

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 01/01/2022 and ending 12/31/2022	
A This return/report is for:	☒ a multiemployer plan ☐ a multiple-employer plan (Filers checking this box must attach a list of participating employer information in accordance with the form instructions.)
	☐ 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 MIDWEST PENSION PLAN	1b Three-digit plan number (PN) ▶ 001
	1c Effective date of plan 07/01/1967
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 - MIDWEST PENSION PLAN 245 FENCL LANE HILLSIDE, IL 60162	2b Employer Identification Number (EIN) 36-6512748
	2c Plan Sponsor's telephone number 312-738-0822
	2d Business code (see instructions) 326100

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.	10/13/2023	MARK SPANO
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	Filed with authorized/valid electronic signature.	10/13/2023	SHELDON ROSEN
	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

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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 11431
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) 1758
a(2) Total number of active participants at the end of the plan year		6a(2) 1707
b Retired or separated participants receiving benefits		6b 3772
c Other retired or separated participants entitled to future benefits.....		6c 5301
d Subtotal. Add lines 6a(2) , 6b , and 6c		6d 10780
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.		6e 606
f Total. Add lines 6d and 6e		6f 11386
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 133
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)		7 50
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)	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	(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	b General 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	(1) ☒ H (Financial Information) (2) ☐ I (Financial Information – Small Plan) (3) ☐ A (Insurance Information) (4) ☒ C (Service Provider Information) (5) ☒ D (DFE/Participating Plan Information) (6) ☐ G (Financial Transaction Schedules)

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

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

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

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

11c Enter the Receipt Confirmation Code for the 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 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 MIDWEST 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 - MIDWEST PENSION PLAN	D Employer Identification Number (EIN) 36-6512748

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)	146858104
(2) Actuarial value of assets for funding standard account	1b(2)	139356179
c (1) Accrued liability for plan using immediate gain methods	1c(1)	127307236
(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)	127307236
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)	224888770
(b) Expected increase in current liability due to benefits accruing during the plan year	1d(2)(b)	1363889
(c) Expected release from "RPA '94" current liability for the plan year	1d(2)(c)	9890179
(3) Expected plan disbursements for the plan year	1d(3)	11207416

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	KEVIN CAMPE	Date 23-05356
Type or print name of actuary	MILLIMAN	Most recent enrollment number 312-726-0677
Firm name	71 S. WACKER DR., 31ST FLOOR, CHICAGO, IL 60606	Telephone number (including area code)
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 ☐

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2 Operational information as of beginning of this plan year:

a Current value of assets (see instructions)	2a	146858104
b "RPA '94" current liability/participant count breakdown:	(1) Number of participants	(2) Current liability
(1) For retired participants and beneficiaries receiving payment.....	4288	111325679
(2) For terminated vested participants	5388	94449861
(3) For active participants:		
(a) Non-vested benefits		1061962
(b) Vested benefits		18051268
(c) Total active	1758	19113230
(4) Total	11434	224888770
c If the percentage resulting from dividing line 2a by line 2b(4), column (2), is less than 70%, enter such percentage	2c	65.30 %

3 Contributions made to the plan for the plan year by employer(s) and employees:

(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	1560565				
Totals ▶			3(b)	1560565	3(c)
(d) Total withdrawal liability amounts included in line 3(b) total					3(d) 202632

4 Information on plan status:

a Funded percentage for monitoring plan's status (line 1b(2) divided by line 1c(3))	4a	109.5 %
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:	4f	
• 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."		

5 Actuarial cost method used as the basis for this plan year's funding standard account computations (check all that apply):

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	1.91 %
	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	8.6 %
h Estimated investment return on current value of assets for year ending on the valuation date	6h	15.4 %
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)	1317237
(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	-4853513	-498028
4	4655825	477743

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	1802419

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)	36783019	7560815
9c(2)		
9c(3)		

d Interest as applicable on lines 9a, 9b, and 9c.....**9d** 655426**e** Total charges. Add lines 9a through 9d.....**9e** 10018660**Credits to funding standard account:****f** Prior year credit balance, if any**9f** 40001391**g** Employer contributions. Total from column (b) of line 3.....**9g** 1560565**h** Amortization credits as of valuation date.....

	Outstanding balance	
9h	8830571	1539666

i Interest as applicable to end of plan year on lines 9f, 9g, and 9h.....**9i** 2962019**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)	31837708
9j(2)	60858437

9j(3)**k** (1) Waived funding deficiency.....

(2) Other credits.....

9k(1)**9k(2)****l** Total credits. Add lines 9f through 9i, 9j(3), 9k(1), and 9k(2)**9l** 46063641**m** Credit balance: If line 9l is greater than line 9e, enter the difference**9m** 36044981**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.....

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

(3) Total as of valuation date

9o(2)(a)**9o(2)(b)****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 MIDWEST PENSION PLAN	B Three-digit plan number (PN) ▶	001
C Plan sponsor's name as shown on line 2a of Form 5500 BOARD OF TRUSTEES - MIDWEST PENSION PLAN	D Employer Identification Number (EIN) 36-6512748	

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	
WELLINGTON MANAGEMENT COMPANY LLP	280 CONGRESS STREET BOSTON, MA 02210

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

30-0872552

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation	
JMB INSURANCE AGENCY, INC	

36-2711359

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation	
ALERA GROUP - GCG FINANCIAL	

81-4473358

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

CHEVY CHASE TRUST

52-2037618

(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

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

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

ASB CAPITAL MANAGEMENT

80-0618452

(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	SEE ATTACHED (2)	208959	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

ADP

13-3036745

(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	SEE ATTACHED (2)	130088	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

BASYS, LLC

52-1796473

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
16	SEE ATTACHED (2)	100511	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)

GROSVENOR CAPITAL MANAGEMENT, LP

36-3795985

(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	SEE ATTACHED (2)	94011	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☒ No ☐

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

LOOMIS SAYLES & COMPANY LP

04-3200030

(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 68	NONE	87101	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☐ No ☒

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

BROWN ADVISORY, LLC

26-4560299

(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	SEE ATTACHED - 2	79765	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)

MILLIMAN

91-0675641

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
11	SEE ATTACHED (1)	77193	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

BUCHBINDER TUNICK & COMPANY LLP

13-1578842

(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	SEE ATTACHED (1)	75000	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

AMALGAMATED BANK OF CHICAGO

36-0721895

(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 19	SEE ATTACHED (2)	64852	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)

JOHNSON & KROL, ATTORNEY AT LAW, LLC

36-4342024

(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	SEE ATTACHED (1)	62739	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

DEARBORN PARTNERS

36-4145621

(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	NONE	61271	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

INVESTMENT PERFORMANCE SERVICES LLC

58-2432390

(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	SEE ATTACHED (2)	60788	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)

HARDMAN JOHNSTON GLOBAL ADVISORS

13-3257590

(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	SEE ATTACHED (2)	60493	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

GLOBAL TRUST COMPANY

26-3761443

(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	NONE	49067	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☐ No ☒

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

LSV ASSET MANAGEMENT

23-2772200

(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	NONE	46804	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)

NYDIA ORTIZ

36-6512748

(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	SEE ATTACHED (2)	41923	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

GLOUSTON CAPITAL PARTNERS, LLC

98-1445316

(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	NONE	35200	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☐ No ☒

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

INGRID ESCOBAR

36-6512748

(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	SEE ATTACHED (2)	34199	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)

HAMILTON LANE ADVISORS

23-2962336

(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	SEE ATTACHED (2)	28803	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☐ No ☒

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

EVERACTIVE SOLUTIONS, INC

27-0988892

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
16	SEE ATTACHED (2)	26974	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

GABRIELA RAMIREZ

36-6512748

(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	SEE ATTACHED (2)	26692	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)

NATIONAL INVESTMENT SERVICES INC

84-3937993

(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	NONE	19010	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

INTERCONTINENTAL REAL ESTATE CORP.

04-2895544

(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	NONE	13100	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

WELLINGTON TRUST COMPANY, NA

04-2755549

(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	SEE ATTACHED (2)	6922	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

Part I Service Provider Information (continued)

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE D (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration	DFE/Participating Plan Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ► File as an attachment to Form 5500.	OMB No. 1210-0110 2022 This Form is Open to Public Inspection.
For calendar plan year 2022 or fiscal plan year beginning 01/01/2022 and ending 12/31/2022		
A Name of plan MIDWEST PENSION PLAN	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 - MIDWEST PENSION PLAN		
D Employer Identification Number (EIN) 36-6512748		
Part I Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs) (Complete as many entries as needed to report all interests in DFEs)		
a Name of MTIA, CCT, PSA, or 103-12 IE: ASB ALLEGIANCE REAL ESTATE FUND		
b Name of sponsor of entity listed in (a): CHEVY CHASE TRUST COMPANY		
c EIN-PN 52-6257033-006	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 22491821
a Name of MTIA, CCT, PSA, or 103-12 IE: COLLECTIVE INTL EQUITY FUND		
b Name of sponsor of entity listed in (a): LSV TRUST COMPANY		
c EIN-PN 36-6052183-094	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 6112276
a Name of MTIA, CCT, PSA, or 103-12 IE: MULTI-EMPLOYER PROPERTY TRUST		
b Name of sponsor of entity listed in (a): NEWTOWER 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) 4135695
a Name of MTIA, CCT, PSA, or 103-12 IE: NIS INTERMEDIATE FIXED INCOME FUND		
b Name of sponsor of entity listed in (a): NATIONAL INVESTMENT SERVICES, INC		
c EIN-PN 20-0065449-004	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 6022684
a Name of MTIA, CCT, PSA, or 103-12 IE: UTC-CIF OPPORTUNISTIC INV		
b Name of sponsor of entity listed in (a): WELLINGTON TRUST COMPANY		
c EIN-PN 04-2767481-076	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 351388
a Name of MTIA, CCT, PSA, or 103-12 IE: VICTORY TRIVALENT INTL SMALL-CAP CO		
b Name of sponsor of entity listed in (a): GLOBAL TRUST COMPANY		
c EIN-PN 80-6249702-006	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 5226380
a Name of MTIA, CCT, PSA, or 103-12 IE: HARDMAN JOHNSTON INTL EQUITY GRP		
b Name of sponsor of entity listed in (a): HARDMAN JOHNSTON GLOBAL ADVISORS LLC		
c EIN-PN 26-6493485-001	d Entity code E	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 7937830

a Name of MTIA, CCT, PSA, or 103-12 IE: **INTCNTL ENHANCED CORE US REAL ESTAT****b** Name of sponsor of entity listed in (a): **INTERCONTINENTAL REAL ESTATE CORP**

c EIN-PN 35-7161136-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 7947169
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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)
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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)
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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)
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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)
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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)
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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)
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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)
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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)
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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)
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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>MIDWEST PENSION PLAN</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 - MIDWEST PENSION PLAN</u>	D Employer Identification Number (EIN) <u>36-6512748</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	7535741135
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions.....		1b(1)	2859683532287
(2) Participant contributions.....		1b(2)	
(3) Other.....		1b(3)	11577091267954
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit).....		1c(1)	22838781140057
(2) U.S. Government securities		1c(2)	
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred		1c(3)(A)	
(B) All other		1c(3)(B)	1351805911267264
(4) Corporate stocks (other than employer securities):			
(A) Preferred		1c(4)(A)	
(B) Common.....		1c(4)(B)	3523815528158994
(5) Partnership/joint venture interests		1c(5)	3183174026431103
(6) Real estate (other than employer real property)		1c(6)	
(7) Loans (other than to participants).....		1c(7)	
(8) Participant loans.....		1c(8)	
(9) Value of interest in common/collective trusts.....		1c(9)	5270425652287413
(10) Value of interest in pooled separate accounts		1c(10)	
(11) Value of interest in master trust investment accounts.....		1c(11)	
(12) Value of interest in 103-12 investment entities		1c(12)	104066607937830
(13) Value of interest in registered investment companies (e.g., mutual funds).....		1c(13)	
(14) Value of funds held in insurance company general account (unallocated contracts).....		1c(14)	
(15) Other		1c(15)	

1d Employer-related investments:		(a) Beginning of Year	(b) End of Year
(1) Employer securities	1d(1)		
(2) Employer real property	1d(2)		
e Buildings and other property used in plan operation	1e	25678	15492
f Total assets (add all amounts in lines 1a through 1e)	1f	147527460	132079529

Liabilities

g Benefit claims payable	1g		
h Operating payables	1h	188539	172090
i Acquisition indebtedness	1i		
j Other liabilities	1j	69498	292357
k Total liabilities (add all amounts in lines 1g through 1j)	1k	258037	464447

Net Assets

l Net assets (subtract line 1k from line 1f)	1l	147269423	131615082
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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)	4704583	
(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)		4704583
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	1075	
(B) U.S. Government securities	2b(1)(B)		
(C) Corporate debt instruments	2b(1)(C)	711287	
(D) Loans (other than to participants)	2b(1)(D)		
(E) Participant loans	2b(1)(E)		
(F) Other	2b(1)(F)	3621	
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		715983
(2) Dividends: (A) Preferred stock	2b(2)(A)		
(B) Common stock	2b(2)(B)	494103	
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	373549	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		867652
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)	14953064	
(B) Aggregate carrying amount (see instructions)	2b(4)(B)	11795446	
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)		3157618
(5) Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)		
(B) Other	2b(5)(B)	-13788183	
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		-13788183

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		-3801635
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities.....	2b(9)		2424807
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		
c Other income	2c		498497
d Total income. Add all income amounts in column (b) and enter total	2d		-5220678
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	8127896	
(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)		8127896
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)	446303	
(2) Contract administrator fees	2i(2)		
(3) Investment advisory and management fees	2i(3)	917541	
(4) Other	2i(4)	941923	
(5) Total administrative expenses. Add lines 2i(1) through (4)	2i(5)		2305767
j Total expenses. Add all expense amounts in column (b) and enter total	2j		10433663
Net Income and Reconciliation			
k Net income (loss). Subtract line 2j from line 2d	2k		-15654341
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: **BUCHBINDER TUNICK & COMPANY LLP**

(2) EIN: **13-1578842**

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		750000
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 488179.

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 MIDWEST PENSION PLAN		B Three-digit plan number (PN) ► 001
C Plan sponsor's name as shown on line 2a of Form 5500 BOARD OF TRUSTEES - MIDWEST PENSION PLAN		D Employer Identification Number (EIN) 36-6512748
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 11
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 **FRESH EXPRESS CHIQUITA BRANDS**

b EIN **94-2591533** **c** Dollar amount contributed by employer **111290**

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 **10** Day **27** Year **2023**

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) **31.00**

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☒ Other (specify): **MONTHLY**

a Name of contributing employer **CHICAGO STEEL HOLDINGS**

b EIN **20-0836074** **c** Dollar amount contributed by employer **101106**

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 **10** Day **31** Year **2024**

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) **180.00**

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☒ Other (specify): **MONTHLY**

a Name of contributing employer **LA-CO INDUSTRIES**

b EIN **36-2278494** **c** Dollar amount contributed by employer **84388**

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 **11** Day **30** Year **2023**

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) **96.00**

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☒ Other (specify): **MONTHLY**

a Name of contributing employer **GLOBAL MATERIAL TECHNOLOGY**

b EIN **04-2624726** **c** Dollar amount contributed by employer **82500**

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 **10** Day **31** Year **2023**

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) **75.00**

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☒ Other (specify): **MONTHLY**

a Name of contributing employer **WERTHEIMER BOX**

b EIN **36-2096689** **c** Dollar amount contributed by employer **88680**

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 **14** Year **2024**

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) **95.00**

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☒ Other (specify): **MONTHLY**

a Name of contributing employer **BRETFORD FRANKLIN PARK**

b EIN **36-2113703** **c** Dollar amount contributed by employer **71225**

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 **02** Day **28** Year **2023**

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) **75.00**

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☒ Other (specify): **MONTHLY**

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 **LIFE FITNESS**

b EIN **36-0848180**

c Dollar amount contributed by employer **136368**

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 **03** Day **10** Year **2022**

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) **75.00**

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☒ Other (specify): **MONTHLY**

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

14	Enter the number of deferred vested and retired participants (inactive participants), as of the beginning of the plan year, whose contributing employer is no longer making contributions to the plan for:	
a	The current plan year. Check the box to indicate the counting method used to determine the number of inactive participants: ☐ last contributing employer ☐ alternative ☐ reasonable approximation (see instructions for required attachment).....	14a
b	The plan year immediately preceding the current plan year. ☐ Check the box if the number reported is a change from what was previously reported (see instructions for required attachment)	14b
c	The second preceding plan year. ☐ Check the box if the number reported is a change from what was previously reported (see instructions for required attachment)	14c
15	Enter the ratio of the number of participants under the plan on whose behalf no employer had an obligation to make an employer contribution during the current plan year to:	
a	The corresponding number for the plan year immediately preceding the current plan year.....	15a
b	The corresponding number for the second preceding plan year.....	15b
16	Information with respect to any employers who withdrew from the plan during the preceding plan year:	
a	Enter the number of employers who withdrew during the preceding plan year	16a 1
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 733440
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: 38.4 % Investment-Grade Debt: 22.1 % High-Yield Debt: 0.0 % Real Estate: 26.5 % Other: 13.0 %

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 _____

MIDWEST PENSION PLAN

**Financial Statements
and
Supplemental Schedules**

For the Years Ended December 31, 2022 and 2021

MIDWEST PENSION PLAN
Financial Statements and Supplemental Schedules
For the Years Ended December 31, 2022 and 2021

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INDEPENDENT AUDITOR'S REPORT

Board of Trustees
Midwest Pension Plan

Opinion

We have audited the accompanying financial statements of Midwest 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, and the related statements of changes in net assets available for benefits for the years then ended, and the related notes to the financial statements.

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

Basis for Opinion

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

Emphasis of Matter

As discussed in Note 2 to the financial statements, in 2022, the Plan adopted FASB ASU 2016-02, *Leases* (Topic 842). Our opinion is not modified with respect to this matter.

Responsibilities of Management for the Financial Statements

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

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about Midwest Pension Plan's ability to continue as a going concern within 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 that may become due to such participants.

Auditor's Responsibilities for the Audit of the Financial Statements

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

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

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

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

Other Matter - Supplemental Schedules Required by ERISA

Our audits were conducted for the purpose of forming an opinion on the financial statements as a whole. The supplemental schedules on pages 30 through 41 are presented for purposes of additional analysis and are not a required part of the financial statements but are supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Such information 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 generally accepted auditing standards.

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

BUCHBINDER TUNICK & COMPANY LLP

New York, NY
August 28, 2023

MIDWEST PENSION PLAN
Statements of Net Assets Available for Benefits
December 31, 2022 and 2021

	<u>2022</u>	<u>2021</u>
Assets:		
Investments, at fair value:		
Common stocks	\$ 28,158,994	\$ 35,238,155
Corporate and other bonds and notes	11,267,264	13,518,059
Short-term investment funds	1,072,052	1,540,530
Common/collective trusts	67,594,943	77,510,943
Hedge funds	<u>19,061,403</u>	<u>17,431,713</u>
Total investments	<u>127,154,656</u>	<u>145,239,400</u>
Receivables:		
Accrued interest and dividends	199,989	204,752
Employers' contributions	12,803	15,952
Withdrawal liability receivable, net of allowance of \$-0- in 2022 and 2021	3,519,484	270,016
Due from broker for pending security trades	<u>106,000</u>	<u>174,160</u>
Total receivables	<u>3,838,276</u>	<u>664,880</u>
Cash	<u>109,140</u>	<u>818,705</u>
Prepaid expenses	<u>59,549</u>	<u>90,593</u>
Prepaid pension benefits	<u>693,279</u>	<u>688,204</u>
Other assets:		
Computer software costs, net of accumulated amortization of \$578,325 and \$568,138 at December 31, 2022 and 2021, respectively	<u>15,492</u>	<u>25,678</u>
Right-of-use asset - operating lease	<u>209,137</u>	<u>-</u>
Total assets	<u>132,079,529</u>	<u>147,527,460</u>
Liabilities:		
Accounts payable	172,090	188,539
Lease liability - rent	209,137	-
Due to related entities	46,892	52,073
Due to broker for pending security trades	<u>36,328</u>	<u>17,425</u>
Total liabilities	<u>464,447</u>	<u>258,037</u>
Net assets available for benefits	<u>\$ 131,615,082</u>	<u>\$ 147,269,423</u>

See notes to financial statements.

MIDWEST PENSION PLAN
Statements of Changes in Net Assets Available for Benefits
For the years ended December 31, 2022 and 2021

	<u>2022</u>	<u>2021</u>
(Reductions) additions:		
Investment (loss) income:		
Net (depreciation) appreciation in fair value of investments	\$ (11,513,134)	\$ 20,273,336
Interest and dividends	<u>1,583,635</u>	<u>1,157,361</u>
	(9,929,499)	21,430,697
Less: investment expenses	<u>(917,541)</u>	<u>(1,289,226)</u>
Net investment (loss) income	(10,847,040)	20,141,471
Contributions from employers	1,265,037	1,099,693
Withdrawal liability income	3,439,546	142,883
Other income	<u>4,238</u>	<u>46,002</u>
Total (reductions) additions	<u>(6,138,219)</u>	<u>21,430,049</u>
Deductions:		
Benefits paid directly to participants	8,127,896	8,023,110
Administrative expenses	<u>1,388,226</u>	<u>1,327,880</u>
Total deductions	<u>9,516,122</u>	<u>9,350,990</u>
Net (decrease) increase	(15,654,341)	12,079,059
Net assets available for benefits:		
Beginning of year	<u>147,269,423</u>	<u>135,190,364</u>
End of year	<u>\$ 131,615,082</u>	<u>\$ 147,269,423</u>

See notes to financial statements.

MIDWEST PENSION PLAN
Notes to Financial Statements
December 31, 2022 and 2021

Note 1 - Description of the Plan

The following brief description of the Midwest Pension Plan (the "Plan") is provided for general information purposes only. Participants should refer to the Plan regulations for more complete information.

General

The Plan is a multi-employer, defined benefit pension plan covering all eligible employees of contributing employers under the provisions of various collective bargaining agreements entered into by the employers and the Central States Joint Board, AFL-CIO (the "Union") and its affiliated locals. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 ("ERISA"), as amended.

Pension Benefits

The Plan provides for normal, early retirement, late retirement, vested benefits and disability pensions to employees who meet specific requirements as to age and years of service.

Death Benefits

- (a) Spouse survivorship pension is payable upon the death of an employee: (i) receiving a disability pension before age 65, or (ii) after at least 10 years of vested service and before the employee received a pension.
- (b) Monthly pension amount to the employee's spouse is that which would have been payable had the employee retired with a joint and survivor pension, as described below, beginning at the later of the employee's death or age 55.

Optional Benefits

Unless a married employee elects a single-life pension, subject to the consent of spouse to waive the joint and survivor pension, the pension benefit shall be actuarially reduced and payable in the form of a joint and survivor pension, under which the spouse will receive 50% thereof as a survivorship pension payable upon death (or deferred to the 55th birthday, if later). No death benefits are payable on behalf of a retired employee receiving a single-life pension.

MIDWEST PENSION PLAN
Notes to Financial Statements (Continued)
December 31, 2022 and 2021

Note 2 - Summary of Significant Accounting Policies

Basis of Accounting

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

Investment Valuation and Income Recognition

The Plan's investments are stated at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. See note 4 for discussion of fair value measurements.

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

Use of Estimates

The preparation of financial statements in accordance with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities, and changes therein, disclosure of contingent assets and liabilities and the actuarial present value of accumulated plan benefits at the date of the financial statements. Actual results could differ from those estimates.

Funding Policy

In accordance with the terms of the Trust Agreement, the Plan shall receive contributions from the employers pursuant to their respective collective bargaining agreements with the Union.

MIDWEST PENSION PLAN
Notes to Financial Statements (Continued)
December 31, 2022 and 2021

Note 2 - Summary of Significant Accounting Policies (Continued)

Contributions

Employer contributions are recorded for payroll periods which ended on or before the financial statements' date.

Reserves for potential uncollectible contributions are established based on expectations of future payments to be received. As of December 31, 2022 and 2021, no allowance was deemed necessary by management.

Depreciation and Amortization

Computer software costs are amortized by the straight-line method over three years.

Depreciation and amortization totaled \$10,187 and \$14,146 for the years ended December 31, 2022 and 2021, respectively.

Leases

The Plan determines if an arrangement is a lease or contains a lease at inception of a contract. A contract is determined to be a lease or contain a lease if the contract conveys the right to control the use of the identified property, plant, or equipment (an identified asset) in exchange for consideration. The Plan determines these assets are leased because the Plan has the right to obtain substantially all of the economic benefit from and the right to direct the use of the identified asset. Assets in which the supplier or lessor has the practical ability and right to substitute alternative assets for the identified asset and would benefit economically from the exercise of its right to substitute the asset are not considered to be or contain a lease because the Plan determines it does not have the right to control and direct the use of the identified asset. The Plan's lease agreements do not contain any material residual value guarantees or material restrictive covenants.

In evaluating its contracts, the Plan separately identifies lease and nonlease components, such as common area and other maintenance costs, in calculating the right of use (ROU) assets and lease liabilities for its space. The Plan has elected the practical expedient to not separate lease and nonlease components and classifies the contract as a lease if consideration in the contract allocated to the lease component is greater than the consideration allocated to the nonlease component.

MIDWEST PENSION PLAN
Notes to Financial Statements (Continued)
December 31, 2022 and 2021

Note 2 - Summary of Significant Accounting Policies (Continued)

Leases (Continued)

Leases result in the recognition of ROU assets and lease liabilities on the statement of net assets available for benefits. ROU assets represent the right to use an underlying asset for the lease term, and lease liabilities represent the obligation to make lease payments arising from the lease, measured on a discounted basis. The Plan determines lease classification as operating or finance at the lease commencement date.

At lease inception, the lease liability is measured at the present value of the lease payments over the lease term. The ROU asset equals the lease liability adjusted for any initial direct costs, prepaid or deferred rent and lease incentives. The Plan uses the implicit rate when readily determinable. As most leases do not provide an implicit rate, the Plan uses the Applicable Federal Rate for long-term debt, annually compounded, published by the IRS, to determine the present value of lease payments.

The lease term may include options to extend or to terminate the lease that the Plan is reasonably certain to exercise. Lease expense is generally recognized on a straight-line basis over the lease term.

The Plan has elected not to record leases with an initial term of 12 months or less on the statement of net assets available for benefits. Lease expense on such leases is generally recognized on a straight-line basis over the lease term.

New Accounting Pronouncements

In February 2016, the FASB issued *ASU 2016-02, Leases (Topic 842)*, which requires the recognition of a “right-of-use” asset and a lease liability, initially measured at the present value of lease payments, on all of the Plan’s lease obligations. This ASU is effective for fiscal years beginning after December 15, 2021. The Plan evaluated its lease and determined that it is an operating lease. The Plan elected to adopt the practical expedient that permits organizations to maintain the operating lease classification of expired and existing leases that were classified as such under Topic 840 if the lease commencement date is prior to the adoption of Topic 842. The Plan elected to adopt the practical expedient to combine lease and non-lease components as a single lease component. The Plan adopted this standard as of January 1, 2022. The ASU has been applied on a modified retrospective transition method.

MIDWEST PENSION PLAN
Notes to Financial Statements (Continued)
December 31, 2022 and 2021

Note 2 - Summary of Significant Accounting Policies (Continued)

Subsequent Events

The Plan has evaluated subsequent events and transactions through August 28, 2023, the date that the financial statements were available to be issued.

Note 3 - Concentrations of Credit Risk

Financial instruments that subject the Plan to concentrations of credit risk include cash, short-term investment funds and employers' contributions receivable. While the Plan attempts to limit any financial exposure by maintaining accounts at several financial institutions, its deposit balances may, at times, exceed federally insured limits. The Plan has not experienced any losses on such accounts.

Note 4 - Fair Value Measurements

Financial Accounting Standards Board ("FASB") *Accounting Standards Codification* ("ASC") 820, *Fair Value Measurements and Disclosures*, provides the framework for measuring fair value. It defines fair value as an exit price, which is the price that would be received for an asset or paid to transfer a liability in the Plan's principal or most advantageous market for the asset or liability, in an orderly transaction between market participants on the measurement date.

The fair value hierarchy generally requires an entity to maximize the use of observable inputs and minimize the use of unobservable inputs when measuring fair value. Observable inputs reflect the assumptions market participants would use in pricing the asset or liability and are developed based on market data obtained from sources independent of the reporting entity. Unobservable inputs reflect the entity's own assumptions based on market data and the entity's judgments about the assumptions that market participants would use in pricing the asset or liability, and are to be developed based on the best information available in the circumstances.

The Plan determines the fair market value of its investment in securities based on the established fair value definition and hierarchy levels. The three levels within the hierarchy that may be used to measure fair value are:

Level 1: Unadjusted quoted prices in active markets for identical assets or liabilities.

MIDWEST PENSION PLAN
Notes to Financial Statements (Continued)
December 31, 2022 and 2021

Note 4 - Fair Value Measurements (Continued)

Level 2: Observable inputs, including Level 1 prices that have been adjusted; quoted prices for similar assets or liabilities; quoted prices in markets that are less active than traded exchanges; and other inputs that are observable or can be substantially corroborated by observable market data.

Level 3: Unobservable inputs that are supported by little or no market activity and that are a significant component of the fair value of the assets or liabilities.

The lowest level of input that is a significant component of the fair value measurements determines the placement of the entire fair value measurement in the hierarchy. The Plan's assessment of the significance of a particular input to the fair value measurement requires judgment, and may affect the classification of fair value assets and liabilities within the fair value hierarchy levels.

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

Common stocks:

Common stocks are valued by quoted market prices in active markets.

Corporate and other bonds and notes:

The fair value of corporate and other bonds and notes is determined using recently executed transactions provided by the National Association of Securities Dealers Trade Reporting and Compliance Engine and the Securities Rulemaking Board, bid/ask markets reported by industry participants, bids from market participants, levels at which market participants would offer the security, comparable trades, dealer quotes, and news media.

Short-term investment funds:

Short-term investment funds are stated at cost which approximates fair value.

MIDWEST PENSION PLAN
Notes to Financial Statements (Continued)
December 31, 2022 and 2021

Note 4 - Fair Value Measurements (Continued)

Common/collective trusts:

The common/collective trusts are valued at the net asset value ("NAV") of the units of the common/collective trusts. The NAV, as provided by the common/collective trusts, is used as a practical expedient to estimating fair value. The NAV is based on the fair value of the underlying investments held by the trusts less its liabilities. This practical expedient is not used when it is determined to be probable that the trusts will sell the investment for an amount different than the reported NAV. Were the Plan to initiate a full redemption of the common/collective trusts, the investment adviser reserves the right to temporarily delay withdrawal from the common/collective trusts in order to ensure that securities liquidations will be carried out in an orderly business manner.

Hedge funds:

The hedge funds are valued at the net asset value ("NAV") of the units of the hedge funds. The NAV, as provided by the hedge fund, is used as a practical expedient to estimating fair value. The NAV is based on the fair value of the underlying investments held by the funds less its liabilities. This practical expedient is not used when it is determined to be probable that the funds will sell the investment for an amount different than the reported NAV. Were the Plan to initiate a full redemption of the hedge funds, the investment adviser reserves the right to temporarily delay withdrawal from the hedge funds in order to ensure that securities liquidations will be carried out in an orderly business manner.

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

MIDWEST PENSION PLAN
Notes to Financial Statements (Continued)
December 31, 2022 and 2021

Note 4 - Fair Value Measurements (Continued)

The following table sets forth, by level, the Plan's assets that were accounted for at fair value on a recurring basis as of December 31, 2022:

Investments in securities:

	<u>Total Fair Value</u>	<u>Quoted Prices (Level 1)</u>	<u>Significant Other Observable Inputs (Level 2)</u>	<u>Significant Other Unobservable Inputs (Level 3)</u>
Investments at fair value:				
Common stocks	\$ 28,158,994	\$ 28,158,994	\$ -	\$ -
Corporate and other bonds and notes	11,267,264	-	11,267,264	-
Short-term investment funds	1,072,052	-	1,072,052	-
Investments measured at net asset value (NAV):				
Common/collective trusts*	67,594,943	-	-	-
Hedge funds*	<u>19,061,403</u>	<u>-</u>	<u>-</u>	<u>-</u>
Total investments	<u>\$ 127,154,656</u>	<u>\$ 28,158,994</u>	<u>\$ 12,339,316</u>	<u>\$ -</u>

* Certain investments that are measured at fair value using the net assets value per share (or its equivalent) practical expedient have not been categorized in the fair value hierarchy. The fair value amounts presented in this table are intended to permit reconciliation of the fair value hierarchy to the amounts presented in the statements of net assets available for benefits.

MIDWEST PENSION PLAN
Notes to Financial Statements (Continued)
December 31, 2022 and 2021

Note 4 - Fair Value Measurements (Continued)

The following table sets forth, by level, the Plan's assets that were accounted for at fair value on a recurring basis as of December 31, 2021:

Investments in securities:

	<u>Total Fair Value</u>	<u>Quoted Prices (Level 1)</u>	<u>Significant Other Observable Inputs (Level 2)</u>	<u>Significant Other Unobservable Inputs (Level 3)</u>
Investments at fair value:				
Common stocks	\$ 35,238,155	\$ 35,238,155	\$ -	\$ -
Corporate and other bonds and notes	13,518,059	-	13,518,059	-
Short-term investment funds	1,540,530	-	1,540,530	-
Investments measured at net asset value (NAV):				
Common/collective trusts*	77,510,943	-	-	-
Hedge funds*	<u>17,431,713</u>	<u>-</u>	<u>-</u>	<u>-</u>
Total investments	<u>\$ 145,239,400</u>	<u>\$ 35,238,155</u>	<u>\$ 15,058,589</u>	<u>\$ -</u>

* Certain investments that are measured at fair value using the net assets value per share (or its equivalent) practical expedient have not been categorized in the fair value hierarchy. The fair value amounts presented in this table are intended to permit reconciliation of the fair value hierarchy to the amounts presented in the statements of net assets available for benefits.

MIDWEST PENSION PLAN
Notes to Financial Statements (Continued)
December 31, 2022 and 2021

Note 4 - Fair Value Measurements (Continued)

The following table summarizes investments measured at fair value based on net asset value (NAV) per share as of December 31, 2022 and 2021:

<u>December 31, 2022</u>	<u>Fair Value</u>	<u>Unfunded Commitments</u>	<u>Redemption Frequency (if currently eligible)</u>	<u>Redemption Notice Period</u>
Common/collective trusts:				
Chevy Chase Trust Company				
ASB Allegiance Real Estate Fund	\$ 22,491,821 ^(a)	\$ -	(a)	(a)
LSV International Value Equity Trust	6,112,276 ^(b)	-	(b)	(b)
NewTower Trust Company				
Multi-employer Property Trust Class E	4,135,695 ^(c)	-	(c)	(c)
National Investment Services				
Intermediate Fixed Income Fund	6,022,684 ^(e)	-	(e)	(e)
Hardman Johnston International Equity Group Trust	7,937,830 ^(f)	-	(f)	(f)
Wellington Multiple Collective Investment Funds Trust	351,388 ^(d)	-	(d)	(d)
Boyd Watterson State Government Fund, LP	7,369,700 ^(g)	-	(g)	(g)
Intercontinental U.S. Real Estate Investment Fund, LLC	7,947,169 ^(h)	-	(h)	(h)
Victory Trivalent International Small Cap Collective Fund	5,226,380 ⁽ⁱ⁾	-	(i)	(i)

MIDWEST PENSION PLAN
Notes to Financial Statements (Continued)
December 31, 2022 and 2021

Note 4 - Fair Value Measurements (Continued)

<u>December 31, 2022</u>	<u>Fair Value</u>	<u>Unfunded Commitments</u>	<u>Redemption Frequency (if currently eligible)</u>	<u>Redemption Notice Period</u>
Hedge funds:				
GCM Grosvenor Opportunistic Credit Fund V	\$ 3,561,245 ^(j)	\$ -	(j)	(j)
GCM Grosvenor Secondary Opportunities Feeder Fund II	5,863,945 ^(k)	2,636,841	(k)	(k)
Corbin ERISA Opportunity Fund	3,732,886 ^(l)	-	(l)	(l)
Hamilton Lane Secondary Feeder Fund	2,681,168 ^(m)	1,429,286	(m)	(m)
Glouston Private Equity Opportunities Fund VI	3,222,159 ⁽ⁿ⁾	928,000	(n)	(n)

MIDWEST PENSION PLAN
Notes to Financial Statements (Continued)
December 31, 2022 and 2021

Note 4 - Fair Value Measurements (Continued)

<u>December 31, 2021</u>	<u>Fair Value</u>	<u>Unfunded Commitments</u>	<u>Redemption Frequency (if currently eligible)</u>	<u>Redemption Notice Period</u>
Common/collective trusts:				
Chevy Chase Trust Company ASB Allegiance Real Estate Fund	\$ 20,522,973 ^(a)	\$ -	(a)	(a)
LSV International Value Equity Trust	8,629,068 ^(b)	-	(b)	(b)
NewTower Trust Company Multi-employer Property Trust Class E	3,836,098 ^(c)	-	(c)	(c)
National Investment Services Intermediate Fixed Income Fund	11,159,963 ^(e)	-	(e)	(e)
Hardman Johnston International Equity Group Trust	10,406,660 ^(f)	-	(f)	(f)
Wellington Multiple Collective Investment Funds Trust	1,932,300 ^(d)	-	(d)	(d)
Boyd Watterson State Government Fund, LP	6,950,396 ^(g)	-	(g)	(g)
Intercontinental U.S. Real Estate Investment Fund, LLC	7,449,631 ^(h)	-	(h)	(h)
Victory Trivalent International Small Cap Collective Fund	6,623,854 ⁽ⁱ⁾	-	(i)	(i)

MIDWEST PENSION PLAN
Notes to Financial Statements (Continued)
December 31, 2022 and 2021

Note 4 - Fair Value Measurements (Continued)

<u>December 31, 2021</u>	<u>Fair Value</u>	<u>Unfunded Commitments</u>	<u>Redemption Frequency (if currently eligible)</u>	<u>Redemption Notice Period</u>
Hedge funds:				
GCM Grosvenor Opportunistic Credit Fund V	\$ 3,580,001 ^(j)	\$ -	(j)	(j)
GCM Grosvenor Secondary Opportunities Feeder Fund II	5,188,599 ^(k)	-	(k)	(k)
Corbin ERISA Opportunity Fund	3,909,269 ^(l)	-	(l)	(l)
Hamilton Lane Secondary Feeder Fund	2,286,693 ^(m)	-	(m)	(m)
Glouston Private Equity Opportunities Fund VI	2,467,151 ⁽ⁿ⁾	-	(n)	(n)

MIDWEST PENSION PLAN
Notes to Financial Statements (Continued)
December 31, 2022 and 2021

Note 4 - Fair Value Measurements (Continued)

-
- (a) A commingled equity real estate fund with the objective of producing, over a 3 to 5-year period, a target rate of return greater than the NCREIF NFI-ODCE Index. Liquidity from this plan is subject to a withdrawal queue, whereas the fund can hold the Plan's investment for a period of up to one year from the date of the withdrawal request. The Plan has no unfunded commitments to invest additional capital in this fund.
- (b) A commingled international large cap value fund with the objective of producing, over a 3 to 5-year period, a target rate of return greater than the MSCI EAFE Index without the assumption of excessive risk as measured by the volatility of quarterly returns. The fund is liquid on a monthly basis with 7 days' advance notice. The Plan has no unfunded commitments to invest additional capital in this fund.
- (c) A commingled equity real estate fund with the objective of producing a target rate of return greater than the NCREIF NFI-ODCE Index. Liquidity from this fund is subject to a withdrawal queue, whereas the fund can hold the Plan's investment for a period of up to one year from the date of the withdrawal request. The Plan has no unfunded commitments to invest additional capital in this fund.
- (d) A global tactical asset allocation fund with the objective of producing, over a 3 to 5-year period, a target rate of return greater than the sum of 65% of the MSCI All Country World Index and 35% of the Barclays Aggregate Index, without the assumption of excessive risk as measured by the volatility of quarterly returns. The fund is liquid on a monthly basis with 30 days' advance notice. The Plan has no unfunded commitments to invest additional capital in this fund.
- (e) A comingled fixed income security consisting primarily of U.S. government, corporate and mortgage-backed securities. The long-term objective is to outperform the Bloomberg Barclays Intermediate Government Credit Index over a full market cycle. Investments in the Plan may also include domestic preferred stocks, asset-backed securities and short-term investment funds. The fund is liquid on a monthly basis with 3 days' advance notice. The Plan has no unfunded commitments to invest additional capital in this fund.
- (f) The fund is an investment adviser registered with the Securities and Exchange Commission under the Investment Advisers Act of 1940. The Trustee of the fund is the Bank of New York Mellon. The fund invests primarily in publicly traded foreign securities. The fund is liquid on a monthly basis with 10 days' advance notice. The Plan has no unfunded commitments to invest additional capital in this fund.
- (g) The fund is an open-end, commingled real estate investment fund and is intended to have an indefinite term. The objective is to target 8%-10% net total returns annualized over one year. The fund is liquid on a quarterly basis with 90 days' advance notice. The Plan has no unfunded commitments to invest additional capital in this fund.
- (h) A private equity fund of funds with an objective to target 10% gross returns. The fund is liquid on a quarterly basis with 90 days' advance notice. The Plan has no unfunded commitments to invest additional capital in this fund.
- (i) The fund seeks to provide long-term growth of capital in the fund by investing primarily in equity securities of small-capitalization companies in countries represented in the S&P® Developed ex-U.S. SmallCap Index. The fund is liquid on a daily basis. The Plan has no unfunded commitments to invest additional capital in this fund.

MIDWEST PENSION PLAN
Notes to Financial Statements (Continued)
December 31, 2022 and 2021

Note 4 - Fair Value Measurements (Continued)

- (j) A multi-strategy hedge fund of funds. Substantially all of the assets of the fund that are available for investment have been and shall be invested in GCM Grosvenor Opportunistic Credit Master Fund V, L.P. (the "Master Fund"), a Cayman Islands exempted limited partnership that has the same investment objective as the fund. The fund has an objective of LIBOR + 750 basis points. The Master Fund does not permit voluntary redemptions. However, a shareholder may cause part or all of such shareholder's participating shares to cease participating in new investments made by the Master Fund by converting some or all of its participating shares into liquidating shares as of December 31, of any fiscal year, upon not less than 90 days' prior written notice to the fund.
- (k) A private equity fund of funds with an absolute objective to seek substantial outperformance over public equity. The fund is liquid on a quarterly basis with 90 days' advance notice. The Plan has \$2,636,841 of unfunded commitments to invest additional capital in this fund.
- (l) Corbin ERISA Opportunity Fund, L.P. seeks to achieve a substantial return on capital through opportunistic investments primarily in a broad range of public and private credit instruments, with an expected emphasis on corporate bonds and loans, asset-backed securities, mortgage-backed securities, commercial real estate, structured credit and collateralized loan obligations, though at times the fund may have exposure to other assets, instruments and markets. The fund is managed in accordance with ERISA standards. The net asset value per unit is determined as of each quarterly valuation date. The investment is redeemable quarterly upon 65 days' written notice and there are no unfunded commitments. Liquidity is subject to a withdrawal queue, whereas the partnership can hold the Plan's investment for a period of up to two years from the date of the withdrawal request. There are no unfunded commitments.
- (m) The fund invests substantially all its assets in Hamilton Lane Secondary Fund V LP, which in turn invests solely in HLSF V Holdings LP. The strategy is focused on identifying secondary opportunities where they have a distinct competitive advantage and purchasing high quality assets managed by leading general partners at attractive prices. The fund is liquid on a quarterly basis with 90 days' advance notice. The Plan has \$1,429,286 of unfunded commitments to invest additional capital in this fund.
- (n) A private equity fund of funds with the objective to make secondary investments. The fund is liquid on a quarterly basis with 90 days' advance notice. The Plan has \$928,000 of unfunded commitments to invest additional capital in this fund.

MIDWEST PENSION PLAN
Notes to Financial Statements (Continued)
December 31, 2022 and 2021

Note 5 - Actuarial Present Value of Accumulated Plan Benefits

Accumulated plan benefits are those future periodic payments that are attributable under the Plan's provisions to the service that eligible employees have rendered. Accumulated plan benefits include benefits expected to be paid to:

- (a) retired or terminated vested employees or their spouses,
- (b) spouses of employees who have died, and
- (c) present employees or their spouses.

The accumulated plan benefits for active eligible employees are based on their years of service, times the weekly contribution on the date as of which the benefit information is presented. Benefits payable under all circumstances, i.e., retirement, death, disability, and termination of employment are included, to the extent they are deemed attributable to eligible employee service rendered to the valuation date.

The actuarial present value of accumulated plan benefits is determined by the Plan's consulting actuary 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.

The significant actuarial assumptions used in the valuation as of January 1, 2022 are as follows:

Mortality:	
Healthy participant	RP-2014 Blue Collar Mortality Tables adjusted to reflect Mortality Improvement Scale MP-2015 from the 2006 base year and projected forward using MP-2015 on a generational basis, with employee rates before commencement and healthy annuitant rates after benefit commencement.
Investment return:	
Ongoing valuation	7.0% for 2022.
Expenses:	
	Average of actual expenses paid in the prior two years, increased by 2% and assumed to be payable in the middle of the year.

MIDWEST PENSION PLAN
Notes to Financial Statements (Continued)
December 31, 2022 and 2021

Note 5 - Actuarial Present Value of Accumulated Plan Benefits (Continued)

Withdrawal rates
at termination:

Rates at termination vary with age.
Sample rates are as follows:

Termination	
Age	Rate
20	30.0%
25	30.0
30	20.0
35	20.0
40 plus	10.0

Retirement rates:

Retirement rates vary by age as follows:

Retirement	
Age	Rate
55-59	1.0%
60-64	5.0
65-69	20.0
70 plus	100.0

Percent married:

80% (female spouse assumed to be three years younger, male spouse assumed to be three years older).

Actuarial cost method:

Unit credit actuarial cost method.

Valuation 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 market return, and is recognized over a five-year period. The actuarial value is further adjusted, if necessary, to be within 20% of the market value.

MIDWEST PENSION PLAN
Notes to Financial Statements (Continued)
December 31, 2022 and 2021

Note 5 - Actuarial Present Value of Accumulated Plan Benefits (Continued)

The actuarial present value of accumulated plan benefits as of January 1, 2022 is as follows:

	<u>January 1, 2022</u>
Vested benefits:	
Participants currently receiving payments	\$ 80,601,045
Other participants	<u>56,479,954</u>
	137,080,999
Nonvested benefits	<u>947,170</u>
Total actuarial present value of accumulated plan benefits	<u>\$ 138,028,169</u>

An analysis of changes in accumulated plan benefits for the year ended January 1, 2022 is as follows:

	<u>January 1, 2022</u>
Actuarial present value of accumulated plan benefits at beginning of year	<u>\$ 134,637,484</u>
Increase (decrease) during the year attributed to:	
Change in average discount period	9,753,488
Benefits paid	(8,023,110)
Benefits accumulated, net experience gain or loss, changes in data	(1,667,636)
Administrative expenses	(1,327,880)
Plan amendments	-
Change in assumptions	<u>4,655,823</u>
Net increase	<u>3,390,685</u>
Actuarial present value of accumulated plan benefits at end of year	<u>\$ 138,028,169</u>

MIDWEST PENSION PLAN
Notes to Financial Statements (Continued)
December 31, 2022 and 2021

Note 5 - Actuarial Present Value of Accumulated Plan Benefits (Continued)

The following changes in assumptions and methods were made for the January 1, 2022 valuation:

- For current liability purposes, the interest rate was changed from 2.08% to 1.91% in accordance with IRS guidance. (The statutory mortality tables have also been updated as required by law).
- For withdrawal liability purposes, the interest rates were changed from 1.62% for the first 20 years and 1.40% thereafter to 2.40% for the first 20 years and 2.11% thereafter.
- For ASC Topic 960 purposes, the interest rate was changed from 7.50% per year to 7.00% per year (net of investment-related administrative expenses).

The Plan's actuary has advised that the Plan is being funded at a level sufficient to meet the minimum funding standard requirements of ERISA and that there was no accumulated funding deficiency as of January 1, 2022.

The Plan is not considered endangered, seriously endangered, or critical as those terms are defined in the Pension Protection Act of 2006 for the Plan year beginning January 1, 2022.

Note 6 - Pension Plan for Employees

The Plan's employees participate in the Central States Joint Board and Allied Organizations Staff Pension Plan, a multiple employer defined benefit plan, and the Plan. Pension expense for the years ended December 31, 2022 and 2021 amounted to \$83,088 and \$71,088, respectively.

MIDWEST PENSION PLAN
Notes to Financial Statements (Continued)
December 31, 2022 and 2021

Note 7 - Party-in-Interest Transactions

For the purpose of ERISA, the Central States Joint Board, AFL-CIO (the "Joint Board") is a party-in-interest to the Midwest Pension Plan. Since the Plan and Joint Board exist in the same premises, utilizing each other's resources and personnel to effectuate cost-savings and to minimize duplication of efforts, interfund relationships have been established on a continuing basis. The expenses allocated by the Joint Board to the Plan for the years ended December 31, 2022 and 2021 amounted to \$67,756 and \$80,400, respectively. The Plan had amounts due to the Joint Board of \$(21,111) and \$(45,912) as of December 31, 2022 and 2021, respectively. The Plan also owed the Central States Joint Board Health and Welfare Plan \$(2,742) and \$(2,742) as of December 31, 2022 and 2021, respectively. The Plan also owed the International Union of Allied, Novelty and Production Workers, AFL-CIO \$(3,419) and \$(3,419) as of December 31, 2022 and 2021, respectively.

The Plan leases its premises from a related party, the Joint Board. (See Note 12.)

Note 8 - Plan Termination

Upon plan termination, the accrued benefit of each participant and beneficiary shall be fully vested and shall be payable to the extent that plan assets, after the expenses of liquidation, are sufficient to meet the benefit liabilities. The assets will be allocated according to the following order of priority:

First, to provide pensions that became payable (or would have become payable had an employee retired and been eligible for pension) three or more years before the Plan termination date;

Second, to provide pensions that became payable (or would have become payable had an employee retired and been eligible for pension) within the three-year period preceding the Plan termination date; and

Third, to provide pensions to all other participants in covered employment when the Plan terminates.

If plan assets are insufficient to meet all benefit liabilities at the Plan termination date, pensions will be reduced to the extent necessary, but not below the guaranteed amounts as specified by the Pension Benefit Guaranty Corp.

MIDWEST PENSION PLAN
Notes to Financial Statements (Continued)
December 31, 2022 and 2021

Note 9 - Tax Status

The Internal Revenue Service (the "IRS") has determined, and informed the Plan by a letter dated September 17, 2015, that the Plan is qualified under Section 401(a) of the Internal Revenue Code (the "IRC"), and the Trust established under the Plan is exempt from federal income taxes under Section 501(a) of the IRC. The Plan has been amended since receiving the determination letter. However, the plan administrator believes that the Plan is designed and is currently being operated in compliance with the applicable requirements of the IRC.

Accounting principles generally accepted in the United States of America require plan management to evaluate tax positions taken by the Plan and recognize a tax liability (or asset) if the Plan has taken an uncertain position that more likely than not would not be sustained upon examination by the Internal Revenue Service. The plan administrator has analyzed the tax positions taken by the Plan, and has concluded that as of December 31, 2022, there are no uncertain positions taken or expected to be taken that would require recognition of a liability (or asset) or disclosure in the financial statements. Employee benefit plans are subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress for the Plan. The plan administrator believes it is no longer subject to income tax examinations for years prior to 2019.

Note 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 that such changes could materially affect the amounts reported in the statements of net assets available for benefits.

Plan contributions are made and the actuarial present value 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.

MIDWEST PENSION PLAN
Notes to Financial Statements (Continued)
December 31, 2022 and 2021

Note 11 - Employers' Contributions - Withdrawal Liability

The Plan is subject to the provisions of the Multi-employer Pension Plan Amendments Act of 1980 ("MPPAA"), as such, the Plan is required to determine if a withdrawing employer has a withdrawal liability under the computation method defined in the Plan. If it is determined that a withdrawing employer has a withdrawal liability, the Plan is required to issue a demand letter to such employer assessing it for the amount due. Such assessments may be made against employers who withdraw either partially or completely.

During the year December 31, 2021, the Plan assessed one withdrawing employer \$270,016, which represented the employers' shares of the Plan's unfunded liabilities as determined by the Plan's consulting actuary. One employer paid a lump sum of \$175,000 during 2021 in full settlement.

During the year ended December 31, 2022, the Plan assessed two withdrawing employers \$3,439,546, which represented the employers' shares of the Plan's unfunded liabilities as determined by the Plan's consulting actuary. This is net of a present value adjustment which reduced the overall receivables by \$19,494 as of December 31, 2022.

As of December 31, 2022, three employers had agreed to pay withdrawal liability payments totaling \$3,519,484. These payments are due on a quarterly or annual basis through 2041.

Note 12 - Leases

The Plan has one operating lease for office space with the Union that expires in 2024. This lease generally contains renewal options for 3 years. Termination of the lease is generally prohibited unless there is a violation under the lease agreement. The remaining lease term is 5 years. The discount rate used was 1.26%.

MIDWEST PENSION PLAN
Notes to Financial Statements (Continued)
December 31, 2022 and 2021

Note 12 - Leases (Continued)

Future minimum lease payments, including the Plan's estimated share of real estate taxes, and reconciliation to the statement of net assets available for benefits at December 31, 2022, are as follows:

<u>Years Ending December 31:</u>	<u>Operating Lease</u>
2023	\$ 43,445
2024	43,445
2025	43,995
2026	43,995
2027	<u>40,971</u>
Total future undiscounted lease payments	215,851
Less present value discount	<u>(6,714)</u>
Lease liabilities	<u>\$ 209,137</u>

Rent expense was \$42,370 and \$40,980 for the years ended December 31, 2022 and 2021, respectively. The 2022 and 2021 expense includes \$6,075 and \$6,789, respectively, billed for the Plan's share of real estate taxes.

The minimum rentals to be collected under the lease as of December 31, 2021 are as follows:

<u>Years Ending December 31,</u>	<u>Amount</u>
2022	\$ 36,295
2023	36,295
2024	<u>33,270</u>
Total	<u>\$ 105,860</u>

MIDWEST PENSION PLAN
Notes to Financial Statements (Continued)
December 31, 2022 and 2021

Note 13 - Reconciliation of Financial Statements to Form 5500
Annual Return/Report of Employee Benefit Plan

In accordance with U.S. Department of Labor ERISA Regulations Sec. 2520.103-1(b)(3), set forth below is a reconciliation of amounts appearing in the audited financial statements to amounts appearing on Form 5500, Schedule H, "Financial Information":

2022

Reconciliation of Total Administrative Expenses

Amounts per Page 5 of the financial statements:

Investment expenses	\$ 917,541
Administrative expenses	<u>1,388,226</u>

Amount per Form 5500, Schedule H, Page 3,
Part II, Item 2i(5)

\$ 2,305,767

MIDWEST PENSION PLAN
(Supplemental Schedules)
Schedule of Assets (Held at End of Year)
December 31, 2022

Form 5500, Schedule H, Line 4(i)
E.I.N.: 36-6512748
Plan No.: 001

	Shares	Cost	Fair Value
<u>Common stocks:</u>			
ADOBE SYSTEMS INC	1,566	\$ 418,143	\$ 527,006
AECOM TECHNOLOGY	2,487	103,335	211,221
AGREE REALTY CORP	1,659	112,351	117,673
ALCON INC	3,020	172,083	207,021
ALIGHT INC	18,293	184,582	152,929
ALIGN TECHNOLOGY INC	811	275,802	171,040
ALPHABET INC CL C	3,958	416,418	351,193
AMAZON.COM INC	2,673	370,604	224,532
AMERICAN WATER WORKS CO.	517	15,914	78,801
AMERIPRISE FINANCIAL INC	880	96,575	274,006
AMGEN INC	1,050	170,702	275,772
AMN HEALTHCARE SERVICES INC	1,116	85,932	114,747
ANSYS INC	1,020	116,544	246,422
ANTERO RESOURCES CORP	3,072	91,821	95,201
API GROUP	4,678	96,423	87,993
ARCOSA INC	2,171	62,031	117,972
ASHLAND INC	1,316	105,994	141,509
ATLASSIAN CORP	939	173,295	120,831
ATMOS ENERGY CORP	2,180	233,319	244,313
AUTODESK INC	2,927	656,693	546,968
AVANTOR INC	6,033	121,524	127,236
BATH & BODY WORKS	4,231	219,090	178,294
BLACKSTONE GROUP INC	2,560	317,024	189,926
BROWN-FORMAN CORP CLASS B STOCK	2,267	153,036	148,897
CABOT OIL & GAS	8,960	159,409	220,147
CAPITAL ONE FINANCIAL CO	2,490	228,397	231,470
CATALENT INC	1,323	38,629	59,548
CHAMPIONX CORPORATION	6,220	134,431	180,318
CHART INDUSTRIES INC	550	34,982	63,377
CHEWY INC	5,241	340,717	194,336
CHURCHILL DOWNS INC	843	90,640	178,235
CINCINNATI FINANCIAL CORP	2,220	178,062	227,306
CINTAS CORPORATION	898	308,981	405,555
COCA COLA CO	4,150	180,943	263,982
COMMERCE BANCSHARES INC	2,226	107,638	151,524

See independent auditor's report.

MIDWEST PENSION PLAN
(Supplemental Schedules)
Schedule of Assets (Held at End of Year)
December 31, 2022

Form 5500, Schedule H, Line 4(i)
E.I.N.: 36-6512748
Plan No.: 001

	<u>Shares</u>	<u>Cost</u>	<u>Fair Value</u>
<u>Common stocks (Continued):</u>			
CONCENTRIX CORP	1,183	91,276	157,528
CONSTELLATION BRANDS INC	850	191,275	196,988
CORTEVA INC	5,980	198,580	351,504
COSTCO WHOLESALE CORP	725	285,310	330,963
CROWN CASTLE INC	1,600	257,680	217,024
CULLEN/FROST BANKERS INC	1,530	121,065	204,561
DANAHER CORP	1,150	118,647	305,233
DEXCOM INC	2,286	198,232	258,867
EAGLE MATERIALS INC	807	83,605	107,210
ECOLAB INC	1,210	256,979	176,128
EDWARDS LIFESCIENCES CORP	4,337	377,487	323,584
EQT CORPORATION	2,678	62,972	90,597
EQUITY LIFESTYLE PROPERTIES	2,294	122,412	148,192
ESTEE LAUDER	1,580	411,943	392,014
EURONET WORLDWIDE INC	1,361	124,418	128,451
EXPEDIA INC	1,124	167,174	98,462
EXPRO GROUP HLDINGS NV	5,968	109,436	108,200
FERGUSON PLC NEW	1,450	129,726	184,107
FIRST AMERICAN FINANCIAL CORP	1,723	95,114	90,182
FRONTIER COMMUNICATIONS PARE	4,556	135,748	116,087
GENERAC HOLDINGS INC	1,451	163,953	146,058
GENERAL DYNAMICS CORP	890	74,678	220,818
GENPACT LTD	3,281	128,545	151,976
HERC HOLDINGS, INC	1,669	134,907	219,590
HOLOGIC INC	1,931	80,046	144,458
HOME BANCSHARES INC	5,981	128,870	136,307
HONEYWELL INTERNATIONAL INC	1,160	261,285	248,588
IAA SPINCO INC	1,845	59,297	73,800
ICON PLC	872	73,315	169,386
IDEX CORP	1,483	313,039	338,613
INGERSOLL RAND INC	3,507	103,102	183,241
INTERNATIONAL SEAWAYS, INC.	2,658	44,008	98,399
INTUIT	992	376,987	386,106
INTUITIVE SURGICAL INC	1,827	431,777	484,794
ITT INC	1,436	118,975	116,460

See independent auditor's report.

MIDWEST PENSION PLAN
(Supplemental Schedules)
Schedule of Assets (Held at End of Year)
December 31, 2022

Form 5500, Schedule H, Line 4(i)
E.I.N.: 36-6512748
Plan No.: 001

	<u>Shares</u>	<u>Cost</u>	<u>Fair Value</u>
<u>Common stocks (Continued):</u>			
JAZZ PHARMACEUTICALS PLC	698	92,315	111,198
JB HUNT TRANSPORT SVCS INC	820	73,502	142,975
KADANT INC	1,027	48,063	182,426
KORN/FERRY INTERNATIONAL	1,217	54,067	61,605
KOSMOS ENERGY LTD	7,302	41,896	46,441
L3 HARRIS TECHNOLOGIES INC	899	193,789	187,181
LCI INDUSTRIES NEW	572	65,217	52,881
LENNAR CORP CLASS B	107	1,532	8,001
LENNAR CORP	2,800	62,830	253,400
LEONARDO DRS INC	7,174	83,543	91,684
LIBERTY BROADBAND CORP	1,254	109,660	95,643
LIBERTY MEDIA CORP	5,345	176,624	209,150
LITTLEFUSE INC	453	88,743	99,751
LULULEMON ATHLETICA INC	2,331	383,307	350,123
LUMENTUM HOLDINGS INC	-	-	-
MARTIN MARIETTA MATERIALS	760	106,062	256,857
MASTERCARD INC	1,218	435,038	423,535
MATCH GROUP INC	4,044	450,666	167,786
MEDTRONIC PLC	2,220	174,570	172,538
MERCK & CO INC	2,300	204,666	255,185
MICHELIN (CGDE) UNSPONSORED ADR	12,800	212,726	177,485
MICROCHIP TECHNOLOGY INC	3,610	100,750	253,603
MICROSOFT CORP	3,366	501,940	807,234
MITSUBISHI UFJ FINL GROUP INC	23,250	112,979	155,078
NATIONAL INSTRUMENTS CORP	3,941	165,874	145,423
NEOGEN CORPORATION	3,686	56,691	56,138
NEXSTAR MEDIA GROUP INC	623	67,558	109,044
NOMAD FOODS LTD	6,380	125,205	109,991
NVIDIA CORP	1,534	355,215	224,179
NXP SEMICONDUCTORS NV	1,613	307,702	254,902
OPTION CARE HEALTH INC	3,094	96,556	93,098
OSHKOSH CORPORATION	1,700	189,447	149,923
PACKAGING CORP OF AMERICA	672	79,571	85,956
PARKER HANNIFAN CORP	980	174,580	285,180
PAYPAL HOLDINGS INC	1,110	31,185	79,054

See independent auditor's report.

MIDWEST PENSION PLAN
(Supplemental Schedules)
Schedule of Assets (Held at End of Year)
December 31, 2022

Form 5500, Schedule H, Line 4(i)
E.I.N.: 36-6512748
Plan No.: 001

	<u>Shares</u>	<u>Cost</u>	<u>Fair Value</u>
<u>Common stocks (Continued):</u>			
PHILLIPS 66	1,750	65,493	182,140
PNC FINANCIAL SERVICES	1,420	183,861	224,275
POPULAR INC	1,397	56,775	92,649
POST HOLDINGS INC	1,188	88,968	107,229
PRINCE GEORGE	1,666	98,449	132,031
PROCTER & GAMBLE CO	1,520	209,835	230,371
PROSPERITY BANCSHARES INC	1,921	126,587	139,618
PULTEGROUP INC	3,393	150,618	154,483
QUALCOMM INC	2,090	161,789	229,775
RAYMOND JAMES FINANCIAL INC	1,043	14,406	111,445
REINSURANCE GROUP OF AMERICA INC	841	71,525	119,498
RELIANCE STEEL & ALUMINUM	728	52,142	147,376
REXFORD INDUSTRIAL REALTY INC	1,506	98,396	82,288
ROGERS CORP	526	61,743	62,773
ROPER TECHNOLOGIES INC	867	354,818	374,622
RPM INTL INC	2,370	154,732	230,957
S&P GLOBAL INC	781	292,646	261,588
SBA COMMUNICATIONS CORP	942	267,209	264,052
SERVICENOW INC	1,124	571,867	436,415
SHOPIFY INC. CLASS A	4,189	358,699	145,400
SIGNATURE BANK	810	92,540	93,328
SKECHERS USA INC-CL A	3,087	105,388	129,500
SKYLINE CORP COM	1,999	62,470	102,968
SONY CORP SPONSORED ADR	2,900	151,864	221,212
SPECTRUM BRANDS HLDGS	813	56,082	49,528
SUN COMMUNITIES INC	1,326	142,997	189,618
SYNNEX CORP	2,169	163,205	205,426
SYSCO CORP	2,406	188,361	183,939
TELEDYNE TECHNOLOGIES INC	395	58,977	157,964
TELEPHONE & DATA	5,805	121,058	60,894
TENET HEALTHCARE CORP	1,834	105,353	89,481
THERMO FISHER SCIENTIFIC INC	775	358,115	426,785
TRACTOR SUPPLY COMPANY	549	69,514	123,509
TRAVEL LEISURE CO	3,255	129,594	118,482

See independent auditor's report.

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December 31, 2022

Form 5500, Schedule H, Line 4(i)
E.I.N.: 36-6512748
Plan No.: 001

	<u>Shares</u>	<u>Cost</u>	<u>Fair Value</u>
<u>Common stocks (Continued):</u>			
UTAH MEDICAL PRODUCTS	720	64,881	72,382
VALARIS LTD	1,646	83,606	111,303
VALVOLINE INC	4,188	88,880	136,738
VEEVA SYSTEM INC CLASS A	1,440	363,973	232,387
VERADIGM INC	8,070	129,606	142,355
VISTRA	5,012	101,917	116,278
VONTIER CORP	4,791	147,882	92,610
WEX INC	993	65,152	162,504
XCEL ENERGY INC	3,480	235,501	243,983
XYLEM INC	2,230	188,180	246,571
ZOETIS INC	2,278	354,061	333,839
		<u> </u>	<u> </u>
Total common stocks		<u>\$ 25,097,711</u>	<u>\$ 28,158,994</u>

See independent auditor's report.

MIDWEST PENSION PLAN
(Supplemental Schedules)
Schedule of Assets (Held at End of Year) (Continued)
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Form 5500, Schedule H, Line 4(i)
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	Interest Rate	Maturity Date	Principal	Cost	Fair Value
<u>Corporate and other bonds and notes:</u>					
ABERCROMBIE & FITCH MANA	8.750%	07/15/25	\$ 130,000	\$ 144,300	\$ 127,395
AIR CANADA	10.500%	07/15/26	35,000	39,725	35,343
ALLISON TRANSMISSION INC	5.875%	06/01/29	139,000	142,873	130,535
AMC NETWORKS INC	5.000%	04/01/24	22,000	22,040	20,570
AMC NETWORKS INC	4.750%	08/01/25	75,000	77,014	57,000
AMC NETWORKS INC	4.250%	02/15/29	80,000	79,950	49,848
AMN HEALTHCARE INC	4.625%	10/01/27	144,000	139,616	132,778
AMERICAN AIRLINES	5.750%	04/20/29	65,000	66,799	59,292
AMERIGAS PART/FIN CORP	5.625%	05/20/24	115,000	114,844	111,628
ASBURY AUTOMOTIVE GROUP	4.750%	03/01/30	98,000	93,451	81,962
ATI INC	5.875%	12/01/27	65,000	65,163	62,159
ATI INC	5.125%	10/01/31	70,000	68,513	61,642
AVIS BUDGET CAR/FINANCE	5.375%	03/01/29	135,000	140,996	115,484
BEAZER HOMES USA INC	5.875%	10/15/27	135,000	141,413	118,086
BOYNE USA INC	4.750%	05/15/29	70,000	71,312	61,953
BRINKER INTL INC	3.875%	05/15/23	181,000	175,201	179,266
BUCKEYE PARTNERS LTD	4.150%	07/01/23	90,000	88,650	88,421
BUCKEYE PARTNERS LTD	4.125%	12/01/27	60,000	55,725	52,494
CCO HLDGS LLC/CAP CORP	n/a	n/a	140,000	123,900	111,531
CAESARS RESORT	5.750%	07/01/25	125,000	128,400	122,364
CARNIVAL CORP	7.200%	10/01/23	171,000	178,010	168,649
CARPENTER TECHNOLOGY	6.375%	07/15/28	130,000	135,787	123,634
CARPENTER TECHNOLOGY CARPENTER TECHNOLOGY	7.625%	03/15/30	45,000	45,000	45,108
CEDAR FAIR/CAN/MAGNUM/MI	6.500%	10/01/28	130,000	138,450	125,775
CENTURYLINK INC	7.650%	03/15/42	230,000	249,397	152,925
CHENIERE ENERGY PARTNERS	4.500%	10/01/29	100,000	105,125	89,978
CINEMARK USA INC	8.750%	05/01/25	107,000	109,618	108,051
COGENT COMMUNICATIONS GR	7.000%	06/15/27	85,000	84,567	83,294
CRESTWOOD MIDSTREAM PARTNERS	5.750%	04/01/25	125,000	127,214	121,600
DT MIDSTREAM INC	4.375%	06/15/31	23,000	23,000	19,295
DANA INCORPORATED	5.625%	06/15/28	134,000	138,465	121,845
DAVITA INC	4.625%	06/01/30	139,000	141,972	111,575
DELTA AIR LINES INC	7.375%	01/15/26	85,000	87,444	86,848
DISH DBS CORP	5.875%	11/15/24	132,000	135,366	122,658
RR DONNELLEY & SONS CO	6.500%	11/15/23	175,000	179,808	172,935
ENCOMPASS HEALTH CORPORATION	4.500%	02/01/28	127,000	127,453	115,367
ENDEAVOR ENERGY RESOURCE	5.750%	01/30/28	155,000	163,444	148,798
ENERGY TRANSFER EQUITY LP	7.125%	05/15/30	134,000	114,034	111,890

See independent auditor's report.

MIDWEST PENSION PLAN
(Supplemental Schedules)
Schedule of Assets (Held at End of Year) (Continued)
December 31, 2022

Form 5500, Schedule H, Line 4(i)
E.I.N.: 36-6512748
Plan No.: 001

	Interest Rate	Maturity Date	Principal	Cost	Fair Value
<u>Corporate and other bonds and notes (Continued):</u>					
FORD MOTOR CO	9.625%	04/22/30	50,000	68,879	56,562
FRONTIER COMMUNICATIONS CORP	5.000%	05/01/28	135,000	137,101	117,223
GLP CAPITAL LP / FIN II	5.750%	06/01/28	100,000	92,193	97,998
G-III APPAREL GROUP LTD	7.875%	08/15/25	133,000	145,402	124,049
GLOBAL PART/GLP FINANCE	7.000%	08/01/27	90,000	91,783	85,467
GLOBAL PART/GLP FINANCE	n/a	01/15/29	19,000	19,000	17,405
GOODYEAR TIRE & RUBBER CO	7.000%	03/15/28	80,000	92,038	79,657
GRAHAM HOLDINGS CO	5.750%	06/01/26	83,000	83,750	81,556
GRAY TELEVISION INC	5.875%	07/15/26	115,000	118,238	102,456
GRAY TELEVISION	2.644%	01/02/26	25,489	25,489	24,884
GREAT LAKES DREDGE & DOCK	5.250%	06/01/29	80,000	82,839	62,192
GRIFFON CORPORATION	5.750%	03/01/28	135,000	138,394	123,525
H&E EQUIPMENT SERVICES INC	3.875%	12/15/28	135,000	133,777	114,992
HAWAIIAN BRAND INTELLECT	5.750%	01/20/26	100,000	98,500	90,500
HERC HOLDINGS, INC	5.500%	07/15/27	70,000	71,649	65,293
HESS MIDSTREAM	5.125%	06/15/28	135,000	139,895	124,876
HOLLY ENERGY PARTNERS LP	5.000%	02/01/28	120,000	123,575	109,261
HOSPITALITY PROPERTIES TRUST	4.500%	03/15/25	175,000	175,992	150,946
HOWARD HUGHES CORP	4.375%	02/01/31	140,000	140,437	113,270
HUGHES SATELITE SYSTEMS	6.625%	08/01/26	132,000	145,295	123,122
ICAHN ENTERPRISES	6.250%	05/15/26	40,000	41,127	38,436
ICAHN ENTERPRISES	4.750%	09/15/24	115,000	118,112	110,239
ICAHN ENTERPRISES	5.250%	05/15/27	12,000	12,240	10,987
IHEARTCOMMUNICATIONS INC	8.375%	05/01/27	95,000	98,563	80,762
L BRANDS INC	5.250%	02/01/28	75,000	78,938	69,649
L BRANDS INC	6.694%	01/15/27	55,000	62,838	54,605
LPL HOLDINGS INC	4.000%	03/15/29	120,000	121,313	104,412
LAMAR MEDIA CORP	4.875%	01/15/29	122,000	129,975	112,018
LIONS GATE CAPITAL HOLD	5.500%	04/15/29	90,000	90,000	52,182
LITHIA MOTORS INC-CL A	4.375%	01/15/31	84,000	67,620	68,343
LIVE NATION ENTERTAINMENT	4.750%	10/15/27	165,000	167,850	147,142
MGM RESORTS INTERNATIONAL	4.750%	10/15/28	140,000	144,507	122,165
MAGNOLIA OIL GAS	6.000%	08/01/26	126,000	126,068	121,905
MARRIOTT OWNERSHIP RESOR	4.750%	01/15/28	115,000	117,546	100,140
MARRIOTT OWNERSHIP RESOR	4.500%	06/15/29	25,000	25,000	20,741
MASTEC INC	4.500%	08/15/28	20,000	20,000	17,946
MATADOR RESOURCES CO.	5.875%	09/15/26	98,000	99,546	94,178
MERCER INTERNATIONAL INC	5.500%	01/15/26	30,000	30,618	28,412
MOZART DEBIT MERGER	3.875%	04/01/29	105,000	90,825	84,512
MURPHY OIL CORPORATION	5.750%	08/15/25	25,000	25,721	24,566
MURPHY OIL USA INC	4.750%	09/15/29	96,000	100,114	87,843
NAVIENT CORP	5.875%	10/25/24	130,000	139,458	125,782
OCEANEERING INTL INC	4.650%	11/15/24	100,000	94,500	95,504

See independent auditor's report.

MIDWEST PENSION PLAN
(Supplemental Schedules)
Schedule of Assets (Held at End of Year) (Continued)
December 31, 2022

Form 5500, Schedule H, Line 4(i)
E.I.N.: 36-6512748
Plan No.: 001

	Interest Rate	Maturity Date	Principal	Cost	Fair Value
<u>Corporate and other bonds and notes (Continued):</u>					
OPEN TEXT HOLDINGS INC	4.125%	02/15/30	40,000	40,000	32,186
OUTFRONT MEDIA CAP LLC/C	4.625%	03/15/30	105,000	101,113	86,869
OUTFRONT MEDIA CAP LLC/C	4.250%	01/15/29	35,000	35,137	29,041
PDC ENERGY INC	6.125%	09/15/24	94,000	94,911	92,647
PDC ENERGY INC	5.750%	05/15/26	24,000	23,170	22,910
PARKLAND CORP/CANADA	4.500%	10/01/29	140,000	140,878	116,815
PARKLAND CORP/CANADA	4.625%	05/01/30	14,000	14,000	11,585
PATTERSON-UTIL ENERGY INC	3.950%	02/01/28	125,000	111,250	110,456
PENN ENTERTAINMENT INC	5.625%	01/15/27	158,000	157,268	143,265
PRECISION DRILLING CORP	6.875%	01/15/29	140,000	144,580	130,341
PROVIDENT FDG/PFG FIN	6.375%	06/15/25	81,000	83,000	70,470
RHP HOTEL PPTY/RHP FINANCE	4.750%	10/15/27	130,000	124,391	117,651
RLJ LODGIN TRUST	4.000%	09/15/29	29,000	29,000	23,509
SS&C TECHNOLOGIES INC	5.500%	09/30/27	61,000	61,199	57,250
SALLY HOLDINGS/SALLY CAP	5.625%	12/01/25	90,000	90,963	86,697
SOUTHWESTERN ENERGY CO	6.450%	01/23/25	118,000	126,386	115,935
SPEEDWAY MOT/SPEEDWAY FD	4.875%	11/01/27	140,000	140,506	124,230
SPRINGLEAF FINANCE CORP	7.125%	03/15/26	125,000	139,388	118,860
SPIRIT AEROSYSTEMS INC	7.500%	04/15/25	123,000	125,282	121,544
STARWOOD PROPERTY TRUST INC	4.750%	03/15/25	80,000	84,439	76,340
STARWOOD PROPERTY TRUST INC	4.375%	01/15/27	25,000	25,000	21,877
SUBURBAN PROPANE PARTNERS	5.000%	06/01/31	55,000	56,937	46,749
SUNOCO LP/FINANCE CORP	4.500%	05/15/29	95,000	96,382	83,097
SUNOCO LP/FINANCE CORP	4.500%	04/30/30	15,000	15,000	13,021
TRI POINTE HOMES INC	5.250%	06/01/27	80,000	87,707	71,418
TTM TECHNOLOGIES	4.000%	03/01/29	13,000	13,000	11,148
TEINE ENERGY LTD	6.875%	04/15/29	130,000	131,499	116,675
TELECOM ITALIA CAPITAL	6.375%	11/15/33	120,000	141,737	98,171
TEVA PHARMACEUTICALS NE	2.800%	07/21/23	110,000	108,900	107,525
TITAN INTERNATIONAL INC	7.000%	04/30/28	165,000	172,056	155,780
UNITED AIRLINES HOLDINGS INC	4.875%	01/15/25	140,000	143,370	133,700
UNITED RENTALS NORTH AM	4.000%	07/15/30	105,000	110,250	89,754
VERMILION ENERGY INC VERMILION ENERGY INC	6.875%	05/01/30	127,000	123,190	116,186
VICI PROPERTIES	4.500%	09/01/26	135,000	134,976	127,159
WYNDHAM WORLDWIDE CORP	6.000%	04/01/27	129,000	140,093	122,432
Total corporate bonds				<u>\$ 11,757,702</u>	<u>\$ 10,450,972</u>

See independent auditor's report.

MIDWEST PENSION PLAN
(Supplemental Schedules)
Schedule of Assets (Held at End of Year) (Continued)
December 31, 2022

Form 5500, Schedule H, Line 4(i)
E.I.N.: 36-6512748
Plan No.: 001

	Interest Rate	Maturity Date	Principal	Cost	Fair Value
<u>Corporate and other bonds and notes (Continued):</u>					
<u>Variable rate bonds:</u>					
AIR CANADA 2015-2B PTT SINKABLE	5.000%	15/15/2023	\$ 70,800	\$ 63,617	\$ 69,305
AIR LEASE CORPORATION VARIABLE	4.125%	12/15/26	135,000	96,005	92,475
AMERICAN AIRLINES 21 SINKABLE BOND	3.950%	07/11/30	120,000	104,700	95,350
JETBLUE 2020 SINKABLE BOND	7.750%	11/15/28	150,351	174,590	145,550
UNITED AIR 2019-2 B PTT	3.500%	05/01/28	145,183	142,197	125,076
Total variable rate bonds				<u>\$ 581,109</u>	<u>\$ 527,756</u>
<u>Loans:</u>					
AADVANTAGE LOYALTY IP LTD.	5.500%	03/24/28	\$ 80,479	\$ 80,479	\$ 79,850
CSC HOLDINGS, LLC	2.627%	04/15/27	67,224	67,224	62,771
MIDWEST GAMING BORROWER	4.875%	05/01/29	26,000	26,000	22,122
RESOLUTE INVESTMENT MANAGERS, INC.	4.750%	04/29/24	80,212	80,212	64,671
Total loans				<u>\$ 253,915</u>	<u>\$ 229,414</u>
<u>Commercial paper:</u>					
RADIAN GROUP INC COMMERCIAL PAPER			60,000	<u>\$ 59,550</u>	<u>\$ 59,122</u>
Total commercial paper				<u>\$ 59,550</u>	<u>\$ 59,122</u>
Total corporate and other bonds and notes				<u>\$ 12,652,276</u>	<u>\$ 11,267,264</u>

See independent auditor's report.

MIDWEST PENSION PLAN
(Supplemental Schedules)
Schedule of Assets (Held at End of Year) (Continued)
December 31, 2022

Form 5500, Schedule H, Line 4(i)
E.I.N.: 36-6512748
Plan No.: 001

	<u>Principal or Shares</u>	<u>Cost</u>	<u>Fair Value</u>
<u>Short-term investment funds:</u>			
GOLDMAN FINANCIAL SQUARE PRIME OBLIGATIONS-A-FD# 462	196,536	\$ 196,536	\$ 196,536
GOLDMAN FINANCIAL SQUARE GOVT-A FD# 465	550,136	550,136	550,136
GOLDMAN FINANCIAL SQUARE PRIME OBLIGATIONS-A-FD# 468	325,380	<u>325,380</u>	<u>325,380</u>
Total short-term investment funds		<u>\$ 1,072,052</u>	<u>\$ 1,072,052</u>
<u>Hedge funds:</u>			
GCM GROSVENOR OPPORTUNISTIC CREDIT FUND V		\$ 3,200,000	\$ 3,561,245
GCM GROSVENOR SECONDARY OPP FEEDER FUND II		3,635,271	5,863,945
CORBIN ERISA OPPORTUNITY FUND		3,160,418	3,732,886
HAMILTON LANE SECONDARY FEEDER FUND		1,868,396	2,681,168
GLOUSTON PRIVATE EQUITY OPPORTUNITIES FUND VI		<u>1,644,921</u>	<u>3,222,159</u>
Total hedge funds		<u>\$ 13,509,006</u>	<u>\$ 19,061,403</u>

See independent auditor's report.

MIDWEST PENSION PLAN
(Supplemental Schedules)
Schedule of Assets (Held at End of Year) (Continued)
December 31, 2022

Form 5500, Schedule H, Line 4(i)
E.I.N.: 36-6512748
Plan No.: 001

	<u>Shares</u>	<u>Cost</u>	<u>Fair Value</u>
<u>Common/collective trusts:</u>			
CHEVY CHASE TRUST COMPANY ASB ALLEGIANCE REAL ESTATE FUND	10,676	\$ 4,776,630	\$ 22,491,821
LSV INTERNATIONAL VALUE EQUITY TRUST	22,417	2,711,724	6,112,276
NATIONAL INVESTMENT SERVICES INTERMEDIATE FIXED INCOME FUND	302	6,158,231	6,022,684
NEWTOWER TRUST COMPANY MULTI-EMPLOYER PROPERTY TRUST CLASS E	267	1,372,939	4,135,695
HARDMAN JOHNSTON INTERNATIONAL EQUITY GROUP TRUST	227,636	9,887,562	7,937,830
INTERCONTINENTAL U.S. REAL ESTATE INVESTMENT FUND LLC	5,275	6,513,621	7,947,169
BOYD WATTERSON STATE GOVERNMENT FUND, LP	6,048	6,233,541	7,369,700
VICTORY TRIVALENT INTERNATIONAL SMALL CAP COLLECTIVE FUND	336,668	6,643,940	5,226,380
WELLINGTON MULTIPLE COLLECTIVE INVESTMENT FUNDS TRUST	22,539	<u>253,305</u>	<u>351,388</u>
Total common/collective trusts		<u>\$ 44,551,493</u>	<u>\$ 67,594,943</u>

See independent auditor's report.

**MIDWEST PENSION PLAN
(Supplemental Schedules)
Schedule of Reportable Transactions
For the year ended December 31, 2022**

Form 5500, Schedule H, Line 4(j)
EIN: 36-6512748
Plan No.: 001

Description of Assets	Purchase Price	Selling Price	Cost	Current Value of Assets on Transaction Date	Net Gain or (Loss)
Series of Transactions					
Exceeding 5% of Plan Assets					
GOLDMAN FINANCIAL SQUARE GOVT-A-FD# 462	\$ 3,651,131	\$ -	\$ 3,651,131	\$ 3,651,131	\$ -
GOLDMAN FINANCIAL SQUARE GOVT-A-FD# 462	-	3,942,428	3,942,436	3,942,428	(8)
GOLDMAN FINANCIAL SQUARE TREASURY OBLIGATIONS-A-FD# 468	4,311,860	-	4,311,860	4,311,860	-
GOLDMAN FINANCIAL SQUARE TREASURY OBLIGATIONS-A-FD# 468	-	4,365,829	4,365,829	4,365,829	-

See independent auditor's report.

Appendix C – Summary of Principal Plan Provisions

This summary of plan provisions is intended to only describe the essential features of the Plan. All eligibility requirements and benefit amounts shall be determined in strict accordance with the plan document itself.

Definitions

Accrued benefit: Sum of the accrued benefit earned prior to January 1, 2010 plus the accrued benefit earned after June 1, 2012. If a participant has more than 35 years of credited service, the 35 years resulting in the highest benefit shall be counted.

The accrued benefit earned after June 1, 2012 is determined for each period of credited service based on 0.05 times the first \$40 of the monthly employer contribution rate plus 0.20 times the amount of the monthly employer contribution rate in excess of \$40.

Effective January 1, 2010, the plan temporarily froze benefit accruals after December 31, 2009 through May 31, 2012.

The accrued benefit earned prior to January 1, 2010 is based on the applicable benefit formula rate multiplied by the applicable monthly employer contribution rate multiplied by years of credited service. Total years of credited service are limited to 35.

The applicable benefit formula rate and monthly employer contribution rate depend on the computation date in the following table:

Computation Date	Benefit Formula Rate	Monthly Employer Contribution Rate
1/1/1999 – 12/31/2009	0.2900	Monthly rate paid by the employer for at least six consecutive months immediately before the computation date
7/1/1985 – 12/31/1998	0.2772	
7/1/1983 – 6/30/1985	0.2772	Monthly rate paid by the employer immediately before the computation date
7/1/1967 – 6/30/1983	0.2310	

Credited service: Earned as shown in the following table.

Hours of service in plan year	Years of credited service
1,710 or more	1.0
1,530 – 1,709	0.9
1,350 – 1,529	0.8
1,170 – 1,349	0.7
1,000 – 1,169	0.6
Less than 1,000	0.0

No credited service can be earned after December 31, 2009 through May 31, 2012 due to the temporary benefit freeze.

Monthly contribution rate: Monthly contribution rate varies from \$30 to \$180 per month as of the valuation date, with a weighted average of \$61 per month.

Plan Effective Date: July 1, 1967. The plan document was amended and restated effective January 1, 2014. The first amendment was adopted in 2015. The second amendment was adopted in 2017.

Plan Year: The 12-month period beginning January 1 and ending December 31.

Vesting Service: Each plan year in which a participant completes 1,000 or more hours of service. A participant continues to receive vesting service during the temporary plan freeze effective January 1, 2010 through May 31, 2012.

Eligibility for Participation

Any employee becomes a participant when the first contribution to the plan is required to be made on the employee's behalf.

Normal Retirement

Normal Retirement Date: The first day of the month coincident with or next following the attainment of age 65 with 5 years of plan participation.

Normal Retirement Benefit: The accrued benefit as of normal retirement date.

Early Retirement

Early Retirement Date: The first day of the month coincident with or next following the attainment of age 55 and completion of 5 years of vesting service.

Early Retirement Benefit: The accrued benefit as of early retirement date reduced for each year of age less than 65 by either 4% a year for participants with 10 or more years of vesting service or 6% a year for participants with less than 10 years of vesting service.

Vested Retirement

Vested Retirement Date: The date of termination of service other than for reasons of retirement, disability, or death.

Vested Retirement Benefit: The accrued benefit, multiplied by the vested percentage in the following table, payable at the Normal Retirement Date, or payable as of the first day of any month coincident with or next following attainment of age 55 reduced in the same manner as an early retirement benefit.

Years of Vesting Service	Vested Percentage
Less than 5	0%
5 or more	100%

Preretirement Death

Preretirement Death Benefit Eligibility: Surviving spouses of participants with a vested accrued benefit who die before commencement of payments. In the absence of an eligible spouse, dependent children or dependent natural parents are eligible.

Preretirement Death Benefit: The benefit payable to the surviving spouses is 50% of the benefit which would have been payable had the deceased participant instead terminated service on the date of death, survived to his earliest possible benefit commencement date, elected a joint and 50% survivor annuity, and died on that same date. The benefit is payable immediately unless the participant died prior to the earliest retirement age. If so, the benefit payable to the eligible spouse is deferred until the participant would have reached the earliest retirement age.

In the event participants die while vested and do not have an eligible spouse, their dependent children or dependent natural parents will receive 60 monthly payments. The monthly amount of the benefit is the amount the participant would have received as a single life pension had he or she retired on the day before death, or if later, his or her 55th birthday.

Disability Retirement

Disability Retirement Eligibility: Upon total and permanent disability preventing the participant from engaging in any gainful occupation or any related or similar occupation. To qualify, a participant must earn at least 15 years of vesting service.

Disability Retirement Benefit: The accrued benefit, determined as of the date the disability is determined to be total and permanent.

Forms of Payment

Normal Form: The accrued benefit defined above assumes payment in the form of a monthly life annuity with 5 years guaranteed.

Optional Forms: Actuarially adjusted 50% and 75% joint and survivor annuity for married participants

Changes in Principal Plan Provisions Since Prior Valuation

None.

MIDWEST PENSION PLAN
(Supplemental Schedules)
Schedule of Assets (Held at End of Year)
December 31, 2022

Form 5500, Schedule H, Line 4(i)
E.I.N.: 36-6512748
Plan No.: 001

	<u>Shares</u>	<u>Cost</u>	<u>Fair Value</u>
<u>Common stocks:</u>			
ADOBE SYSTEMS INC	1,566	\$ 418,143	\$ 527,006
AECOM TECHNOLOGY	2,487	103,335	211,221
AGREE REALTY CORP	1,659	112,351	117,673
ALCON INC	3,020	172,083	207,021
ALIGHT INC	18,293	184,582	152,929
ALIGN TECHNOLOGY INC	811	275,802	171,040
ALPHABET INC CL C	3,958	416,418	351,193
AMAZON.COM INC	2,673	370,604	224,532
AMERICAN WATER WORKS CO.	517	15,914	78,801
AMERIPRISE FINANCIAL INC	880	96,575	274,006
AMGEN INC	1,050	170,702	275,772
AMN HEALTHCARE SERVICES INC	1,116	85,932	114,747
ANSYS INC	1,020	116,544	246,422
ANTERO RESOURCES CORP	3,072	91,821	95,201
API GROUP	4,678	96,423	87,993
ARCOSA INC	2,171	62,031	117,972
ASHLAND INC	1,316	105,994	141,509
ATLASSIAN CORP	939	173,295	120,831
ATMOS ENERGY CORP	2,180	233,319	244,313
AUTODESK INC	2,927	656,693	546,968
AVANTOR INC	6,033	121,524	127,236
BATH & BODY WORKS	4,231	219,090	178,294
BLACKSTONE GROUP INC	2,560	317,024	189,926
BROWN-FORMAN CORP CLASS B STOCK	2,267	153,036	148,897
CABOT OIL & GAS	8,960	159,409	220,147
CAPITAL ONE FINANCIAL CO	2,490	228,397	231,470
CATALENT INC	1,323	38,629	59,548
CHAMPIONX CORPORATION	6,220	134,431	180,318
CHART INDUSTRIES INC	550	34,982	63,377
CHEWY INC	5,241	340,717	194,336
CHURCHILL DOWNS INC	843	90,640	178,235
CINCINNATI FINANCIAL CORP	2,220	178,062	227,306
CINTAS CORPORATION	898	308,981	405,555
COCA COLA CO	4,150	180,943	263,982
COMMERCE BANCSHARES INC	2,226	107,638	151,524

See independent auditor's report.

MIDWEST PENSION PLAN
(Supplemental Schedules)
Schedule of Assets (Held at End of Year)
December 31, 2022

Form 5500, Schedule H, Line 4(i)
E.I.N.: 36-6512748
Plan No.: 001

	<u>Shares</u>	<u>Cost</u>	<u>Fair Value</u>
<u>Common stocks (Continued):</u>			
CONCENTRIX CORP	1,183	91,276	157,528
CONSTELLATION BRANDS INC	850	191,275	196,988
CORTEVA INC	5,980	198,580	351,504
COSTCO WHOLESALE CORP	725	285,310	330,963
CROWN CASTLE INC	1,600	257,680	217,024
CULLEN/FROST BANKERS INC	1,530	121,065	204,561
DANAHER CORP	1,150	118,647	305,233
DEXCOM INC	2,286	198,232	258,867
EAGLE MATERIALS INC	807	83,605	107,210
ECOLAB INC	1,210	256,979	176,128
EDWARDS LIFESCIENCES CORP	4,337	377,487	323,584
EQT CORPORATION	2,678	62,972	90,597
EQUITY LIFESTYLE PROPERTIES	2,294	122,412	148,192
ESTEE LAUDER	1,580	411,943	392,014
EURONET WORLDWIDE INC	1,361	124,418	128,451
EXPEDIA INC	1,124	167,174	98,462
EXPRO GROUP HLDINGS NV	5,968	109,436	108,200
FERGUSON PLC NEW	1,450	129,726	184,107
FIRST AMERICAN FINANCIAL CORP	1,723	95,114	90,182
FRONTIER COMMUNICATIONS PARE	4,556	135,748	116,087
GENERAC HOLDINGS INC	1,451	163,953	146,058
GENERAL DYNAMICS CORP	890	74,678	220,818
GENPACT LTD	3,281	128,545	151,976
HERC HOLDINGS, INC	1,669	134,907	219,590
HOLOGIC INC	1,931	80,046	144,458
HOME BANCSHARES INC	5,981	128,870	136,307
HONEYWELL INTERNATIONAL INC	1,160	261,285	248,588
IAA SPINCO INC	1,845	59,297	73,800
ICON PLC	872	73,315	169,386
IDEX CORP	1,483	313,039	338,613
INGERSOLL RAND INC	3,507	103,102	183,241
INTERNATIONAL SEAWAYS, INC.	2,658	44,008	98,399
INTUIT	992	376,987	386,106
INTUITIVE SURGICAL INC	1,827	431,777	484,794
ITT INC	1,436	118,975	116,460

See independent auditor's report.

MIDWEST PENSION PLAN
(Supplemental Schedules)
Schedule of Assets (Held at End of Year)
December 31, 2022

Form 5500, Schedule H, Line 4(i)
E.I.N.: 36-6512748
Plan No.: 001

	<u>Shares</u>	<u>Cost</u>	<u>Fair Value</u>
<u>Common stocks (Continued):</u>			
JAZZ PHARMACEUTICALS PLC	698	92,315	111,198
JB HUNT TRANSPORT SVCS INC	820	73,502	142,975
KADANT INC	1,027	48,063	182,426
KORN/FERRY INTERNATIONAL	1,217	54,067	61,605
KOSMOS ENERGY LTD	7,302	41,896	46,441
L3 HARRIS TECHNOLOGIES INC	899	193,789	187,181
LCI INDUSTRIES NEW	572	65,217	52,881
LENNAR CORP CLASS B	107	1,532	8,001
LENNAR CORP	2,800	62,830	253,400
LEONARDO DRS INC	7,174	83,543	91,684
LIBERTY BROADBAND CORP	1,254	109,660	95,643
LIBERTY MEDIA CORP	5,345	176,624	209,150
LITTLEFUSE INC	453	88,743	99,751
LULULEMON ATHLETICA INC	2,331	383,307	350,123
LUMENTUM HOLDINGS INC	-	-	-
MARTIN MARIETTA MATERIALS	760	106,062	256,857
MASTERCARD INC	1,218	435,038	423,535
MATCH GROUP INC	4,044	450,666	167,786
MEDTRONIC PLC	2,220	174,570	172,538
MERCK & CO INC	2,300	204,666	255,185
MICHELIN (CGDE) UNSPONSORED ADR	12,800	212,726	177,485
MICROCHIP TECHNOLOGY INC	3,610	100,750	253,603
MICROSOFT CORP	3,366	501,940	807,234
MITSUBISHI UFJ FINL GROUP INC	23,250	112,979	155,078
NATIONAL INSTRUMENTS CORP	3,941	165,874	145,423
NEOGEN CORPORATION	3,686	56,691	56,138
NEXSTAR MEDIA GROUP INC	623	67,558	109,044
NOMAD FOODS LTD	6,380	125,205	109,991
NVIDIA CORP	1,534	355,215	224,179
NXP SEMICONDUCTORS NV	1,613	307,702	254,902
OPTION CARE HEALTH INC	3,094	96,556	93,098
OSHKOSH CORPORATION	1,700	189,447	149,923
PACKAGING CORP OF AMERICA	672	79,571	85,956
PARKER HANNIFAN CORP	980	174,580	285,180
PAYPAL HOLDINGS INC	1,110	31,185	79,054

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December 31, 2022

Form 5500, Schedule H, Line 4(i)
E.I.N.: 36-6512748
Plan No.: 001

	<u>Shares</u>	<u>Cost</u>	<u>Fair Value</u>
<u>Common stocks (Continued):</u>			
PHILLIPS 66	1,750	65,493	182,140
PNC FINANCIAL SERVICES	1,420	183,861	224,275
POPULAR INC	1,397	56,775	92,649
POST HOLDINGS INC	1,188	88,968	107,229
PRINCE GEORGE	1,666	98,449	132,031
PROCTER & GAMBLE CO	1,520	209,835	230,371
PROSPERITY BANCSHARES INC	1,921	126,587	139,618
PULTEGROUP INC	3,393	150,618	154,483
QUALCOMM INC	2,090	161,789	229,775
RAYMOND JAMES FINANCIAL INC	1,043	14,406	111,445
REINSURANCE GROUP OF AMERICA INC	841	71,525	119,498
RELIANCE STEEL & ALUMINUM	728	52,142	147,376
REXFORD INDUSTRIAL REALTY INC	1,506	98,396	82,288
ROGERS CORP	526	61,743	62,773
ROPER TECHNOLOGIES INC	867	354,818	374,622
RPM INTL INC	2,370	154,732	230,957
S&P GLOBAL INC	781	292,646	261,588
SBA COMMUNICATIONS CORP	942	267,209	264,052
SERVICENOW INC	1,124	571,867	436,415
SHOPIFY INC. CLASS A	4,189	358,699	145,400
SIGNATURE BANK	810	92,540	93,328
SKECHERS USA INC-CL A	3,087	105,388	129,500
SKYLINE CORP COM	1,999	62,470	102,968
SONY CORP SPONSORED ADR	2,900	151,864	221,212
SPECTRUM BRANDS HLDGS	813	56,082	49,528
SUN COMMUNITIES INC	1,326	142,997	189,618
SYNNEX CORP	2,169	163,205	205,426
SYSCO CORP	2,406	188,361	183,939
TELEDYNE TECHNOLOGIES INC	395	58,977	157,964
TELEPHONE & DATA	5,805	121,058	60,894
TENET HEALTHCARE CORP	1,834	105,353	89,481
THERMO FISHER SCIENTIFIC INC	775	358,115	426,785
TRACTOR SUPPLY COMPANY	549	69,514	123,509
TRAVEL LEISURE CO	3,255	129,594	118,482

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MIDWEST PENSION PLAN
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December 31, 2022

Form 5500, Schedule H, Line 4(i)
E.I.N.: 36-6512748
Plan No.: 001

	<u>Shares</u>	<u>Cost</u>	<u>Fair Value</u>
<u>Common stocks (Continued):</u>			
UTAH MEDICAL PRODUCTS	720	64,881	72,382
VALARIS LTD	1,646	83,606	111,303
VALVOLINE INC	4,188	88,880	136,738
VEEVA SYSTEM INC CLASS A	1,440	363,973	232,387
VERADIGM INC	8,070	129,606	142,355
VISTRA	5,012	101,917	116,278
VONTIER CORP	4,791	147,882	92,610
WEX INC	993	65,152	162,504
XCEL ENERGY INC	3,480	235,501	243,983
XYLEM INC	2,230	188,180	246,571
ZOETIS INC	2,278	354,061	333,839
		<u> </u>	<u> </u>
Total common stocks		<u>\$ 25,097,711</u>	<u>\$ 28,158,994</u>

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MIDWEST PENSION PLAN
(Supplemental Schedules)
Schedule of Assets (Held at End of Year) (Continued)
December 31, 2022

Form 5500, Schedule H, Line 4(i)
E.I.N.: 36-6512748
Plan No.: 001

	Interest Rate	Maturity Date	Principal	Cost	Fair Value
<u>Corporate and other bonds and notes:</u>					
ABERCROMBIE & FITCH MANA	8.750%	07/15/25	\$ 130,000	\$ 144,300	\$ 127,395
AIR CANADA	10.500%	07/15/26	35,000	39,725	35,343
ALLISON TRANSMISSION INC	5.875%	06/01/29	139,000	142,873	130,535
AMC NETWORKS INC	5.000%	04/01/24	22,000	22,040	20,570
AMC NETWORKS INC	4.750%	08/01/25	75,000	77,014	57,000
AMC NETWORKS INC	4.250%	02/15/29	80,000	79,950	49,848
AMN HEALTHCARE INC	4.625%	10/01/27	144,000	139,616	132,778
AMERICAN AIRLINES	5.750%	04/20/29	65,000	66,799	59,292
AMERIGAS PART/FIN CORP	5.625%	05/20/24	115,000	114,844	111,628
ASBURY AUTOMOTIVE GROUP	4.750%	03/01/30	98,000	93,451	81,962
ATI INC	5.875%	12/01/27	65,000	65,163	62,159
ATI INC	5.125%	10/01/31	70,000	68,513	61,642
AVIS BUDGET CAR/FINANCE	5.375%	03/01/29	135,000	140,996	115,484
BEAZER HOMES USA INC	5.875%	10/15/27	135,000	141,413	118,086
BOYNE USA INC	4.750%	05/15/29	70,000	71,312	61,953
BRINKER INTL INC	3.875%	05/15/23	181,000	175,201	179,266
BUCKEYE PARTNERS LTD	4.150%	07/01/23	90,000	88,650	88,421
BUCKEYE PARTNERS LTD	4.125%	12/01/27	60,000	55,725	52,494
CCO HLDGS LLC/CAP CORP	n/a	n/a	140,000	123,900	111,531
CAESARS RESORT	5.750%	07/01/25	125,000	128,400	122,364
CARNIVAL CORP	7.200%	10/01/23	171,000	178,010	168,649
CARPENTER TECHNOLOGY	6.375%	07/15/28	130,000	135,787	123,634
CARPENTER TECHNOLOGY CARPENTER TECHNOLOGY	7.625%	03/15/30	45,000	45,000	45,108
CEDAR FAIR/CAN/MAGNUM/MI	6.500%	10/01/28	130,000	138,450	125,775
CENTURYLINK INC	7.650%	03/15/42	230,000	249,397	152,925
CHENIERE ENERGY PARTNERS	4.500%	10/01/29	100,000	105,125	89,978
CINEMARK USA INC	8.750%	05/01/25	107,000	109,618	108,051
COGENT COMMUNICATIONS GR	7.000%	06/15/27	85,000	84,567	83,294
CRESTWOOD MIDSTREAM PARTNERS	5.750%	04/01/25	125,000	127,214	121,600
DT MIDSTREAM INC	4.375%	06/15/31	23,000	23,000	19,295
DANA INCORPORATED	5.625%	06/15/28	134,000	138,465	121,845
DAVITA INC	4.625%	06/01/30	139,000	141,972	111,575
DELTA AIR LINES INC	7.375%	01/15/26	85,000	87,444	86,848
DISH DBS CORP	5.875%	11/15/24	132,000	135,366	122,658
RR DONNELLEY & SONS CO	6.500%	11/15/23	175,000	179,808	172,935
ENCOMPASS HEALTH CORPORATION	4.500%	02/01/28	127,000	127,453	115,367
ENDEAVOR ENERGY RESOURCE	5.750%	01/30/28	155,000	163,444	148,798
ENERGY TRANSFER EQUITY LP	7.125%	05/15/30	134,000	114,034	111,890

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MIDWEST PENSION PLAN
(Supplemental Schedules)
Schedule of Assets (Held at End of Year) (Continued)
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Form 5500, Schedule H, Line 4(i)
E.I.N.: 36-6512748
Plan No.: 001

	Interest Rate	Maturity Date	Principal	Cost	Fair Value
<u>Corporate and other bonds and notes (Continued):</u>					
FORD MOTOR CO	9.625%	04/22/30	50,000	68,879	56,562
FRONTIER COMMUNICATIONS CORP	5.000%	05/01/28	135,000	137,101	117,223
GLP CAPITAL LP / FIN II	5.750%	06/01/28	100,000	92,193	97,998
G-III APPAREL GROUP LTD	7.875%	08/15/25	133,000	145,402	124,049
GLOBAL PART/GLP FINANCE	7.000%	08/01/27	90,000	91,783	85,467
GLOBAL PART/GLP FINANCE	n/a	01/15/29	19,000	19,000	17,405
GOODYEAR TIRE & RUBBER CO	7.000%	03/15/28	80,000	92,038	79,657
GRAHAM HOLDINGS CO	5.750%	06/01/26	83,000	83,750	81,556
GRAY TELEVISION INC	5.875%	07/15/26	115,000	118,238	102,456
GRAY TELEVISION	2.644%	01/02/26	25,489	25,489	24,884
GREAT LAKES DREDGE & DOCK	5.250%	06/01/29	80,000	82,839	62,192
GRIFFON CORPORATION	5.750%	03/01/28	135,000	138,394	123,525
H&E EQUIPMENT SERVICES INC	3.875%	12/15/28	135,000	133,777	114,992
HAWAIIAN BRAND INTELLECT	5.750%	01/20/26	100,000	98,500	90,500
HERC HOLDINGS, INC	5.500%	07/15/27	70,000	71,649	65,293
HESS MIDSTREAM	5.125%	06/15/28	135,000	139,895	124,876
HOLLY ENERGY PARTNERS LP	5.000%	02/01/28	120,000	123,575	109,261
HOSPITALITY PROPERTIES TRUST	4.500%	03/15/25	175,000	175,992	150,946
HOWARD HUGHES CORP	4.375%	02/01/31	140,000	140,437	113,270
HUGHES SATELITE SYSTEMS	6.625%	08/01/26	132,000	145,295	123,122
ICAHN ENTERPRISES	6.250%	05/15/26	40,000	41,127	38,436
ICAHN ENTERPRISES	4.750%	09/15/24	115,000	118,112	110,239
ICAHN ENTERPRISES	5.250%	05/15/27	12,000	12,240	10,987
IHEARTCOMMUNICATIONS INC	8.375%	05/01/27	95,000	98,563	80,762
L BRANDS INC	5.250%	02/01/28	75,000	78,938	69,649
L BRANDS INC	6.694%	01/15/27	55,000	62,838	54,605
LPL HOLDINGS INC	4.000%	03/15/29	120,000	121,313	104,412
LAMAR MEDIA CORP	4.875%	01/15/29	122,000	129,975	112,018
LIONS GATE CAPITAL HOLD	5.500%	04/15/29	90,000	90,000	52,182
LITHIA MOTORS INC-CL A	4.375%	01/15/31	84,000	67,620	68,343
LIVE NATION ENTERTAINMENT	4.750%	10/15/27	165,000	167,850	147,142
MGM RESORTS INTERNATIONAL	4.750%	10/15/28	140,000	144,507	122,165
MAGNOLIA OIL GAS	6.000%	08/01/26	126,000	126,068	121,905
MARRIOTT OWNERSHIP RESOR	4.750%	01/15/28	115,000	117,546	100,140
MARRIOTT OWNERSHIP RESOR	4.500%	06/15/29	25,000	25,000	20,741
MASTEC INC	4.500%	08/15/28	20,000	20,000	17,946
MATADOR RESOURCES CO.	5.875%	09/15/26	98,000	99,546	94,178
MERCER INTERNATIONAL INC	5.500%	01/15/26	30,000	30,618	28,412
MOZART DEBIT MERGER	3.875%	04/01/29	105,000	90,825	84,512
MURPHY OIL CORPORATION	5.750%	08/15/25	25,000	25,721	24,566
MURPHY OIL USA INC	4.750%	09/15/29	96,000	100,114	87,843
NAVIENT CORP	5.875%	10/25/24	130,000	139,458	125,782
OCEANEERING INTL INC	4.650%	11/15/24	100,000	94,500	95,504

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MIDWEST PENSION PLAN
(Supplemental Schedules)
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Form 5500, Schedule H, Line 4(i)
E.I.N.: 36-6512748
Plan No.: 001

	Interest Rate	Maturity Date	Principal	Cost	Fair Value
<u>Corporate and other bonds and notes (Continued):</u>					
OPEN TEXT HOLDINGS INC	4.125%	02/15/30	40,000	40,000	32,186
OUTFRONT MEDIA CAP LLC/C	4.625%	03/15/30	105,000	101,113	86,869
OUTFRONT MEDIA CAP LLC/C	4.250%	01/15/29	35,000	35,137	29,041
PDC ENERGY INC	6.125%	09/15/24	94,000	94,911	92,647
PDC ENERGY INC	5.750%	05/15/26	24,000	23,170	22,910
PARKLAND CORP/CANADA	4.500%	10/01/29	140,000	140,878	116,815
PARKLAND CORP/CANADA	4.625%	05/01/30	14,000	14,000	11,585
PATTERSON-UTIL ENERGY INC	3.950%	02/01/28	125,000	111,250	110,456
PENN ENTERTAINMENT INC	5.625%	01/15/27	158,000	157,268	143,265
PRECISION DRILLING CORP	6.875%	01/15/29	140,000	144,580	130,341
PROVIDENT FDG/PFG FIN	6.375%	06/15/25	81,000	83,000	70,470
RHP HOTEL PPTY/RHP FINANCE	4.750%	10/15/27	130,000	124,391	117,651
RLJ LODGIN TRUST	4.000%	09/15/29	29,000	29,000	23,509
SS&C TECHNOLOGIES INC	5.500%	09/30/27	61,000	61,199	57,250
SALLY HOLDINGS/SALLY CAP	5.625%	12/01/25	90,000	90,963	86,697
SOUTHWESTERN ENERGY CO	6.450%	01/23/25	118,000	126,386	115,935
SPEEDWAY MOT/SPEEDWAY FD	4.875%	11/01/27	140,000	140,506	124,230
SPRINGLEAF FINANCE CORP	7.125%	03/15/26	125,000	139,388	118,860
SPIRIT AEROSYSTEMS INC	7.500%	04/15/25	123,000	125,282	121,544
STARWOOD PROPERTY TRUST INC	4.750%	03/15/25	80,000	84,439	76,340
STARWOOD PROPERTY TRUST INC	4.375%	01/15/27	25,000	25,000	21,877
SUBURBAN PROPANE PARTNERS	5.000%	06/01/31	55,000	56,937	46,749
SUNOCO LP/FINANCE CORP	4.500%	05/15/29	95,000	96,382	83,097
SUNOCO LP/FINANCE CORP	4.500%	04/30/30	15,000	15,000	13,021
TRI POINTE HOMES INC	5.250%	06/01/27	80,000	87,707	71,418
TTM TECHNOLOGIES	4.000%	03/01/29	13,000	13,000	11,148
TEINE ENERGY LTD	6.875%	04/15/29	130,000	131,499	116,675
TELECOM ITALIA CAPITAL	6.375%	11/15/33	120,000	141,737	98,171
TEVA PHARMACEUTICALS NE	2.800%	07/21/23	110,000	108,900	107,525
TITAN INTERNATIONAL INC	7.000%	04/30/28	165,000	172,056	155,780
UNITED AIRLINES HOLDINGS INC	4.875%	01/15/25	140,000	143,370	133,700
UNITED RENTALS NORTH AM	4.000%	07/15/30	105,000	110,250	89,754
VERMILION ENERGY INC VERMILION ENERGY INC	6.875%	05/01/30	127,000	123,190	116,186
VICI PROPERTIES	4.500%	09/01/26	135,000	134,976	127,159
WYNDHAM WORLDWIDE CORP	6.000%	04/01/27	129,000	140,093	122,432
Total corporate bonds				<u>\$ 11,757,702</u>	<u>\$ 10,450,972</u>

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MIDWEST PENSION PLAN
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Form 5500, Schedule H, Line 4(i)
E.I.N.: 36-6512748
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	Interest Rate	Maturity Date	Principal	Cost	Fair Value
<u>Corporate and other bonds and notes (Continued):</u>					
<u>Variable rate bonds:</u>					
AIR CANADA 2015-2B PTT SINKABLE	5.000%	15/15/2023	\$ 70,800	\$ 63,617	\$ 69,305
AIR LEASE CORPORATION VARIABLE	4.125%	12/15/26	135,000	96,005	92,475
AMERICAN AIRLINES 21 SINKABLE BOND	3.950%	07/11/30	120,000	104,700	95,350
JETBLUE 2020 SINKABLE BOND	7.750%	11/15/28	150,351	174,590	145,550
UNITED AIR 2019-2 B PTT	3.500%	05/01/28	145,183	142,197	125,076
Total variable rate bonds				<u>\$ 581,109</u>	<u>\$ 527,756</u>
<u>Loans:</u>					
AADVANTAGE LOYALTY IP LTD.	5.500%	03/24/28	\$ 80,479	\$ 80,479	\$ 79,850
CSC HOLDINGS, LLC	2.627%	04/15/27	67,224	67,224	62,771
MIDWEST GAMING BORROWER	4.875%	05/01/29	26,000	26,000	22,122
RESOLUTE INVESTMENT MANAGERS, INC.	4.750%	04/29/24	80,212	80,212	64,671
Total loans				<u>\$ 253,915</u>	<u>\$ 229,414</u>
<u>Commercial paper:</u>					
RADIAN GROUP INC COMMERCIAL PAPER			60,000	<u>\$ 59,550</u>	<u>\$ 59,122</u>
Total commercial paper				<u>\$ 59,550</u>	<u>\$ 59,122</u>
Total corporate and other bonds and notes				<u>\$ 12,652,276</u>	<u>\$ 11,267,264</u>

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MIDWEST PENSION PLAN
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	<u>Principal or Shares</u>	<u>Cost</u>	<u>Fair Value</u>
<u>Short-term investment funds:</u>			
GOLDMAN FINANCIAL SQUARE PRIME OBLIGATIONS-A-FD# 462	196,536	\$ 196,536	\$ 196,536
GOLDMAN FINANCIAL SQUARE GOVT-A FD# 465	550,136	550,136	550,136
GOLDMAN FINANCIAL SQUARE PRIME OBLIGATIONS-A-FD# 468	325,380	<u>325,380</u>	<u>325,380</u>
Total short-term investment funds		<u>\$ 1,072,052</u>	<u>\$ 1,072,052</u>
<u>Hedge funds:</u>			
GCM GROSVENOR OPPORTUNISTIC CREDIT FUND V		\$ 3,200,000	\$ 3,561,245
GCM GROSVENOR SECONDARY OPP FEEDER FUND II		3,635,271	5,863,945
CORBIN ERISA OPPORTUNITY FUND		3,160,418	3,732,886
HAMILTON LANE SECONDARY FEEDER FUND		1,868,396	2,681,168
GLOUSTON PRIVATE EQUITY OPPORTUNITIES FUND VI		<u>1,644,921</u>	<u>3,222,159</u>
Total hedge funds		<u>\$ 13,509,006</u>	<u>\$ 19,061,403</u>

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MIDWEST PENSION PLAN
(Supplemental Schedules)
Schedule of Assets (Held at End of Year) (Continued)
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E.I.N.: 36-6512748
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	<u>Shares</u>	<u>Cost</u>	<u>Fair Value</u>
<u>Common/collective trusts:</u>			
CHEVY CHASE TRUST COMPANY ASB ALLEGIANCE REAL ESTATE FUND	10,676	\$ 4,776,630	\$ 22,491,821
LSV INTERNATIONAL VALUE EQUITY TRUST	22,417	2,711,724	6,112,276
NATIONAL INVESTMENT SERVICES INTERMEDIATE FIXED INCOME FUND	302	6,158,231	6,022,684
NEWTOWER TRUST COMPANY MULTI-EMPLOYER PROPERTY TRUST CLASS E	267	1,372,939	4,135,695
HARDMAN JOHNSTON INTERNATIONAL EQUITY GROUP TRUST	227,636	9,887,562	7,937,830
INTERCONTINENTAL U.S. REAL ESTATE INVESTMENT FUND LLC	5,275	6,513,621	7,947,169
BOYD WATTERSON STATE GOVERNMENT FUND, LP	6,048	6,233,541	7,369,700
VICTORY TRIVALENT INTERNATIONAL SMALL CAP COLLECTIVE FUND	336,668	6,643,940	5,226,380
WELLINGTON MULTIPLE COLLECTIVE INVESTMENT FUNDS TRUST	22,539	<u>253,305</u>	<u>351,388</u>
Total common/collective trusts		<u>\$ 44,551,493</u>	<u>\$ 67,594,943</u>

See independent auditor's report.

Active Participants by Age and Service

The number of active participants summarized by attained age and years of credited service as of January 1, 2022 is shown below.

Age	Years of Credited Service										Total
	0	1-4	5-9	10-14	15-19	20-24	25-29	30-34	35-39	40+	
0-24	12	33	1	-	-	-	-	-	-	-	46
25-29	23	57	22	-	-	-	-	-	-	-	102
30-34	14	44	34	1	-	-	-	-	-	-	93
35-39	14	31	46	14	3	-	-	-	-	-	108
40-44	15	36	55	30	29	5	-	-	-	-	170
45-49	14	54	66	55	41	21	6	1	-	-	258
50-54	17	56	61	83	42	23	13	5	-	-	300
55-59	6	53	63	52	44	18	17	10	6	-	269
60-64	3	54	56	57	29	16	16	8	14	-	253
65-69	2	15	34	27	10	15	7	3	7	-	120
70+	1	5	13	9	5	-	3	-	3	-	39
Total	121	438	451	328	203	98	62	27	30	-	1,758

Attachment to 2022 Form 5500
Schedule MB, Line 3(d) - Withdrawal Liability Amounts
Midwest Pension Plan
EIN/PN: 36-6512748/001

Payment Date	Periodic Amounts	Lump Sum Amounts	Total Amounts
01/11/2022	34,074.00		34,074.00
01/19/2022	9,168.00		9,168.00
03/22/2022	7,416.00		7,416.00
04/25/2022	9,168.00		9,168.00
06/03/2022	34,074.00		34,074.00
07/14/2022	34,074.00		34,074.00
07/18/2022	9,168.00		9,168.00
07/18/2022	7,416.00		7,416.00
09/27/2022	7,416.00		7,416.00
10/18/2022	9,168.00		9,168.00
11/03/2022	34,074.00		34,074.00
12/20/2022	7,416.00		7,416.00

Charges and Credits for Funding Standard Account

The amortization charges and credits for the Funding Standard Account for the plan year beginning January 1, 2022 are determined below.

1. Charges as of January 1, 2022

	<u>Date</u>		<u>Amortization</u>	<u>Years</u>	<u>Outstanding</u>
	<u>Established</u>	<u>Description</u>	<u>Amount</u>	<u>Remaining</u>	<u>Balance</u>
a.	January 1, 1993	Plan amendment	\$128,055	1	\$128,055
b.	January 1, 1993	Change in assumptions	271,931	1	271,931
c.	January 1, 1994	Plan amendment	95,850	2	185,430
d.	January 1, 1995	Plan amendment	64,486	3	181,079
e.	January 1, 1996	Plan amendment	110,404	4	400,138
f.	January 1, 1997	Plan amendment	247,022	5	1,083,738
g.	January 1, 1998	Plan amendment	144,000	6	734,430
h.	January 1, 1998	Change in assumptions	381,842	6	1,947,472
i.	January 1, 1999	Plan amendment	568,206	7	3,276,584
j.	January 1, 2000	Plan amendment	134,485	8	859,265
k.	January 1, 2001	Plan amendment	182,118	9	1,269,599
l.	January 1, 2006	Plan amendment	89,573	14	838,195
m.	January 1, 2007	Plan amendment	25,553	15	249,025
n.	January 1, 2008	Actuarial loss	396,118	1	396,118
o.	January 1, 2009	Actuarial loss	1,387,801	2	2,684,812
p.	January 1, 2009	Plan amendment	104,755	2	202,657
q.	January 1, 2010	Actuarial loss	487,275	3	1,368,277
r.	January 1, 2012	Actuarial loss	207,027	5	908,272
s.	January 1, 2013	Actuarial loss	208,348	6	1,062,615
t.	January 1, 2013	Plan amendment	34,214	6	174,498
u.	January 1, 2015	Actuarial loss	42,029	8	268,534
v.	January 1, 2016	Change in assumptions	188,498	9	1,314,078
w.	January 1, 2016	Actuarial loss	584,102	9	4,071,948
x.	January 1, 2017	Actuarial loss	290,652	10	2,184,316
y.	January 1, 2018	Actuarial loss	149,554	11	1,199,955
z.	January 1, 2019	Actuarial loss	310,898	12	2,642,224
aa.	January 1, 2020	Actuarial loss	239,375	13	2,140,654
bb.	January 1, 2021	Actuarial loss	8,901	14	83,295
cc.	January 1, 2022	Change in assumptions	<u>477,743</u>	15	<u>4,655,825</u>
dd.	Total		7,560,815		36,783,019

Milliman

2. Credits as of January 1, 2022

	<u>Date</u>		<u>Amortization</u>	<u>Years</u>	<u>Outstanding</u>
	<u>Established</u>	<u>Description</u>	<u>Amount</u>	<u>Remaining</u>	<u>Balance</u>
a.	January 1, 2009	Change in assumptions	\$122,504	2	\$236,994
b.	January 1, 2011	Actuarial gain	30,858	4	111,840
c.	January 1, 2011	Change in assumptions	697,432	4	2,527,714
d.	January 1, 2014	Actuarial gain	190,844	7	1,100,510
e.	January 1, 2022	Actuarial gain	<u>498,028</u>	15	<u>4,853,513</u>
f.	Total		1,539,666		8,830,571
3.	Net outstanding balance [(1dd) - (2f)]				27,952,448
4.	Credit Balance as of January 1, 2022				40,001,391
5.	Waived funding deficiency				0
6.	Balance test result [(3) - (4) - (5)]				(12,048,943)
7.	Unfunded Actuarial Accrued Liability as of January 1, 2022, minimum \$0				(12,048,943)

Appendix A – Summary of Actuarial Methods

The ultimate cost of a pension plan is the excess of actual benefits and administrative expenses paid over actual net investment return on plan assets during the plan's existence until the last payment has been made to the last participant. A plan's "actuarial cost method" determines the expected incidence of actuarial costs by allocating portions of the ultimate cost to each plan year. The cost method is thus a budgeting tool to help ensure that a plan will be adequately and systematically funded. Annual contributions are also affected by a plan's "asset valuation method" (as well as plan provisions, actuarial assumptions, and actual plan demographic and investment experience each year).

Actuarial Cost Method

The actuarial cost method used for determining the Plan's ERISA funding requirements, FASB ASC Topic 960 values and current liability (RPA '94) values is the Unit Credit method. Under this method, an accrued benefit is determined at each active participant's assumed retirement age based on compensation and service at both the beginning and the end of the current year. The Plan's Normal Cost is the sum of the present value of the excess of each active participant's accrued benefit at the end of the current year over that at the beginning of the current year. The Plan's accrued liability is the sum of (a) the present value of each active participant's accrued benefit at the beginning of the current year plus (b) the present value of each inactive participant's benefits, plus (c) for FASB ASC Topic 960 plan accounting, the present value of the administrative expenses. The present value of the administrative expenses for FASB ASC Topic 960 plan accounting was calculated by projecting the payment of expected administrative expenses for the duration of the Plan's liabilities. The duration of the Plan's liabilities was calculated to be 10 years at January 1, 2022 and 10 years at January 1, 2021.

The Actuarial Value of Assets is 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 market return, and is recognized over a five-year period. The actuarial value is further adjusted, if necessary, to be within 20% of the market value.

Changes in Actuarial Methods Since Prior Valuation

None.

Appendix B – Summary of Actuarial Assumptions

ECONOMIC ASSUMPTIONS

Investment Return

ERISA minimum funding: 7.00% per year (net of investment-related administrative expenses)

FASB ASC Topic 960: Discount rate of 7.00% per year

Withdrawal liability: To the extent the present value of benefits is matched by the market value of plan assets, the interest assumption is the PBGC interest rates for December of 2021 of 2.40% for the first 20 years and 2.11% thereafter. To the extent the present value of vested benefits is not matched by the market value of plan assets, the interest assumption utilized is 7.50% per year.

Current Liability (RPA '94): 1.91% per year

Administrative Expenses

Average of actual administrative expenses paid in prior two years, increased by 2% and assumed to be payable in the middle of the year. For FASB ASC Topic 960 plan accounting, the present value of the administrative expenses was calculated by projecting the payment of expected administrative expenses with increases of 2% per year for the duration of the Plan's liabilities. The duration of the Plan's liabilities was calculated to be 10 years at January 1, 2022 and 10 years at January 1, 2021.

Mortality

ERISA minimum funding, FASB ASC Topic 960, and withdrawal liability: Healthy participant: RP-2014 blue collar mortality tables adjusted to reflect Mortality Improvement Scale MP-2015 from the 2006 base year, and projected forward using MP-2015 on a generational basis, with employee rates before commencement and healthy annuitant rates after benefit commencement. Disabled participant: RP-2014 disabled annuitant table adjusted to reflect Mortality Improvement Scale MP-2015 from the 2006 base year, and projected forward using MP-2015

Current Liability (RPA '94): IRS 2022 Non-annuitant/annuitant Mortality Table. This table is based on the RP-2014 Mortality Table with projection for mortality improvement.

Retirement

Annual rates of retirement are shown in the following table for active participants who are eligible to retire.

Age	Rate
55-59	1%
60-64	5
65-69	20
70+	100

The weighted average retirement age for active participants is 66.

Terminated vested participants are assumed to retire at age 65. Terminated vested participants age 80 or older are excluded from the valuation.

Termination

Annual rates of termination are based on age. Sample rates are shown in the following table.

Age	Rate
20	30%
25	30
30	20
35	20
40	10
45	10
50	10
55	10
60	10

Disability

Annual rates of disability are based on age. Sample rates are shown in the following table.

Age	Rate
20	0.037%
25	0.037
30	0.037
35	0.043
40	0.100
45	0.213
50	0.370
55	0.633
60	1.150

Missing Participants

Terminated vested participants age 80 or older as of the valuation date are excluded from the valuation. Pre-retirement death benefits for deceased former participants who would have been age 72 or older as of the valuation date are excluded from the valuation.

Decrement Timing

Decrements are assumed to occur at the middle of the year, except that 100% retirement (see above) is assumed to occur at the beginning of the year.

Form of Payment

Single life annuity with 60 months guaranteed.

Hours of Service

1,710 hours per year

Marital Characteristics

For participants not in pay status: 80% of participants are assumed to be married to a spouse of the opposite sex. Males are assumed to be 3 years older than females.

For participants in pay status: Actual birth dates of beneficiaries are included in the census data, where relevant.

For beneficiaries: Actual birth dates are included in the census data, where relevant.

Changes In Actuarial Assumptions Since Prior Valuation

Interest rate for ERISA minimum funding and ASC Topic 960: From 7.50% per year to 7.00% per year (net of investment-related administrative expenses).

PBGC Interest rates for withdrawal liability: From 1.62% for the first 20 years and 1.40% thereafter to 2.40% for the first 20 years and 2.11% thereafter.

Missing participants (effective January 1, 2022): Terminated vested participants age 80 or older as of the valuation date are excluded from the valuation. Pre-retirement death benefits for deceased former participants who would have been age 72 or older as of the valuation date are excluded from the valuation.

Interest rates for current liability: From 2.08% per year to 1.91% per year, as required by statute.

Mortality for current liability: From statutory tables for 2021 to statutory tables for 2022.

Rational for Significant Assumptions

Investment return for ERISA minimum funding: Selected based on the Plan's target asset allocation as of the valuation date, capital market assumptions from several sources, including published studies summarizing the expectations of various investment experts. This information was used to develop forward-looking long-term expected returns, producing a range of reasonable expectations according to industry experts. Based on the resulting range of potential assumptions, in our professional judgement the selected investment return assumption is reasonable and is not expected to have any significant bias.

Investment return for withdrawal liability: First, the PBGC rates are used to value those liabilities presently funded by plan assets. The PBGC rates are based on returns for fixed income securities. Second, the Fund's remaining liabilities are valued under the ERISA minimum funding investment return used to value the Fund on an ongoing basis which was 7.50% as of December 31, 2021. The decision to use a blended investment return rate assumption for withdrawal liability rests on all relevant actuarial considerations, including the Fund's financial health and contribution levels.

Mortality rates: Based on recent pension mortality research conducted by the Society of Actuaries.

Missing participants: Based on the missing participant policy adopted by the Board of Trustees.

Other demographic assumptions: Except where noted, demographic assumptions are based on Milliman's experience study dated October 20, 2016.

Attachment to 2022 Form 5500

Schedule MB, line 8b(1) - Schedule of Projection of Expected Benefit Payments

Midwest Pension Plan

EIN/PN: 36-6512748/001

Plan Year	Active Participants	Terminated Vested Participants	Retired Participants and Beneficiaries Receiving	Total
			Payments	
2022	71,801.30	1,500,280.99	8,308,782.00	9,880,864.29
2023	150,052.92	1,792,162.20	8,099,218.83	10,041,433.95
2024	233,770.96	2,051,602.58	7,874,827.14	10,160,200.68
2025	308,460.05	2,314,738.85	7,629,583.74	10,252,782.64
2026	389,481.21	2,640,088.93	7,374,669.04	10,404,239.18
2027	465,616.79	2,937,840.19	7,022,220.79	10,425,677.77
2028	519,084.44	3,186,249.87	6,755,547.06	10,460,881.37
2029	573,073.37	3,376,531.98	6,486,069.63	10,435,674.98
2030	620,644.69	3,566,961.07	6,214,557.81	10,402,163.57
2031	660,681.11	3,781,855.80	5,936,634.02	10,379,170.93
2032	692,978.55	3,947,272.33	5,659,361.39	10,299,612.27
2033	736,240.85	4,097,495.22	5,372,343.47	10,206,079.54
2034	775,499.65	4,222,090.16	5,081,526.28	10,079,116.09
2035	808,484.13	4,327,895.98	4,789,703.32	9,926,083.43
2036	833,404.39	4,431,966.71	4,499,987.15	9,765,358.25
2037	866,008.49	4,504,534.08	4,208,405.53	9,578,948.10
2038	891,464.31	4,535,052.81	3,926,423.78	9,352,940.90
2039	914,157.30	4,547,284.00	3,652,406.48	9,113,847.78
2040	922,927.02	4,546,724.67	3,379,361.28	8,849,012.97
2041	929,093.78	4,520,259.78	3,111,497.51	8,560,851.07
2042	932,892.19	4,469,981.23	2,850,411.19	8,253,284.61
2043	930,147.45	4,390,235.79	2,595,840.15	7,916,223.39
2044	917,690.31	4,276,149.98	2,347,688.30	7,541,528.59
2045	902,753.17	4,154,356.53	2,114,010.36	7,171,120.06
2046	881,490.89	4,014,307.26	1,892,593.28	6,788,391.43
2047	863,080.85	3,857,710.70	1,683,519.11	6,404,310.66
2048	844,076.93	3,688,802.06	1,487,279.30	6,020,158.29
2049	812,325.38	3,514,505.35	1,305,090.71	5,631,921.44
2050	781,071.48	3,334,561.41	1,137,010.36	5,252,643.25
2051	745,541.03	3,155,913.58	983,111.40	4,884,566.01
2052	709,369.92	2,971,348.58	843,368.58	4,524,087.08
2053	672,274.79	2,785,881.25	717,587.95	4,175,743.99
2054	638,043.46	2,602,697.14	605,406.53	3,846,147.13
2055	606,059.89	2,424,148.74	506,310.81	3,536,519.44
2056	572,146.68	2,247,055.95	419,654.01	3,238,856.64
2057	538,471.96	2,074,283.33	344,663.12	2,957,418.41
2058	504,067.69	1,906,229.19	280,469.05	2,690,765.93
2059	475,128.65	1,744,758.65	226,129.11	2,446,016.41
2060	444,248.20	1,588,948.12	180,650.12	2,213,846.44
2061	411,625.57	1,440,137.99	143,023.09	1,994,786.65
2062	380,456.80	1,299,040.62	112,258.46	1,791,755.88
2063	350,183.11	1,166,482.89	87,401.22	1,604,067.22
2064	320,697.12	1,042,614.92	67,554.47	1,430,866.51
2065	292,872.01	926,549.25	51,891.84	1,271,313.10
2066	266,623.50	819,140.44	39,669.17	1,125,433.11
2067	241,805.76	720,320.51	30,230.95	992,357.22
2068	218,595.85	629,908.04	23,011.23	871,515.12
2069	196,955.67	547,686.46	17,532.13	762,174.26
2070	176,875.14	473,444.73	13,398.97	663,718.84
2071	158,327.01	406,807.10	10,292.60	575,426.71

Midwest Pension Plan
EIN: 36-6512748
Plan Number: 001
Attachment to Form 5500
Schedule R, Line 13e - Information on Contribution rates and Base Units
December 31, 2022

13. The following information is for each employer that contributed more than 5% of total contributions to the plan during the plan year (measured in dollars).

a. Name of contributing employer	<u>Fresh Express Chiquita Brands</u>		
b. EIN : 94-2591533	c. Dollar amount contributed by employer <u>\$111,290</u>		
d. Date collective bargaining agreement expires: <u>10/27/2023</u>			
e. Contribution rate information			
(1) Contribution rate (in dollars and cents): \$31			
(2) Base unit measure	☐ Hourly	☐ Weekly	☐ Unit of production ☒ Other (Monthly)
a. Name of contributing employer	<u>Chicago Steel Holdings</u>		
b. EIN: 20-0836074	c. Dollar amount contributed by employer <u>\$101,106</u>		
d. Date collective bargaining agreement expires: <u>10/31/2024</u>			
e. Contribution rate information			
(1) Contribution rate (in dollars and cents): \$180			
(2) Base unit measure	☐ Hourly	☐ Weekly	☐ Unit of production ☒ Other (Monthly)
a. Name of contributing employer	<u>LA-CO Industries</u>		
b. EIN: 36-2278494	c. Dollar amount contributed by employer <u>\$84,388</u>		
d. Date collective bargaining agreement expires: <u>11/30/2023</u>			
e. Contribution rate information			
(1) Contribution rate (in dollars and cents): \$96			
(2) Base unit measure	☐ Hourly	☐ Weekly	☐ Unit of production ☒ Other (Monthly)
a. Name of contributing employer	<u>Wertheimer Box</u>		
b. EIN: 36-2096689	c. Dollar amount contributed by employer <u>\$88,680</u>		
d. Date collective bargaining agreement expires: <u>05/14/2024</u>			
e. Contribution rate information			
(1) Contribution rate (in dollars and cents): \$95			
(2) Base unit measure	☐ Hourly	☐ Weekly	☐ Unit of production ☒ Other (Monthly)
a. Name of contributing employer	<u>Global Material Technology</u>		
b. EIN: 04-2624726	c. Dollar amount contributed by employer <u>\$82,500</u>		
d. Date collective bargaining agreement expires: <u>10/31/2023</u>			
e. Contribution rate information			
(1) Contribution rate (in dollars and cents): \$75			
(2) Base unit measure	☐ Hourly	☐ Weekly	☐ Unit of production ☒ Other (Monthly)
a. Name of contributing employer	<u>Bretford Franklin Park</u>		
b. EIN: 36-2113703	c. Dollar amount contributed by employer <u>\$71,225</u>		
d. Date collective bargaining agreement expires: <u>02/28/2023</u>			
e. Contribution rate information			
(1) Contribution rate (in dollars and cents): \$75			
(2) Base unit measure	☐ Hourly	☐ Weekly	☐ Unit of production ☒ Other (Monthly)

Midwest Pension Plan
EIN: 36-6512748
Plan Number: 001
Attachment to Form 5500
Schedule R, Line 13e - Information on Contribution rates and Base Units
December 31, 2022

a. Name of contributing employer Life Fitness

b. EIN: 36-0848180

c. Dollar amount contributed by employer \$136,368

d. Date collective bargaining agreement expires: 03/10/2022

e. Contribution rate information

(1) Contribution rate (in dollars and cents): \$75

(2) Base unit measure

☐ Hourly

☐ Weekly

☐ Unit of production ☒ Other (Monthly)

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**

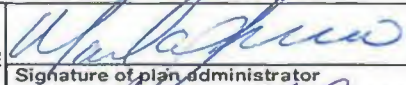
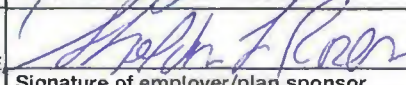
- A** This return/report is for: ☒ a multiemployer plan ☐ a multiple-employer plan (Filers checking this box must attach a list of participating employer information in accordance with the form instr.)
- B** This return/report is: ☐ a single-employer plan ☐ a DFE (specify) _____
- ☐ the first return/report ☐ 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 MIDWEST PENSION PLAN	1b Three-digit plan number (PN) ▶ 001
	1c Effective date of plan 07/01/1967
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 - MIDWEST PENSION PLAN	2b Employer Identification Number (EIN) 36-6512748
	2c Plan Sponsor's telephone number 312-738-0822
	2d Business code (see instructions) 326100
245 FENCL LANE HILLSIDE IL 60162	

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		10/3/2023	MARK SPANO
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE		10/3/2023	SHELDON L. ROSEN
	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

11431

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)

1758

a (2) Total number of active participants at the end of the plan year

6a(2)

1707

b Retired or separated participants receiving benefits

6b

3772

c Other retired or separated participants entitled to future benefits

6c

5301

d Subtotal. Add lines 6a(2), 6b, and 6c

6d

10780

e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits

6e

606

f Total. Add lines 6d and 6e

6f

11386

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

133

7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)

7

50

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) ☐ A (Insurance Information)
 (4) ☒ C (Service Provider Information)
 (5) ☒ D (DFE/Participating Plan Information)
 (6) ☐ G (Financial Transaction Schedules)

**MIDWEST PENSION PLAN
(Supplemental Schedules)
Schedule of Reportable Transactions
For the year ended December 31, 2022**

Form 5500, Schedule H, Line 4(j)
EIN: 36-6512748
Plan No.: 001

Description of Assets	Purchase Price	Selling Price	Cost	Current Value of Assets on Transaction Date	Net Gain or (Loss)
Series of Transactions					
Exceeding 5% of Plan Assets					
GOLDMAN FINANCIAL SQUARE GOVT-A-FD# 462	\$ 3,651,131	\$ -	\$ 3,651,131	\$ 3,651,131	\$ -
GOLDMAN FINANCIAL SQUARE GOVT-A-FD# 462	-	3,942,428	3,942,436	3,942,428	(8)
GOLDMAN FINANCIAL SQUARE TREASURY OBLIGATIONS-A-FD# 468	4,311,860	-	4,311,860	4,311,860	-
GOLDMAN FINANCIAL SQUARE TREASURY OBLIGATIONS-A-FD# 468	-	4,365,829	4,365,829	4,365,829	-

See independent auditor's report.

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 MIDWEST 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 - MIDWEST PENSION PLAN	D Employer Identification Number (EIN) 36-6512748

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

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

b Assets

(1) Current value of assets.....	1b(1)	146,858,104
(2) Actuarial value of assets for funding standard account	1b(2)	139,356,179
c (1) Accrued liability for plan using immediate gain methods	1c(1)	127,307,236
(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)	127,307,236
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)	224,888,770
(b) Expected increase in current liability due to benefits accruing during the plan year.....	1d(2)(b)	1,363,889
(c) Expected release from "RPA '94" current liability for the plan year.....	1d(2)(c)	9,890,179
(3) Expected plan disbursements for the plan year.....	1d(3)	11,207,416

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 <i>Kevin Campe</i> Signature of actuary Kevin M. Campe Type or print name of actuary MILLIMAN Firm name 71 S. WACKER DR., 31ST FLOOR CHICAGO IL 60606 Address of the firm	October 12, 2023 Date 23-05356 Most recent enrollment number (312) 726-0677 Telephone number (including area code)
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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

2 Operational information as of beginning of this plan year:

a Current value of assets (see instructions)	2a	146,858,104
b "RPA '94" current liability/participant count breakdown:		
	(1) Number of participants	(2) Current liability
(1) For retired participants and beneficiaries receiving payment	4,288	111,325,679
(2) For terminated vested participants	5,388	94,449,861
(3) For active participants:		
(a) Non-vested benefits.....		1,061,962
(b) Vested benefits.....		18,051,268
(c) Total active	1,758	19,113,230
(4) Total	11,434	224,888,770
c If the percentage resulting from dividing line 2a by line 2b(4), column (2), is less than 70%, enter such percentage	2c	65.30 %

3 Contributions made to the plan for the plan year by employer(s) and employees:

(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	1,560,565				
Totals ▶			3(b)	1,560,565	3(c) 0
(d) Total withdrawal liability amounts included in line 3(b) total					3(d) 202,632

4 Information on plan status:

a Funded percentage for monitoring plan's status (line 1b(2) divided by line 1c(3)).....	4a	109.5 %
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	

5 Actuarial cost method used as the basis for this plan year's funding standard account computations (check all that apply):

- 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	1.91 %
	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	8.6%
h Estimated investment return on current value of assets for year ending on the valuation date	6h	15.4%
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)	1,317,237
(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	-4,853,513	-498,028
4	4,655,825	477,743

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	1,802,419

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)	36,783,019	7,560,815
9c(2)	0	0
9c(3)	0	0

d Interest as applicable on lines 9a, 9b, and 9c.....**9d** 655,426**e** Total charges. Add lines 9a through 9d.....**9e** 10,018,660**Credits to funding standard account:****f** Prior year credit balance, if any.....**9f** 40,001,391**g** Employer contributions. Total from column (b) of line 3.....**9g** 1,560,565**h** Amortization credits as of valuation date.....

	Outstanding balance	
9h	8,830,571	1,539,666

i Interest as applicable to end of plan year on lines 9f, 9g, and 9h**9i** 2,962,019**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)	31,837,708	
9j(2)	60,858,437	
9j(3)		0

k (1) Waived funding deficiency**9k(1)** 0**(2)** Other credits**9k(2)** 0**l** Total credits. Add lines 9f through 9i, 9j(3), 9k(1), and 9k(2)**9l** 46,063,641**m** Credit balance: If line 9l is greater than line 9e, enter the difference**9m** 36,044,981**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)** 0**(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)** 0**(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** 0**11** Has a change been made in the actuarial assumptions for the current plan year? If "Yes," see instructions☒ Yes ☐ No