Part.		
10 Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan?..... ☐ Yes ☐ No		
11 a Does the ESOP hold any preferred stock?..... ☐ Yes ☐ No		
b If the ESOP has an outstanding exempt loan with the employer as lender, is such loan part of a "back-to-back" loan? (See instructions for definition of "back-to-back" loan.)..... ☐ Yes ☐ No		
12 Does the ESOP hold any stock that is not readily tradable on an established securities market?..... ☐ Yes ☐ No		
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 **SCHNUCKS MARKETS INC**

b EIN **43-0726776** **c** Dollar amount contributed by employer **8075096**

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month **05** Day **11** Year **2025**

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 **SCHNUCKS MARKETS 534 MEAT**

b EIN **43-0726776** **c** Dollar amount contributed by employer **679116**

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 **09** Day **28** Year **2025**

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 **SCHNUCKS MARKETS 534 GROCERY**

b EIN **43-0726776** **c** Dollar amount contributed by employer **227185**

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 **09** Day **28** Year **2025**

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 **STRAUBS**

b EIN _____ **c** Dollar amount contributed by employer **220876**

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 **KROGER COMPANY**

b EIN **31-0345740** **c** Dollar amount contributed by employer **178908**

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 **STE GENEVIEVE COUNTRY MART**

b EIN _____ **c** Dollar amount contributed by employer **145832**

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): _____

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 **ROZIER**

b EIN

c Dollar amount contributed by employer

102227

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 **UFCW LOCAL 655 HEALTH & WELFARE FUN**

b EIN **23-7401847**

c Dollar amount contributed by employer

67330

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 **UFCW LOCAL 655**

b EIN **43-0477135**

c Dollar amount contributed by employer

57488

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 **CENTRAL MKT UNION - FRICKS**

b EIN

c Dollar amount contributed by employer

49519

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	64.11
b	The corresponding number for the second preceding plan year.....	15b	59.40
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: 27.5 % Investment-Grade Debt: 7.4 % High-Yield Debt: 3.3 % Real Estate: 0.4 % Other: 61.4 %

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 _____

**UNITED FOOD AND COMMERCIAL WORKERS UNION LOCAL 655 FOOD EMPLOYERS JOINT
PENSION PLAN**

**FINANCIAL STATEMENTS WITH SUPPLEMENTARY INFORMATION
AND ADDITIONAL INFORMATION
AND
INDEPENDENT AUDITORS' REPORT
YEARS ENDED DECEMBER 31, 2022 AND 2021**

Contents

	<u>Page</u>
Independent Auditors' Report	1 - 3
Financial Statements	
Statements of Net Assets Available for Benefits	4
Statements of Changes in Net Assets Available for Benefits	5
Statement of Accumulated Plan Benefits	6
Statement of Changes in Accumulated Plan Benefits	7
Notes to Financial Statements	8 - 22
Supplementary Information	
Schedule H, Line 4i - Schedule of Assets (Held at End of Year)	23 - 45
Schedule H, Line 4j - Schedule of Reportable Transactions	46
Additional Information	
Schedules of Administrative Expenses	47

Independent Auditors' Report

Board of Trustees
United Food and Commercial Workers Union Local 655 Food Employers Joint Pension Plan
St. Louis, Missouri

Opinion

We have audited the accompanying financial statements of United Food and Commercial Workers Union Local 655 Food Employers Joint Pension Plan (the "Plan"), an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 ("ERISA"), which comprise the statements of net assets available for benefits as of December 31, 2022 and 2021, the related statements of changes in net assets available for benefits for the years then ended, the statement of accumulated plan benefits as of December 31, 2021, the related statement of changes in accumulated plan benefits for the year then ended, and the related notes to the financial statements.

In our opinion, the financial statements referred to above present fairly, in all material respects, the net assets available for benefits of the Plan as of December 31, 2022 and 2021, and the changes in its net assets available for benefits for years then ended, and accumulated plan benefits as of December 31, 2021 and the changes in its accumulated plan benefits for the year then ended, in accordance with accounting principles generally accepted in the United States of America.

Basis for Opinion

We conducted our audits in accordance with auditing standards generally accepted in the United States of America ("GAAS"). Our responsibilities under those standards are further described in the Auditors' Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of the 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.

Management's Responsibility for the Financial Statements

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

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

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

Auditors' Responsibilities for the Audit of the Financial Statements

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

In performing an audit in accordance with GAAS, we:

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

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

Supplemental Schedules Required by ERISA

Our audits were conducted for the purpose of forming an opinion on the financial statements as a whole. The supplementary Schedule of Assets (Held at End of Year) and Schedule of Reportable Transactions are presented for the purpose 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 is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with GAAS.

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

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

Report on Additional Information

Our audits were conducted for the purpose of forming an opinion on the financial statements as a whole. The additional Schedules of Administrative Expenses for the years ended December 31, 2022 and 2021 are presented for purposes of additional analysis and are not a required part of the financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audits of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with GAAS. In our opinion, the additional information is fairly stated in all material respects in relation to the financial statements as a whole.



October 16, 2023

**United Food and Commercial Workers Union Local 655 Food Employers Joint Pension
Plan
Statements of Net Assets Available for Benefits
December 31, 2022 and 2021**

Assets			
		<u>2022</u>	<u>2021</u>
Investments, at Fair Value		\$ 729,461,628	\$ 884,781,578
Receivables			
Employer contributions		862,241	801,475
Employers' withdrawal liability assessments		16,494,160	17,112,400
Other receivables		2,511	-
Due from investment brokers		1,599,279	2,275,713
Accrued interest and dividends		479,491	443,934
Total Receivables		<u>19,437,682</u>	<u>20,633,522</u>
Property, Plant, and Equipment, Net		70,000	-
Cash - Noninterest Bearing		-	231,099
Total Assets		<u>748,969,310</u>	<u>905,646,199</u>
Liabilities			
Cash Overdraft		954,231	2,405,875
Accrued Expenses		17,540	14,668
Due to Related Parties		5,897	7,721
Due to Investment Brokers		501,557	502,168
Total Liabilities		<u>1,479,225</u>	<u>2,930,432</u>
Net Assets Available for Benefits		<u>\$ 747,490,085</u>	<u>\$ 902,715,767</u>

**United Food and Commercial Workers Union Local 655 Food Employers Joint Pension
Plan**

**Statements of Changes in Net Assets Available for Benefits
Years Ended December 31, 2022 and 2021**

	<u>2022</u>	<u>2021</u>
Additions (Reductions) To Net Assets:		
Investment Income (Loss)		
Net appreciation (depreciation) in fair value of investments	\$ (105,763,357)	\$ 77,449,975
Partnership income (loss)	(14,250,603)	53,809,528
Interest, dividends and other investment income	<u>10,119,308</u>	<u>6,805,128</u>
	(109,894,652)	138,064,631
Less: Investment expense	<u>(2,211,761)</u>	<u>(2,524,065)</u>
Net Investment Income (Loss)	<u>(112,106,413)</u>	<u>135,540,566</u>
 Employer Contributions	10,481,389	9,605,483
Employer Withdrawal Contributions	11,276	18,036,584
Other Income	<u>918,336</u>	<u>6,147</u>
Total Additions (Reductions)	<u>(100,695,412)</u>	<u>163,188,780</u>
 Deductions From Net Assets:		
Benefits Paid to Participants	52,734,213	51,081,075
Administrative Expenses	<u>1,796,057</u>	<u>1,937,374</u>
Total Deductions	<u>54,530,270</u>	<u>53,018,449</u>
 Net Increase (Decrease)	(155,225,682)	110,170,331
 Net Assets Available for Benefits, Beginning of Year	<u>902,715,767</u>	<u>792,545,436</u>
 Net Assets Available for Benefits, End of Year	<u>\$ 747,490,085</u>	<u>\$ 902,715,767</u>

**United Food and Commercial Workers Union Local 655 Food Employers Joint Pension
Plan
Statement of Accumulated Plan Benefits
December 31, 2021**

Actuarial Present Value of Accumulated Plan Benefits:

Vested Benefits	
Participants currently receiving payments	\$ 455,171,464
Other participants	<u>310,194,817</u>
Total Vested Benefits	765,366,281
Non-Vested Benefits	<u>2,506,150</u>
Total Actuarial Present Value of Accumulated Plan Benefits	<u>\$ 767,872,431</u>

**United Food and Commercial Workers Union Local 655 Food Employers Joint Pension
Plan
Statement of Changes in Accumulated Plan Benefits
Year Ended December 31, 2021**

Actuarial Present Value of Accumulated Plan Benefits at December 31, 2020:	<u>\$ 761,031,344</u>
Increase (decrease) during the year attributed to:	
Interest credited	51,335,370
Changes in actuarial assumptions	431,774
Benefits paid, net	(51,081,075)
Benefits accumulated and other	<u>6,155,018</u>
Net Increase	<u>6,841,087</u>
Total Actuarial Present Value of Accumulated Plan Benefits at December 31, 2021	<u><u>\$ 767,872,431</u></u>

United Food and Commercial Workers Union Local 655 Food Employers Joint Pension Plan
Notes to Financial Statements
December 31, 2022 and 2021

1. Plan Description

The following description of United Food and Commercial Workers Union Local 655 Food Employers Joint Pension Plan (the "Plan") provides only general information. Participants of the Plan should refer to the plan document and summary plan description for a more complete description of the Plan's provisions.

General

The Plan is a multiemployer defined benefit pension plan. The Plan was established effective January 1, 1963, pursuant to a collective bargaining agreement ("CBA") between the United Food and Commercial Workers Union Local 655 (the "Union") and various participating employers involved in the food and retail industries to provide retirement benefits to covered employees. To be eligible, an employee must be working for a participating employer (the "Employer") who is subject to the CBA or for an Employer subject to a trustee approved participation agreement. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 ("ERISA"), as amended.

Administration of the Plan is the responsibility of the Board of Trustees (the "Trustees") and is governed by a Joint Board consisting of equal representation from participating Employers and the Union.

Eligibility

An employee is eligible to participant in the Plan on the earlier of the employee's contribution commencement date or January 1 or July 1 following the completion of one year of service.

Funding Policy

The Employers are required to make monthly contributions to the Plan on behalf of covered employees in amounts determined by the CBA or such other participation agreements and is subject to minimum funding requirements of ERISA and maximum deductibility of contributions by Employers under the Internal Revenue Code ("IRC"). Contributions by participants are not permitted under the Plan. The Trustees design the benefit structure based on information from the actuarial consultants. The Plan's actuary has certified that the minimum funding requirements of ERISA have been met as of January 1, 2022.

The Plan is signatory to the International Reciprocal Agreement which permits Employer contributions to be returned to the employee's home fund when those contributions pertain to work performed under a CBA or other participation agreement requiring contributions be paid to a fund other than the employee's home fund.

United Food and Commercial Workers Union Local 655 Food Employers Joint Pension Plan
Notes to Financial Statements
December 31, 2022 and 2021

Pension Protection Act Funding Status

As required by ERISA under the Pension Protection Act of 2006 ("PPA"), the Plan's actuary has completed the Plan's actuarial funding certification as of January 1, 2022, in accordance with generally accepted actuarial principles and practices. The certification was based on projections using the actuarial present value of accumulated plan benefit obligations as of January 1, 2022 and audited financial information as of December 31, 2021, as well as other information, including estimated cash flows for the year ended December 31, 2022 and the rate of market value return as reported by investment consultants. The funded (zone) status provides an indication of the financial health of the Plan.

The Plan was certified as neither endangered nor critical (that is, in the Green Zone). The Plan's funding status at December 31, 2022 and 2021 was 102.0% and 97.5%, respectively. The certification has projected the funding to be larger than 80% for ten years and there was no projected deficiency in the Plan for at least seven years.

Vesting

Participants earn one year of vesting service for each Plan year in which 1,000 hours or more is worked in covered employment.

Participants are fully vested in their accrued benefits upon the earlier one of the following: a) normal retirement age; b) upon the completion of five years of vesting service; c) upon completion of 10 years of vesting service.

Pension Benefits

The Plan provides the following types of monthly pensions for qualified employees who retire from covered employment: 1) normal retirement, 2) early retirement, and 3) disability retirement. The monthly pension amount is related to the number of pension credits earned by an employee. Once an employee retires, benefits will be paid for life as long as the former employee remains retired. At death, survivor benefits may be paid to the deceased employee's spouse. In certain instances, a death benefit is also payable if an employee dies before retirement.

2. Summary of Significant Accounting Policies

Basis of Accounting

The financial statements of the Plan have been prepared in accordance with the provisions of the Financial Accounting Standards Board ("FASB"), Accounting Standards Codification (the "FASB ASC"), which is the source of authoritative, non-governmental accounting principles generally accepted in the United States of America ("GAAP"). All references to authoritative accounting guidance contained in our disclosures are based on the general accounting topics within the FASB ASC.

United Food and Commercial Workers Union Local 655 Food Employers Joint Pension Plan
Notes to Financial Statements
December 31, 2022 and 2021

Use of Estimates

The preparation of financial statements in conformity with GAAP requires management to make estimates and assumptions that affect certain reported amounts of assets, liabilities, and changes therein, and disclosure of contingent assets and liabilities, and the actuarial present value of accumulated plan benefits at the date of the financial statements, and changes therein. Accordingly, actual results could differ from those estimates.

Investment Valuation and Income Recognition

Investments are reported at fair value. Fair value is the amount 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.

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) in fair value of investments includes the Plan's gains and losses on investments bought and sold as well as held during the year. Partnership income is the Plan's proportionate share of the income (loss) attributable to the partnerships as a whole.

Fair Value Measurements

The Plan follows guidance issued by the FASB on fair value measurements, which establishes a framework for measuring fair value, clarifies the definition of fair value within that framework, and expands disclosures about the use of fair value measurements. This guidance applies whenever fair value is the applicable measurement. The three general valuation techniques used to measure fair value are the market approach, cost approach, and income approach.

Employer Contributions Receivable

Employer contributions receivable represent Employer contributions due to the Plan for hours worked by participants, prior to the end of the Plan year. Employer contributions receivable are carried at reported amounts less an estimate made for doubtful receivables based on a review of outstanding amounts. Management determines the allowance for doubtful accounts by regularly evaluating individual Employer receivables and considering an Employer's financial condition, payment history, and current economic conditions. Employer contributions receivable are written off when deemed uncollectible. Recoveries of receivables previously written off are recorded when received. Management is of the opinion that no allowance is necessary as of December 31, 2022 or 2021.

United Food and Commercial Workers Union Local 655 Food Employers Joint Pension Plan
Notes to Financial Statements
December 31, 2022 and 2021

Assessed Withdrawal Liability Receivable

The Plan is a multiemployer collectively bargained plan subject to the provisions of the Multiemployer Pension Plan Amendments Act of 1980 (the "MPPA Act"). Under the MPPA Act, an Employer that withdraws from the Plan after April 28, 1980, in either a complete or partial withdrawal, shall owe and pay a withdrawal liability to the Plan, determined by a formula adopted by the Trustees in accordance with the MPPA Act. The actuary has determined there may be a withdrawal liability assessed against any Employer that would terminate its participation in the Plan after December 31, 2022 and 2021. The Plan's policy is to recognize a receivable at its present value, net of any allowance for collectibility, once a withdrawal liability has been actuarially determined and formally assessed by the Plan.

Payments of Benefits

Benefit payments to participants are recorded upon distribution.

Administrative Expenses

The Plan permits the payment of Plan expenses from Plan assets. Expenses incurred in connection with the general administration of the Plan are recorded as deductions in the accompanying statements of changes in net assets available for benefits.

3. Fair Value Measurements

The framework for measuring fair value provides a fair value hierarchy which prioritizes the inputs to valuation techniques used to measure fair value into Levels 1, 2, and 3. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1) and the lowest priority to unobservable inputs (Level 3). The three levels of the fair value hierarchy are described as follows:

Level 1	Inputs to the valuation methodology are unadjusted quoted prices for identical instruments in active markets.
Level 2	Inputs to the valuation method to include quoted prices for similar instruments in active markets, quoted prices for identical or similar instruments in inactive markets, inputs other than quoted prices that are observable for the instrument, or inputs that are derived principally from or corroborated by observable market data by correlation or other means.
Level 3	Inputs to the valuation methodology are unobservable and significant to the fair value measurement.

The instruments' fair value measurement levels 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 should maximize the use of observable inputs and minimize the use of unobservable inputs.

United Food and Commercial Workers Union Local 655 Food Employers Joint Pension Plan
Notes to Financial Statements
December 31, 2022 and 2021

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

Level 1 investments consist of money market funds, common stocks, real estate investment trusts, and registered investment companies ("mutual funds"). Money market funds are derived from quoted prices in active markets for identical assets. Common stocks and real estate investment trusts are valued at the closing price reported on the active market on which the individual securities are traded. The mutual funds are recorded at the closing price reported by the funds. These are open-ended mutual funds that are registered with the Securities and Exchange Commission. These funds are required to publish their daily net asset value ("NAV") and to transact at that price. The mutual funds held by the Plan are deemed to be actively traded.

Level 2 investments consist of corporate bonds, municipal bonds, and U.S. government and agency securities. Corporate bonds, municipal bonds and U.S. government and agency securities are valued using pricing models maximizing the use of observable inputs for similar securities. This includes basing value on yields currently available on comparable securities of issuers with similar credit ratings.

Level 3 investments consist of limited partnerships, hedge funds, an investment contract, and Employers' withdrawal liability assessment receivables. The partnerships and hedge funds are valued at estimated fair value as determined by the partnership's and hedge fund's management based on estimates of the underlying investments held. The investment contract is valued using a cash-out factor based on an associated pool of general account assets. The Employers' withdrawal liability assessment receivables are valued at the net present value of future cash flows.

Investments also include common collective trust funds and a pooled separate account. The common collective trust funds are valued at the net asset value ("NAV") of bank collective trusts held by the Plan at year-end. The pooled separate account is valued at the NAV of the underlying investments held by the trust at year end. The NAV is used as the practical expedient to estimate fair value.

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

United Food and Commercial Workers Union Local 655 Food Employers Joint Pension Plan

**Notes to Financial Statements
December 31, 2022 and 2021**

The fair value of investments is measured as of December 31, as follows:

	2022			
	Total	Fair Value Measurements		
		Level 1	Level 2	Level 3
Money market funds	\$ 7,860,356	\$ 7,860,356	\$ -	\$ -
Common stocks	94,498,345	94,498,345	-	-
Corporate bonds	27,043,721	-	27,043,721	-
U.S. government and agency securities	24,869,763	-	24,869,763	-
Real estate investment trusts	3,031,207	3,031,207	-	-
Municipal bonds	3,229,333	-	3,229,333	-
Registered investment companies	110,557,026	110,557,026	-	-
Investment contract	3,558,281	-	-	3,558,281
Hedge funds	22,659,638	-	-	22,659,638
Limited partnerships	199,348,260	-	-	199,348,260
Employers' withdrawal liability assessment receivables	16,494,160	-	-	16,494,160
Total assets in fair value hierarchy	513,150,090	<u>\$215,946,934</u>	<u>\$ 55,142,817</u>	<u>\$242,060,339</u>
Investments measured at NAV	<u>232,805,698</u>			
	<u>\$745,955,788</u>			

	2021			
	Total	Fair Value Measurements		
		Level 1	Level 2	Level 3
Money market funds	\$ 13,406,110	\$ 13,406,110	\$ -	\$ -
Common stocks	150,780,916	150,780,916	-	-
Corporate bonds	33,600,324	-	33,600,324	-
U.S. government and agency securities	24,410,595	-	24,410,595	-
Real estate investment trusts	6,150,136	6,150,136	-	-
Municipal bonds	3,750,669	-	3,750,669	-
Registered investment companies	101,380,756	101,380,756	-	-
Investment contract	3,656,170	-	-	3,656,170
Hedge funds	27,413,449	-	-	27,413,449
Limited partnerships	219,702,447	-	-	219,702,447
Employers' withdrawal liability assessment receivables	17,112,400	-	-	17,112,400
Total assets in fair value hierarchy	601,363,972	<u>\$271,717,918</u>	<u>\$ 61,761,588</u>	<u>\$267,884,466</u>
Investments measured at NAV	<u>300,530,006</u>			
	<u>\$901,893,978</u>			

In accordance with Subtopic 820-10, certain investments that were measured at NAV per share have not been classified in the fair value hierarchy. The fair value amounts presented in the tables are intended to permit reconciliation of the fair value hierarchy to the line items presented in the statements of net assets available for benefits.

United Food and Commercial Workers Union Local 655 Food Employers Joint Pension Plan

**Notes to Financial Statements
December 31, 2022 and 2021**

Investments measured at fair value based on NAV per share as a practical expedient as of December 31, are as follows:

	<u>Fair Value</u>	<u>Unfunded Commitments</u>	<u>Redemption Frequency</u>	<u>Redemption Notice Period</u>
2022				
<u>Collective Trust Funds:</u>				
Barings International Small Cap	\$ 17,971,197	N/A	Monthly	N/A
Invesco International Growth Trust CL 1	28,333,167	N/A	Daily	N/A
Multi-Employer Property Trust	21,823,128	N/A	Quarterly	45 days
Russell 1000 Growth Indx NL	59,436,411	N/A	Daily	N/A
S&P 500 Flagship NL Fund	61,689,713	N/A	Daily	N/A
<u>Pooled Separate Account:</u>				
QMA US Mid Cap Core Equity	\$ 43,552,082	N/A	Daily	N/A
2021				
<u>Collective Trust Funds:</u>				
Barings International Small Cap	\$ 24,542,563	N/A	Monthly	N/A
Invesco International Growth Trust CL 1	34,507,261	N/A	Daily	N/A
Multi-Employer Property Trust	20,242,240	N/A	Quarterly	45 days
Russell 1000 Growth Indx NL	83,880,370	N/A	Daily	N/A
S&P 500 Flagship NL Fund	83,475,367	N/A	Daily	N/A
<u>Pooled Separate Account:</u>				
QMA US Mid Cap Core Equity	\$ 53,882,205	N/A	Daily	N/A

The following table provides a summary of changes in the estimated fair value of the Plan's Level 3 assets for the years ended December 31, 2022 and 2021, as follows:

	<u>Limited Partnerships</u>	<u>Hedge Funds</u>	<u>Investment Contract</u>	<u>Employers' Withdrawal Liability Assessments Receivable</u>	<u>Total</u>
Balance, December 31, 2020	\$ 174,835,949	\$ 28,913,444	\$ 3,719,228	\$ 16,000	\$ 207,484,621
Unrealized gain (loss)	45,305,739	147,170	(63,058)	-	45,389,851
Purchases, sales, issuances, and settlements (net)	<u>(439,241)</u>	<u>(1,647,165)</u>	<u>-</u>	<u>17,096,400</u>	<u>15,009,994</u>
Balance, December 31, 2021	219,702,447	27,413,449	3,656,170	17,112,400	267,884,466
Unrealized loss	(15,082,386)	(2,214,961)	(97,889)	-	(17,395,236)
Purchases, sales, issuance and settlements, (net)	<u>(5,271,801)</u>	<u>(2,538,850)</u>	<u>-</u>	<u>(618,240)</u>	<u>(8,428,891)</u>
Balance, December 31, 2022	<u>\$ 199,348,260</u>	<u>\$ 22,659,638</u>	<u>\$ 3,558,281</u>	<u>\$ 16,494,160</u>	<u>\$ 242,060,339</u>

United Food and Commercial Workers Union Local 655 Food Employers Joint Pension Plan

**Notes to Financial Statements
December 31, 2022 and 2021**

The following table represents the Plan's level 3 financial instruments, the valuation techniques used to measure the fair value of those financial instruments, and the significant unobservable inputs and the ranges of values for those inputs for:

December 31, 2022

<u>Instrument</u>	<u>Fair Value</u>	<u>Valuation Technique</u>	<u>Unobservable Inputs</u>
Limited partnerships	\$199,348,260	Market Approach	Value of underlying assets of the partnerships
Hedge funds	\$ 22,659,638	Market Approach	Value of underlying assets of the hedge funds
Investment contract	\$ 3,558,281	Market Approach	Cash-out factor based on associated pool of general assets
Withdrawal liability	\$ 16,494,160	Market Approach	Discounted future cash flows

December 31, 2021

<u>Instrument</u>	<u>Fair Value</u>	<u>Valuation Technique</u>	<u>Unobservable Inputs</u>
Limited partnerships	\$219,702,447	Market Approach	Value of underlying assets of the partnerships
Hedge funds	\$ 27,413,449	Market Approach	Value of underlying assets of the hedge funds
Investment contract	\$ 3,656,170	Market Approach	Cash-out factor based on associated pool of general assets
Withdrawal liability	\$ 17,112,400	Market Approach	Discounted future cash flows

4. Related-Party Transactions

The Union provides services to the Plan, including common occupancy of offices, personnel, utilization of data processing equipment, and common administrative functions. All such costs are borne by the Union and allocated to the Plan. The total allocated expenses amounted to \$66,633 and \$80,857 for the years ended December 31, 2022 and 2021, respectively. As of December 31, 2022 and 2021, \$5,897 and \$7,721, respectively, was due to the Union for administrative expenses.

5. Actuarial Present Value of Accumulated Plan Benefits

Accumulated plan benefits are those future periodic payments, including lump sum distributions that are attributable under the Plan's provisions to the service employees have rendered. Accumulated plan benefits include benefits expected to be paid to (a) retired or terminated employees or their beneficiaries, (b) beneficiaries of employees who have died, and (c) present employees or their beneficiaries. Benefits under the Plan are accumulated based on participants' years of credited service. The accumulated plan benefits of active employees will equal the accumulation, with interest, the annual benefit accruals as of the benefit information date. Benefits payable under all circumstances (retirement, death, disability, and termination of employment) are included, to the extent they are deemed attributable to employee service rendered to the valuation date.

United Food and Commercial Workers Union Local 655 Food Employers Joint Pension Plan
Notes to Financial Statements
December 31, 2022 and 2021

The present value of accrued benefits is the sum of the present values of payments to pensioners and survivors, vested accrued benefits of inactive employees, vested accrued benefits of active employees, and non-vested accrued benefits of active employees.

These values are determined on the assumption that each active participant will earn one pension credit in each future year. Future service is recognized for purposes of determining eligibility. Non-vested accrued benefits include potential benefits that may become payable whether or not the employee is already vested in a normal retirement benefit.

The actuarial present value of accumulated plan benefits is determined by the Plan's independent actuary, as of January 1, 2022 and is that amount that results from applying actuarial assumptions to adjust the accumulated plan benefits to reflect the time value of money (through discounts for interest) and the probability of payment (by means of decrements such as for death, disability, withdrawal, or retirement) between the valuation date and the expected date of payment.

Significant assumptions underlying the actuarial computations are:

Estimated rate of return on investments	On actuarial value of assets (Schedule MB, line 6g): 11.2%, for the Plan Year ending December 31, 2021.
	On current (market) value of assets (Schedule MB, line 6h): 17.6%, for the Plan Year ending December 31, 2021.
Mortality Rates	Non-Annuitants: 110% of the RP-2006 Blue Collar Employee Mortality Tables, projected generationally using Scale MP-2019.
	Healthy Annuitants: 110% of the RP-2006 Blue Collar Healthy Annuitant Mortality Tables, projected generationally using Scale MP-2019.
	Disabled Annuitants: 110% of the RP-2006 Disabled Retiree Mortality Tables, projected generationally using Scale MP-2019.

United Food and Commercial Workers Union Local 655 Food Employers Joint Pension Plan

**Notes to Financial Statements
December 31, 2022 and 2021**

Termination Rates				
Age	Mortality*		Disability	Withdrawal**
	Male	Female		
20	0.07%	0.02%	0.02%	14.76%
25	0.09%	0.03%	0.03%	14.76%
30	0.09%	0.04%	0.03%	8.17%
35	0.11%	0.05%	0.04%	8.47%
40	0.12%	0.06%	0.07%	7.00%
45	0.16%	0.09%	0.11%	6.29%
50	0.25%	0.13%	0.18%	5.89%
55	0.40%	0.22%	0.30%	3.00%
60	0.71%	0.34%	0.49%	0.13%

* Rates shown above are sample rates in 2022

** Withdrawal rates cut out at early retirement age. Before 5 years of vesting service, withdrawal rates are as follows:

Years of Vesting Service	Withdrawal Rate
Less than 2	30%
2-3	20%
3-4	15%

Retirement

The assumed retirement rates for those eligible are:

Age	From Active Status	From Inactive Status
55-59	2%	2%
57-59	5%	2%
60	15%	10%
61	15%	20%
62	30%	35%
63-64	20%	20%
65	30%	40%
67-70	25%	10%
71	100%	100%

Description of Weighted Average Retirement Age:

Age 63, determined as follows: The weighted average retirement age for each participant is calculated as the sum of the product of each potential current or future retirement age times the probability of surviving from current age to that age and then retiring at that age, assuming no other decrements. The overall weighted retirement age is the average of the individual retirement ages based on all the active participants included in the January 1, 2022 actuarial valuation.

Future Benefit Accruals:

Based on the average of the participant's hours during the previous two years with a minimum of 0.25 pension credits.

United Food and Commercial Workers Union Local 655 Food Employers Joint Pension Plan
Notes to Financial Statements
December 31, 2022 and 2021

Unknown Data for Participants:	Same as those exhibited by participants with similar known characteristics. If not specified, participants are assumed to be male.
Definition of Active Participants:	Participants with at least 250 hours in the most recent plan year and who have accumulated at least one pension eligibility credit, excluding those who have retired as of the valuation date and those who were employed by a withdrawn employer.
Percent Married:	Males: 80% Females: 65%
Age of Spouse:	Spouses are assumed 4 years younger than the male participants and 2 years older than female participants. If not given, spouses are assumed to be of the opposite sex of the participants.
Benefit Election:	Male Participants: 50% elect the 50% joint and survivor pension with pop-up provision and 50% elect the single life annuity. Female Participants: 30% elect the 50% joint and survivor pension with pop-up provision and 70% elect the single life annuity.
Delayed Retirement Factors	Active participants work enough hours each month to not qualify for delayed retirement adjustment. Inactive vested participants who are assumed to commence receipt of benefits after attaining normal retirement age qualify for delayed retirement increases.
Net Investment Return:	7.00% - The net investment return assumption is a long-term estimate derived from historical data, current and recent market expectations, and professional judgment. As part of the analysis, a building block approach was used that reflects inflation expectations and anticipated risk premiums for each of the portfolio's asset classes as provided by Segal Marco Advisors, as well as the Plan's target asset allocation.
Annual Administrative Expenses:	\$1,750,000 for the year beginning January 1, 2022 (equivalent to \$1,687,346 payable at the beginning of the year).

United Food and Commercial Workers Union Local 655 Food Employers Joint Pension Plan
Notes to Financial Statements
December 31, 2022 and 2021

Actuarial Value of Assets:	The market value of assets less unrecognized returns in each of the last five years. Unrecognized return is equal to the difference between the actual market return and the projected return on the market value, and is recognized 20% per year, over a five-year period. The actuarial value is further adjusted, if necessary, to be within 80% to 120% on the market value of assets.
Actuarial Cost Method:	Unit Credit Actuarial Cost Method. Normal cost and actuarial accrued liability are calculated on an individual basis.
Benefits Valued:	Unless otherwise indicated, includes all benefits.
Current Liability Assumptions:	Interest: 2.22%, within the permissible range prescribed under IRC Section 431(c)(6)(E). Mortality: As prescribed under IRS Regulations 1.431(c)(6)-1 and 1.430(h)(3)-1(a)(2): RP2006 employee and annuitant mortality tables, projected generationally using scale MP-2020.
Funding Standard Account ("FSA") Contribution Timing (Schedule MB, Line 3):	Unless otherwise noted, contributions are paid periodically throughout the year pursuant to collective bargaining agreements. The interest credited in the FSA is therefore assumed to be equivalent to a July 1 contribution date.

Were the Plan to terminate, different actuarial assumptions and other factors might be applicable in determining the actuarial present value of accumulated plan benefits. The computations of the actuarial present value of accumulated plan benefits were made as of January 1, 2022. Had the valuations been performed as of December 31, 2021, there would be no material differences.

United Food and Commercial Workers Union Local 655 Food Employers Joint Pension Plan
Notes to Financial Statements
December 31, 2022 and 2021

6. Employer Withdrawal Liability Assessments

The Plan complies with the provisions of the MPPA Act, which requires imposition of a withdrawal liability assessment on a participating Employer that partially or totally withdraws from the Plan. Under the provisions of MPPA Act, a portion of the Plan's unfunded vested liability would be allocated to a withdrawing Employer. A withdrawal liability assessment is usually paid in quarterly installments as determined by a statutory formula over a maximum of 20 years. The Plan entered into various settlement agreements with participating Employers who withdrew from the Plan and were subject to withdrawal liability assessments. Quarterly payments are to be received through October 2040. The Trustees, at times, approve settlements and payment plan arrangements for assessment amounts owed to the Plan.

During the years ended December 31, 2022 and 2021, the Plan recognized employer withdrawal contributions of \$11,276 and \$18,036,584, respectively. At December 31, 2022 and 2021, the Plan was receiving withdrawal liability assessment payments under payment plan arrangements from two former participating Employers, and received a lump sum settlement from one previously participating Employer. The receivable amount represents the present value of the remaining payments at a discount rate between 7.0% and 7.5%.

7. Plan Amendments

In May 2021, the Plan was amended to delay a participant's required beginning date until April 1 following the year the participant attains age 72.

Effective January 1, 2022, the Plan was amended to clarify Article IV of the Plan's Trust Agreement related to Employer withdrawal liability payments and notice requirements.

Effective November 9, 2022, the Plan was amended to change the total number of Trustees from eight to six, provided that there are three employer Trustees and three Union Trustees.

8. Plan Termination

It is the intent of the Trustees to continue the Plan in full force and effect; however, the right to discontinue the Plan is reserved by the Trustees. In the event of termination, the Plan's assets would not be used for or diverted to purposes other than the exclusive benefit of the pensioners, beneficiaries, and participants. During termination, the net assets of the Plan will be allocated, as prescribed by ERISA and its related regulations, generally to provide the following benefits in the order indicated.

1. Annuity benefits that former employees or their beneficiaries have been receiving for at least three years, or that employees eligible to retire for that three-year period would have been receiving if they had retired with benefits in the normal form of payment under the Plan. The priority amount is limited to the lowest benefit that was payable (or would have been payable) during those three years. The amount is further limited to the lowest benefit that would be payable under plan provisions in effect at any time during the five years preceding plan termination.

United Food and Commercial Workers Union Local 655 Food Employers Joint Pension Plan

**Notes to Financial Statements
December 31, 2022 and 2021**

2. Other vested benefits insured by the Pension Benefit Guaranty Corporation ("PBGC") (a U.S. government agency) up to the applicable limitations.
3. All other vested benefits (that is, vested benefits not insured by the PBGC).
4. All non-vested benefits.

Certain benefits under the Plan are insured by the PBGC, if the Plan terminates. Generally, the PBGC guarantees most vested normal age retirement benefits, early retirement benefits, and certain disability and survivors' pensions. However, the PBGC does not guarantee all types of benefits under the Plan, and the amount of benefit protection is subject to certain limitations. Vested benefits under the Plan are guaranteed at the level in effect on the date of the Plan's termination.

Whether all participants receive their benefits should the Plan terminate at some future time will depend on the sufficiency, at that time, of the Plan's net assets to provide for accumulated benefit obligations and may also depend on the financial condition of the Plan and the level of benefits guaranteed by the PBGC. For multiemployer plans, the PBGC provides financial assistance to plans that are unable to pay basic PBGC guaranteed benefits when due.

9. Tax Status of Plan

The Internal Revenue Service has determined and informed the Trustees by a letter dated June 16, 2011, that the Plan and related trust are designed in accordance with the applicable sections of the IRC. The Plan has been amended since receiving the determination letter. The Trustees believe that the Plan is designed and is currently being operated in compliance with the applicable requirements of the IRC and therefore believes that the Plan is qualified and the related trust is tax-exempt.

In accordance with GAAP, management is required to evaluate tax positions taken by the Plan and recognize a tax liability if the Plan has taken an uncertain position that more likely than not would not be sustained upon examination by the applicable taxing authorities. The Plan's management has analyzed the tax positions taken by the Plan and has concluded that as of December 31, 2022 and 2021, there are no uncertain positions taken, or expected to be taken, that would require recognition of a liability or disclosure in the financial statements. Management believes the Plan is no longer subject to income tax examinations for years prior to 2019. The Plan is also subject to routine audits by the Department of Labor, generally for six years after the statutory due date of the annual information return. There are currently no audits in progress for any tax periods.

**United Food and Commercial Workers Union Local 655 Food Employers Joint Pension
Plan
Notes to Financial Statements
December 31, 2022 and 2021**

10. Risks and Uncertainties

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

The majority of receivables are from Employers concentrated in the food and retail industries. The Plan generally does not require collateral, but in some cases can require a performance bond. The Plan maintains adequate reserves for potential losses and such losses have been minimal and within management's estimates.

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

11. Subsequent Events

The Plan has evaluated subsequent events through October 16, 2023 the date the financial statements were available to be issued.

The Plan entered into a settlement agreement with an Employer related to a withdrawal liability that reduced the original withdrawal liability assessment to be paid over the course of 20 years with principal and interest payments totaling \$33,605,561 to \$17,650,000, with the remaining amount to be paid in a lump sum in 2023. The reduction in the Employers' withdrawal liability assessments receivable will be accounted for in 2023.

United Food and Commercial Workers Union Local 655 Food Employers Joint Pension Plan
EIN: 43-6058365 Plan Number: 001
Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
December 31, 2022

(a)	Identity of Issuer, Borrower, Lessor, or Similar Party and Description of Assets (b) and (c)	Cost (d)	Current Value (e)
	MONEY MARKET FUNDS:		
	COMERICA SHORT TERM FUND	\$ 2,201,796	\$ 2,201,796
	FIRST BANK INTEREST BEARING CHECKING ACCOUNT	5,658,560	5,658,560
	TOTAL MONEY MARKET FUNDS	<u>7,860,356</u>	<u>7,860,356</u>
	U.S. GOVERNMENT AND AGENCY SECURITIES:		
	FEDERAL HOME LN MTG CORP GOLD	31,290	32,329
	FEDERAL HOME LN MTG CORP GROUP	85,683	79,618
	FEDERAL HOME LN MTG CORP MBS	116,321	106,834
	FEDERAL HOME LN MTG CORP PARTN	250,879	231,423
	FEDERAL HOME LN MTG CORP PARTN C	124,358	116,725
	FEDERAL HOME LN MTG CORP PARTN C	67,309	61,115
	FEDERAL HOME LN MTG CORP POOL	18,940	19,426
	FEDERAL HOME LOAN MTG CORP 3.000	282,827	236,187
	FEDERAL HOME LOAN MTG CORP 3.000	738,634	618,105
	FEDERAL HOME LOAN MTG CORP 3.500	560,964	485,761
	FEDERAL HOME LOAN MTG CORP 3.500	731,774	639,225
	FEDERAL HOME LOAN MTG CORP 4.000	556,660	520,971
	FEDERAL HOME LOAN MTG CORP 4.000	429,695	411,306
	FEDERAL HOME LOAN MTG CORP 4.500	552,319	525,469
	FEDERAL HOME LOAN MTG CORP 4.500	811,101	807,576
	FEDERAL HOME LOAN MTG CORP 5.000	645,086	631,270
	FEDERAL HOME LOAN MTG CORP 5.500	535,450	543,755
	FEDERAL NATL MTG ASSN .875%	973,903	875,666
	FEDERAL NATL MTG ASSN 4.000	553,759	522,277
	FEDERAL NATL MTG ASSN 4.000	534,901	524,356
	FEDERAL NATL MTG ASSN 5.000	545,382	521,237
	FEDERAL NATL MTG ASSN GTD MTG	58,950	54,252
	FEDERAL NATL MTG ASSN GTD MTG	45,174	40,482
	FEDERAL NATL MTG ASSN GTD MTG	63,374	59,311
	FEDERAL NATL MTG ASSN GTD MTG	38,542	34,877
	FEDERAL NATL MTG ASSN GTD MTG	113,870	104,533
	FEDERAL NATL MTG ASSN GTD MTG	294,093	275,575
	FEDERAL NATL MTG ASSN GTD MTG PA	235,003	210,036
	FEDERAL NATL MTG ASSN GTD MTG PA	316,822	268,600
	FEDERAL NATL MTG ASSN GTD MTG PA	254,453	216,753
	FEDERAL NATL MTG ASSN GTD MTG PA	481,072	382,234
	FEDERAL NATL MTG ASSN GTD MTG PA	753,249	616,369
	FEDERAL NATL MTG ASSN GTD MTG PA	64,947	59,420
	FEDERAL NATL MTG ASSN POOL	3,037	2,989

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U.S. GOVERNMENT AND AGENCY SECURITIES (CONTINUED):			
	FEDERAL NATL MTG ASSN POOL	\$ 52,612	\$ 54,580
	FEDERAL NATL MTG ASSN POOL	57,096	53,480
	FEDERAL NATL MTG ASSN POOL	39,763	40,141
	FEDERAL NATL MTG ASSN POOL NBR	170,945	150,792
	FEDERAL NATL MTG ASSN POOL NBR	160,430	146,451
	FEDERAL NATL MTG ASSN POOL NBR	123,923	119,414
	FNMA PASS-THRU I 2.500	542,531	452,797
	GNMA II GTD CTF MULTI ISSUER	535,480	455,680
	GNMA II GTD CTF MULTI ISSUER	594,575	501,353
	GNMA II GTD CTF MULTI ISSUER	775,037	667,912
	GNMA II GTD CTF MULTI ISSUER	582,496	509,136
	GNMA II GTD CTF MULTI ISSUER	148,305	129,961
	GNMA II GTD CTF MULTI ISSUER	654,685	628,357
	GNMA PLATINUM POOLS USING GNMA I	77,475	70,981
	GOVERNMENT NATL MTG ASSN 5.5%	622,887	611,526
	GOVERNMENT NATL MTG ASSN POOL #	13,808	13,592
	UNITED STATES TREAS 2.5% NTS	282,200	281,943
	UNITED STATES TREAS BDS 0% PIDI	845,427	831,320
	UNITED STATES TREAS BDS 1.25%	1,205,063	891,947
	UNITED STATES TREAS BDS 1.375%	1,170,451	828,139
	UNITED STATES TREAS BDS 2%	1,122,256	1,097,019
	UNITED STATES TREAS BDS 2.375%	851,135	594,469
	UNITED STATES TREAS BDS 2.5%	1,150,389	929,371
	UNITED STATES TREAS BDS 2.5%	1,107,829	921,335
	UNITED STATES TREAS BDS 2.75%	1,451,807	1,049,399
	UNITED STATES TREAS BDS 3%	702,969	560,871
	UNITED STATES TREAS BDS 3%	896,591	869,975
	UNITED STATES TREAS US TREASURY	643,028	571,760
	TOTAL U.S. GOVERNMENT AND AGENCY SECURITIES	28,451,014	24,869,763
MUNICIPAL BONDS:			
	COLUMBIA SC WTRWKS & SWR SYS REV	120,000	109,566
	HONOLULU HI CITY & CNTY WSTWTR	365,000	331,756
	MARIN CA CMNTY COLLEGE DIST	349,598	316,824
	MASSACHUSETTS ST WTR RES AUTH	575,000	527,867
	METRO WASTEWTR RECLAMATION DIST	265,000	223,771
	NEW YORK ST URBAN DEV CORP REV	273,935	258,882
	OREGON ED TAXABLE BDS 2021A	160,000	150,763
	PRINCE GEORGES CNTY MD TAXABLE	80,000	70,009

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MUNICIPAL BONDS (CONTINUED):			
	TEXAS ST TXBL-PUBLIC FIN AUTH	\$ 144,939	\$ 122,916
	TEXAS ST TXBL-REF-STATE OF TEXAS	185,000	159,278
	UNIVERSITY CALIF REVS 3.063%	148,380	144,251
	UNIVERSITY MICH UNIV REVS	100,000	87,346
	VIRGINIA BUILD AMERICA BONDS	333,247	316,115
	VIRGINIA ST RES AUTH INFRASTRUCT	460,000	409,989
	TOTAL MUNICIPAL BONDS	<u>3,560,099</u>	<u>3,229,333</u>
CORPORATE BONDS:			
	ADOBE INC 2.3% 02/01/2030-2029	166,423	141,096
	AEP TRANSMISSION CO LLC 3.1%	558,974	469,270
	AIR PRODUCTS & CHEMICAL INC	398,190	312,380
	ALLSTATE CORP .75%	465,924	421,767
	AMAZON COM INC 3.875%	230,042	173,950
	AMER WATER WORKS 3.45%	317,953	270,067
	AMERICAN EXPRESS CR CORP 3.3%	624,318	539,152
	AMPHENOL CORP CL A 2.05%	532,443	503,258
	ANALOG DEVICES INC 3.5%	254,944	214,970
	ANHEUSER-BUSCH INBEV WORLDWIDE I	411,518	337,245
	APPLE INC 4.375% 05/13/2045	282,933	207,999
	APPLIED MATLS INC 1.75%	289,108	249,511
	AUTOMATIC DATA PROCESSING 1.7%	163,063	139,152
	AVERY DENNISON CORP 3.35%	468,016	462,015
	BA CR CARD TR CMO .34%	319,926	306,171
	BERKSHIRE HATHAWAY 4.25%	238,465	179,522
	BK OF AMERICA CORP FR 2.592%	403,518	314,480
	BURLINGTON NORTH SANTA FE 7.29%	385,201	313,073
	CANADIAN NATL RAILWAY CO 6.712%	300,488	237,999
	CATERPILLAR INC 6.625%	268,682	231,794
	CINTAS CORP NO 2 4%	289,469	273,212
	CNH EQUIPMENT TRUST ABS .81%	234,973	219,013
	CNH EQUIPMENT TRUST ABS .4%	340,710	326,404
	COLGATE PALMOLIVE CO 3.25%	292,850	271,806
	COMCAST CORP NEW 6.5% 11/15/2035	137,108	122,857
	CONAGRA .5% 08/11/2023-2022	129,582	126,304
	CONOCOPHILLIPS CO 2.125%	395,999	391,441
	CONTINENTAL AIRLS INC CL B 4%	197,363	181,770
	CUMMINS 1.5% 09/01/2030-2030	264,006	216,222
	DAIRY FARMERS OF AMERICA INC ABS	249,877	249,783

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	CORPORATE BONDS (CONTINUED):		
	DELMARVA PWR & LT CO 3.5%	\$ 594,573	\$ 552,552
	DELTA AIR LINES 2019- 1AA 3.204%	377,529	360,668
	DICKS SPORTING GOODS INC 3.15%	77,539	74,424
	DOMINION ENERGY INC PERP GLBL -C	301,186	236,742
	DTE ELEC CO 3.7% 03/15/2045-2044	110,940	83,867
	DUKE ENERGY CAROLINAS LLC 3.75%	179,829	136,519
	EATON CORP OHIO 4.15% 11/02/2042	240,082	167,388
	EMERSON ELECTRIC .875%	224,270	194,888
	EVERGY INC 2.9% 09/15/2029-2029	344,390	281,460
	EXXON MOBIL CORPORATION 2.019%	120,307	110,046
	EXXON MOBIL CORPORATION 2.61%	227,304	218,835
	FEDERAL HOME LN MTG CMO 3.458%	459,781	448,763
	FEDERAL HOME LN MTG CORP MULTICL	26,975	26,184
	FEDERAL HOME LN MTG CORP MULTICL	7,548	7,255
	FEDERAL HOME LN MTG CORP MULTICL	624,261	552,266
	FEDERAL HOME LN MTG CORP MULTICL	309,235	264,126
	FEDERAL HOME LN MTG CORP MULTICL	594,721	571,836
	FEDERAL HOME LOAN MTG CORP CMO	569,078	512,294
	FEDERAL NATL MTG ASSN CMO 4.5%	23,433	22,648
	FEDEX 2020-1 CLASS AA 1.875%	584,951	480,585
	FLORIDA PWR & LT CO SR GLBL FL	591,451	521,041
	GENERAL MTRS FINL CO INC 2.7%	250,713	214,505
	GEORGIA PAC CORP DEB 7.375%	468,195	410,818
	GLOBAL MARKETS INC 3.65%	481,836	454,205
	GOVERNMENT NATL MTG ASSN CMO 1%	245,117	198,831
	GRAINGER W W INC 1.85%	401,337	389,859
	HERSHEY CO 1.7% 06/01/2030-2030	352,867	296,881
	ILLINOIS TOOL WORKS INC 2.65%	140,663	139,491
	INTEL CORP 4.75% 03/25/2050-2049	212,550	165,292
	INTUIT INC 1.35% 07/15/2027-2027	141,598	138,602
	JOHN DEERE OWNER TRUST 2022-B	249,974	247,644
	JOHNSON & JOHNSON .95%	274,794	237,204
	JPMORGAN CHASE & CO 2.182%	443,164	385,317
	KIMBERLY CLARK CORP 2.65%	454,496	444,391
	KROGER CO 2.65% 10/15/2026-2026	255,599	220,543
	LOCKHEED MARTIN CORP 7.75%	371,575	300,259
	LOWES COMPANIES INC 5.625%	139,110	137,869
	MAGELLAN MIDSTREAM 5%	320,739	298,320
	MARTIN MARIETTA 3.2%	152,039	105,450

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	CORPORATE BONDS (CONTINUED):		
	MCDONALDS CORP 3.35%	\$ 237,485	\$ 224,152
	MICROSOFT CORP 3.3%	568,255	487,194
	MONDELEZ INTL INC 2.75%	86,544	71,690
	NATIONAL RURAL UTILS COOP FIN	471,508	408,452
	NORFOLK SOUTHERN CORP 2.9%	278,696	252,923
	OGLETHORPE POWER CORPORATION	172,986	124,610
	ORACLE CORPORATION 6.15%	84,919	88,432
	OSHKOSH CORP 3.1% SNR PIDI NTS	205,816	173,426
	PACCAR FINL CORP MEDIUM TERM SR	159,778	152,245
	PACKAGING CORP OF AMERICA 3.65%	197,438	175,446
	PEPSICO INC 4.45%	277,151	207,086
	PINNACLE WEST CAPITAL CORP 1.3%	473,820	432,749
	PROCTER & GAMBLE CO 3.55%	227,372	164,949
	PUBLIC SVC CO COLORADO 4.3%	147,014	111,419
	QUANTA 3.05% 10/01/2041-2041	140,043	95,864
	REPUBLIC 1.75% 02/15/2032-2031	310,251	238,861
	REPUBLIC 3.375% 11/15/2027-2027	114,808	93,324
	ROPER TECHNOLOGIES INC 3.65%	317,361	291,844
	TENNESSEE GAS PIPELINE CO 7%	212,303	176,555
	TEXAS INSTRS INC 1.75%	141,804	140,269
	T-MOBILE USA INC 3.875%	132,727	108,985
	TRANSCONTINENTAL GAS PIPE LINE C	348,721	293,774
	UNION PAC RR CO 2014-1 PASS THRU	541,522	519,829
	UNITED PARCEL SERVICE 5.2%	238,446	216,097
	VALERO ENERGY CORP 1.2%	448,536	427,572
	VERIZON MASTER TRUST ABS .99%	479,776	447,619
	WALT DISNEY CO 7.125% 04/08/2028	414,819	340,730
	WASTE CONNECTIONS INC 4.25%	413,191	363,983
	WASTE MANAGEMENT INC .75%	503,992	451,935
	WELLS FARGO & CO 3% 04/22/2026	267,465	275,987
	WISCONSIN ENERGY CORP 6.2%	273,530	237,467
	YALE UNIVERSITY .873%	255,000	234,702
	TOTAL CORPORATE BONDS	<u>30,700,892</u>	<u>27,043,721</u>
	REAL ESTATE INVESTMENT TRUSTS:		
	ALEXANDRIA REAL ESTATE EQTY INC	47,396	40,059
	AMERICAN TOWER REIT	11,239	10,169
	AMERICOLD REALTY TRUST, INC	307,750	306,456
	BOSTON PROPERTIES INC	37,553	25,343

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REAL ESTATE INVESTMENT TRUSTS:			
	BRIXMOR PPTY GROUP INC	\$ 24,721	\$ 22,217
	CAMDEN PPTY TR	24,040	21,593
	COHEN & STEERS INC	234,140	301,818
	CUBESMART	45,952	38,560
	DIAMONDROCK HOSPITALITY CO	275,373	275,675
	EPR PPTYS	28,208	20,897
	ESSEX PROPERTY TRUST INC	33,944	22,675
	EXTRA SPACE STORAGE INC	81,510	67,261
	HOST HOTELS & RESORTS, INC.	33,540	34,074
	IRON MTN INC NEW	221,117	222,580
	KIMCO RLTY CORP	73,197	65,298
	LIFE STORAGE INC	24,761	18,321
	MEDICAL PPTYS TR INC COMMON	14,650	8,856
	MID-AMER APARTMENT CMNTYS INC	47,106	37,207
	PARK HOTELS & RESORTS INC	20,207	13,252
	PENNYMAC MTG INVT TR	200,343	167,637
	PHYSICIANS RLTY TR	453,126	357,409
	PUBLIC STORAGE INC	182,436	157,747
	REALTY INCOME CORP REIT	25,285	23,659
	REGENCY CENTERS CORP	82,402	76,375
	RITHM CAPITAL	55,097	37,410
	STAG INDL INC COM	374,395	332,793
	STARWOOD PPTY TR INC	12,239	9,990
	SUN CMNTYS INC	46,385	40,183
	UDR INC	41,090	30,209
	VORNADO RLTY TR	16,731	14,193
	WEYERHAEUSER CO	234,649	231,291
	TOTAL REAL ESTATE INVESTMENT TRUSTS	<u>3,310,582</u>	<u>3,031,207</u>
REGISTERED INVESTMENT COMPANIES:			
	BAIRD SHORT-TERM BD FD INSTL CL	29,794,488	28,123,220
	FIDELITY MID CAP INDEX FUND-FAI	31,380,242	29,889,019
	PIMCO TOTAL RETURN FD INSTL	56,726,719	52,544,787
	TOTAL REGISTERED INVESTMENT COMPANIES	<u>117,901,449</u>	<u>110,557,026</u>
POOLED SEPARATE ACCOUNT:			
	QMA US MID CAP CORE EQUITY	<u>23,169,563</u>	<u>43,552,082</u>

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	COLLECTIVE TRUST FUNDS:		
	BARINGS INTERNATIONAL SMALL CAP	\$ 17,000,000	\$ 17,971,197
	INVESCO EQV INTL EQUITY TRUST	20,597,139	28,333,167
	MULTI-EMPLOYER PROPERTY TRUST	9,167,028	21,823,128
	RUSSELL 1000 (R) GROWTH INDX NL	36,603,226	59,436,411
	S&P 500 (R) FLAGSHIP NL FUND	17,767,656	61,689,713
	TOTAL COLLECTIVE TRUST FUNDS	<u>101,135,049</u>	<u>189,253,616</u>
	LIMITED PARTNERSHIPS:		
	AMERICAN STRATEGIC VALUE REALTY	7,012,359	14,066,264
	ASB ALLEGIANCE REAL ESTATE FD LP	17,052,882	32,593,542
	FORT WASHINGTON HIGH YIELD II	20,000,000	21,703,298
	GCM GROSVENOR MULTI-CLASS FUND	31,612,760	50,657,359
	GROSVENOR OPPORTUNISTIC CREDIT	1,588,630	437,640
	GROSVENOR OPPORTUNISTIC CREDIT	4,136,314	12,984,335
	HAMILTON LANE PRIVATE EQUITY	3,467,686	5,209,202
	HAMILTON LANE SECONDARY FUND II	234,223	65,575
	LANDMARK EQUITY PARTNERS XIV LP	500,806	690,682
	LSV INTERNATIONAL AC VALUE	17,594,939	20,124,754
	SIGULER GUFF SMALL BUYOUT	6,822,059	20,190,319
	SIGULER GUFF SMALL BUYOUT	1,131,692	1,202,515
	U.S. REAL ESTATE INVESTMENT FUND	10,705,290	19,422,775
	TOTAL LIMITED PARTNERSHIPS	<u>121,859,640</u>	<u>199,348,260</u>
	HEDGE FUNDS:		
	ENTRUST CAPITAL DIVERSIFIED	1,309,011	548,778
	ENTRUST SPECIAL OPPORTUNITIES	1,077,832	497,823
	ENTRUST SPECIAL OPPORTUNITIES	7,327,106	5,356,175
	GROSVENOR INSTITUTIONAL PARTNERS	9,247,154	16,256,862
	TOTAL HEDGE FUNDS	<u>18,961,103</u>	<u>22,659,638</u>
	INVESTMENT CONTRACT:		
	PRINCIPAL GLOBAL INVESTORS LLC	<u>3,197,655</u>	<u>3,558,281</u>
	COMMON STOCKS:		
	1ST CTZNS BANCSHS INC N C CL A	45,393	50,052
	3M CO	119,046	102,052
	ABBOTT LABS	46,319	62,251
	ACADIA HEALTHCARE CO INC	35,858	43,547

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COMMON STOCKS:			
	ACTIVISION BLIZZARD INC	\$ 47,755	\$ 47,078
	ACUITY BRANDS INC	262,437	304,888
	ADEIA INC. COM	177,676	111,020
	ADVANCE AUTO PARTS	81,712	60,282
	ADVANCED ENERGY INDS INC	101,433	278,785
	ADVANCED MICRO DEVICES INC	17,346	14,962
	AECOM TECHNOLOGY CORP DELAWARE	34,670	43,060
	AES CORP	154,523	254,152
	AFFILIATED MANAGERS GROUP INC	26,800	34,221
	AFLAC INC	182,954	229,561
	AGCO CORP	21,545	23,439
	AGILENT TECHNOLOGIES INC	154,699	199,932
	AIR PRODUCTS & CHEMICAL INC	289,447	387,791
	AKAMAI TECHNOLOGIES	74,566	67,019
	ALBEMARLE CORP	207,094	205,150
	ALCOA CORPORATION	44,642	32,511
	ALIGN TECHNOLOGY INC	15,472	13,076
	ALLEGION PLC	50,105	46,841
	ALLIANT ENERGY CORP	77,785	72,049
	ALLSTATE CORP	328,969	475,820
	ALLY FINL INC	42,190	27,384
	ALPHABET INC CL A	427,710	289,394
	ALPHABET INC CL C	303,124	195,206
	ALTRIA GROUP INC	190,424	192,439
	AMCOR PLC	51,542	49,998
	AMDOCS LTD	21,691	25,452
	AMEREN CORP	44,658	45,972
	AMERICAN AIRLS GROUP INC	29,623	28,951
	AMERICAN AXLE & MFG HLDGS INC	428,254	293,563
	AMERICAN EXPRESS CO	224,770	259,745
	AMERICAN INTL GROUP INC	295,093	412,325
	AMERIPRISE FINL INC	119,444	128,907
	AMERISAFE INC	172,843	208,919
	AMETEK INC	52,406	60,080
	AMGEN INC	131,383	153,119
	AMPHENOL CORP CL A	63,034	68,754
	ANTERO MIDSTREAM CORPORATION COM	17,104	18,127
	ANYWHERE REAL ESTATE INC	345,032	133,104
	AON PLC SHS CL A	78,900	85,240

United Food and Commercial Workers Union Local 655 Food Employers Joint Pension Plan
EIN: 43-6058365 Plan Number: 001
Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
December 31, 2022

(a)	Identity of Issuer, Borrower, Lessor, or Similar Party and Description of Assets (b) and (c)	Cost (d)	Current Value (e)
	COMMON STOCK (CONTINUED):		
	APA CORPORATION COM	\$ 77,255	\$ 125,476
	APOLLO GLOBAL MANAGEMENT INC COM	10,336	13,842
	APPLIED INDUSTRIAL TECH INC	151,400	377,334
	APTARGROUP INC	364,033	341,048
	ARAMARK HLDGS CORP	39,834	48,326
	ARCHER DANIELS MIDLAND CO	304,155	631,751
	ARDAGH GROUP SA	20,344	29,948
	ARES COML REAL ESTATE CORP	235,618	234,818
	ASHLAND INC.	20,516	22,581
	ASSURANT INC	299,210	235,988
	ASSURED GUARANTY LTD	29,727	32,500
	AT&T INC	548,151	468,571
	ATLAS AIR INC	51,096	154,224
	ATMOS ENERGY CORP	26,574	27,569
	ATRION CORP	164,377	148,254
	AUTOMATIC DATA PROCESSING INC	185,401	211,869
	AUTONATION INC	12,721	12,232
	AUTOZONE INC	236,989	291,009
	AVERY DENNISON CORP	13,201	15,204
	AVIS BUDGET GROUP INC	18,248	12,950
	AXALTA COATING SYSTEMS LTD	11,410	11,691
	AXIS CAPITAL HOLDINGS LTD	11,728	11,701
	B & G FOODS HLDGS CORP CLASS A	325,066	245,635
	BADGER METER INC	170,054	302,558
	BAKER HUGHES A GE CO	52,662	50,201
	BANC CALIF INC	277,619	277,166
	BANK NEW YORK MELLON CORP	266,225	268,340
	BANK OF AMERICA CORP	581,709	516,374
	BANK OF HAWAII CORP	229,407	257,965
	BANK OZK	30,283	30,966
	BATH BODY WORKS INC COM	114,846	117,149
	BAXTER INTL INC	135,133	95,365
	BECTON DICKINSON & CO	259,682	269,049
	BELDEN CDT INC	249,167	293,352
	BERKLEY W R	33,870	36,938
	BERKSHIRE HATHAWAY INC CL B	393,736	542,120
	BERRY PLASTICS GROUP INC	46,437	50,882
	BEST BUY	319,469	327,738
	BILL HOLDINGS INC	44,532	39,008

United Food and Commercial Workers Union Local 655 Food Employers Joint Pension Plan
EIN: 43-6058365 Plan Number: 001
Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
December 31, 2022

(a)	Identity of Issuer, Borrower, Lessor, or Similar Party and Description of Assets (b) and (c)	Cost (d)	Current Value (e)
	COMMON STOCK (CONTINUED):		
	BIO RAD LABORATORIES INC CL A	\$ 46,708	\$ 32,798
	BIOGEN IDEC INC	104,135	110,214
	BIOMARIN PHARMACEUTICAL INC	28,986	35,911
	BLACK KNIGHT INC	24,784	24,453
	BLACKROCK INC	172,724	174,323
	BOEING CO	103,714	128,581
	BOSTON SCIENTIFIC CORP	36,989	42,059
	BRISTOL MYERS SQUIBB CO	481,507	551,281
	BROADRIDGE FINL SOLUTIONS INC	42,079	38,898
	BROOKFIELD RENEWABLE CORPORATION	12,688	10,686
	BROWN & BROWN INC	60,581	95,994
	BROWN FORMAN CORP CL B	25,691	25,024
	BUILDERS FIRSTSOURCE INC	58,944	61,052
	BUNGE LIMITED	53,430	74,428
	BWX TECHNOLOGIES INC	12,826	15,565
	C H ROBINSON WORLDWIDE INC	109,894	93,666
	CABLE ONE INC	285,985	211,422
	CACI INTL INC CL A	25,602	29,458
	CACTUS INC	300,054	459,276
	CAESARS ENTERTAINMENT, INC	57,930	47,715
	CAMDEN NATL CORP	74,789	76,084
	CAMPBELL SOUP CO	74,359	87,282
	CAPITAL ONE FINL CORP GLBL FLT	211,007	161,936
	CAPRI HOLDINGS LTD	15,637	21,552
	CARDINAL HEALTH INC	145,079	208,087
	CARLISLE COMPANIES INC	28,773	35,348
	CARMAX INC	95,745	68,927
	CARNIVAL CORP	83,236	71,807
	CARTER'S INC	317,051	289,114
	CASEYS GENERAL STORES	39,366	42,627
	CATALENT INC	66,880	42,174
	CATERPILLAR INC	226,797	259,443
	CATHAY BANCORP INC	394,666	416,058
	CAVCO INDUSTRIES INC	276,806	282,813
	CBRE GROUP INC	36,370	36,017
	CENTERPOINT ENERGY INC	169,608	170,553
	CENTRAL GARDEN & PET CO	248,886	204,812
	CERIDIAN HCM HLDG INC	16,077	14,755
	CHARLES RIVER LABORATORIES	51,130	32,903

United Food and Commercial Workers Union Local 655 Food Employers Joint Pension Plan
EIN: 43-6058365 Plan Number: 001
Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
December 31, 2022

(a)	Identity of Issuer, Borrower, Lessor, or Similar Party and Description of Assets (b) and (c)	Cost (d)	Current Value (e)
COMMON STOCK (CONTINUED):			
	CHEMED CORP	\$ 409,167	\$ 446,626
	CHEMOURS CO	11,801	11,636
	CHENIERE ENERGY INC	38,381	34,791
	CHEVRON CORPORATION	410,596	647,779
	CHILDRENS PLACE RETAIL STS INC	421,964	323,410
	CHOICE HOTELS INTL INC	275,684	365,404
	CHUBB LTD	14,590	17,427
	CIENA CORP	55,526	57,098
	CINCINNATI FINANCIAL CORP	293,153	336,146
	CINTAS CORP	66,292	76,775
	CIRRUS LOGIC INC	80,726	308,347
	CISCO SYS INC	630,974	603,408
	CITIGROUP INC	219,588	187,750
	CITIZENS FINL GROUP INC	14,246	14,921
	CLARIVATE ANALYTICS PLC	14,648	8,323
	CLEAN HARBORS INC	23,157	27,275
	CLOROX CO	36,300	35,644
	CMS ENERGY CORP	60,094	57,314
	COCA COLA CO	39,979	38,929
	COGNIZANT TECHNOLOGY SOLUTIONS	370,645	279,602
	COLFAX CORP COM	30,299	20,659
	COLGATE PALMOLIVE CO	15,613	15,837
	COLUMBIA BANKING SYSTEM INC	178,423	196,146
	COLUMBIA SPORTSWEAR CO	409,186	414,166
	COMCAST CORP CL A	162,522	133,026
	COMERICA INC	44,800	34,294
	COMFORT SYSTEM USA INC	163,566	224,406
	COMMSCOPE HLDG CO INC	420,190	347,582
	COMSTOCK RESOURCES INC	250,408	421,308
	CONAGRA FOODS INC	418,203	475,004
	CONCENTRIX CORPORATION COM	42,450	35,021
	CONDUENT INC	534,548	287,186
	CONOCOPHILLIPS	128,724	152,220
	CONSOLIDATED EDISON INC	16,108	18,204
	CONSTELLATION BRANDS INC CL A	229,568	227,347
	CONSTELLATION ENERGY CORP. COM	81,652	109,832
	COOPER COMPANIES INC	89,583	88,620
	CORCEPT THERAPEUTICS INC	388,228	334,100
	CORE LABORATORIES N V ADR	295,737	190,903

United Food and Commercial Workers Union Local 655 Food Employers Joint Pension Plan
EIN: 43-6058365 Plan Number: 001
Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
December 31, 2022

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	COMMON STOCK (CONTINUED):		
	CORNING INCORPORATED	\$ 377,137	\$ 339,778
	CORTEVA INC	77,302	80,058
	CORVEL CORP	137,068	301,560
	COTERRA ENERGY INC COM	42,481	36,142
	COTY INC	14,504	15,408
	CRANE HOLDINGS CO. COM	18,717	19,990
	CREDIT ACCEPTANCE CORP	11,471	9,488
	CROWN HOLDINGS INC	29,118	23,759
	CSG SYSTEMS INTL INC	269,626	357,500
	CSX CORP	166,357	174,820
	CUMMINS INC	48,019	56,454
	CVS/CAREMARK CORP	626,931	799,757
	D R HORTON INC	18,243	20,235
	DANAHER CORP	325,759	533,760
	DARDEN RESTAURANTS INC	34,633	39,562
	DECKERS OUTDOOR CORP	90,505	574,391
	DELL TECHNOLOGIES INC -C	56,577	49,471
	DENTSPLY SIRONA INC	213,974	171,172
	DEVON ENERGY CORPORATION	178,563	179,302
	DIAMONDBACK ENERGY INC	31,796	35,700
	DICKS SPORTING GOODS INC	61,947	64,957
	DISCOVER FINL SVCS	86,272	75,525
	DISH NETWORK CORP A	90,200	51,864
	DOLLAR TREE INC	331,132	289,386
	DOMINOS PIZZA INC	40,949	42,954
	DONALDSON INC	351,601	449,178
	DOVER CORP	81,649	102,235
	DTE ENERGY CO	41,852	41,488
	DUN BRADSTREET HOLDINGS INC COM	12,482	10,960
	DUPONT DE NEMOURS INC	34,502	36,237
	DXC TECHNOLOGY CO	84,898	79,076
	DYCOM INDS INC	208,794	497,952
	EAGLE MATERIALS INC	15,559	18,599
	EAGLE PHARMACEUTICALS INC	411,104	257,809
	EARTHSTONE ENERGY INC	280,734	293,992
	EAST WEST BANCORP INC	45,385	41,978
	EASTMAN CHEMICAL CO	24,528	23,780
	EATON CORP PLC	196,959	209,999
	ECOLAB INC	49,622	44,978

United Food and Commercial Workers Union Local 655 Food Employers Joint Pension Plan
EIN: 43-6058365 Plan Number: 001
Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
December 31, 2022

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	COMMON STOCK (CONTINUED):		
	EDISON INTERNATIONAL	\$ 416,596	\$ 445,722
	ELANCO ANIMAL HEALTH INC	59,928	22,754
	ELECTRONIC ARTS	111,396	108,496
	ELEMENT SOLUTIONS INC PLATFORM	-	13,806
	ELEVANCE HEALTH INC	341,851	575,039
	EMERSON ELECTRIC	126,385	176,846
	ENCORE CAPITAL GROUP INC	204,202	370,576
	ENERSYS	213,430	223,735
	ENTERGY CORP NEW	39,013	39,825
	ENVISTA HOLDINGS CORPORATION	20,524	16,094
	EOG RESOURCES INC	51,262	62,299
	EQT CORP	17,780	16,611
	EQUIFAX INC	202,662	209,909
	EQUITABLE HLDGS INC	9,892	11,968
	ERIE INDEMNITY COMPANY CL A	10,337	11,192
	ESAB CORP. COM	18,972	24,868
	ESSENTIAL UTILITIES INC	27,173	27,445
	EVERCORE PARTNERS INC	332,036	272,155
	EVEREST RE GROUP LTD	159,532	216,651
	EVERGY INC	183,832	173,813
	EVERSOURCE ENERGY	100,344	97,422
	EXELON CORP CORPORATION	32,504	30,909
	EXLSERVICE HLDGS INC	149,130	371,391
	EXXON MOBIL CORPORATION	378,046	584,480
	F5, INC.	124,644	110,503
	FEDERAL REALTY OP LP SH BEN INT	77,908	72,648
	FEDEX CORP	317,008	270,019
	FIDELITY NATL INFORMATION SVCS	24,727	20,287
	FIFTH THIRD BANCORP COM	26,205	22,705
	FIRST HAWAIIAN INC	154,296	158,089
	FIRST HORIZON NATIONAL CORP	172,300	286,087
	FIRST REPUBLIC BANK/SF COM	110,133	85,932
	FIRST SOLAR INC	51,350	82,085
	FIRST SOURCE CORP	139,347	173,870
	FIRSTENERGY CORP	345,469	378,005
	FLOWERS FOODS INC	377,941	508,324
	FLOWERVE CORP	25,047	22,795
	FMC CORP - NEW	54,628	60,278
	FORD MOTOR CO	311,078	334,804

United Food and Commercial Workers Union Local 655 Food Employers Joint Pension Plan
EIN: 43-6058365 Plan Number: 001
Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
December 31, 2022

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	COMMON STOCK (CONTINUED):		
	FORTIVE CORP	\$ 64,712	\$ 69,968
	FORWARD AIR CORP	126,110	236,003
	FOX CORPORATION CL B COM	40,447	37,156
	FOX CORPORATION CLASS A	58,382	52,692
	FRANKLIN ELEC INC	161,440	284,389
	FRANKLIN RES INC	31,928	32,342
	FTI CONSULTING INC	18,718	24,138
	GALLAGHER ARTHUR J & CO	33,044	36,765
	GAMESTOP CORP NEW CL A	12,273	8,935
	GARMIN LTD	391,436	387,064
	GATX CORP	129,620	279,674
	GEN DIGITAL INC.	15,701	13,865
	GENERAL DYNAMICS CORP	66,155	93,537
	GENERAL ELECTRIC CO COM NEW	309,415	370,017
	GENERAL MILLS INC	28,786	34,127
	GENERAL MOTORS CO	212,836	183,607
	GENESCO INC	209,508	223,197
	GENPACT LTD	12,470	14,406
	GENTEX CORP	12,279	11,508
	GENUINE PARTS CO	157,498	199,884
	GERMAN AMERN BANCORP	65,659	70,870
	GILEAD SCIENCES INC	407,838	512,181
	GLOBE LIFE INSURANCE	19,070	23,387
	GLOBUS MED INC	251,513	443,763
	GODADDY INC CLASS A	42,052	44,518
	GOLDMAN SACHS GROUP INC	362,392	418,580
	GRAND CANYON ED INC	10,672	13,947
	GRAPHIC PACKAGING HOLDING CORP	12,313	13,016
	GREEN DOT CORP CL A	390,094	247,425
	GREENBRIER CORP	214,293	264,216
	GRIFFON CORPORATION	223,108	409,438
	GROUP 1 AUTOMOTIVE INC	193,719	535,699
	GUIDEWIRE SOFTWARE INC	44,922	36,535
	HAEMONETICS CORP MASS	349,637	426,204
	HARLEY DAVIDSON INC	26,084	28,371
	HARTFORD FINL SVCS GROUP INC	97,522	116,627
	HASBRO INC	215,173	158,870
	HEALTHPEAK PROPERTIES INC.	12,365	11,833
	HEICO CORP CL A	14,224	15,700

United Food and Commercial Workers Union Local 655 Food Employers Joint Pension Plan
EIN: 43-6058365 Plan Number: 001
Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
December 31, 2022

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COMMON STOCK (CONTINUED):			
	HELEN OF TROY LTD	\$ 272,605	\$ 135,865
	HELMERICH & PAYNE INC	279,493	458,126
	HERSHEY CO COMMON STOCK	21,258	22,231
	HEWLETT PACKARD ENTERPRISE CO	327,756	319,136
	HEXCEL CORP NEW	15,224	17,008
	HF SINCLAIR CORPORATION COM	50,901	56,041
	HIBBETT SPORTS INC	231,045	544,396
	HOLOGIC INC	80,427	79,972
	HONEYWELL INTERNATIONAL INC	179,503	216,229
	HOPE BANCORP INC	310,343	303,341
	HORIZON THERAPEUTICS PUBLIC	41,347	51,096
	HOWMET AEROSPACE INC COM	49,217	59,351
	HP INC	308,964	413,476
	HUMANA INC	223,073	298,607
	HUNTINGTON INGALLS INDS INC	56,626	62,284
	IAC INC	45,927	18,692
	IBM CORP	590,343	683,035
	ICU MED INC	429,268	339,999
	IDACORP INC	285,960	323,011
	IDEX CORP	46,396	55,256
	ILLINOIS TOOL WORKS INC WKS INC	133,012	130,197
	INCYTE CORPORATION	26,945	30,441
	INDEPENDENT BK CORP MASS	186,823	270,176
	INGERSOLL RAND INC COM	12,099	13,846
	INGREDION INC	13,687	14,102
	INSPERITY INC	152,483	201,640
	INTEGER HLDGS CORP	117,181	277,263
	INTEL CORP	924,990	439,108
	INTERCONTINENTALEXCHANGE GROUP I	13,769	12,926
	INTERDIGITAL INC PA	323,295	290,695
	INTERNATIONAL BANCSHARES CORP	216,125	199,376
	INTERNATIONAL FLAVORS	175,018	144,679
	INTERPUBLIC GROUP COS INC	162,186	153,359
	INTUITIVE SURGICAL INC	13,586	19,105
	INVESCO LTD	29,068	28,136
	ITRON INC	117,558	154,989
	ITT INC	15,601	21,248
	JABIL CIRCUIT INC	28,476	30,144
	JACOBS ENGINEERING GROUP INC.	107,951	140,962

United Food and Commercial Workers Union Local 655 Food Employers Joint Pension Plan
EIN: 43-6058365 Plan Number: 001
Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
December 31, 2022

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	COMMON STOCK (CONTINUED):		
	JAZZ PHARMACEUTICALS PLC	\$ 28,181	\$ 29,472
	JB HUNT TRANSPORTATION SERVICES	71,086	67,826
	JEFFERIES FINL GROUP INC	34,614	52,414
	JM SMUCKER COMPANY-NEW	105,713	123,282
	JOHNSON & JOHNSON	246,936	252,080
	JOHNSON CONTROLS INTERNATIONAL	185,693	296,320
	JONES LANG LASALLE INC	40,873	32,511
	JPMORGAN CHASE & CO	885,203	1,234,525
	JUNIPER NETWORKS INC	292,011	299,657
	KELLOGG CO	230,041	256,963
	KEYCORP	37,765	31,060
	KEYSIGHT TECHNOLOGIES INC - W/I	87,598	106,406
	KIMBERLY CLARK CORP	19,615	19,141
	KINDER MORGAN INC DEL COM	98,607	110,650
	KIRBY CORP	15,696	15,315
	KKR CO INC CL- A	44,766	33,979
	KOHL'S CORP	29,347	14,494
	KOPPERS HLDGS INC	365,264	337,272
	KRAFT HEINZ CO	583,016	626,486
	KROGER CO	276,359	228,785
	KYNDRYL HOLDINGS INC COMMON	27,256	26,299
	L3 HARRIS TECHNOLOGIES INC COM	85,129	93,903
	LA Z BOY INCORPORATED	265,485	222,951
	LABORATORY CORP OF AMER HLDGS	171,021	175,433
	LAKELAND FINL CORP	92,722	184,979
	LANCASTER COLONY CORP	253,384	352,181
	LANDSTAR SYSTEM INC	174,805	346,163
	LEIDOS HLDGS INC	83,189	91,410
	LENNAR CORP CL A	46,290	54,029
	LIBERTY MEDIA CORP-LIBERTY	38,935	46,927
	LIGAND PHARMACEUTICALS INC CL B	135,306	167,000
	LILLY ELI & CO	23,144	26,706
	LINCOLN ELECTRIC HLDGS	155,091	299,817
	LINCOLN NATL CORP IND	58,114	31,703
	LITHIA MTRS INC - CL A	149,166	374,265
	LITTLEFUSE INC	231,814	225,485
	LIVE NATION INC	29,626	24,200
	LKQ CORP	16,002	20,082
	LOEWS CORP	30,795	29,807

United Food and Commercial Workers Union Local 655 Food Employers Joint Pension Plan
EIN: 43-6058365 Plan Number: 001
Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
December 31, 2022

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COMMON STOCK (CONTINUED):			
	LUMEN TECHNOLOGIES INC COM	\$ 531,353	\$ 237,698
	LYONDELLBASELL INDUSTRIES NV	16,850	13,866
	M D C HLDGS INC	232,068	283,736
	MANPOWER INC WIS	39,776	35,447
	MARATHON OIL CORP	52,004	58,498
	MARATHON PETE CORP	134,441	176,098
	MARKEL CORP (HOLDING CO)	14,158	14,492
	MARSH & MCLENNAN COS INC	321,977	338,076
	MARTIN MARIETTA MATERIALS INC	11,842	17,912
	MARVELL TECHNOLOGY INC LTD COM	190,746	124,640
	MASCO CORP	29,070	24,548
	MASIMO CORP	13,299	14,055
	MASTEC INC	12,262	14,762
	MATCH GROUP INC NEW COM	20,387	11,451
	MCKESSON CORP	326,541	467,400
	MEDPACE HLDGS INC	240,360	515,944
	MEDTRONIC PLC	455,730	334,118
	MERCK & CO INC	71,114	86,874
	METLIFE INC	108,147	115,647
	MICROCHIP TECHNOLOGY INC	12,302	12,294
	MICRON TECHNOLOGY INC	39,120	28,439
	MIDDLEBY CORP	83,297	75,654
	MINERALS TECHNOLOGIES INC	264,819	293,885
	MODERNA INC COM	18,321	21,195
	MOHAWK INDS INC	73,866	53,972
	MOLINA HEALTHCARE INC	32,384	35,003
	MOLSON COORS BREWING CO CL B	56,306	53,478
	MONDELEZ INTL INC	178,975	221,611
	MONSTER BEVERAGE CORP NEW	14,940	16,651
	MOODY'S CORPORATION	25,638	21,175
	MORGAN STANLEY	231,896	211,105
	MORNINGSTAR INC	20,225	17,111
	MOSAIC CO NEW	33,228	27,068
	MOTOROLA SOLUTIONS INC.	295,444	436,818
	MSC INDL DIRECT INC CL A	274,299	291,832
	MSCI INC CL A	20,368	22,328
	NATIONAL FUEL GAS CO N J	12,572	13,293
	NATIONAL INSTRUMENTS CORP	23,510	21,808
	NEW YORK COMMUNITY BANCORP	24,745	22,197

United Food and Commercial Workers Union Local 655 Food Employers Joint Pension Plan
EIN: 43-6058365 Plan Number: 001
Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
December 31, 2022

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COMMON STOCK (CONTINUED):			
	NEW YORK TIMES CO CLASS A	\$ 33,873	\$ 25,611
	NEWELL BRANDS INC	315,398	207,043
	NEWMONT MNG CORP	129,956	99,686
	NEWS CORP NEW	58,458	78,133
	NEWS CORP NEW	121,380	122,718
	NEXSTAR MEDIA GROUP INC COMMON	37,792	42,707
	NEXTERA ENERGY INC	34,236	36,032
	NEXTGEN HEALTHCARE INC. COM	336,697	469,594
	NISOURCE INC	111,071	103,401
	NMI HLDGS INC -CLASS A	187,375	196,878
	NORDSON CORP	32,591	35,420
	NORFOLK SOUTHERN CORP	260,832	310,982
	NORTHERN TRUST CORP	106,401	91,145
	NORTHWEST NATURAL HOLDING CO	344,054	340,744
	NORWEGIAN CRUISE LINE HOLDINGS	60,318	56,206
	NRG ENERGY INC	262,287	240,273
	NUCOR CORP	94,406	92,662
	NVENT ELECTRIC PLC-W/I	12,208	15,773
	O REILLY AUTOMOTIVE INC NEW	66,179	86,091
	OCCIDENTAL PETROLEUM CORP	159,866	280,620
	OGE ENERGY CORP	12,812	12,340
	OLD REP INTL CORP	20,593	23,595
	OLLIES BARGAIN OUTLET HLDGS INC	12,319	9,415
	OMNIAB INC. COM	44,969	19,872
	OMNICOM GROUP INC	94,265	107,101
	ON SEMICONDUCTOR CORP	21,131	22,328
	ONE GAS INC	206,125	273,576
	ONEMAIN HLDGS INC	21,096	18,620
	ONEOK INC	236,877	261,355
	ORACLE CORPORATION	169,205	179,828
	ORGANON CO COMMON STOCK	119,463	100,548
	OSHKOSH TRUCK CORP	19,813	19,049
	OTIS WORLDWIDE CORP COM	67,929	72,672
	OWENS & MINOR INC	262,719	324,979
	OWENS CORNING NEW	14,313	13,989
	PACCAR INC	193,158	220,703
	PACKAGING CORP OF AMERICA	41,281	38,245
	PACWEST BANCORP	236,955	182,728
	PARAMOUNT GLOBAL	108,639	80,653

United Food and Commercial Workers Union Local 655 Food Employers Joint Pension Plan
EIN: 43-6058365 Plan Number: 001
Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
December 31, 2022

(a)	Identity of Issuer, Borrower, Lessor, or Similar Party and Description of Assets (b) and (c)	Cost (d)	Current Value (e)
	COMMON STOCK (CONTINUED):		
	PARKER HANNIFIN CORP	\$ 43,828	\$ 48,306
	PATTERSON COS INC	176,744	296,277
	PAYPAL HLDGS INC	66,658	62,389
	PEDIATRIX MEDICAL GROUP, INC	274,523	211,606
	PELTON INTERACTIVE INC -A	13,656	11,831
	PEPSICO INC	28,129	29,628
	PERKINELMER INC	46,818	39,682
	PFIZER INC	771,258	1,024,595
	PHIBRO ANIMAL HEALTH CORP -A	360,082	243,794
	PHILIP MORRIS INTL INC	289,775	317,192
	PINNACLE FINANCIAL PARTNERS INC	11,226	9,982
	PINNACLE WEST CAPITAL CORP	53,120	53,152
	PINTEREST INC	13,578	14,447
	PIONEER NATURAL RESOURCES CO	37,372	35,172
	PLUG POWER INC COM NEW	16,562	7,917
	PNC FINL SVCS GROUP INC	146,744	144,357
	POLARIS INDUSTRIES INC	11,824	11,009
	POPULAR INC	14,673	12,336
	POST HLDGS INC	19,308	21,031
	POWER INTEGRATIONS INC	245,437	398,046
	PPG INDUSTRIALS INDS INC	189,784	189,867
	PPL CORPORATION	64,438	64,196
	PREMIER INC	509,177	493,533
	PRESTIGE BRANDS HLDGS INC	208,979	356,820
	PRIMORIS SVCS CORP	242,375	279,296
	PRINCIPAL FINANCIAL GROUP	88,765	101,040
	PROASSURANCE CORPORATION	265,095	180,815
	PROCTER & GAMBLE CO	241,433	250,529
	PROGRESS SOFTWARE CORP	350,639	428,825
	PROGRESSIVE CORP	308,067	414,034
	PRUDENTIAL FINL INC JR SB GLBL	141,097	131,685
	PUBLIC SVC ENTERPRISE GROUP INC	85,467	78,854
	QIAGEN NV	36,721	38,599
	QORVO INC	48,709	40,788
	QUALYS INC	314,324	338,261
	QUEST DIAGNOSTICS INC	157,734	176,151
	QUIDELORTHO CORP COM	12,859	12,593
	RALPH LAUREN CORP	27,981	30,750
	RAYTHEON TECHNOLOGIES CORP	271,869	400,551

United Food and Commercial Workers Union Local 655 Food Employers Joint Pension Plan
EIN: 43-6058365 Plan Number: 001
Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
December 31, 2022

(a)	Identity of Issuer, Borrower, Lessor, or Similar Party and Description of Assets (b) and (c)	Cost (d)	Current Value (e)
	COMMON STOCK (CONTINUED):		
	REGAL BELOIT CORP WISCONSIN	\$ 34,627	\$ 33,594
	REGENERON PHARMACEUTICALS INC	87,310	98,844
	REGIONS FINL CORP	26,858	27,381
	REINSURANCE GROUP OF AMERICA	57,482	69,198
	RELIANCE STEEL & ALUMINUM CO	40,720	43,525
	REPUBLIC SVCS INC	73,670	72,363
	REXFORD INDL RLTY INC	25,583	19,780
	ROBERT HALF INTL INC	89,184	67,628
	ROCKWELL AUTOMATION INC	64,532	75,468
	ROLLINS INC	21,457	22,143
	ROPER INDS INC NEW	69,688	69,566
	ROYAL CARIBBEAN CRUISES LTD	32,707	30,894
	RYDER SYSTEMS INC	18,166	20,475
	SALESFORCE INC	62,173	55,157
	SCANSOURCE INC	359,911	361,159
	SCHEIN HENRY INC	155,790	144,724
	SCHLUMBERGER LTD	65,899	96,068
	SCHWAB CHARLES CORP	14,022	18,400
	SCIENCE APPLICATIONS INTL CORP N	11,670	15,863
	SEI INVESTMENT COMPANY	42,493	46,232
	SELECT MED HLDGS CORP	180,597	413,420
	SELECTIVE INSURANCE GROUP INC	417,470	809,895
	SEMPRA ENERGY	42,423	43,426
	SENSIENT TECHNOLOGIES CORP	221,841	251,574
	SERVICE CORP INTERNATL	65,558	66,997
	SHUTTERSTOCK INC	395,656	241,299
	SIGNATURE BANK	25,024	14,518
	SILGAN HOLDINGS INC	252,402	423,792
	SIRIUS XM HLDGS INC	20,282	19,015
	SKECHERS USA INC CL A	25,046	27,477
	SKYWORKS SOLUTIONS INC	37,498	28,524
	SLM CORP	49,469	49,551
	SMITH A O CORP	38,307	37,492
	SNAP ON INC	223,623	231,003
	SOUTHWEST AIRLINES CO	32,885	28,653
	SPECTRUM BRANDS HOLDINGS, INC.	12,344	16,997
	SS&C TECHNOLOGIES HLDGS INC	125,330	101,829
	STANLEY BLACK & DECKER INC	84,392	54,162
	STATE STR CORP	239,775	261,101

United Food and Commercial Workers Union Local 655 Food Employers Joint Pension Plan
EIN: 43-6058365 Plan Number: 001
Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
December 31, 2022

(a)	Identity of Issuer, Borrower, Lessor, or Similar Party and Description of Assets (b) and (c)	Cost (d)	Current Value (e)
	COMMON STOCK (CONTINUED):		
	STERICYCLE INC	\$ 31,218	\$ 32,927
	STERIS PUBLIC COMPANY LIMITED	113,657	97,516
	STRYKER CORP	12,095	14,180
	SUNRUN INC	29,709	27,407
	SVB FINANCIAL GROUP	48,760	27,387
	SYNAPTICS INC	106,002	221,723
	SYNCHRONY FINL	267,121	271,161
	SYNNEX CORP	60,446	55,974
	SYNOVUS FINL CORP	12,044	10,739
	T ROWE PRICE GROUP INC	352,299	264,580
	TAKE-TWO INTERACTIVE SOFTWARE	82,353	70,808
	TAPESTRY INC	82,929	100,988
	TARGET CORP	413,001	569,035
	TELADOC INC	13,365	8,585
	TELEDYNE TECHNOLOGIES INC	23,528	24,794
	TELEFLEX INC	42,245	36,446
	TERADATA CORP DEL	348,889	385,441
	TERADYNE INC	26,504	28,214
	TETRA TECH INC NEW	80,419	358,619
	TEXAS ROADHOUSE INC CLASS A	138,301	309,230
	TEXTRON INC	71,240	76,535
	THE CARLYLE GROUP INC	12,052	9,012
	THE CIGNA GROUP	135,710	172,959
	THOR IND INC	13,907	13,135
	TIMKEN CO	25,592	32,226
	T-MOBILE US INC	248,979	307,300
	TOMPKINS COUNTY TRUSTCO INC	107,154	128,007
	TOPBUILD CORP	198,007	185,441
	TRANE TECHNOLOGIES PLC	42,792	61,857
	TRANSDIGM GROUP INC	105,174	119,634
	TRAVELERS COS INC	218,206	236,425
	TRIUMPH GROUP INC NEW	437,755	198,197
	TRIUMPH GROUP INC NEW 12/19/2023	19,661	2,824
	TRUIST FINANCIAL CORP COM	45,719	39,415
	TTM TECHNOLOGIES	399,843	373,833
	TYLER TECHNOLOGIES INC	38,839	34,820
	TYSON FOODS INC CLASS A	195,522	132,717
	U S PHYSICAL THERAPY INC	361,579	368,362
	UGI CORP	32,323	30,768

United Food and Commercial Workers Union Local 655 Food Employers Joint Pension Plan
EIN: 43-6058365 Plan Number: 001
Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
December 31, 2022

(a)	Identity of Issuer, Borrower, Lessor, or Similar Party and Description of Assets (b) and (c)	Cost (d)	Current Value (e)
COMMON STOCK (CONTINUED):			
	U-HAUL HOLDING COMPANY COM SER N	\$ 22,193	\$ 24,246
	ULTRA CLEAN HLDGS INC COM	184,480	404,563
	UMB FINANCIAL CORP	346,703	396,720
	UNIFIRST CORP MASS	176,603	284,660
	UNITED BANKSHARES INC W VA	134,484	170,868
	UNITED CONTL HLDGS INC	46,103	46,446
	UNITED PARCEL SERVICE	82,420	77,533
	UNITED RENTALS INC	45,605	56,867
	UNITED THERAPEUTICS CORP DEL	24,838	38,376
	UNITEDHEALTH GROUP INC	801,387	844,577
	UNITIL CORP	149,621	157,932
	UNITY SOFTWARE INC COM	14,603	10,207
	UNIVAR INC	25,608	28,366
	UNIVERSAL HEALTH SVCS INC CL B	86,077	98,341
	UNUMPROVIDENT CORP	13,474	14,689
	UPSTART HOLDINGS INC COM	13,688	9,677
	US BANCORP DEL	40,568	36,371
	US STEEL CORP	14,502	13,452
	V F CORP	68,543	48,566
	VALERO ENERGY CORP CORP NEW	78,769	86,899
	VALMONT INDS INC	186,830	348,857
	VERADIGM INC	211,057	374,427
	VERISIGN INC	10,672	12,326
	VERTEX PHARMACEUTICALS INC	80,273	84,035
	VIATRIS INC COM	12,799	14,725
	VISTRA ENERGY CORP	13,003	13,897
	VMWARE INC CL A	36,209	38,301
	WABTEC CORP	64,750	73,859
	WALGREENS BOOTS ALLIANCE INC	489,082	421,981
	WAL-MART STORES INC	643,590	721,428
	WALT DISNEY CO	567,948	313,116
	WARNER BROS. DISCOVERY INC.	20,545	13,642
	WASHINGTON FEDERAL INC	183,111	269,071
	WASHINGTON TRUST BANCORP	137,489	135,643
	WASTE MANAGEMENT INC	189,279	187,158
	WATSCO INC	38,351	37,909
	WATTS WATER TECHNOLOGIES INC	154,478	280,762
	WAYFAIR INC CLASS A	28,285	16,511
	WEBSTER FINL CORP WATERBURY CONN	323,234	482,300

United Food and Commercial Workers Union Local 655 Food Employers Joint Pension Plan
EIN: 43-6058365 Plan Number: 001
Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
December 31, 2022

(a)	Identity of Issuer, Borrower, Lessor, or Similar Party and Description of Assets (b) and (c)	Cost (d)	Current Value (e)
COMMON STOCK (CONTINUED):			
	WEC ENERGY GROUP INC	\$ 31,653	\$ 29,722
	WELLS FARGO & CO & CO NEW	665,285	644,041
	WESTERN ALLIANCE COMMON STOCK	17,399	13,401
	WESTERN DIGITAL CORP	157,939	108,185
	WEX INC	138,422	224,201
	WHIRLPOOL CORP	202,454	151,079
	WILLIAMS SONOMA INC	32,867	20,226
	WILLIS TOWERS WATSON PLC	295,512	344,858
	WILLSCOT MOBILE MINI HOLDINGS	12,668	11,789
	WINTRUST FINL CORP	11,548	11,664
	WOLFSPEED INC COM	51,367	46,947
	WOODWARD INC	32,314	30,722
	WORTHINGTON INDS INC	193,180	247,556
	WYNDHAM HOTELS & RESORTS INC	12,986	14,191
	WYNN RESORTS LTD	10,672	12,041
	XCEL ENERGY INC	52,819	55,878
	XPERI INC. COMMON STOCK	168,930	42,292
	XYLEM INC	70,455	91,663
	YUM! BRANDS INC	28,014	32,276
	ZIMMER BIOMET HOLDINGS, INC	97,172	87,456
	ZIONS BANCORP	28,340	21,876
	TOTAL COMMON STOCKS	<u>84,495,278</u>	<u>94,498,345</u>
	TOTAL ASSETS HELD AT END OF YEAR	<u>\$ 544,602,680</u>	<u>\$ 729,461,628</u>

United Food and Commercial Workers Union Local 655 Food Employers Joint Pension Plan
EIN: 43-6058365 Plan Number: 001
Schedule H, Line 4j - Schedule of Reportable Transactions
Year Ended December 31, 2022

Identity of Party Involved (a)	Description of Asset (b)	Purchase Price (c)	Selling Price (d)	Cost of Asset (g)	Current Value of Asset on Transaction Date (h)	Net Gain (Loss) (i)
Comerica	Short Term Fund (342)	\$ -	\$ 109,110,929	\$ 109,110,929	\$ 109,110,929	\$ -
Comerica	Short Term Fund (1,006)	\$ 102,893,563	\$ -	\$ 102,893,563	\$ 102,893,563	\$ -

**United Food and Commercial Workers Union Local 655 Food Employers Joint Pension
Plan**

**Schedules of Administrative Expenses
Years Ended December 31, 2022 and 2021**

	<u>2022</u>	<u>2021</u>
Administrative	\$ 237,432	\$ 285,864
Insurance	672,566	720,882
Meetings and conferences	2,489	3,611
Miscellaneous	1,723	-
Payroll	292,284	339,683
Payroll compliance audits	13,540	11,670
Professional fees - actuarial	263,795	301,965
Professional fees - audit and tax	74,826	68,923
Professional fees - legal	<u>237,402</u>	<u>204,776</u>
	<u>\$ 1,796,057</u>	<u>\$ 1,937,374</u>

Exhibit L(1): Summary of Plan Provisions

(Schedule MB, Line 6)

This exhibit summarizes the major provisions of the Plan included in the valuation. It is not intended to be, nor should it be interpreted as, a complete statement of all plan provisions.

Plan Year	January 1 through December 31
Pension Credit Year	January 1 through December 31
Plan Status	Ongoing plan
Regular Pension	• <i>Age Requirement:</i> 62 • <i>Service Requirement:</i> Five years of vesting service or 6 pension credits • <i>Amount:</i> – For participants hired on or before December 31, 2010, future benefit accruals will be determined based on the number of hours worked during a calendar year based on the following Table A:

Table A	
Hours Worked in a Calendar Year	Benefit Accrual
799 or less	\$0.00
800 – 1,099	16.50
1,100 – 1,399	21.00
1,400 – 1,699	25.50
1,700 or more	30.00

**Regular Pension
(continued)**

- For Participants hired on or after January 1, 2011, future benefit accrual will be determined based on number of hours worked during a calendar year based on the following Table B during their first 10 years of participation:

Table B		
Hours Worked in a Calendar Year	Benefit Accrual	
	During First Five Years of Participation	During Next Five Years of Participation
799 or less	\$0.00	\$0.00
800 – 1,099	12.50	14.50
1,100 – 1,399	16.00	18.50
1,400 – 1,699	19.50	22.50
1,700 or more	22.50	26.00

After 10 years of participation, benefits will be accrued according to Table A shown on the previous page.

- Delayed Retirement Amount:** Regular pension accrued at normal retirement age (NRA), increased by 1.0% for first 60 months and 1.5% for each month thereafter.

Early Retirement

- Age Requirement:** 52
- Service Requirement:** 10 pension eligibility credits including one earned during the contribution period
- Amount:** Regular pension accrued, reduced by 5% for each year of age less than 62

Disability

- Age Requirement:** None
- Service Requirement:** 10 pension eligibility credits including one earned during the contribution period
- Amount:** Regular pension accrued

Vesting

- Age Requirement:** None
- Service Requirement:** 10 pension eligibility credits or 5 years of vesting service
Or
- Age and Service Requirement:** Age 62 or, if later, the fifth anniversary of participation (Normal Retirement Age) before incurring a permanent break-in-service
- Amount:** Benefit accrued at the benefit rate in effect at the end of the two consecutive calendar year period in which the participant failed to earn at least two quarters of a pension eligibility credit, or on the effective date of retirement if earlier. May be paid at regular or early retirement age if requirements are met.
- Normal Retirement Age:** 62

Pre-Retirement Death Benefits:

Joint and Survivor Spousal Pension

- *Age Requirement:* None
- *Service Requirement:* 5 pension eligibility credits or 5 years of vesting service
- *Amount:* 50% of the benefit participant would have received had he or she retired the day before he or she died and elected the 50% joint and survivor option, paid to qualified spouse. If the participant died prior to eligibility for an early retirement pension, the spouse's benefit is deferred to the date participant would have been eligible for early retirement. Reductions are made to the accrued benefit for early commencement (if applicable) and form of payment.
- *Charge for Coverage:* None

Or

Pre-Retirement Death Benefit

- *Age Requirement:* None
- *Service Requirement:* 10 pension eligibility credits and active employee at death
- *Amount:* 50% of the regular pension accrued (without reduction for early commencement and form of payment) payable immediately to the surviving spouse for life. If no surviving spouse or if the surviving spouse dies, the monthly death benefit is payable to any surviving dependent children until the earlier of the month in which their eighteenth birthday or their death occurs.
- *Charge for Coverage:* None

Post-Retirement Death Benefit

- If married, pension benefits are paid in the form of a 50% joint and survivor annuity unless this form is rejected by the participant and spouse. If not rejected, the benefit amount otherwise payable is reduced to reflect the joint and survivor coverage. If not rejected, and the spouse predeceases the participant, the participant's benefit amount will subsequently be increased to the unreduced amount payable had the joint and survivor coverage been rejected (pop-up provision). If rejected, or if not married, benefits are payable for the life of the participant, or in any other available optional form elected by the employee in an actuarially equivalent amount.

Optional Forms of Benefits

- Single life annuity (for married participants)
- 50% joint and survivor with pop-up provision (for single participants)
- 75% or 100% joint and survivor with pop-up provision
- 50% or 75% joint and survivor without pop-up provision
- 10 year certain and life annuity
- Social security equalization option

Participation

On the earliest of the first day on which the employer is required to contribute to the fund on behalf of the employee, the first January 1 or July 1 following completion of a 12 consecutive month period during which the employee completed at least 1,000 hours of service, or the first day of the month following the month in which the employee completes at least 250 hours of work for which contributions are made to the fund.

Pension Credit	• <i>Before January 1, 2004:</i> One pension credit for each calendar year in which the participant works 1,000 or more hours in covered employment; proportionate credit in quarters for less than 1,000 hours • <i>After December 31, 2003:</i> One pension credit for each calendar year in which the participant works 1,600 or more hours in covered employment; proportionate credit in quarters for less than 1,600 hours
Pension Eligibility Credit	One pension eligibility credit for each calendar year in which the participant works 1,000 or more hours in covered employment; proportionate credit in quarters for less than 1,000 hours; an employee retiring on a regular pension shall receive a full pension eligibility credit for the plan year in which he retires provided he works in covered employment from the beginning of such plan year up to his retirement date.
Vesting Credit	One year of vesting service for each calendar year during the contribution period in which the participant completed 1,000 hours or more of service
Contribution Rate	• \$1.52 per hour effective January 1, 2022 • \$1.37 per hour effective January 1, 2023 • \$1.22 per hour effective January 1, 2024 • \$1.07 per hour effective January 1, 2025
Changes in Plan Provisions	In May 2022, the Plan entered into a reciprocal agreement that provides for the recognition of certain eligibility credits and vesting service earned while a participant of The Dierbergs Markets, Inc. and Local 655 Variable Annuity Plan.

Summary of Plan Provisions for benefits accrued under The Employers and Local 534 Meat Employees Pension Fund

(Schedule MB, Line 6)

This exhibit summarizes the major provisions of the Employers and Local 534 Meat Employees Pension Fund for accruals prior to January 1, 2018. It is not intended to be, nor should it be interpreted as, a complete statement of all plan provisions. Service requirement is determined with service earned under the United Food and Commercial Workers Union Local 655, Food Employers Joint Pension Plan included.

Plan Year	January 1 through December 31 (merger effective December 31, 2017)
Pension Credit Year	January 1 through December 31
Plan Status	Ongoing plan

Normal Retirement

- *Age Requirement:* 65
- *Service Requirement:* Five years of credited service
- *Amount:*
 - For participants who first retire or terminated participation on or after January 1, 2001, a monthly benefit according to the table below:

<u>Months Worked in a Year</u>	<u>Service After 1/1/1986</u>	<u>Service Before 1/1/1986¹</u>
1	\$3.69	\$2.84
2	7.38	5.69
3	11.07	8.53
4	14.75	11.38
5	18.44	14.22
6	22.13	17.07
7	25.82	19.92
8	29.50	22.76
9	33.19	25.61
10	36.88	28.45
11	40.57	31.29
12	44.25	34.14

¹ Benefit accrual rate proportionate reduced to \$26.46 for participants not covered by the Alternate Schedule 1, effective 30 days after the Rehabilitation Plan Schedule is ratified.

Delayed Retirement Amount: Regular pension accrued at normal retirement age (NRA), increased by actuarial equivalence from normal retirement age

Early Retirement

- *Age Requirement:* 52
- *Service Requirement:* 10 years of credited service
- *Amount:*
 - For participants covered by the Alternate Schedule 1: Normal pension accrued, reduced by 3% for each year of age less than 62
 - For other participants: Normal pension accrued, reduced by actuarial equivalence from normal retirement age

Disability	• <i>Age and Service Requirements:</i> – Age 35 and 5 years of credited service; or – 10 pension eligibility credits including one earned during the contribution period. • <i>Other Requirement:</i> Permanent and total disabled for six months and not covered by the Default Schedule of the Rehabilitation Plan • <i>Amount:</i> Normal pension accrued, but not less than \$50 per month
Vesting	• <i>Age Requirement:</i> None • <i>Service Requirement:</i> 5 years of vesting service • <i>Amount:</i> Normal pension accrued, actuarially reduced to the effective date, if commenced prior to the normal retirement age • <i>Normal Retirement Age:</i> 65
Pre-Retirement Surviving Spouse Death Benefits	• <i>Age Requirement:</i> None • <i>Service Requirement:</i> 5 years of vesting service • <i>Amount:</i> 50% of the benefit participant would have received had the participant terminated employment on the date of death, survived to the earliest retirement date, retired under the 50% joint and survivor form, and died the following day. • <i>Charge for Coverage:</i> None
Post-Retirement Death Benefit	• If married, pension benefits are paid in the form of a 50% joint and survivor annuity unreduced unless this form is rejected by the participant and spouse. If rejected, or if not married, benefits are payable for the life of the participant, or in any other available optional form elected by the participant in an actuarially equivalent amount.
Optional Forms of Benefits	• Single life annuity (for married participants) • 50% joint and survivor with or without pop-up provision (for single participants) • 75% or 100% joint and survivor with pop-up provision • 75% joint and survivor without pop-up provision • 10 year certain and life annuity
Participation	• Date the first contribution is received by the Fund.
Credited Future Service	• One month of credited service for each month an employee works 92 or more contributory hour of service.
Vesting Service	• One year of vesting service for each calendar year during the contribution period in which the participant completed 1,000 hours or more of service.

Exhibit L(3): Summary of Plan Provisions for benefits accrued under The Employers and Local 534 Grocery Employees Pension Fund

(Schedule MB, Line 6)

This exhibit summarizes the major provisions of the Plan in effect for the Employers and Local 534 Grocery Employees Pension Fund for accruals prior to January 1, 2018. It is not intended to be, nor should it be interpreted as, a complete statement of all plan provisions. Service requirement is determined with service earned under the UFCW Local 655, Food Employers Joint Pension Plan included.

Plan Year	January 1 through December 31 (merger effective December 31, 2017)		
Pension Credit Year	January 1 through December 31		
Plan Status	Ongoing plan		
Normal Retirement	• <i>Age Requirement:</i> 65 • <i>Service Requirement:</i> Five years credited service • <i>Amount:</i> – For participants who first retire or terminated participation on or after January 1, 2001, a monthly benefit according to the table below:		
	Contributory Hours of Service	Years of Service Prior to 5/1/2006	Years of Service on or After 5/1/2006
	1,750 & Over	\$32.25	\$30.00
	1,500 – 1,749	28.22	26.25
	1,250 – 1,499	24.19	22.50
	1,000 – 1,249	20.16	18.75
	750 – 999	16.13	15.00
	501 – 749	12.09	11.25
	Less than 501	0.00	0.00
	¹ These rates are effective on the first day of the month following ratification of a collective bargaining agreement compliant with one of the Rehabilitation Plan schedules and the required participant notice.		
	• <i>Delayed Retirement Amount:</i> Regular pension accrued at normal retirement age (NRA), increased by actuarial equivalence from normal retirement age		

Early Retirement	• <i>Age Requirement:</i> 52 • <i>Service Requirement:</i> 10 years credited service • <i>Amount:</i> Regular pension accrued, reduced by actuarial equivalence from normal retirement age
Disability	• <i>Age and Service Requirements:</i> – Age 35 and 5 years of credited service; or – 10 pension eligibility credits including one earned during the contribution period. • <i>Other Requirement:</i> Permanent and total disabled for six months and not covered by the Default Schedule of the Rehabilitation Plan • <i>Amount:</i> Normal pension accrued, but not less than \$50 per month
Vesting	• <i>Age Requirement:</i> None. • <i>Service Requirement:</i> 5 years of vesting service • <i>Amount:</i> Normal pension accrued, actuarially reduced to the effective date, if commenced prior to the Normal Retirement Age • <i>Normal Retirement Age:</i> 65
Pre-Retirement Surviving Spouse Death Benefits	• <i>Age Requirement:</i> None • <i>Service Requirement:</i> 5 years of vesting service • <i>Amount:</i> 50% of the benefit participant would have received had the participant terminated employment on the date of death, survived to the earliest retirement date, retired under the 50% joint and survivor form, and died the following day • <i>Charge for Coverage:</i> None
Post-Retirement Death Benefit	• If married, pension benefits are paid in the form of a 50% joint and survivor annuity unreduced unless this form is rejected by the participant and spouse. If rejected, or if not married, benefits are payable for the life of the participant, or in any other available optional form elected by the participant in an actuarially equivalent amount.
Optional Forms of Benefits	• Single life annuity (for married participant) • 50% joint and survivor with or without pop-up provision (for single participants) • 75% or 100% joint and survivor with pop-up provision • 75% joint and survivor without pop-up provision • 10 year certain and life annuity
Participation	Date the first contribution is received by the Fund
Credited Future Service	One year of future service credited for each year an employee works 1,750 or more hours of covered employment.

2022 Schedule MB, Line 6 - Summary of Plan Provisions
United Food and Commercial Workers Union Local 655, Food Employers Joint Pension Plan
EIN 43-6058365/PN 001

Vesting Service	One year of vesting service for each calendar year during the contribution period in which the participant completed 1,000 hours or more of service.
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United Food and Commercial Workers Union Local 655 Food Employers Joint Pension Plan
EIN: 43-6058365 Plan Number: 001
Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
December 31, 2022

(a)	Identity of Issuer, Borrower, Lessor, or Similar Party and Description of Assets (b) and (c)	Cost (d)	Current Value (e)
	MONEY MARKET FUNDS:		
	COMERICA SHORT TERM FUND	\$ 2,201,796	\$ 2,201,796
	FIRST BANK INTEREST BEARING CHECKING ACCOUNT	5,658,560	5,658,560
	TOTAL MONEY MARKET FUNDS	<u>7,860,356</u>	<u>7,860,356</u>
	U.S. GOVERNMENT AND AGENCY SECURITIES:		
	FEDERAL HOME LN MTG CORP GOLD	31,290	32,329
	FEDERAL HOME LN MTG CORP GROUP	85,683	79,618
	FEDERAL HOME LN MTG CORP MBS	116,321	106,834
	FEDERAL HOME LN MTG CORP PARTN	250,879	231,423
	FEDERAL HOME LN MTG CORP PARTN C	124,358	116,725
	FEDERAL HOME LN MTG CORP PARTN C	67,309	61,115
	FEDERAL HOME LN MTG CORP POOL	18,940	19,426
	FEDERAL HOME LOAN MTG CORP 3.000	282,827	236,187
	FEDERAL HOME LOAN MTG CORP 3.000	738,634	618,105
	FEDERAL HOME LOAN MTG CORP 3.500	560,964	485,761
	FEDERAL HOME LOAN MTG CORP 3.500	731,774	639,225
	FEDERAL HOME LOAN MTG CORP 4.000	556,660	520,971
	FEDERAL HOME LOAN MTG CORP 4.000	429,695	411,306
	FEDERAL HOME LOAN MTG CORP 4.500	552,319	525,469
	FEDERAL HOME LOAN MTG CORP 4.500	811,101	807,576
	FEDERAL HOME LOAN MTG CORP 5.000	645,086	631,270
	FEDERAL HOME LOAN MTG CORP 5.500	535,450	543,755
	FEDERAL NATL MTG ASSN .875%	973,903	875,666
	FEDERAL NATL MTG ASSN 4.000	553,759	522,277
	FEDERAL NATL MTG ASSN 4.000	534,901	524,356
	FEDERAL NATL MTG ASSN 5.000	545,382	521,237
	FEDERAL NATL MTG ASSN GTD MTG	58,950	54,252
	FEDERAL NATL MTG ASSN GTD MTG	45,174	40,482
	FEDERAL NATL MTG ASSN GTD MTG	63,374	59,311
	FEDERAL NATL MTG ASSN GTD MTG	38,542	34,877
	FEDERAL NATL MTG ASSN GTD MTG	113,870	104,533
	FEDERAL NATL MTG ASSN GTD MTG	294,093	275,575
	FEDERAL NATL MTG ASSN GTD MTG PA	235,003	210,036
	FEDERAL NATL MTG ASSN GTD MTG PA	316,822	268,600
	FEDERAL NATL MTG ASSN GTD MTG PA	254,453	216,753
	FEDERAL NATL MTG ASSN GTD MTG PA	481,072	382,234
	FEDERAL NATL MTG ASSN GTD MTG PA	753,249	616,369
	FEDERAL NATL MTG ASSN GTD MTG PA	64,947	59,420
	FEDERAL NATL MTG ASSN POOL	3,037	2,989

United Food and Commercial Workers Union Local 655 Food Employers Joint Pension Plan
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Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
December 31, 2022

(a)	Identity of Issuer, Borrower, Lessor, or Similar Party and Description of Assets (b) and (c)	Cost (d)	Current Value (e)
U.S. GOVERNMENT AND AGENCY SECURITIES (CONTINUED):			
	FEDERAL NATL MTG ASSN POOL	\$ 52,612	\$ 54,580
	FEDERAL NATL MTG ASSN POOL	57,096	53,480
	FEDERAL NATL MTG ASSN POOL	39,763	40,141
	FEDERAL NATL MTG ASSN POOL NBR	170,945	150,792
	FEDERAL NATL MTG ASSN POOL NBR	160,430	146,451
	FEDERAL NATL MTG ASSN POOL NBR	123,923	119,414
	FNMA PASS-THRU I 2.500	542,531	452,797
	GNMA II GTD CTF MULTI ISSUER	535,480	455,680
	GNMA II GTD CTF MULTI ISSUER	594,575	501,353
	GNMA II GTD CTF MULTI ISSUER	775,037	667,912
	GNMA II GTD CTF MULTI ISSUER	582,496	509,136
	GNMA II GTD CTF MULTI ISSUER	148,305	129,961
	GNMA II GTD CTF MULTI ISSUER	654,685	628,357
	GNMA PLATINUM POOLS USING GNMA I	77,475	70,981
	GOVERNMENT NATL MTG ASSN 5.5%	622,887	611,526
	GOVERNMENT NATL MTG ASSN POOL #	13,808	13,592
	UNITED STATES TREAS 2.5% NTS	282,200	281,943
	UNITED STATES TREAS BDS 0% PIDI	845,427	831,320
	UNITED STATES TREAS BDS 1.25%	1,205,063	891,947
	UNITED STATES TREAS BDS 1.375%	1,170,451	828,139
	UNITED STATES TREAS BDS 2%	1,122,256	1,097,019
	UNITED STATES TREAS BDS 2.375%	851,135	594,469
	UNITED STATES TREAS BDS 2.5%	1,150,389	929,371
	UNITED STATES TREAS BDS 2.5%	1,107,829	921,335
	UNITED STATES TREAS BDS 2.75%	1,451,807	1,049,399
	UNITED STATES TREAS BDS 3%	702,969	560,871
	UNITED STATES TREAS BDS 3%	896,591	869,975
	UNITED STATES TREAS US TREASURY	643,028	571,760
	TOTAL U.S. GOVERNMENT AND AGENCY SECURITIES	28,451,014	24,869,763
MUNICIPAL BONDS:			
	COLUMBIA SC WTRWKS & SWR SYS REV	120,000	109,566
	HONOLULU HI CITY & CNTY WSTWTR	365,000	331,756
	MARIN CA CMNTY COLLEGE DIST	349,598	316,824
	MASSACHUSETTS ST WTR RES AUTH	575,000	527,867
	METRO WASTEWTR RECLAMATION DIST	265,000	223,771
	NEW YORK ST URBAN DEV CORP REV	273,935	258,882
	OREGON ED TAXABLE BDS 2021A	160,000	150,763
	PRINCE GEORGES CNTY MD TAXABLE	80,000	70,009

United Food and Commercial Workers Union Local 655 Food Employers Joint Pension Plan
EIN: 43-6058365 Plan Number: 001
Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
December 31, 2022

(a)	Identity of Issuer, Borrower, Lessor, or Similar Party and Description of Assets (b) and (c)	Cost (d)	Current Value (e)
MUNICIPAL BONDS (CONTINUED):			
	TEXAS ST TXBL-PUBLIC FIN AUTH	\$ 144,939	\$ 122,916
	TEXAS ST TXBL-REF-STATE OF TEXAS	185,000	159,278
	UNIVERSITY CALIF REVS 3.063%	148,380	144,251
	UNIVERSITY MICH UNIV REVS	100,000	87,346
	VIRGINIA BUILD AMERICA BONDS	333,247	316,115
	VIRGINIA ST RES AUTH INFRASTRUCT	460,000	409,989
	TOTAL MUNICIPAL BONDS	<u>3,560,099</u>	<u>3,229,333</u>
CORPORATE BONDS:			
	ADOBE INC 2.3% 02/01/2030-2029	166,423	141,096
	AEP TRANSMISSION CO LLC 3.1%	558,974	469,270
	AIR PRODUCTS & CHEMICAL INC	398,190	312,380
	ALLSTATE CORP .75%	465,924	421,767
	AMAZON COM INC 3.875%	230,042	173,950
	AMER WATER WORKS 3.45%	317,953	270,067
	AMERICAN EXPRESS CR CORP 3.3%	624,318	539,152
	AMPHENOL CORP CL A 2.05%	532,443	503,258
	ANALOG DEVICES INC 3.5%	254,944	214,970
	ANHEUSER-BUSCH INBEV WORLDWIDE I	411,518	337,245
	APPLE INC 4.375% 05/13/2045	282,933	207,999
	APPLIED MATLS INC 1.75%	289,108	249,511
	AUTOMATIC DATA PROCESSING 1.7%	163,063	139,152
	AVERY DENNISON CORP 3.35%	468,016	462,015
	BA CR CARD TR CMO .34%	319,926	306,171
	BERKSHIRE HATHAWAY 4.25%	238,465	179,522
	BK OF AMERICA CORP FR 2.592%	403,518	314,480
	BURLINGTON NORTH SANTA FE 7.29%	385,201	313,073
	CANADIAN NATL RAILWAY CO 6.712%	300,488	237,999
	CATERPILLAR INC 6.625%	268,682	231,794
	CINTAS CORP NO 2 4%	289,469	273,212
	CNH EQUIPMENT TRUST ABS .81%	234,973	219,013
	CNH EQUIPMENT TRUST ABS .4%	340,710	326,404
	COLGATE PALMOLIVE CO 3.25%	292,850	271,806
	COMCAST CORP NEW 6.5% 11/15/2035	137,108	122,857
	CONAGRA .5% 08/11/2023-2022	129,582	126,304
	CONOCOPHILLIPS CO 2.125%	395,999	391,441
	CONTINENTAL AIRLS INC CL B 4%	197,363	181,770
	CUMMINS 1.5% 09/01/2030-2030	264,006	216,222
	DAIRY FARMERS OF AMERICA INC ABS	249,877	249,783

United Food and Commercial Workers Union Local 655 Food Employers Joint Pension Plan
EIN: 43-6058365 Plan Number: 001
Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
December 31, 2022

(a)	Identity of Issuer, Borrower, Lessor, or Similar Party and Description of Assets (b) and (c)	Cost (d)	Current Value (e)
CORPORATE BONDS (CONTINUED):			
	DELMARVA PWR & LT CO 3.5%	\$ 594,573	\$ 552,552
	DELTA AIR LINES 2019- 1AA 3.204%	377,529	360,668
	DICKS SPORTING GOODS INC 3.15%	77,539	74,424
	DOMINION ENERGY INC PERP GLBL -C	301,186	236,742
	DTE ELEC CO 3.7% 03/15/2045-2044	110,940	83,867
	DUKE ENERGY CAROLINAS LLC 3.75%	179,829	136,519
	EATON CORP OHIO 4.15% 11/02/2042	240,082	167,388
	EMERSON ELECTRIC .875%	224,270	194,888
	EVERGY INC 2.9% 09/15/2029-2029	344,390	281,460
	EXXON MOBIL CORPORATION 2.019%	120,307	110,046
	EXXON MOBIL CORPORATION 2.61%	227,304	218,835
	FEDERAL HOME LN MTG CMO 3.458%	459,781	448,763
	FEDERAL HOME LN MTG CORP MULTICL	26,975	26,184
	FEDERAL HOME LN MTG CORP MULTICL	7,548	7,255
	FEDERAL HOME LN MTG CORP MULTICL	624,261	552,266
	FEDERAL HOME LN MTG CORP MULTICL	309,235	264,126
	FEDERAL HOME LN MTG CORP MULTICL	594,721	571,836
	FEDERAL HOME LOAN MTG CORP CMO	569,078	512,294
	FEDERAL NATL MTG ASSN CMO 4.5%	23,433	22,648
	FEDEX 2020-1 CLASS AA 1.875%	584,951	480,585
	FLORIDA PWR & LT CO SR GLBL FL	591,451	521,041
	GENERAL MTRS FINL CO INC 2.7%	250,713	214,505
	GEORGIA PAC CORP DEB 7.375%	468,195	410,818
	GLOBAL MARKETS INC 3.65%	481,836	454,205
	GOVERNMENT NATL MTG ASSN CMO 1%	245,117	198,831
	GRAINGER W W INC 1.85%	401,337	389,859
	HERSHEY CO 1.7% 06/01/2030-2030	352,867	296,881
	ILLINOIS TOOL WORKS INC 2.65%	140,663	139,491
	INTEL CORP 4.75% 03/25/2050-2049	212,550	165,292
	INTUIT INC 1.35% 07/15/2027-2027	141,598	138,602
	JOHN DEERE OWNER TRUST 2022-B	249,974	247,644
	JOHNSON & JOHNSON .95%	274,794	237,204
	JPMORGAN CHASE & CO 2.182%	443,164	385,317
	KIMBERLY CLARK CORP 2.65%	454,496	444,391
	KROGER CO 2.65% 10/15/2026-2026	255,599	220,543
	LOCKHEED MARTIN CORP 7.75%	371,575	300,259
	LOWES COMPANIES INC 5.625%	139,110	137,869
	MAGELLAN MIDSTREAM 5%	320,739	298,320
	MARTIN MARIETTA 3.2%	152,039	105,450

United Food and Commercial Workers Union Local 655 Food Employers Joint Pension Plan
EIN: 43-6058365 Plan Number: 001
Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
December 31, 2022

(a)	Identity of Issuer, Borrower, Lessor, or Similar Party and Description of Assets (b) and (c)	Cost (d)	Current Value (e)
	CORPORATE BONDS (CONTINUED):		
	MCDONALDS CORP 3.35%	\$ 237,485	\$ 224,152
	MICROSOFT CORP 3.3%	568,255	487,194
	MONDELEZ INTL INC 2.75%	86,544	71,690
	NATIONAL RURAL UTILS COOP FIN	471,508	408,452
	NORFOLK SOUTHERN CORP 2.9%	278,696	252,923
	OGLETHORPE POWER CORPORATION	172,986	124,610
	ORACLE CORPORATION 6.15%	84,919	88,432
	OSHKOSH CORP 3.1% SNR PIDI NTS	205,816	173,426
	PACCAR FINL CORP MEDIUM TERM SR	159,778	152,245
	PACKAGING CORP OF AMERICA 3.65%	197,438	175,446
	PEPSICO INC 4.45%	277,151	207,086
	PINNACLE WEST CAPITAL CORP 1.3%	473,820	432,749
	PROCTER & GAMBLE CO 3.55%	227,372	164,949
	PUBLIC SVC CO COLORADO 4.3%	147,014	111,419
	QUANTA 3.05% 10/01/2041-2041	140,043	95,864
	REPUBLIC 1.75% 02/15/2032-2031	310,251	238,861
	REPUBLIC 3.375% 11/15/2027-2027	114,808	93,324
	ROPER TECHNOLOGIES INC 3.65%	317,361	291,844
	TENNESSEE GAS PIPELINE CO 7%	212,303	176,555
	TEXAS INSTRS INC 1.75%	141,804	140,269
	T-MOBILE USA INC 3.875%	132,727	108,985
	TRANSCONTINENTAL GAS PIPE LINE C	348,721	293,774
	UNION PAC RR CO 2014-1 PASS THRU	541,522	519,829
	UNITED PARCEL SERVICE 5.2%	238,446	216,097
	VALERO ENERGY CORP 1.2%	448,536	427,572
	VERIZON MASTER TRUST ABS .99%	479,776	447,619
	WALT DISNEY CO 7.125% 04/08/2028	414,819	340,730
	WASTE CONNECTIONS INC 4.25%	413,191	363,983
	WASTE MANAGEMENT INC .75%	503,992	451,935
	WELLS FARGO & CO 3% 04/22/2026	267,465	275,987
	WISCONSIN ENERGY CORP 6.2%	273,530	237,467
	YALE UNIVERSITY .873%	255,000	234,702
	TOTAL CORPORATE BONDS	<u>30,700,892</u>	<u>27,043,721</u>
	REAL ESTATE INVESTMENT TRUSTS:		
	ALEXANDRIA REAL ESTATE EQTY INC	47,396	40,059
	AMERICAN TOWER REIT	11,239	10,169
	AMERICOLD REALTY TRUST, INC	307,750	306,456
	BOSTON PROPERTIES INC	37,553	25,343

United Food and Commercial Workers Union Local 655 Food Employers Joint Pension Plan
EIN: 43-6058365 Plan Number: 001
Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
December 31, 2022

(a)	Identity of Issuer, Borrower, Lessor, or Similar Party and Description of Assets (b) and (c)	Cost (d)	Current Value (e)
	REAL ESTATE INVESTMENT TRUSTS:		
	BRIXMOR PPTY GROUP INC	\$ 24,721	\$ 22,217
	CAMDEN PPTY TR	24,040	21,593
	COHEN & STEERS INC	234,140	301,818
	CUBESMART	45,952	38,560
	DIAMONDROCK HOSPITALITY CO	275,373	275,675
	EPR PPTYS	28,208	20,897
	ESSEX PROPERTY TRUST INC	33,944	22,675
	EXTRA SPACE STORAGE INC	81,510	67,261
	HOST HOTELS & RESORTS, INC.	33,540	34,074
	IRON MTN INC NEW	221,117	222,580
	KIMCO RLTY CORP	73,197	65,298
	LIFE STORAGE INC	24,761	18,321
	MEDICAL PPTYS TR INC COMMON	14,650	8,856
	MID-AMER APARTMENT CMNTYS INC	47,106	37,207
	PARK HOTELS & RESORTS INC	20,207	13,252
	PENNYMAC MTG INVT TR	200,343	167,637
	PHYSICIANS RLTY TR	453,126	357,409
	PUBLIC STORAGE INC	182,436	157,747
	REALTY INCOME CORP REIT	25,285	23,659
	REGENCY CENTERS CORP	82,402	76,375
	RITHM CAPITAL	55,097	37,410
	STAG INDL INC COM	374,395	332,793
	STARWOOD PPTY TR INC	12,239	9,990
	SUN CMNTYS INC	46,385	40,183
	UDR INC	41,090	30,209
	VORNADO RLTY TR	16,731	14,193
	WEYERHAEUSER CO	234,649	231,291
	TOTAL REAL ESTATE INVESTMENT TRUSTS	<u>3,310,582</u>	<u>3,031,207</u>
	REGISTERED INVESTMENT COMPANIES:		
	BAIRD SHORT-TERM BD FD INSTL CL	29,794,488	28,123,220
	FIDELITY MID CAP INDEX FUND-FAI	31,380,242	29,889,019
	PIMCO TOTAL RETURN FD INSTL	56,726,719	52,544,787
	TOTAL REGISTERED INVESTMENT COMPANIES	<u>117,901,449</u>	<u>110,557,026</u>
	POOLED SEPARATE ACCOUNT:		
	QMA US MID CAP CORE EQUITY	<u>23,169,563</u>	<u>43,552,082</u>

United Food and Commercial Workers Union Local 655 Food Employers Joint Pension Plan
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	COLLECTIVE TRUST FUNDS:		
	BARINGS INTERNATIONAL SMALL CAP	\$ 17,000,000	\$ 17,971,197
	INVESCO EQV INTL EQUITY TRUST	20,597,139	28,333,167
	MULTI-EMPLOYER PROPERTY TRUST	9,167,028	21,823,128
	RUSSELL 1000 (R) GROWTH INDX NL	36,603,226	59,436,411
	S&P 500 (R) FLAGSHIP NL FUND	17,767,656	61,689,713
	TOTAL COLLECTIVE TRUST FUNDS	<u>101,135,049</u>	<u>189,253,616</u>
	LIMITED PARTNERSHIPS:		
	AMERICAN STRATEGIC VALUE REALTY	7,012,359	14,066,264
	ASB ALLEGIANCE REAL ESTATE FD LP	17,052,882	32,593,542
	FORT WASHINGTON HIGH YIELD II	20,000,000	21,703,298
	GCM GROSVENOR MULTI-CLASS FUND	31,612,760	50,657,359
	GROSVENOR OPPORTUNISTIC CREDIT	1,588,630	437,640
	GROSVENOR OPPORTUNISTIC CREDIT	4,136,314	12,984,335
	HAMILTON LANE PRIVATE EQUITY	3,467,686	5,209,202
	HAMILTON LANE SECONDARY FUND II	234,223	65,575
	LANDMARK EQUITY PARTNERS XIV LP	500,806	690,682
	LSV INTERNATIONAL AC VALUE	17,594,939	20,124,754
	SIGULER GUFF SMALL BUYOUT	6,822,059	20,190,319
	SIGULER GUFF SMALL BUYOUT	1,131,692	1,202,515
	U.S. REAL ESTATE INVESTMENT FUND	10,705,290	19,422,775
	TOTAL LIMITED PARTNERSHIPS	<u>121,859,640</u>	<u>199,348,260</u>
	HEDGE FUNDS:		
	ENTRUST CAPITAL DIVERSIFIED	1,309,011	548,778
	ENTRUST SPECIAL OPPORTUNITIES	1,077,832	497,823
	ENTRUST SPECIAL OPPORTUNITIES	7,327,106	5,356,175
	GROSVENOR INSTITUTIONAL PARTNERS	9,247,154	16,256,862
	TOTAL HEDGE FUNDS	<u>18,961,103</u>	<u>22,659,638</u>
	INVESTMENT CONTRACT:		
	PRINCIPAL GLOBAL INVESTORS LLC	<u>3,197,655</u>	<u>3,558,281</u>
	COMMON STOCKS:		
	1ST CTZNS BANCSHS INC N C CL A	45,393	50,052
	3M CO	119,046	102,052
	ABBOTT LABS	46,319	62,251
	ACADIA HEALTHCARE CO INC	35,858	43,547

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COMMON STOCKS:			
	ACTIVISION BLIZZARD INC	\$ 47,755	\$ 47,078
	ACUITY BRANDS INC	262,437	304,888
	ADEIA INC. COM	177,676	111,020
	ADVANCE AUTO PARTS	81,712	60,282
	ADVANCED ENERGY INDS INC	101,433	278,785
	ADVANCED MICRO DEVICES INC	17,346	14,962
	AECOM TECHNOLOGY CORP DELAWARE	34,670	43,060
	AES CORP	154,523	254,152
	AFFILIATED MANAGERS GROUP INC	26,800	34,221
	AFLAC INC	182,954	229,561
	AGCO CORP	21,545	23,439
	AGILENT TECHNOLOGIES INC	154,699	199,932
	AIR PRODUCTS & CHEMICAL INC	289,447	387,791
	AKAMAI TECHNOLOGIES	74,566	67,019
	ALBEMARLE CORP	207,094	205,150
	ALCOA CORPORATION	44,642	32,511
	ALIGN TECHNOLOGY INC	15,472	13,076
	ALLEGION PLC	50,105	46,841
	ALLIANT ENERGY CORP	77,785	72,049
	ALLSTATE CORP	328,969	475,820
	ALLY FINL INC	42,190	27,384
	ALPHABET INC CL A	427,710	289,394
	ALPHABET INC CL C	303,124	195,206
	ALTRIA GROUP INC	190,424	192,439
	AMCOR PLC	51,542	49,998
	AMDOCS LTD	21,691	25,452
	AMEREN CORP	44,658	45,972
	AMERICAN AIRLS GROUP INC	29,623	28,951
	AMERICAN AXLE & MFG HLDGS INC	428,254	293,563
	AMERICAN EXPRESS CO	224,770	259,745
	AMERICAN INTL GROUP INC	295,093	412,325
	AMERIPRISE FINL INC	119,444	128,907
	AMERISAFE INC	172,843	208,919
	AMETEK INC	52,406	60,080
	AMGEN INC	131,383	153,119
	AMPHENOL CORP CL A	63,034	68,754
	ANTERO MIDSTREAM CORPORATION COM	17,104	18,127
	ANYWHERE REAL ESTATE INC	345,032	133,104
	AON PLC SHS CL A	78,900	85,240

United Food and Commercial Workers Union Local 655 Food Employers Joint Pension Plan
EIN: 43-6058365 Plan Number: 001
Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
December 31, 2022

(a)	Identity of Issuer, Borrower, Lessor, or Similar Party and Description of Assets (b) and (c)	Cost (d)	Current Value (e)
	COMMON STOCK (CONTINUED):		
	APA CORPORATION COM	\$ 77,255	\$ 125,476
	APOLLO GLOBAL MANAGEMENT INC COM	10,336	13,842
	APPLIED INDUSTRIAL TECH INC	151,400	377,334
	APTARGROUP INC	364,033	341,048
	ARAMARK HLDGS CORP	39,834	48,326
	ARCHER DANIELS MIDLAND CO	304,155	631,751
	ARDAGH GROUP SA	20,344	29,948
	ARES COML REAL ESTATE CORP	235,618	234,818
	ASHLAND INC.	20,516	22,581
	ASSURANT INC	299,210	235,988
	ASSURED GUARANTY LTD	29,727	32,500
	AT&T INC	548,151	468,571
	ATLAS AIR INC	51,096	154,224
	ATMOS ENERGY CORP	26,574	27,569
	ATRION CORP	164,377	148,254
	AUTOMATIC DATA PROCESSING INC	185,401	211,869
	AUTONATION INC	12,721	12,232
	AUTOZONE INC	236,989	291,009
	AVERY DENNISON CORP	13,201	15,204
	AVIS BUDGET GROUP INC	18,248	12,950
	AXALTA COATING SYSTEMS LTD	11,410	11,691
	AXIS CAPITAL HOLDINGS LTD	11,728	11,701
	B & G FOODS HLDGS CORP CLASS A	325,066	245,635
	BADGER METER INC	170,054	302,558
	BAKER HUGHES A GE CO	52,662	50,201
	BANC CALIF INC	277,619	277,166
	BANK NEW YORK MELLON CORP	266,225	268,340
	BANK OF AMERICA CORP	581,709	516,374
	BANK OF HAWAII CORP	229,407	257,965
	BANK OZK	30,283	30,966
	BATH BODY WORKS INC COM	114,846	117,149
	BAXTER INTL INC	135,133	95,365
	BECTON DICKINSON & CO	259,682	269,049
	BELDEN CDT INC	249,167	293,352
	BERKLEY W R	33,870	36,938
	BERKSHIRE HATHAWAY INC CL B	393,736	542,120
	BERRY PLASTICS GROUP INC	46,437	50,882
	BEST BUY	319,469	327,738
	BILL HOLDINGS INC	44,532	39,008

United Food and Commercial Workers Union Local 655 Food Employers Joint Pension Plan
EIN: 43-6058365 Plan Number: 001
Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
December 31, 2022

(a)	Identity of Issuer, Borrower, Lessor, or Similar Party and Description of Assets (b) and (c)	Cost (d)	Current Value (e)
	COMMON STOCK (CONTINUED):		
	BIO RAD LABORATORIES INC CL A	\$ 46,708	\$ 32,798
	BIOGEN IDEC INC	104,135	110,214
	BIOMARIN PHARMACEUTICAL INC	28,986	35,911
	BLACK KNIGHT INC	24,784	24,453
	BLACKROCK INC	172,724	174,323
	BOEING CO	103,714	128,581
	BOSTON SCIENTIFIC CORP	36,989	42,059
	BRISTOL MYERS SQUIBB CO	481,507	551,281
	BROADRIDGE FINL SOLUTIONS INC	42,079	38,898
	BROOKFIELD RENEWABLE CORPORATION	12,688	10,686
	BROWN & BROWN INC	60,581	95,994
	BROWN FORMAN CORP CL B	25,691	25,024
	BUILDERS FIRSTSOURCE INC	58,944	61,052
	BUNGE LIMITED	53,430	74,428
	BWX TECHNOLOGIES INC	12,826	15,565
	C H ROBINSON WORLDWIDE INC	109,894	93,666
	CABLE ONE INC	285,985	211,422
	CACI INTL INC CL A	25,602	29,458
	CACTUS INC	300,054	459,276
	CAESARS ENTERTAINMENT, INC	57,930	47,715
	CAMDEN NATL CORP	74,789	76,084
	CAMPBELL SOUP CO	74,359	87,282
	CAPITAL ONE FINL CORP GLBL FLT	211,007	161,936
	CAPRI HOLDINGS LTD	15,637	21,552
	CARDINAL HEALTH INC	145,079	208,087
	CARLISLE COMPANIES INC	28,773	35,348
	CARMAX INC	95,745	68,927
	CARNIVAL CORP	83,236	71,807
	CARTER'S INC	317,051	289,114
	CASEYS GENERAL STORES	39,366	42,627
	CATALENT INC	66,880	42,174
	CATERPILLAR INC	226,797	259,443
	CATHAY BANCORP INC	394,666	416,058
	CAVCO INDUSTRIES INC	276,806	282,813
	CBRE GROUP INC	36,370	36,017
	CENTERPOINT ENERGY INC	169,608	170,553
	CENTRAL GARDEN & PET CO	248,886	204,812
	CERIDIAN HCM HLDG INC	16,077	14,755
	CHARLES RIVER LABORATORIES	51,130	32,903

United Food and Commercial Workers Union Local 655 Food Employers Joint Pension Plan
EIN: 43-6058365 Plan Number: 001
Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
December 31, 2022

(a)	Identity of Issuer, Borrower, Lessor, or Similar Party and Description of Assets (b) and (c)	Cost (d)	Current Value (e)
COMMON STOCK (CONTINUED):			
	CHEMED CORP	\$ 409,167	\$ 446,626
	CHEMOURS CO	11,801	11,636
	CHENIERE ENERGY INC	38,381	34,791
	CHEVRON CORPORATION	410,596	647,779
	CHILDRENS PLACE RETAIL STS INC	421,964	323,410
	CHOICE HOTELS INTL INC	275,684	365,404
	CHUBB LTD	14,590	17,427
	CIENA CORP	55,526	57,098
	CINCINNATI FINANCIAL CORP	293,153	336,146
	CINTAS CORP	66,292	76,775
	CIRRUS LOGIC INC	80,726	308,347
	CISCO SYS INC	630,974	603,408
	CITIGROUP INC	219,588	187,750
	CITIZENS FINL GROUP INC	14,246	14,921
	CLARIVATE ANALYTICS PLC	14,648	8,323
	CLEAN HARBORS INC	23,157	27,275
	CLOROX CO	36,300	35,644
	CMS ENERGY CORP	60,094	57,314
	COCA COLA CO	39,979	38,929
	COGNIZANT TECHNOLOGY SOLUTIONS	370,645	279,602
	COLFAX CORP COM	30,299	20,659
	COLGATE PALMOLIVE CO	15,613	15,837
	COLUMBIA BANKING SYSTEM INC	178,423	196,146
	COLUMBIA SPORTSWEAR CO	409,186	414,166
	COMCAST CORP CL A	162,522	133,026
	COMERICA INC	44,800	34,294
	COMFORT SYSTEM USA INC	163,566	224,406
	COMMSCOPE HLDG CO INC	420,190	347,582
	COMSTOCK RESOURCES INC	250,408	421,308
	CONAGRA FOODS INC	418,203	475,004
	CONCENTRIX CORPORATION COM	42,450	35,021
	CONDUENT INC	534,548	287,186
	CONOCOPHILLIPS	128,724	152,220
	CONSOLIDATED EDISON INC	16,108	18,204
	CONSTELLATION BRANDS INC CL A	229,568	227,347
	CONSTELLATION ENERGY CORP. COM	81,652	109,832
	COOPER COMPANIES INC	89,583	88,620
	CORCEPT THERAPEUTICS INC	388,228	334,100
	CORE LABORATORIES N V ADR	295,737	190,903

United Food and Commercial Workers Union Local 655 Food Employers Joint Pension Plan
EIN: 43-6058365 Plan Number: 001
Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
December 31, 2022

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	COMMON STOCK (CONTINUED):		
	CORNING INCORPORATED	\$ 377,137	\$ 339,778
	CORTEVA INC	77,302	80,058
	CORVEL CORP	137,068	301,560
	COTERRA ENERGY INC COM	42,481	36,142
	COTY INC	14,504	15,408
	CRANE HOLDINGS CO. COM	18,717	19,990
	CREDIT ACCEPTANCE CORP	11,471	9,488
	CROWN HOLDINGS INC	29,118	23,759
	CSG SYSTEMS INTL INC	269,626	357,500
	CSX CORP	166,357	174,820
	CUMMINS INC	48,019	56,454
	CVS/CAREMARK CORP	626,931	799,757
	D R HORTON INC	18,243	20,235
	DANAHER CORP	325,759	533,760
	DARDEN RESTAURANTS INC	34,633	39,562
	DECKERS OUTDOOR CORP	90,505	574,391
	DELL TECHNOLOGIES INC -C	56,577	49,471
	DENTSPLY SIRONA INC	213,974	171,172
	DEVON ENERGY CORPORATION	178,563	179,302
	DIAMONDBACK ENERGY INC	31,796	35,700
	DICKS SPORTING GOODS INC	61,947	64,957
	DISCOVER FINL SVCS	86,272	75,525
	DISH NETWORK CORP A	90,200	51,864
	DOLLAR TREE INC	331,132	289,386
	DOMINOS PIZZA INC	40,949	42,954
	DONALDSON INC	351,601	449,178
	DOVER CORP	81,649	102,235
	DTE ENERGY CO	41,852	41,488
	DUN BRADSTREET HOLDINGS INC COM	12,482	10,960
	DUPONT DE NEMOURS INC	34,502	36,237
	DXC TECHNOLOGY CO	84,898	79,076
	DYCOM INDS INC	208,794	497,952
	EAGLE MATERIALS INC	15,559	18,599
	EAGLE PHARMACEUTICALS INC	411,104	257,809
	EARTHSTONE ENERGY INC	280,734	293,992
	EAST WEST BANCORP INC	45,385	41,978
	EASTMAN CHEMICAL CO	24,528	23,780
	EATON CORP PLC	196,959	209,999
	ECOLAB INC	49,622	44,978

United Food and Commercial Workers Union Local 655 Food Employers Joint Pension Plan
EIN: 43-6058365 Plan Number: 001
Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
December 31, 2022

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	COMMON STOCK (CONTINUED):		
	EDISON INTERNATIONAL	\$ 416,596	\$ 445,722
	ELANCO ANIMAL HEALTH INC	59,928	22,754
	ELECTRONIC ARTS	111,396	108,496
	ELEMENT SOLUTIONS INC PLATFORM	-	13,806
	ELEVANCE HEALTH INC	341,851	575,039
	EMERSON ELECTRIC	126,385	176,846
	ENCORE CAPITAL GROUP INC	204,202	370,576
	ENERSYS	213,430	223,735
	ENTERGY CORP NEW	39,013	39,825
	ENVISTA HOLDINGS CORPORATION	20,524	16,094
	EOG RESOURCES INC	51,262	62,299
	EQT CORP	17,780	16,611
	EQUIFAX INC	202,662	209,909
	EQUITABLE HLDGS INC	9,892	11,968
	ERIE INDEMNITY COMPANY CL A	10,337	11,192
	ESAB CORP. COM	18,972	24,868
	ESSENTIAL UTILITIES INC	27,173	27,445
	EVERCORE PARTNERS INC	332,036	272,155
	EVEREST RE GROUP LTD	159,532	216,651
	EVERGY INC	183,832	173,813
	EVERSOURCE ENERGY	100,344	97,422
	EXELON CORP CORPORATION	32,504	30,909
	EXLSERVICE HLDGS INC	149,130	371,391
	EXXON MOBIL CORPORATION	378,046	584,480
	F5, INC.	124,644	110,503
	FEDERAL REALTY OP LP SH BEN INT	77,908	72,648
	FEDEX CORP	317,008	270,019
	FIDELITY NATL INFORMATION SVCS	24,727	20,287
	FIFTH THIRD BANCORP COM	26,205	22,705
	FIRST HAWAIIAN INC	154,296	158,089
	FIRST HORIZON NATIONAL CORP	172,300	286,087
	FIRST REPUBLIC BANK/SF COM	110,133	85,932
	FIRST SOLAR INC	51,350	82,085
	FIRST SOURCE CORP	139,347	173,870
	FIRSTENERGY CORP	345,469	378,005
	FLOWERS FOODS INC	377,941	508,324
	FLOWERVE CORP	25,047	22,795
	FMC CORP - NEW	54,628	60,278
	FORD MOTOR CO	311,078	334,804

United Food and Commercial Workers Union Local 655 Food Employers Joint Pension Plan
EIN: 43-6058365 Plan Number: 001
Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
December 31, 2022

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	COMMON STOCK (CONTINUED):		
	FORTIVE CORP	\$ 64,712	\$ 69,968
	FORWARD AIR CORP	126,110	236,003
	FOX CORPORATION CL B COM	40,447	37,156
	FOX CORPORATION CLASS A	58,382	52,692
	FRANKLIN ELEC INC	161,440	284,389
	FRANKLIN RES INC	31,928	32,342
	FTI CONSULTING INC	18,718	24,138
	GALLAGHER ARTHUR J & CO	33,044	36,765
	GAMESTOP CORP NEW CL A	12,273	8,935
	GARMIN LTD	391,436	387,064
	GATX CORP	129,620	279,674
	GEN DIGITAL INC.	15,701	13,865
	GENERAL DYNAMICS CORP	66,155	93,537
	GENERAL ELECTRIC CO COM NEW	309,415	370,017
	GENERAL MILLS INC	28,786	34,127
	GENERAL MOTORS CO	212,836	183,607
	GENESCO INC	209,508	223,197
	GENPACT LTD	12,470	14,406
	GENTEX CORP	12,279	11,508
	GENUINE PARTS CO	157,498	199,884
	GERMAN AMERN BANCORP	65,659	70,870
	GILEAD SCIENCES INC	407,838	512,181
	GLOBE LIFE INSURANCE	19,070	23,387
	GLOBUS MED INC	251,513	443,763
	GODADDY INC CLASS A	42,052	44,518
	GOLDMAN SACHS GROUP INC	362,392	418,580
	GRAND CANYON ED INC	10,672	13,947
	GRAPHIC PACKAGING HOLDING CORP	12,313	13,016
	GREEN DOT CORP CL A	390,094	247,425
	GREENBRIER CORP	214,293	264,216
	GRIFFON CORPORATION	223,108	409,438
	GROUP 1 AUTOMOTIVE INC	193,719	535,699
	GUIDEWIRE SOFTWARE INC	44,922	36,535
	HAEMONETICS CORP MASS	349,637	426,204
	HARLEY DAVIDSON INC	26,084	28,371
	HARTFORD FINL SVCS GROUP INC	97,522	116,627
	HASBRO INC	215,173	158,870
	HEALTHPEAK PROPERTIES INC.	12,365	11,833
	HEICO CORP CL A	14,224	15,700

United Food and Commercial Workers Union Local 655 Food Employers Joint Pension Plan
EIN: 43-6058365 Plan Number: 001
Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
December 31, 2022

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COMMON STOCK (CONTINUED):			
	HELEN OF TROY LTD	\$ 272,605	\$ 135,865
	HELMERICH & PAYNE INC	279,493	458,126
	HERSHEY CO COMMON STOCK	21,258	22,231
	HEWLETT PACKARD ENTERPRISE CO	327,756	319,136
	HEXCEL CORP NEW	15,224	17,008
	HF SINCLAIR CORPORATION COM	50,901	56,041
	HIBBETT SPORTS INC	231,045	544,396
	HOLOGIC INC	80,427	79,972
	HONEYWELL INTERNATIONAL INC	179,503	216,229
	HOPE BANCORP INC	310,343	303,341
	HORIZON THERAPEUTICS PUBLIC	41,347	51,096
	HOWMET AEROSPACE INC COM	49,217	59,351
	HP INC	308,964	413,476
	HUMANA INC	223,073	298,607
	HUNTINGTON INGALLS INDS INC	56,626	62,284
	IAC INC	45,927	18,692
	IBM CORP	590,343	683,035
	ICU MED INC	429,268	339,999
	IDACORP INC	285,960	323,011
	IDEX CORP	46,396	55,256
	ILLINOIS TOOL WORKS INC WKS INC	133,012	130,197
	INCYTE CORPORATION	26,945	30,441
	INDEPENDENT BK CORP MASS	186,823	270,176
	INGERSOLL RAND INC COM	12,099	13,846
	INGREDION INC	13,687	14,102
	INSPERITY INC	152,483	201,640
	INTEGER HLDGS CORP	117,181	277,263
	INTEL CORP	924,990	439,108
	INTERCONTINENTALEXCHANGE GROUP I	13,769	12,926
	INTERDIGITAL INC PA	323,295	290,695
	INTERNATIONAL BANCSHARES CORP	216,125	199,376
	INTERNATIONAL FLAVORS	175,018	144,679
	INTERPUBLIC GROUP COS INC	162,186	153,359
	INTUITIVE SURGICAL INC	13,586	19,105
	INVESCO LTD	29,068	28,136
	ITRON INC	117,558	154,989
	ITT INC	15,601	21,248
	JABIL CIRCUIT INC	28,476	30,144
	JACOBS ENGINEERING GROUP INC.	107,951	140,962

United Food and Commercial Workers Union Local 655 Food Employers Joint Pension Plan
EIN: 43-6058365 Plan Number: 001
Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
December 31, 2022

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	COMMON STOCK (CONTINUED):		
	JAZZ PHARMACEUTICALS PLC	\$ 28,181	\$ 29,472
	JB HUNT TRANSPORTATION SERVICES	71,086	67,826
	JEFFERIES FINL GROUP INC	34,614	52,414
	JM SMUCKER COMPANY-NEW	105,713	123,282
	JOHNSON & JOHNSON	246,936	252,080
	JOHNSON CONTROLS INTERNATIONAL	185,693	296,320
	JONES LANG LASALLE INC	40,873	32,511
	JPMORGAN CHASE & CO	885,203	1,234,525
	JUNIPER NETWORKS INC	292,011	299,657
	KELLOGG CO	230,041	256,963
	KEYCORP	37,765	31,060
	KEYSIGHT TECHNOLOGIES INC - W/I	87,598	106,406
	KIMBERLY CLARK CORP	19,615	19,141
	KINDER MORGAN INC DEL COM	98,607	110,650
	KIRBY CORP	15,696	15,315
	KKR CO INC CL- A	44,766	33,979
	KOHL'S CORP	29,347	14,494
	KOPPERS HLDGS INC	365,264	337,272
	KRAFT HEINZ CO	583,016	626,486
	KROGER CO	276,359	228,785
	KYNDRYL HOLDINGS INC COMMON	27,256	26,299
	L3 HARRIS TECHNOLOGIES INC COM	85,129	93,903
	LA Z BOY INCORPORATED	265,485	222,951
	LABORATORY CORP OF AMER HLDGS	171,021	175,433
	LAKELAND FINL CORP	92,722	184,979
	LANCASTER COLONY CORP	253,384	352,181
	LANDSTAR SYSTEM INC	174,805	346,163
	LEIDOS HLDGS INC	83,189	91,410
	LENNAR CORP CL A	46,290	54,029
	LIBERTY MEDIA CORP-LIBERTY	38,935	46,927
	LIGAND PHARMACEUTICALS INC CL B	135,306	167,000
	LILLY ELI & CO	23,144	26,706
	LINCOLN ELECTRIC HLDGS	155,091	299,817
	LINCOLN NATL CORP IND	58,114	31,703
	LITHIA MTRS INC - CL A	149,166	374,265
	LITTLEFUSE INC	231,814	225,485
	LIVE NATION INC	29,626	24,200
	LKQ CORP	16,002	20,082
	LOEWS CORP	30,795	29,807

United Food and Commercial Workers Union Local 655 Food Employers Joint Pension Plan
EIN: 43-6058365 Plan Number: 001
Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
December 31, 2022

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COMMON STOCK (CONTINUED):			
	LUMEN TECHNOLOGIES INC COM	\$ 531,353	\$ 237,698
	LYONDELLBASELL INDUSTRIES NV	16,850	13,866
	M D C HLDGS INC	232,068	283,736
	MANPOWER INC WIS	39,776	35,447
	MARATHON OIL CORP	52,004	58,498
	MARATHON PETE CORP	134,441	176,098
	MARKEL CORP (HOLDING CO)	14,158	14,492
	MARSH & MCLENNAN COS INC	321,977	338,076
	MARTIN MARIETTA MATERIALS INC	11,842	17,912
	MARVELL TECHNOLOGY INC LTD COM	190,746	124,640
	MASCO CORP	29,070	24,548
	MASIMO CORP	13,299	14,055
	MASTEC INC	12,262	14,762
	MATCH GROUP INC NEW COM	20,387	11,451
	MCKESSON CORP	326,541	467,400
	MEDPACE HLDGS INC	240,360	515,944
	MEDTRONIC PLC	455,730	334,118
	MERCK & CO INC	71,114	86,874
	METLIFE INC	108,147	115,647
	MICROCHIP TECHNOLOGY INC	12,302	12,294
	MICRON TECHNOLOGY INC	39,120	28,439
	MIDDLEBY CORP	83,297	75,654
	MINERALS TECHNOLOGIES INC	264,819	293,885
	MODERNA INC COM	18,321	21,195
	MOHAWK INDS INC	73,866	53,972
	MOLINA HEALTHCARE INC	32,384	35,003
	MOLSON COORS BREWING CO CL B	56,306	53,478
	MONDELEZ INTL INC	178,975	221,611
	MONSTER BEVERAGE CORP NEW	14,940	16,651
	MOODY'S CORPORATION	25,638	21,175
	MORGAN STANLEY	231,896	211,105
	MORNINGSTAR INC	20,225	17,111
	MOSAIC CO NEW	33,228	27,068
	MOTOROLA SOLUTIONS INC.	295,444	436,818
	MSC INDL DIRECT INC CL A	274,299	291,832
	MSCI INC CL A	20,368	22,328
	NATIONAL FUEL GAS CO N J	12,572	13,293
	NATIONAL INSTRUMENTS CORP	23,510	21,808
	NEW YORK COMMUNITY BANCORP	24,745	22,197

United Food and Commercial Workers Union Local 655 Food Employers Joint Pension Plan
EIN: 43-6058365 Plan Number: 001
Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
December 31, 2022

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	COMMON STOCK (CONTINUED):		
	NEW YORK TIMES CO CLASS A	\$ 33,873	\$ 25,611
	NEWELL BRANDS INC	315,398	207,043
	NEWMONT MNG CORP	129,956	99,686
	NEWS CORP NEW	58,458	78,133
	NEWS CORP NEW	121,380	122,718
	NEXSTAR MEDIA GROUP INC COMMON	37,792	42,707
	NEXTERA ENERGY INC	34,236	36,032
	NEXTGEN HEALTHCARE INC. COM	336,697	469,594
	NISOURCE INC	111,071	103,401
	NMI HLDGS INC -CLASS A	187,375	196,878
	NORDSON CORP	32,591	35,420
	NORFOLK SOUTHERN CORP	260,832	310,982
	NORTHERN TRUST CORP	106,401	91,145
	NORTHWEST NATURAL HOLDING CO	344,054	340,744
	NORWEGIAN CRUISE LINE HOLDINGS	60,318	56,206
	NRG ENERGY INC	262,287	240,273
	NUCOR CORP	94,406	92,662
	NVENT ELECTRIC PLC-W/I	12,208	15,773
	O REILLY AUTOMOTIVE INC NEW	66,179	86,091
	OCCIDENTAL PETROLEUM CORP	159,866	280,620
	OGE ENERGY CORP	12,812	12,340
	OLD REP INTL CORP	20,593	23,595
	OLLIES BARGAIN OUTLET HLDGS INC	12,319	9,415
	OMNIAB INC. COM	44,969	19,872
	OMNICOM GROUP INC	94,265	107,101
	ON SEMICONDUCTOR CORP	21,131	22,328
	ONE GAS INC	206,125	273,576
	ONEMAIN HLDGS INC	21,096	18,620
	ONEOK INC	236,877	261,355
	ORACLE CORPORATION	169,205	179,828
	ORGANON CO COMMON STOCK	119,463	100,548
	OSHKOSH TRUCK CORP	19,813	19,049
	OTIS WORLDWIDE CORP COM	67,929	72,672
	OWENS & MINOR INC	262,719	324,979
	OWENS CORNING NEW	14,313	13,989
	PACCAR INC	193,158	220,703
	PACKAGING CORP OF AMERICA	41,281	38,245
	PACWEST BANCORP	236,955	182,728
	PARAMOUNT GLOBAL	108,639	80,653

United Food and Commercial Workers Union Local 655 Food Employers Joint Pension Plan
EIN: 43-6058365 Plan Number: 001
Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
December 31, 2022

(a)	Identity of Issuer, Borrower, Lessor, or Similar Party and Description of Assets (b) and (c)	Cost (d)	Current Value (e)
COMMON STOCK (CONTINUED):			
	PARKER HANNIFIN CORP	\$ 43,828	\$ 48,306
	PATTERSON COS INC	176,744	296,277
	PAYPAL HLDGS INC	66,658	62,389
	PEDIATRIX MEDICAL GROUP, INC	274,523	211,606
	PELTON INTERACTIVE INC -A	13,656	11,831
	PEPSICO INC	28,129	29,628
	PERKINELMER INC	46,818	39,682
	PFIZER INC	771,258	1,024,595
	PHIBRO ANIMAL HEALTH CORP -A	360,082	243,794
	PHILIP MORRIS INTL INC	289,775	317,192
	PINNACLE FINANCIAL PARTNERS INC	11,226	9,982
	PINNACLE WEST CAPITAL CORP	53,120	53,152
	PINTEREST INC	13,578	14,447
	PIONEER NATURAL RESOURCES CO	37,372	35,172
	PLUG POWER INC COM NEW	16,562	7,917
	PNC FINL SVCS GROUP INC	146,744	144,357
	POLARIS INDUSTRIES INC	11,824	11,009
	POPULAR INC	14,673	12,336
	POST HLDGS INC	19,308	21,031
	POWER INTEGRATIONS INC	245,437	398,046
	PPG INDUSTRIALS INDS INC	189,784	189,867
	PPL CORPORATION	64,438	64,196
	PREMIER INC	509,177	493,533
	PRESTIGE BRANDS HLDGS INC	208,979	356,820
	PRIMORIS SVCS CORP	242,375	279,296
	PRINCIPAL FINANCIAL GROUP	88,765	101,040
	PROASSURANCE CORPORATION	265,095	180,815
	PROCTER & GAMBLE CO	241,433	250,529
	PROGRESS SOFTWARE CORP	350,639	428,825
	PROGRESSIVE CORP	308,067	414,034
	PRUDENTIAL FINL INC JR SB GLBL	141,097	131,685
	PUBLIC SVC ENTERPRISE GROUP INC	85,467	78,854
	QIAGEN NV	36,721	38,599
	QORVO INC	48,709	40,788
	QUALYS INC	314,324	338,261
	QUEST DIAGNOSTICS INC	157,734	176,151
	QUIDELORTHO CORP COM	12,859	12,593
	RALPH LAUREN CORP	27,981	30,750
	RAYTHEON TECHNOLOGIES CORP	271,869	400,551

United Food and Commercial Workers Union Local 655 Food Employers Joint Pension Plan
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December 31, 2022

(a)	Identity of Issuer, Borrower, Lessor, or Similar Party and Description of Assets (b) and (c)	Cost (d)	Current Value (e)
COMMON STOCK (CONTINUED):			
	REGAL BELOIT CORP WISCONSIN	\$ 34,627	\$ 33,594
	REGENERON PHARMACEUTICALS INC	87,310	98,844
	REGIONS FINL CORP	26,858	27,381
	REINSURANCE GROUP OF AMERICA	57,482	69,198
	RELIANCE STEEL & ALUMINUM CO	40,720	43,525
	REPUBLIC SVCS INC	73,670	72,363
	REXFORD INDL RLTY INC	25,583	19,780
	ROBERT HALF INTL INC	89,184	67,628
	ROCKWELL AUTOMATION INC	64,532	75,468
	ROLLINS INC	21,457	22,143
	ROPER INDS INC NEW	69,688	69,566
	ROYAL CARIBBEAN CRUISES LTD	32,707	30,894
	RYDER SYSTEMS INC	18,166	20,475
	SALESFORCE INC	62,173	55,157
	SCANSOURCE INC	359,911	361,159
	SCHEIN HENRY INC	155,790	144,724
	SCHLUMBERGER LTD	65,899	96,068
	SCHWAB CHARLES CORP	14,022	18,400
	SCIENCE APPLICATIONS INTL CORP N	11,670	15,863
	SEI INVESTMENT COMPANY	42,493	46,232
	SELECT MED HLDGS CORP	180,597	413,420
	SELECTIVE INSURANCE GROUP INC	417,470	809,895
	SEMPRA ENERGY	42,423	43,426
	SENSIENT TECHNOLOGIES CORP	221,841	251,574
	SERVICE CORP INTERNATL	65,558	66,997
	SHUTTERSTOCK INC	395,656	241,299
	SIGNATURE BANK	25,024	14,518
	SILGAN HOLDINGS INC	252,402	423,792
	SIRIUS XM HLDGS INC	20,282	19,015
	SKECHERS USA INC CL A	25,046	27,477
	SKYWORKS SOLUTIONS INC	37,498	28,524
	SLM CORP	49,469	49,551
	SMITH A O CORP	38,307	37,492
	SNAP ON INC	223,623	231,003
	SOUTHWEST AIRLINES CO	32,885	28,653
	SPECTRUM BRANDS HOLDINGS, INC.	12,344	16,997
	SS&C TECHNOLOGIES HLDGS INC	125,330	101,829
	STANLEY BLACK & DECKER INC	84,392	54,162
	STATE STR CORP	239,775	261,101

United Food and Commercial Workers Union Local 655 Food Employers Joint Pension Plan
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Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
December 31, 2022

(a)	Identity of Issuer, Borrower, Lessor, or Similar Party and Description of Assets (b) and (c)	Cost (d)	Current Value (e)
	COMMON STOCK (CONTINUED):		
	STERICYCLE INC	\$ 31,218	\$ 32,927
	STERIS PUBLIC COMPANY LIMITED	113,657	97,516
	STRYKER CORP	12,095	14,180
	SUNRUN INC	29,709	27,407
	SVB FINANCIAL GROUP	48,760	27,387
	SYNAPTICS INC	106,002	221,723
	SYNCHRONY FINL	267,121	271,161
	SYNNEX CORP	60,446	55,974
	SYNOVUS FINL CORP	12,044	10,739
	T ROWE PRICE GROUP INC	352,299	264,580
	TAKE-TWO INTERACTIVE SOFTWARE	82,353	70,808
	TAPESTRY INC	82,929	100,988
	TARGET CORP	413,001	569,035
	TELADOC INC	13,365	8,585
	TELEDYNE TECHNOLOGIES INC	23,528	24,794
	TELEFLEX INC	42,245	36,446
	TERADATA CORP DEL	348,889	385,441
	TERADYNE INC	26,504	28,214
	TETRA TECH INC NEW	80,419	358,619
	TEXAS ROADHOUSE INC CLASS A	138,301	309,230
	TEXTRON INC	71,240	76,535
	THE CARLYLE GROUP INC	12,052	9,012
	THE CIGNA GROUP	135,710	172,959
	THOR IND INC	13,907	13,135
	TIMKEN CO	25,592	32,226
	T-MOBILE US INC	248,979	307,300
	TOMPKINS COUNTY TRUSTCO INC	107,154	128,007
	TOPBUILD CORP	198,007	185,441
	TRANE TECHNOLOGIES PLC	42,792	61,857
	TRANSDIGM GROUP INC	105,174	119,634
	TRAVELERS COS INC	218,206	236,425
	TRIUMPH GROUP INC NEW	437,755	198,197
	TRIUMPH GROUP INC NEW 12/19/2023	19,661	2,824
	TRUIST FINANCIAL CORP COM	45,719	39,415
	TTM TECHNOLOGIES	399,843	373,833
	TYLER TECHNOLOGIES INC	38,839	34,820
	TYSON FOODS INC CLASS A	195,522	132,717
	U S PHYSICAL THERAPY INC	361,579	368,362
	UGI CORP	32,323	30,768

United Food and Commercial Workers Union Local 655 Food Employers Joint Pension Plan
EIN: 43-6058365 Plan Number: 001
Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
December 31, 2022

(a)	Identity of Issuer, Borrower, Lessor, or Similar Party and Description of Assets (b) and (c)	Cost (d)	Current Value (e)
COMMON STOCK (CONTINUED):			
	U-HAUL HOLDING COMPANY COM SER N	\$ 22,193	\$ 24,246
	ULTRA CLEAN HLDGS INC COM	184,480	404,563
	UMB FINANCIAL CORP	346,703	396,720
	UNIFIRST CORP MASS	176,603	284,660
	UNITED BANKSHARES INC W VA	134,484	170,868
	UNITED CONTL HLDGS INC	46,103	46,446
	UNITED PARCEL SERVICE	82,420	77,533
	UNITED RENTALS INC	45,605	56,867
	UNITED THERAPEUTICS CORP DEL	24,838	38,376
	UNITEDHEALTH GROUP INC	801,387	844,577
	UNITIL CORP	149,621	157,932
	UNITY SOFTWARE INC COM	14,603	10,207
	UNIVAR INC	25,608	28,366
	UNIVERSAL HEALTH SVCS INC CL B	86,077	98,341
	UNUMPROVIDENT CORP	13,474	14,689
	UPSTART HOLDINGS INC COM	13,688	9,677
	US BANCORP DEL	40,568	36,371
	US STEEL CORP	14,502	13,452
	V F CORP	68,543	48,566
	VALERO ENERGY CORP CORP NEW	78,769	86,899
	VALMONT INDS INC	186,830	348,857
	VERADIGM INC	211,057	374,427
	VERISIGN INC	10,672	12,326
	VERTEX PHARMACEUTICALS INC	80,273	84,035
	VIATRIS INC COM	12,799	14,725
	VISTRA ENERGY CORP	13,003	13,897
	VMWARE INC CL A	36,209	38,301
	WABTEC CORP	64,750	73,859
	WALGREENS BOOTS ALLIANCE INC	489,082	421,981
	WAL-MART STORES INC	643,590	721,428
	WALT DISNEY CO	567,948	313,116
	WARNER BROS. DISCOVERY INC.	20,545	13,642
	WASHINGTON FEDERAL INC	183,111	269,071
	WASHINGTON TRUST BANCORP	137,489	135,643
	WASTE MANAGEMENT INC	189,279	187,158
	WATSCO INC	38,351	37,909
	WATTS WATER TECHNOLOGIES INC	154,478	280,762
	WAYFAIR INC CLASS A	28,285	16,511
	WEBSTER FINL CORP WATERBURY CONN	323,234	482,300

United Food and Commercial Workers Union Local 655 Food Employers Joint Pension Plan
EIN: 43-6058365 Plan Number: 001
Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
December 31, 2022

(a)	Identity of Issuer, Borrower, Lessor, or Similar Party and Description of Assets (b) and (c)	Cost (d)	Current Value (e)
	COMMON STOCK (CONTINUED):		
	WEC ENERGY GROUP INC	\$ 31,653	\$ 29,722
	WELLS FARGO & CO & CO NEW	665,285	644,041
	WESTERN ALLIANCE COMMON STOCK	17,399	13,401
	WESTERN DIGITAL CORP	157,939	108,185
	WEX INC	138,422	224,201
	WHIRLPOOL CORP	202,454	151,079
	WILLIAMS SONOMA INC	32,867	20,226
	WILLIS TOWERS WATSON PLC	295,512	344,858
	WILLSCOT MOBILE MINI HOLDINGS	12,668	11,789
	WINTRUST FINL CORP	11,548	11,664
	WOLFSPEED INC COM	51,367	46,947
	WOODWARD INC	32,314	30,722
	WORTHINGTON INDS INC	193,180	247,556
	WYNDHAM HOTELS & RESORTS INC	12,986	14,191
	WYNN RESORTS LTD	10,672	12,041
	XCEL ENERGY INC	52,819	55,878
	XPERI INC. COMMON STOCK	168,930	42,292
	XYLEM INC	70,455	91,663
	YUM! BRANDS INC	28,014	32,276
	ZIMMER BIOMET HOLDINGS, INC	97,172	87,456
	ZIONS BANCORP	28,340	21,876
	TOTAL COMMON STOCKS	<u>84,495,278</u>	<u>94,498,345</u>
	TOTAL ASSETS HELD AT END OF YEAR	<u>\$ 544,602,680</u>	<u>\$ 729,461,628</u>

2022 Schedule MB, Line 8b(2) - Schedule of Active Participant Data
United Food and Commercial Workers Union Local 655, Food Employers Joint Pension Plan
EIN 43-6058365/PN 001

Pension Credits												
Age	Less than 1		1 - 5		5 - 9		10 - 14		15 - 19		20 - 24	
	No	Average	No	Average	No	Average	No	Average	No	Average	No	Average
		Accrued Mon. Ben.		Accrued Mon. Ben.		Accrued Mon. Ben.		Accrued Mon. Ben.		Accrued Mon. Ben.		Accrued Mon. Ben.
Under 25	228	\$17	277	\$56	9	–	–	–	–	–	–	–
25 - 29	50	17	229	76	119	\$180	3	–	–	–	–	–
30 - 34	22	19	131	75	108	218	78	\$390	9	–	–	–
35 - 39	30	19	81	68	71	221	78	426	70	\$594	13	–
40 - 44	15	–	78	74	44	221	41	424	60	645	87	\$809
45 - 49	15	–	68	70	37	216	29	406	33	657	58	835
50 - 54	25	18	65	68	38	213	43	430	31	659	51	822
55 - 59	33	18	117	78	64	210	43	413	41	654	61	818
60 - 64	29	18	96	77	62	204	45	442	30	651	40	867
65 - 69	14	–	42	72	27	199	15	–	13	–	16	–
70 & over	18	–	38	72	12	–	4	–	2	–	3	–
Unknown	1	–	–	–	–	–	–	–	–	–	–	–

Age	25 – 29		30 – 34		35 – 39		40 & over	
	No	Average	No	Average	No	Average	No	Average
		Accrued Mon. Ben.		Accrued Mon. Ben.		Accrued Mon. Ben.		Accrued Mon. Ben.
Under 25	–	–	–	–	–	–	–	–
25 - 29	–	–	–	–	–	–	–	–
30 - 34	–	–	–	–	–	–	–	–
35 - 39	–	–	–	–	–	–	–	–
40 - 44	5	–	–	–	–	–	–	–
45 - 49	68	\$996	7	–	–	–	–	–
50 - 54	60	977	72	\$1,254	19	–	–	–
55 - 59	57	992	41	1,272	56	\$1,454	21	\$1,660
60 - 64	56	1,052	56	1,318	34	1,510	63	1,841
65 - 69	6	–	5	–	7	–	7	–
70 & over	–	–	1	–	–	–	–	–
Unknown	–	–	–	–	–	–	–	–

Note: Excludes 2,602 participants with less than one pension eligibility credit.

Withdrawal Liability Payments

Payment Date	Periodic Payments	Lump Sum Amounts	Total Amounts
01/07/2022	\$435,048.00	\$0	\$435,048.00
03/02/2022	5,638.00	0	5,638.00
03/31/2022	435,048.00	0	435,048.00
04/21/2022	5,521.00	0	5,521.00
05/16/2022	5,521.00	0	5,521.00
05/27/2022	5,638.00	0	5,638.00
06/30/2022	435,048.00	0	435,048.00
10/07/2022	435,048.00	0	435,048.00
12/29/2022	435,048.00	0	435,048.00

Description of Withdrawal Liability Interest Rate

(Schedule MB, Line 6f(1))

Interest Rate

To the extent the vested benefits are matched by the market value of plan assets on hand: interest assumptions prescribed by the Pension Benefit Guaranty Corporation under 29 C.F.R. Ch. XL, Part 4044, which are in effect for the applicable withdrawal liability valuation date, are used.

PBGC Interest Rates as of December 31, 2021:

- First 20 years 2.40%
- After 20 years 2.11%

To the extent the vested benefits are not matched by plan assets (at market), the interest assumption is the same as used for plan funding: 7.00%.

The portion of the vested benefits that is matched by readily available assets is determined by comparing the total present value of vested benefits plus expenses – at PBGC rates – with the total market value of assets; each vested benefit is treated as covered by assets to the same extent as all other vested benefits.

The present value of vested benefits is based on a blend of two liability calculations. The first calculation is performed on a market value basis, using discount rates selected based on estimated annuity purchase rates available for benefits being settled, because withdrawal liability essentially settles an employer's obligation to the Plan. The second calculation uses the interest rate determined by the plan actuary for minimum funding, based on the expected return on current and future assets. For benefits that could be settled immediately, because assets on hand are sufficient to cover their market value, the first calculation basis is used: annuity purchase rates promulgated by PBGC under ERISA Sec. 4044 for multiemployer plans terminating by mass withdrawal on the measurement date. For benefits that cannot be settled immediately because they are not currently funded, the calculation uses the second basis: the interest rate used for plan funding calculations.

Projection of Employer Contributions and Withdrawal Liability Payments

Payment Date	Employer Contributions	Withdrawal Liability Payments	Total
2022	\$11,920,848	\$1,784,828	\$13,705,676
2023	11,605,309	1,784,828	13,390,137
2024	11,605,309	1,784,828	13,390,137
2025	11,605,309	1,784,828	13,390,137
2026	11,605,309	1,784,828	13,390,137
2027	11,605,309	1,784,828	13,390,137
2028	11,475,367	1,784,828	13,260,195
2029	11,056,443	1,784,828	12,841,271
2030	11,024,875	1,784,828	12,809,703
2031	10,994,944	1,756,148	12,751,092

Note: Projected employer contributions and withdrawal liability payments shown above are based on the assumptions used for the Funding Standard Account projection as described in the Actuarial Certification of Plan Status as of January 1, 2022, dated March 25, 2022.

Schedule of FSA Bases (Charges) (Schedule MB, Line 9c)

Type of Base	Date Established	Outstanding Balance	Years Remaining	Amortization Amount
Plan amendment	01/01/1993	\$696,670	1	\$696,670
Plan amendment	09/01/1993	252,076	1.67	154,614
Plan amendment	01/01/1995	86,137	3	30,675
Change in assumptions	01/01/1995	112,123	3	39,930
Change in assumptions	01/01/1996	1,337,848	4	369,131
Plan amendment	01/01/1997	341,361	5	77,808
Plan amendment	01/01/1998	274,959	6	53,911
Plan amendment	01/01/1999	844,764	7	146,494
Plan amendment	01/01/2002	402,858	10	53,606
Plan amendment	01/01/2004	773,719	12	91,040
Change in assumptions	01/01/2005	1,925,786	13	215,348
Plan amendment	01/01/2007	2,840,802	15	291,500
Change in assumptions	01/01/2007	4,810,031	15	493,566
Change in assumptions	01/01/2008	117,809	1	117,809
Base due to December 31, 2008 investment loss – Meat Plan	01/01/2009	3,115,508	16	308,225
Base due to December 31, 2008 investment loss	01/01/2009	49,926,861	16	4,939,383
Base due to December 31, 2008 investment loss – Meat Plan	01/01/2010	617,155	16	61,057
Experience loss	01/01/2010	6,309,591	3	2,246,991
Base due to December 31, 2008 investment loss – Meat Plan	01/01/2011	1,680,810	16	166,287
Change in assumptions	01/01/2011	4,706,726	4	1,298,652
Base due to December 31, 2008 investment loss	01/01/2011	38,226,674	16	3,781,856

Type of Base	Date Established	Outstanding Balance	Years Remaining	Amortization Amount
Base due to December 31, 2008 investment loss – Meat Plan	01/01/2012	1,797,793	16	177,860
Base due to December 31, 2008 investment loss	01/01/2012	8,404,734	16	831,500
Experience loss	01/01/2013	531,113	6	104,136
Change in assumptions	01/01/2013	702,698	6	137,779
Base due to December 31, 2008 investment loss	01/01/2013	5,938,259	6	1,164,319
Change in assumptions	01/01/2015	1,279,714	8	200,291
Experience loss	01/01/2015	1,441,835	8	225,664
Plan amendment	01/01/2015	2,623,942	8	410,678
Experience loss	01/01/2016	66,618	9	9,556
Experience loss	01/01/2016	9,788,728	9	1,404,147
Plan amendment	01/01/2017	349,492	10	46,504
Experience	01/01/2017	8,599,129	10	1,144,227
Plan amendment - Grocery Plan	01/01/2018	2,042,920	11	254,614
Experience loss	01/01/2018	5,629,891	11	701,668
Experience loss	01/01/2019	15,229,366	12	1,791,970
Experience loss	01/01/2020	10,460,722	13	1,169,752
Change in assumptions	01/01/2020	18,038,717	13	2,017,147
Change in assumptions	01/01/2022	431,774	15	44,305
Plan amendment	01/01/2022	1,282,287	15	131,578
Total		\$214,040,000		\$27,602,248

Schedule of FSA Bases (Credits) (Schedule MB, Line 9h)

Type of Base	Date Established	Outstanding Balance	Years Remaining	Amortization Amount
Change in assumptions	01/01/2009	\$474,364	2	\$245,203
Experience gain	01/01/2009	8,918,262	2	4,609,923
Change in asset method	01/01/2009	16,197,688	17	1,550,515
Experience gain	01/01/2010	343,483	3	122,322
Base due to December 31, 2008 investment loss	01/01/2010	19,027,684	16	1,882,454
Plan amendment	01/01/2011	35,539	4.5	8,858
Experience gain	01/01/2011	281,154	4	77,574
Plan amendment	01/01/2011	1,285,480	4	354,682
Experience gain	01/01/2011	19,041,805	4	5,253,903
Plan amendment	01/01/2012	110,067	5	25,088
Plan amendment	01/01/2012	291,311	5	66,400
Experience gain	01/01/2012	512,353	5	116,783
Experience gain	01/01/2012	1,980,557	5	451,439
Change in assumptions	01/01/2012	5,446,831	5	1,241,525
Plan amendment	01/01/2013	6,111	6	1,198
Plan amendment	01/01/2013	31,196	5.4	6,668
Plan amendment	01/01/2014	4,154	6.1	804
Experience gain	01/01/2014	29,470	7	5,111
Experience gain	01/01/2014	1,141,749	7	197,996
Experience gain	01/01/2015	562,963	8	88,110
Change in assumptions	01/01/2016	3,167,176	9	454,317
Experience gain	01/01/2017	25,819	10	3,436
Experience gain - Meat Plan	01/01/2018	487,685	11	60,781

Type of Base	Date Established	Outstanding Balance	Years Remaining	Amortization Amount
Change in assumptions - Meat Plan	01/01/2018	845,404	11	105,365
Experience gain	01/01/2021	9,503,040	14	1,015,537
Experience gain	01/01/2022	27,554,620	15	2,827,429
Total		\$117,305,965		\$20,773,421

**Justification for
Change in Actuarial
Assumptions
(Schedule MB, line 11)**

Based on past experience and future expectations, the following actuarial assumptions were changed as of January 1, 2022:

Administrative expenses, previously \$1,700,000 per year

Liability for Inactive participants over age 70, previously excluded.

Exhibit K: Statement of Actuarial Assumptions, Methods and Models

(Schedule MB, Line 6)

Mortality Rates

Non-Annuitants:

110% of the RP-2006 Blue Collar Employee Mortality Tables, projected generationally using Scale MP-2019

Healthy Annuitants:

110% of the RP-2006 Blue Collar Healthy Annuitant Mortality Tables, projected generationally using Scale MP-2019

Disabled Annuitants:

110% of the RP-2006 Disabled Retiree Mortality Tables, projected generationally using Scale MP-2019

110% of the underlying tables with the generational projection to the ages of participants as of the measurement date reasonably reflect the mortality experience of the Plan as of the measurement date. The mortality tables were then adjusted to future years using the MP-2019 scale to anticipate future mortality improvement.

The mortality rates were based on historical and current demographic data, estimated future experience and professional judgment. As part of the analysis, a comparison was made between the actual number of deaths and the projected number based on the prior years' assumption over the most recent five years.

Annuitant Mortality Rates

Age	Rate ¹			
	Healthy		Disabled	
	Male	Female	Male	Female
55	0.67%	0.47%	2.60%	1.70%
60	0.99%	0.72%	3.10%	2.14%
65	1.49%	1.03%	3.75%	2.47%
70	2.23%	1.54%	4.57%	3.12%
75	3.52%	2.54%	6.06%	4.53%
80	5.86%	4.37%	8.66%	6.98%
85	9.96%	7.71%	13.00%	10.72%
90	16.91%	13.40%	19.98%	15.89%

¹ Mortality rates shown above are sample rates in 2022

Termination Rates

Age	Rate			
	Mortality ¹		Disability	Withdrawal ²
	Male	Female		
20	0.07%	0.02%	0.02%	14.76%
25	0.09%	0.03%	0.03%	14.76%
30	0.09%	0.04%	0.03%	8.17%
35	0.11%	0.05%	0.04%	8.47%
40	0.12%	0.06%	0.07%	7.00%
45	0.16%	0.09%	0.11%	6.29%
50	0.25%	0.13%	0.18%	5.89%
55	0.40%	0.22%	0.30%	3.00%
60	0.71%	0.34%	0.49%	0.13%

¹ Mortality rates shown above are sample rates in 2022

² Withdrawal rates cut out at early retirement age. Before 5 years of vesting service, withdrawal rates are as follows:

Years of Vesting Service	Withdrawal Rate
Less than 2	30%
2 – 3	20%
3 – 4	15%

The withdrawal rates and disability rates were based on historical and current demographic data, adjusted to reflect estimated future experience and professional judgment. As part of the analysis, a comparison was made between the actual number of withdrawals and disability retirements and the projected number based on the prior years' assumption over the most recent five years.

Retirement Rates	Retirement Rates ¹	
	From Active Status	From Inactive Status
	Age	
	52 – 54	1%
	55 – 56	2%
	57 – 59	5%
	60	15%
	61	15%
	62	30%
	63-64	20%
	65	30%
	67 – 70	25%
	71	100%
¹ These rates are increased by 10% for active participants and 20% for inactive participants in the year that a participant reaches Social Security Normal Retirement Age. (Age 66 for those born in or before 1954 and age 67 for those born in 1955 or after). The retirement rates were based on historical and current demographic data, estimated future experience and professional judgment. As part of the analysis, a comparison was made between the actual number of retirements by age and the projected number based on the prior years' assumption over the most recent five years.		
Description of Weighted Average Retirement Age for Retirement from Active Status	Age 63, determined as follows: The weighted average retirement age for each participant is calculated as the sum of the product of each potential current or future retirement age times the probability of surviving from current age to that age and then retiring at that age, assuming no other decrements. The overall weighted retirement age is the average of the individual retirement ages based on all the active participants included in the January 1, 2022 actuarial valuation.	
Future Benefit Accruals	Based on the average of the participant's hours during the previous two years with a minimum of 0.25 pension credits The future benefit accruals were based on historical and current demographic data, estimated future experience and professional judgment. As part of the analysis, a comparison was made between the assumed and the actual benefit accruals over the most recent five years.	
Unknown Data for Participants	Same as those exhibited by participants with similar known characteristics. If not specified, participants are assumed to be male.	
Definition of Active Participants	Active participants are defined as those with at least 250 hours in the most recent plan year and who have accumulated at least one pension eligibility credit, excluding those who have retired as of the valuation date and those who were employed by a withdrawn employer.	

Reciprocity Load	A 2.5% load on liabilities is added to terminated vested members of a withdrawn former employer that were active on the employer's withdrawal date to account for a special reciprocal agreement that provides for the recognition of certain eligibility credits and vesting services earned while a participant of the former employer's new pension plan.
Percent Married	Males 80%, Females 65%
Age and Gender of Spouse	If actual age is unknown, spouses are assumed 4 years younger than male participants and 2 years older than female participants. If not given, spouses are assumed to be of the opposite sex of the participants.
Benefit Election	- Male participants: 50% elect the 50% joint and survivor pension with pop-up provision and 50% elect the single life annuity. - Female participants: 30% elect the 50% joint and survivor pension with pop-up provision and 70% elect the single life annuity. The benefit elections were based on historical and current demographic data, adjusted to reflect the plan design, and estimated future experience and professional judgment. As part of the analysis, a comparison was made between the assumed and the actual option election patterns over the most recent five years.
Delayed Retirement Factors	Active participants work enough hours each month to not qualify for delayed retirement adjustment. Inactive vested participants who are assumed to commence receipt of benefits after attaining normal retirement age qualify for delayed retirement increases.
Net Investment Return	7.00% The net investment return assumption is a long-term estimate derived from historical data, current and recent market expectations, and professional judgment. As part of the analysis, a building block approach was used that reflects inflation expectations and anticipated risk premiums for each of the portfolio's asset classes as provided by Segal Marco Advisors, as well as the Plan's target asset allocation.
Annual Administrative Expenses	\$1,750,000 for the year beginning January 1, 2022 (equivalent to \$1,687,346 payable at the beginning of the year) or 46.8% of Normal Cost. The annual administrative expenses were based on historical and current data and estimated future experience and professional judgment.
Actuarial Value of Assets	The market value of assets less unrecognized returns in prior years. Unrecognized return is equal to the difference between the actual market return and the expected return on the market value, and is recognized, 20% per year, over a five-year period. The actuarial value is further adjusted, if necessary, to be within 80% to 120% on the market value of assets.
Actuarial Cost Method	Unit Credit Actuarial Cost Method. Normal Cost and Actuarial Accrued Liability are calculated on an individual basis.
Benefits Valued	Unless otherwise indicated, includes all benefits summarized in Exhibit L.

Current Liability Assumptions	<i>Interest:</i> 2.22%, within the permissible range prescribed under IRC Section 431(c)(6)(E) <i>Mortality:</i> Mortality prescribed under IRS Regulations 1.431(c)(6)-1 and 1.430(h)(3)-1(a)(2): RP-2006 employee and annuitant mortality tables, projected generationally using scale MP-2020 (previously, MP-2019)
Actuarial Models	Segal valuation results are based on proprietary actuarial modeling software. The actuarial valuation models generate a comprehensive set of liability and cost calculations that are prepared to meet regulatory, legislative and client requirements. Deterministic cost projections are based on a proprietary forecasting model. Our Actuarial Technology and Systems unit, comprised of both actuaries and programmers, is responsible for the initial development and maintenance of these models. The models have a modular structure that allows for a high degree of accuracy, flexibility and user control. The client team programs the assumptions and the plan provisions, validates the models, and reviews test lives and results, under the supervision of the responsible Enrolled Actuary.

**FSA Contribution
Timing (Schedule MB,
line 3a)**

Unless otherwise noted, contributions are paid periodically throughout the year pursuant to collective bargaining agreements. The interest credited in the FSA is therefore assumed to be equivalent to a July 1 contribution date.

Schedule of Projection of Expected Benefit Payments

(Schedule MB, Line 8b(1))

Plan Year	Active Participants	Terminated Vested Participants	Retired Participants and Beneficiaries Receiving Payments	Total
2022	\$1,584,371	\$2,334,266	\$50,619,184	\$54,537,821
2023	3,090,033	4,057,124	49,173,133	56,320,290
2024	4,455,035	5,687,741	47,770,651	57,913,428
2025	5,774,005	7,179,643	46,312,813	59,266,462
2026	6,990,679	8,613,130	44,828,015	60,431,824
2027	8,098,251	10,150,027	43,320,742	61,569,020
2028	9,065,271	11,476,243	41,773,930	62,315,444
2029	9,962,723	12,691,366	40,184,438	62,838,528
2030	10,764,646	13,816,745	38,555,208	63,136,599
2031	11,446,333	14,845,000	36,885,100	63,176,433
2032	12,052,165	15,705,624	35,183,235	62,941,023
2033	12,521,290	16,455,954	33,450,790	62,428,034
2034	12,933,564	17,026,896	31,690,189	61,650,649
2035	13,256,819	17,489,897	29,907,096	60,653,812
2036	13,531,085	17,899,360	28,107,716	59,538,161
2037	13,736,462	18,223,096	26,298,847	58,258,406
2038	13,879,380	18,504,098	24,487,960	56,871,439
2039	13,977,255	18,734,620	22,683,350	55,395,225
2040	14,025,562	18,968,909	20,894,176	53,888,646
2041	14,034,626	19,127,778	19,130,394	52,292,799
2042	13,984,774	19,304,587	17,402,634	50,691,995

2022 Schedule MB, Line 8b(1) - Schedule of Projection of Expected Benefit Payments
United Food and Commercial Workers Union Local 655, Food Employers Joint Pension Plan
EIN 43-6058365/PN 001

Plan Year	Active Participants	Terminated Vested Participants	Retired Participants and Beneficiaries Receiving Payments	Total
2043	13,892,085	19,370,132	15,721,927	48,984,145
2044	13,744,099	19,381,032	14,099,480	47,224,610
2045	13,554,479	19,338,185	12,546,368	45,439,032
2046	13,312,584	19,223,283	11,073,132	43,608,999
2047	13,029,169	19,052,156	9,689,393	41,770,718
2048	12,710,424	18,787,997	8,403,289	39,901,710
2049	12,353,633	18,471,663	7,221,239	38,046,535
2050	11,965,771	18,092,539	6,147,480	36,205,790
2051	11,546,751	17,666,740	5,183,742	34,397,233
2052	11,096,133	17,195,680	4,329,249	32,621,062
2053	10,632,978	16,676,020	3,580,918	30,889,916
2054	10,153,113	16,090,454	2,933,754	29,177,321
2055	9,662,969	15,473,684	2,381,187	27,517,840
2056	9,172,687	14,811,678	1,915,562	25,899,927
2057	8,689,303	14,127,278	1,528,468	24,345,050
2058	8,206,990	13,422,150	1,210,993	22,840,132
2059	7,735,822	12,723,349	954,092	21,413,263
2060	7,279,147	12,010,593	748,867	20,038,607
2061	6,830,310	11,324,020	586,880	18,741,211
2062	6,402,689	10,633,221	460,397	17,496,307
2063	5,989,626	9,958,763	362,513	16,310,902
2064	5,588,305	9,299,676	287,246	15,175,227
2065	5,204,521	8,664,704	229,583	14,098,808
2066	4,841,707	8,051,287	185,446	13,078,441

2022 Schedule MB, Line 8b(1) - Schedule of Projection of Expected Benefit Payments
United Food and Commercial Workers Union Local 655, Food Employers Joint Pension Plan
EIN 43-6058365/PN 001

Plan Year	Active Participants	Terminated Vested Participants	Retired Participants and Beneficiaries Receiving Payments	Total
2067	4,493,049	7,460,270	151,586	12,104,905
2068	4,162,638	6,893,704	125,468	11,181,810
2069	3,849,417	6,351,828	105,145	10,306,390
2070	3,552,405	5,834,934	89,148	9,476,486
2071	3,270,760	5,338,618	76,383	8,685,761

This assumes the following:

- No additional benefits will be accrued.
- Experience is in line with valuation assumptions.
- No new entrants are covered by the Plan.

Form 5500Department of the Treasury
Internal Revenue ServiceDepartment of Labor
Employee Benefits Security
Administration

Pension Benefit Guaranty Corporation

Annual Return/Report of Employee Benefit Plan

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

▶ **Complete all entries in accordance with the instructions to the Form 5500.**OMB Nos. 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 instr.)
- B** This return/report is: ☐ a single-employer plan ☐ a DFE (specify) _____
☐ the first return/report ☐ the final return/report
☐ an amended return/report ☐ a short plan year return/report (less than 12 months)
- C** If the plan is a collectively-bargained plan, check here ☒
- D** Check box if filing under: ☒ Form 5558 ☐ automatic extension ☐ the DFVC program
☐ special extension (enter description) _____
- E** If this is a retroactively adopted plan permitted by SECURE Act section 201, check here ☐

Part II Basic Plan Information - enter all requested information

1a Name of plan UFCW UNION LOCAL NO. 655, FOOD EMPLOYER'S JOINT PE	1b Three-digit plan number (PN) ▶ 001
	1c Effective date of plan 01/01/1963
2a Plan sponsor's name (employer, if for a single-employer plan) Mailing address (include room, apt., suite no. and street, or P.O. Box) City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions) BOARD OF TRUSTEES OF UFCW LOCAL 655, FOOD EMPLOYERS 300 WEIDMAN ROAD BALLWIN MO 63011-4433	2b Employer Identification Number (EIN) 43-6058365 2c Plan Sponsor's telephone number 636-394-6500 2d Business code (see instructions) 445110

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 <i>Levi Eddins</i>	10/16/23	DAVID COOK LEVI EDDINS
Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE <i>Susan Perney</i>	10/16/23	SUSAN PERNEY
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	20,172
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)	7,606
a (2) Total number of active participants at the end of the plan year	6a(2)	7,157
b Retired or separated participants receiving benefits	6b	6,280
c Other retired or separated participants entitled to future benefits	6c	5,844
d Subtotal. Add lines 6a(2), 6b, and 6c	6d	19,281
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits	6e	658
f Total. Add lines 6d and 6e	6f	19,939
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	6g	
h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested	6h	
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	7	25

8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions:
1B

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

9a Plan funding arrangement (check all that apply) (1) ☒ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor	9b Plan benefit arrangement (check all that apply) (1) ☒ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor
--	--

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

a Pension Schedules

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

b General Schedules

- (1) ☒ **H** (Financial Information)
 (2) ☐ **I** (Financial Information - Small Plan)
 (3) ☒ **2 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 _____

United Food and Commercial Workers Union Local 655 Food Employers Joint Pension Plan
EIN: 43-6058365 Plan Number: 001
Schedule H, Line 4j - Schedule of Reportable Transactions
Year Ended December 31, 2022

Identity of Party Involved (a)	Description of Asset (b)	Purchase Price (c)	Selling Price (d)	Cost of Asset (g)	Current Value of Asset on Transaction Date (h)	Net Gain (Loss) (i)
Comerica	Short Term Fund (342)	\$ -	\$ 109,110,929	\$ 109,110,929	\$ 109,110,929	\$ -
Comerica	Short Term Fund (1,006)	\$ 102,893,563	\$ -	\$ 102,893,563	\$ 102,893,563	\$ -

SCHEDULE MB (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6059 of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500 or 5500-SF.	OMB No. 1210-0110 2022 This Form is Open to Public Inspection
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For calendar plan year 2022 or fiscal plan year beginning 01/01/2022 and ending 12/31/2022

▶ **Round off amounts to nearest dollar.**

▶ **Caution:** A penalty of \$1,000 will be assessed for late filing of this report unless reasonable cause is established.

A Name of plan UFCW UNION LOCAL NO. 655, FOOD EMPLOYERS' JOINT PENSION PLAN	B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF BOARD OF TRUSTEES UFCW LOCAL NO. 655 FOOD EMPLOYERS JOINT PENSION PLAN	D Employer Identification Number (EIN) 43-6058365

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

1a Enter the valuation date: Month 01 Day 01 Year 2022

b Assets

(1) Current value of assets	1b(1)	885,603,367
(2) Actuarial value of assets for funding standard account.....	1b(2)	784,886,152
c (1) Accrued liability for plan using immediate gain methods	1c(1)	769,154,717
(2) Information for plans using spread gain methods:		
(a) Unfunded liability for methods with bases	1c(2)(a)	
(b) Accrued liability under entry age normal method.....	1c(2)(b)	
(c) Normal cost under entry age normal method	1c(2)(c)	
(3) Accrued liability under unit credit cost method.....	1c(3)	769,154,717
d Information on current liabilities of the plan:		
(1) Amount excluded from current liability attributable to pre-participation service (see instructions).....	1d(1)	
(2) "RPA '94" information:		
(a) Current liability	1d(2)(a)	1,476,238,499
(b) Expected increase in current liability due to benefits accruing during the plan year	1d(2)(b)	11,393,673
(c) Expected release from "RPA '94" current liability for the plan year	1d(2)(c)	54,633,036
(3) Expected plan disbursements for the plan year	1d(3)	56,383,036

Statement by Enrolled Actuary

To the best of my knowledge, the information supplied in this schedule and accompanying schedules, statements and attachments, if any, is complete and accurate. Each prescribed assumption was applied in accordance with applicable law and regulations. In my opinion, each other assumption is reasonable (taking into account the experience of the plan and reasonable expectations) and such other assumptions, in combination, offer my best estimate of anticipated experience under the plan.

SIGN HERE	William Gitterman WJG	10/09/2023
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Signature of actuary

Date

William Gitterman, FSA, MAAA

2308743

Type or print name of actuary

Most recent enrollment number

SEGAL

312-984-8500

Firm name

Telephone number (including area code)

101 N. WACKER DR., SUITE 500
CHICAGO IL 60606-1724

Address of the firm

If the actuary has not fully reflected any regulation or ruling promulgated under the statute in completing this schedule, check the box and see instructions ☐

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

Schedule MB (Form 5500) 2022
v. 220413

- k** Has a change been made in funding method for this plan year? ☐ Yes ☒ No
- l** If line k is "Yes," was the change made pursuant to Revenue Procedure 2000-40 or other automatic approval? ☐ Yes ☐ No
- m** If line k is "Yes," and line l is "No," enter the date (MM-DD-YYYY) of the ruling letter (individual or class) approving the change in funding method

5m	
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6 Checklist of certain actuarial assumptions:

- a** Interest rate for "RPA '94" current liability

6a	2.22 %
-----------	--------
- | | Pre-retirement | Post-retirement |
|--|--|--|
| b Rates specified in insurance or annuity contracts | ☐ Yes ☐ No ☒ N/A | ☐ Yes ☐ No ☒ N/A |
| c Mortality table code for valuation purposes: | | |
| (1) Males | 6c(1) A | A |
| (2) Females | 6c(2) A | A |
| d Valuation liability interest rate | 6d 7.00 % | 7.00 % |
| e Salary scale | 6e % ☒ N/A | |
| f Withdrawal liability interest rate: | | |
| (1) Type of interest rate | 6f(1) ☐ Single rate ☐ ERISA 4044 ☒ Other ☐ N/A | |
| (2) If "Single rate" is checked in (1), enter applicable single rate | 6f(2) | % |
| g Estimated investment return on actuarial value of assets for year ending on the valuation date | 6g | 11.2 % |
| h Estimated investment return on current value of assets for year ending on the valuation date | 6h | 17.6 % |
| i Expense load included in normal cost reported in line 9b | 6i | ☐ N/A |
| (1) If expense load is described as a percentage of normal cost, enter the assumed percentage | 6i(1) | % |
| (2) If expense load is a dollar amount that varies from year to year, enter the dollar amount included in line 9b | 6i(2) | 1,687,346 |
| (3) If neither (1) nor (2) describes the expense load, check the box | 6i(3) | ☐ |

7 New amortization bases established in the current plan year:

(1) Type of base	(2) Initial balance	(3) Amortization Charge/Credit
1	-27,554,620	-2,827,429
3	1,282,287	131,578
4	431,774	44,305

8 Miscellaneous information:

- a** If a waiver of a funding deficiency has been approved for this plan year, enter the date (MM-DD-YYYY) of the ruling letter granting the approval

8a	
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- b** Demographic, benefit, and contribution information
- (1)** Is the plan required to provide a projection of expected benefit payments? (See instructions) If "Yes," see instructions for required attachment. ☒ Yes ☐ No
- (2)** Is the plan required to provide a Schedule of Active Participant Data? (See instructions). ☒ Yes ☐ No
- (3)** Is the plan required to provide a projection of employer contributions and withdrawal liability payments? (See instructions) If "Yes," attach a schedule. ☒ Yes ☐ No
- c** Are any of the plan's amortization bases operating under an extension of time under section 412(e) (as in effect prior to 2008) or section 431(d) of the Code? ☐ Yes ☒ No
- d** If line c is "Yes," provide the following additional information:
- | | |
|---|--|
| (1) Was an extension granted automatic approval under section 431(d)(1) of the Code? | ☐ Yes ☐ No |
| (2) If line 8d(1) is "Yes," enter the number of years by which the amortization period was extended. | 8d(2) |
| (3) Was an extension approved by the Internal Revenue Service under section 412(e) (as in effect prior to 2008) or 431(d)(2) of the Code? | ☐ Yes ☐ No |
| (4) If line 8d(3) is "Yes," enter number of years by which the amortization period was extended (not including the number of years in line (2)). | 8d(4) |
| (5) If line 8d(3) is "Yes," enter the date of the ruling letter approving the extension | 8d(5) |
| (6) If line 8d(3) is "Yes," is the amortization base eligible for amortization using interest rates applicable under section 6621(b) of the Code for years beginning after 2007? | ☐ Yes ☐ No |

e If box 5h is checked or line 8c is "Yes," enter the difference between the minimum required contribution for the year and the minimum that would have been required without using the shortfall method or extending the amortization base(s)

8e**9** Funding standard account statement for this plan year:**Charges to funding standard account:**

a Prior year funding deficiency, if any

9a

0

b Employer's normal cost for plan year as of valuation date

9b

5,292,542

c Amortization charges as of valuation date:

Outstanding balance

(1) All bases except funding waivers and certain bases for which the amortization period has been extended

9c(1)

214,040,000

27,602,248

(2) Funding waivers

9c(2)

(3) Certain bases for which the amortization period has been extended

9c(3)

d Interest as applicable on lines 9a, 9b, and 9c

9d

2,302,635

e Total charges. Add lines 9a through 9d

9e

35,197,425

Credits to funding standard account:

f Prior year credit balance, if any

9f

112,465,470

g Employer contributions. Total from column (b) of line 3

9g

12,678,947

Outstanding balance

h Amortization credits as of valuation date

9h

117,305,965

20,773,421

i Interest as applicable to end of plan year on lines 9f, 9g, and 9h

9i

9,770,486

j Full funding limitation (FFL) and credits:

(1) ERISA FFL (accrued liability FFL)

9j(1)

107,779,558

(2) "RPA '94" override (90% current liability FFL)

9j(2)

537,512,663

(3) FFL credit

9j(3)

k (1) Waived funding deficiency

9k(1)

(2) Other credits

9k(2)

l Total credits. Add lines 9f through 9i, 9j(3), 9k(1), and 9k(2)

9l

155,688,324

m Credit balance: If line 9l is greater than line 9e, enter the difference

9m

120,490,899

n Funding deficiency: If line 9e is greater than line 9l, enter the difference

9n**o** Current year's accumulated reconciliation account:

(1) Due to waived funding deficiency accumulated prior to the 2022 plan year

9o(1)

(2) Due to amortization bases extended and amortized using the interest rate under section 6621(b) of the Code:

(a) Reconciliation outstanding balance as of valuation date

9o(2)(a)

(b) Reconciliation amount (line 9c(3) balance minus line 9o(2)(a))

9o(2)(b)

0

(3) Total as of valuation date

9o(3)

0

10 Contribution necessary to avoid an accumulated funding deficiency. (see instructions.)

10

11 Has a change been made in the actuarial assumptions for the current plan year? If "Yes," see instructions

☒ Yes ☐ No