

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 07/01/2022 and ending 06/30/2023	
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 LOCAL NO. 1 PENSION TRUST FUND	1b	Three-digit plan number (PN) ▶ 001
		1c	Effective date of plan 01/04/1967
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) TRUSTEES OF LOCAL 1 PENSION FUND 1431 OPUS PLACE DOWNERS GROVE, IL 60515	2b	Employer Identification Number (EIN) 51-6055057
		2c	Plan Sponsor's telephone number 630-288-6868
		2d	Business code (see instructions) 561790

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.	04/11/2024	JAMES WATTS
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	Filed with authorized/valid electronic signature.	04/11/2024	EFRAIN ELIAS
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

3a Plan administrator's name and address ☒ 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 8800
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 a(2) Total number of active participants at the end of the plan year b Retired or separated participants receiving benefits c Other retired or separated participants entitled to future benefits..... d Subtotal. Add lines 6a(2) , 6b , and 6c e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits. f Total. Add lines 6d and 6e g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)..... h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested.....	 6a(1) 3739 6a(2) 3813 6b 2098 6c 2569 6d 8480 6e 532 6f 9012 6g 6h
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	7 1028
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) ☒ 1 A (Insurance Information) (4) ☒ C (Service Provider Information) (5) ☒ D (DFE/Participating Plan Information) (6) ☐ G (Financial Transaction Schedules)

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

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

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

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

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

Receipt Confirmation Code _____

SCHEDULE A (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Insurance Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500. ▶ Insurance companies are required to provide the information pursuant to ERISA section 103(a)(2).	OMB No. 1210-0110 2022 This Form is Open to Public Inspection
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For calendar plan year 2022 or fiscal plan year beginning 07/01/2022 and ending 06/30/2023		
A Name of plan LOCAL NO. 1 PENSION TRUST FUND	B Three-digit plan number (PN) ▶	001
C Plan sponsor's name as shown on line 2a of Form 5500 TRUSTEES OF LOCAL 1 PENSION FUND	D Employer Identification Number (EIN) 51-6055057	

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

(a) Name of insurance carrier THE PRUDENTIAL INSURANCE COMPANY OF AMERICA
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(b) EIN	(c) NAIC code	(d) Contract or identification number	(e) Approximate number of persons covered at end of policy or contract year	Policy or contract year	
				(f) From	(g) To
22-1211670	68241	006372	9012	07/01/2022	06/30/2023

2 Insurance fee and commission information. Enter the total fees and total commissions paid. List in line 3 the agents, brokers, and other persons in descending order of the amount paid.
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(a) Total amount of commissions paid	(b) Total amount of fees paid
0	0

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

Part II Investment and Annuity Contract Information

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

4	Current value of plan's interest under this contract in the general account at year end.....	4	
5	Current value of plan's interest under this contract in separate accounts at year end.....	5	8102748

6 Contracts With Allocated Funds:**a** State the basis of premium rates ▶

b	Premiums paid to carrier	6b	
c	Premiums due but unpaid at the end of the year	6c	
d	If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, enter amount..... Specify nature of costs ▶	6d	

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

f If contract purchased, in whole or in part, to distribute benefits from a terminating plan, check here ▶ ☐**7 Contracts With Unallocated Funds (Do not include portions of these contracts maintained in separate accounts)**

a Type of contract: (1) ☐ deposit administration (2) ☐ immediate participation guarantee
(3) ☐ guaranteed investment (4) ☐ other ▶

b	Balance at the end of the previous year	7b	
c	Additions: (1) Contributions deposited during the year	7c(1)	
	(2) Dividends and credits.....	7c(2)	
	(3) Interest credited during the year.....	7c(3)	
	(4) Transferred from separate account.....	7c(4)	
	(5) Other (specify below)	7c(5)	
	▶		
	(6) Total additions.....	7c(6)	0
d	Total of balance and additions (add lines 7b and 7c(6))	7d	
e	Deductions:		
	(1) Disbursed from fund to pay benefits or purchase annuities during year	7e(1)	
	(2) Administration charge made by carrier.....	7e(2)	
	(3) Transferred to separate account.....	7e(3)	
	(4) Other (specify below)	7e(4)	
	▶		
	(5) Total deductions.....	7e(5)	0
f	Balance at the end of the current year (subtract line 7e(5) from line 7d)	7f	

Part III Welfare Benefit Contract Information

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

8 Benefit and contract type (check all applicable boxes)

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

9 Experience-rated contracts:

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

10 Nonexperience-rated contracts:

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

Specify nature of costs.

Part IV Provision of Information

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

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

SCHEDULE MB (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6059 of the Internal Revenue Code (the Code). File as an attachment to Form 5500 or 5500-SF.	OMB No. 1210-0110 2022 This Form is Open to Public Inspection
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For calendar plan year 2022 or fiscal plan year beginning 07/01/2022 and ending 06/30/2023

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 LOCAL NO. 1 PENSION TRUST FUND	B Three-digit plan number (PN) 001
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF TRUSTEES OF LOCAL 1 PENSION FUND	D Employer Identification Number (EIN) 51-6055057

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

1a Enter the valuation date: Month 07 Day 01 Year 2022	
b Assets	
(1) Current value of assets	1b(1) 266468674
(2) Actuarial value of assets for funding standard account	1b(2) 273593091
c (1) Accrued liability for plan using immediate gain methods	1c(1) 279398529
(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) 259001160
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) 490789137
(b) Expected increase in current liability due to benefits accruing during the plan year	1d(2)(b) 15182196
(c) Expected release from "RPA '94" current liability for the plan year	1d(2)(c) 15052665
(3) Expected plan disbursements for the plan year	1d(3) 16366688

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	03/18/2024
Signature of actuary JOHN J. MCKEVITT III	Date 23-08580
Type or print name of actuary CHEIRON, INC.	Most recent enrollment number 312-629-8401
Firm name 200 WEST MONROE, SUITE 1800, 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 ☐

2 Operational information as of beginning of this plan year:

a Current value of assets (see instructions)	2a	266468674
b "RPA '94" current liability/participant count breakdown:	(1) Number of participants	(2) Current liability
(1) For retired participants and beneficiaries receiving payment.....	2403	132265561
(2) For terminated vested participants	2672	103497747
(3) For active participants:		
(a) Non-vested benefits		10754994
(b) Vested benefits		244270835
(c) Total active	3739	255025829
(4) Total	8814	490789137
c If the percentage resulting from dividing line 2a by line 2b(4), column (2), is less than 70%, enter such percentage	2c	54.29 %

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
12/31/2022	11690444				
Totals ▶			3(b)	11690444	3(c)

(d) Total withdrawal liability amounts included in line 3(b) total **3(d)** 0**4** Information on plan status:

a Funded percentage for monitoring plan's status (line 1b(2) divided by line 1c(3))	4a	105.6 %
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	2.27 %
	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)	6P17
(2) Females	6c(2)	6FP17
d Valuation liability interest rate	6d	6.50 %
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)	6.50 %
g Estimated investment return on actuarial value of assets for year ending on the valuation date	6g	7.2 %
h Estimated investment return on current value of assets for year ending on the valuation date	6h	-8.4 %
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)	1038771
(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	-4088942	-408329

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	4869655

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)	107434989	15949333
9c(2)		
9c(3)		

d Interest as applicable on lines 9a, 9b, and 9c.....**9d** 1353234**e** Total charges. Add lines 9a through 9d.....**9e** 22172222**Credits to funding standard account:****f** Prior year credit balance, if any**9f** 71553960**g** Employer contributions. Total from column (b) of line 3.....**9g** 11690444**h** Amortization credits as of valuation date.....

	Outstanding balance	
9h	30075591	4786867

i Interest as applicable to end of plan year on lines 9f, 9g, and 9h.....**9i** 5336112**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)	95161446	
9j(2)	177369859	
9j(3)		

k (1) Waived funding deficiency.....**9k(1)****(2)** Other credits.....**9k(2)****l** Total credits. Add lines 9f through 9i, 9j(3), 9k(1), and 9k(2)**9l** 93367383**m** Credit balance: If line 9l is greater than line 9e, enter the difference**9m** 71195161**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
- (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(1)	
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 07/01/2022 and ending 06/30/2023		
A Name of plan LOCAL NO. 1 PENSION TRUST FUND	B Three-digit plan number (PN) ▶	001
C Plan sponsor's name as shown on line 2a of Form 5500 TRUSTEES OF LOCAL 1 PENSION FUND	D Employer Identification Number (EIN) 51-6055057	

Part I Service Provider Information (see instructions)

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation
BLACKROCK INVESTMENT MANAGEMENT
20-5319476

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation
LANDMARK EQUITY ADVISORS, LLC
06-1519082

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation
MESIROW FINANCIAL
353 N. CLARK STREET CHICAGO, IL 60654

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation
PACIFIC INVESTMENT MANAGEMENT CO.
33-0629048

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

NEW TOWER TRUST COMPANY

30-0872552

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

INVESCO TRUST COMPANY

46-3793325

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

GROSVENOR CAPITAL MANAGEMENT

36-3795985

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

ENTRUST GLOBAL PARTNERS OFFSHORE LP

90-0644478

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

HAMILTON LANE ADVISORS LLC

23-2962336

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

GCM CUSTOMIZED INVESTMENT GROUP LP

80-0952472

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

VOYA INVESTMENT TRUST COMPANY

06-1440627

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

BOYD WATTERSON ASSET MANGEMENT LLC

1301 E 9TH STREET 2900
CLEVELAND, OH 44114

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

WILLIAM BLAIR & COMPANY LLC

150 N. RIVERSIDE PLAZA
CHICAGO, IL 60606

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

INVESCO ADVISERS, INC.

58-1707262

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

LSV ASSET MANAGEMENT

23-2772200

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

ULLICO INVESTMENT ADVISORS INC.

52-6435649

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

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

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

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

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

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

WILSON-MCSHANE CORPORATION

41-0956552

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
13	NONE	456000	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

KAYNE ANDERSON RUDNICK

2000 AVENUE OF THE STARS
LOS ANGELES, CA 90067

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 68	NONE	136568	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☐ No ☐

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

LEGACY PROFESSIONALS

32-0043599

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
10	NONE	80864	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)

SEGAL MARCO ADVISORS

13-2646110

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
27	NONE	80000	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

LANER MUCHIN, LTD.

36-3088463

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
29	NONE	79399	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

CHEIRON, INC.

13-4215617

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
11	NONE	60075	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?
28 51	NONE	52113	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

PRUDENTIAL INVESTMENTS

22-1211670

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 52	NONE	46916	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☐ No ☐

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

AMALGAMATED BANK

13-4920330

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
19 28 51 65	NONE	46500	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)

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?
28 52	NONE	20606	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☐ No ☐

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

BANSLEY & KIENER

36-2152389

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
10	NONE	17434	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

ASHER, GITTLER & D'ALBA LTD

36-2786883

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
29	NONE	11508	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)

BNY MELLON

25-6078093

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
19 28 52	NONE	5791	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☐ No ☐

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

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

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

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

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
(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 07/01/2022 and ending 06/30/2023		
A Name of plan LOCAL NO. 1 PENSION TRUST FUND	B Three-digit plan number (PN) ►	001
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 TRUSTEES OF LOCAL 1 PENSION FUND		
D Employer Identification Number (EIN) 51-6055057		
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: INVESCO GLOBAL ASSET ALLOCATION		
b Name of sponsor of entity listed in (a): INVESCO TRUST COMPANY		
c EIN-PN 20-2583973-189	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 18266327
a Name of MTIA, CCT, PSA, or 103-12 IE: MULTI-EMPLOYER PROPERTY TRUST		
b Name of sponsor of entity listed in (a): NEW TOWER TRUST COMPANY		
c EIN-PN 52-6218800-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 6460182
a Name of MTIA, CCT, PSA, or 103-12 IE: PRISA ACCOUNT		
b Name of sponsor of entity listed in (a): THE PRUDENTIAL INSURANCE COMPANY OF AMERICA		
c EIN-PN 22-1211670-038	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 8102748
a Name of MTIA, CCT, PSA, or 103-12 IE: VOYA SENIOR LOAN TRUST FUND		
b Name of sponsor of entity listed in (a): VOYA INVESTMENT TRUST CO		
c EIN-PN 06-1440627-045	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 11486796
a Name of MTIA, CCT, PSA, or 103-12 IE: LONGVIEW SMALLCAP 600 INDEX FUND		
b Name of sponsor of entity listed in (a): AMALGAMATED BANK		
c EIN-PN 13-4920330-004	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 10968695
a Name of MTIA, CCT, PSA, or 103-12 IE: BNY MELLON AFL-CIO SL LAR CAP STCK		
b Name of sponsor of entity listed in (a): THE BANK OF NEW YORK MELLON		
c EIN-PN 25-6078093-355	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 91199814
a Name of MTIA, CCT, PSA, or 103-12 IE: NIS HIGH YIELD FUND, LLC		
b Name of sponsor of entity listed in (a): NATIONAL INVESTMENT SERVICES OF AMERICA , LLC		
c EIN-PN 39-2021943-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 1520124

a Name of MTIA, CCT, PSA, or 103-12 IE: ULLICO INFRASTRUCTURE TAX EXEMPT FD

b Name of sponsor of entity listed in (a): ULLICO INVESTMENT ADVISORS, INC

c EIN-PN 90-0622302-001	d Entity code E	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 6910686
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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)
-----------------	----------------------	---

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

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

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

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

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

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

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

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

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

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

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

c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
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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 07/01/2022 and ending 06/30/2023		
A Name of plan LOCAL NO. 1 PENSION TRUST FUND		B Three-digit plan number (PN) ► 001
C Plan sponsor's name as shown on line 2a of Form 5500 TRUSTEES OF LOCAL 1 PENSION FUND		D Employer Identification Number (EIN) 51-6055057

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	560470	1018760
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions.....	1b(1)	1050168	1015387
(2) Participant contributions.....	1b(2)		
(3) Other.....	1b(3)	1105622	919734
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit).....	1c(1)	15237590	7704608
(2) U.S. Government securities	1c(2)	7130333	7778155
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)	8045788	4263633
(B) All other	1c(3)(B)	1850630	5624173
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common.....	1c(4)(B)	14928768	17701473
(5) Partnership/joint venture interests	1c(5)	37798327	41453219
(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)	118984002	139901938
(10) Value of interest in pooled separate accounts	1c(10)	9223545	8102748
(11) Value of interest in master trust investment accounts.....	1c(11)		
(12) Value of interest in 103-12 investment entities	1c(12)	6775660	6910686
(13) Value of interest in registered investment companies (e.g., mutual funds).....	1c(13)	32508978	34146324
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)		
(15) Other	1c(15)	11510986	10921412

1d Employer-related investments:		(a) Beginning of Year	(b) End of Year
(1) Employer securities	1d(1)		
(2) Employer real property	1d(2)		
e Buildings and other property used in plan operation	1e		
f Total assets (add all amounts in lines 1a through 1e)	1f	266710867	287462250

Liabilities

g Benefit claims payable	1g		
h Operating payables	1h	91891	112529
i Acquisition indebtedness	1i		
j Other liabilities	1j	150302	57605
k Total liabilities (add all amounts in lines 1g through 1j)	1k	242193	170134

Net Assets

l Net assets (subtract line 1k from line 1f)	1l	266468674	287292116
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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)	11690444	
(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)		11690444
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	356223	
(B) U.S. Government securities	2b(1)(B)	189389	
(C) Corporate debt instruments	2b(1)(C)	388812	
(D) Loans (other than to participants)	2b(1)(D)		
(E) Participant loans	2b(1)(E)		
(F) Other	2b(1)(F)	77414	
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		1011838
(2) Dividends: (A) Preferred stock	2b(2)(A)		
(B) Common stock	2b(2)(B)	262062	
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	931072	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		1193134
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)	44094712	
(B) Aggregate carrying amount (see instructions)	2b(4)(B)	42049891	
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)		2044821
(5) Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)		
(B) Other	2b(5)(B)	2271564	
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		2271564

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		15449834
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		-726302
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities.....	2b(9)		497299
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		706275
c Other income	2c		
d Total income. Add all income amounts in column (b) and enter total	2d		34138907
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	11719325	
(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)		11719325
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)	249280	
(2) Contract administrator fees	2i(2)	456000	
(3) Investment advisory and management fees	2i(3)	525704	
(4) Other	2i(4)	365156	
(5) Total administrative expenses. Add lines 2i(1) through (4)	2i(5)		1596140
j Total expenses. Add all expense amounts in column (b) and enter total	2j		13315465
Net Income and Reconciliation			
k Net income (loss). Subtract line 2j from line 2d	2k		20823442
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: **LEGACY PROFESSIONALS LLP**

(2) EIN: **32-0043599**

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

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

Part IV Compliance Questions

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

During the plan year:

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

	Yes	No	Amount
4a		X	

	Yes	No	Amount
b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)			
4b		X	
c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)			
4c		X	
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)			
4d		X	
e Was this plan covered by a fidelity bond?	X		500000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		X	
4f		X	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?	X		51570270
4g	X		51570270
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?		X	
4h		X	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	X		
4i	X		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.)	X		
4j	X		
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?		X	
4k		X	
l Has the plan failed to provide any benefit when due under the plan?		X	
4l		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)		X	
4m		X	
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.			
4n			

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

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

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

5c Was the plan a defined benefit plan covered under the PBGC insurance program at any time during this plan year? (See ERISA section 4021 and instructions.) ☒ Yes ☐ No ☐ Not determined
If "Yes" is checked, enter the My PAA confirmation number from the PBGC premium filing for this plan year 499546.

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 07/01/2022 and ending 06/30/2023		
A Name of plan LOCAL NO. 1 PENSION TRUST FUND		B Three-digit plan number (PN) ► 001
C Plan sponsor's name as shown on line 2a of Form 5500 TRUSTEES OF LOCAL 1 PENSION FUND		D Employer Identification Number (EIN) 51-6055057
Part I	Distributions	
All references to distributions relate only to payments of benefits during the plan year.		
1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions.....		1 0
2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits): EIN(s): _____ Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.		
3 Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year.....		3 0
Part II	Funding Information (If the plan is not subject to the minimum funding requirements of section 412 of the Internal Revenue Code or ERISA section 302, skip this Part.)	
4 Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)? ☐ Yes ☒ No ☐ N/A If the plan is a defined benefit plan, go to line 8.		
5 If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. Date: Month _____ Day _____ Year _____ If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.		
6 a Enter the minimum required contribution for this plan year (include any prior year accumulated funding deficiency not waived).....		6a
b Enter the amount contributed by the employer to the plan for this plan year.....		6b
c Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount).....		6c
If you completed line 6c, skip lines 8 and 9.		
7 Will the minimum funding amount reported on line 6c be met by the funding deadline? ☐ Yes ☐ No ☐ N/A		
8 If a change in actuarial cost method was made for this plan year pursuant to a revenue procedure or other authority providing automatic approval for the change or a class ruling letter, does the plan sponsor or plan administrator agree with the change? ☐ Yes ☐ No ☒ N/A		
Part III	Amendments	
9 If this is a defined benefit pension plan, were any amendments adopted during this plan year that increased or decreased the value of benefits? If yes, check the appropriate box. If no, check the "No" box..... ☐ Increase ☐ Decrease ☐ Both ☒ No		
Part IV	ESOPs (see instructions). If this is not a plan described under section 409(a) or 4975(e)(7) of the Internal Revenue Code, skip this Part.	
10 Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan?..... ☐ Yes ☐ No		
11 a Does the ESOP hold any preferred stock?..... ☐ Yes ☐ No		
b If the ESOP has an outstanding exempt loan with the employer as lender, is such loan part of a "back-to-back" loan? (See instructions for definition of "back-to-back" loan.)..... ☐ Yes ☐ No		
12 Does the ESOP hold any stock that is not readily tradable on an established securities market?..... ☐ Yes ☐ No		
For Paperwork Reduction Act Notice, see the Instructions for Form 5500.		
Schedule R (Form 5500) 2022 v. 220413		

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

13 Enter the following information for each employer that (1) contributed more than 5% of total contributions to the plan during the plan year or (2) was one of the top-ten highest contributors (measured in dollars). See instructions. *Complete as many entries as needed to report all applicable employers.*

a Name of contributing employer **555 W MADISON**

b EIN **20-8715096** **c** Dollar amount contributed by employer **138559**

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 **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) **242.66**

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

a Name of contributing employer **3233 S KING DRIVE**

b EIN **92-3250748** **c** Dollar amount contributed by employer **107984**

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 **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) **242.66**

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

a Name of contributing employer **2801 S KING DR**

b EIN **94-3226677** **c** Dollar amount contributed by employer **72070**

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 **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) **242.66**

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

a Name of contributing employer **5441 N EAST RIVER RD**

b EIN **83-2595519** **c** Dollar amount contributed by employer **66004**

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 **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) **242.66**

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

a Name of contributing employer **6415 S CALUMET**

b EIN **27-4685679** **c** Dollar amount contributed by employer **66004**

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 **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) **242.66**

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

a Name of contributing employer **2960 S FEDERAL**

b EIN **36-6000618** **c** Dollar amount contributed by employer **64790**

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 **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) **242.66**

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

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 **400 E RANDOLPH ST**

b EIN **36-2780451** **c** Dollar amount contributed by employer **62849**

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 **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) **242.66**

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

a Name of contributing employer **3250 W DIVISION STREET**

b EIN **23-7087890** **c** Dollar amount contributed by employer **62606**

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 **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) **242.66**

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

a Name of contributing employer **5020 S LAKE SHORE DR**

b EIN **92-3250748** **c** Dollar amount contributed by employer **61393**

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 **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) **242.66**

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

a Name of contributing employer **333 E ONTARIO**

b EIN **36-3955612** **c** Dollar amount contributed by employer **61393**

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 **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) **242.66**

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

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	15
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	6
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	3
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	2.50
b	The corresponding number for the second preceding plan year.....	15b	2.00
16	Information with respect to any employers who withdrew from the plan during the preceding plan year:		
a	Enter the number of employers who withdrew during the preceding plan year	16a	
b	If line 16a is greater than 0, enter the aggregate amount of withdrawal liability assessed or estimated to be assessed against such withdrawn employers.....	16b	
17	If assets and liabilities from another plan have been transferred to or merged with this plan during the plan year, check box and see instructions regarding supplemental information to be included as an attachment ☐		

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

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

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

a Enter the percentage of plan assets held as:
 Stock: 53.1 % Investment-Grade Debt: 14.0 % High-Yield Debt: 4.3 % Real Estate: 9.3 % Other: 19.3 %

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 _____

**SERVICE EMPLOYEES INTERNATIONAL UNION
LOCAL NO. 1 PENSION FUND**

FINANCIAL STATEMENTS

JUNE 30, 2023

**SERVICE EMPLOYEES INTERNATIONAL UNION
LOCAL NO. 1 PENSION FUND**

FINANCIAL STATEMENTS WITH SUPPLEMENTARY INFORMATION

JUNE 30, 2023 AND 2022

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REPORT OF INDEPENDENT AUDITORS

To the Participants and Trustees of
Service Employees International Union
Local No. 1 Pension Fund

Opinion

We have audited the financial statements of Service Employees International Union Local No. 1 Pension Fund (the Plan), an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (ERISA), which comprise the statements of net assets available for benefits as of June 30, 2023 and 2022, 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 accompanying financial statements present fairly, in all material respects, the net assets available for benefits of Service Employees International Union Local No. 1 Pension Fund as of June 30, 2023 and 2022, and the changes in its net assets available for benefits for the years then ended, and the accumulated plan benefits as of June 30, 2022, and the changes in its accumulated plan benefits for the years then ended, in accordance with accounting principles generally accepted in the United States of America.

Basis for Opinion

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

Responsibilities of Management for the Financial Statements

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

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

Responsibilities of Management for the Financial Statements (continued)

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

Auditors' Responsibilities for the Audit of the Financial Statements

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

In performing an audit in accordance with GAAS, we:

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

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

Legacy Professionals LLP

Westchester, Illinois

April 11, 2024

**SERVICE EMPLOYEES INTERNATIONAL UNION
LOCAL NO. 1 PENSION FUND**

STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS

JUNE 30, 2023 AND 2022

ASSETS	<u>2023</u>	<u>2022</u>
INVESTMENTS - at fair value		
Mutual funds	\$ 34,146,324	\$ 32,508,978
Common and preferred stocks	17,701,473	14,928,768
U. S. Government and Government		
Agency obligations	7,778,155	7,130,333
Corporate bonds and notes	4,351,120	4,458,867
Collateralized mortgage obligations	5,536,686	5,437,551
Municipal bonds	804,361	1,421,495
Common collective trusts	139,901,938	118,984,002
Pooled separate account	8,102,748	9,223,545
Limited partnerships	48,363,905	44,573,987
Hedge funds	10,117,051	10,089,491
Short-term investments	<u>7,704,608</u>	<u>15,237,590</u>
Total investments	<u>284,508,369</u>	<u>263,994,607</u>
RECEIVABLES		
Employer contributions	1,015,387	1,050,168
Due from related organization	740,876	987,258
Accrued interest and dividends	<u>174,331</u>	<u>114,698</u>
Total receivables	<u>1,930,594</u>	<u>2,152,124</u>
PREPAID EXPENSES	<u>4,527</u>	<u>3,666</u>
CASH	<u>1,018,760</u>	<u>560,470</u>
Total assets	<u>287,462,250</u>	<u>266,710,867</u>
LIABILITIES AND NET ASSETS		
LIABILITIES		
Accounts payable	112,529	91,891
Due to related organization	44,000	-
Due to broker	<u>13,605</u>	<u>150,302</u>
Total liabilities	<u>170,134</u>	<u>242,193</u>
NET ASSETS AVAILABLE FOR BENEFITS	<u>\$ 287,292,116</u>	<u>\$ 266,468,674</u>

See accompanying notes to financial statements.

**SERVICE EMPLOYEES INTERNATIONAL UNION
LOCAL NO. 1 PENSION FUND**

STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS

YEARS ENDED JUNE 30, 2023 AND 2022

	<u>2023</u>	<u>2022</u>
ADDITIONS		
Investment income		
Net appreciation (depreciation) in fair value of investments	\$ 20,243,491	\$ (25,844,233)
Interest and dividends	<u>2,204,972</u>	<u>1,884,707</u>
	22,448,463	(23,959,526)
Less investment expenses	<u>(525,704)</u>	<u>(374,810)</u>
Investment income (loss) - net	21,922,759	(24,334,336)
Employer contributions	<u>11,690,444</u>	<u>11,532,738</u>
	<u>33,613,203</u>	<u>(12,801,598)</u>
DEDUCTIONS		
Pension benefits	11,411,728	10,545,812
Death benefits	307,597	585,063
Administrative expenses	<u>1,070,436</u>	<u>1,072,324</u>
Total deductions	<u>12,789,761</u>	<u>12,203,199</u>
NET INCREASE (DECREASE)	20,823,442	(25,004,797)
NET ASSETS AVAILABLE FOR BENEFITS		
Beginning of year	<u>266,468,674</u>	<u>291,473,471</u>
End of year	<u>\$ 287,292,116</u>	<u>\$ 266,468,674</u>

See accompanying notes to financial statements.

**SERVICE EMPLOYEES INTERNATIONAL UNION
LOCAL NO. 1 PENSION FUND**

NOTES TO FINANCIAL STATEMENTS

JUNE 30, 2023 AND 2022

NOTE 1. DESCRIPTION OF THE PLAN

Service Employees International Union Local No. 1 Pension Fund (the Plan) was established in 1967 as a result of a collective bargaining agreement between the local union and certain employer associations to provide retirement, death and disability benefits for eligible participants. The Plan is primarily funded by employer contributions as specified in the collective bargaining agreements. The Plan is a multiemployer defined benefit pension plan and is subject to provisions of the Employee Retirement Income Security Act of 1974 (ERISA), as amended.

Under current provisions, a participant enters the Plan on the first day of the calendar quarter following the first day in covered employment. Participants become vested after earning at least five years of vesting service and five years of pension credit. A participant is credited with one year of vesting service for each calendar year in which 1,000 hours of service in covered employment is completed, or in which the participant is credited with at least 1/2 pension credit.

Normal retirement can occur at age 65, provided the participant has 25 years of credited service. The benefit amount is based on the benefit level or accrual rate applicable at the date of retirement and the number of years of credited service, up to the maximum, as defined by the Plan.

A participant who is at least 62 years of age and has at least 25 years of credited service is eligible for early retirement. Early retirement benefits will be reduced by the early retirement factors in effect and the participant's age at the time of retirement.

A participant who is determined to be totally and permanently disabled and is at least 45 years of age with at least 15 years of credited service, is eligible for a disability retirement pension.

Participants may be eligible for a deferred vested pension if they terminate covered employment with at least five years of vesting service, attain normal retirement age while in covered employment, or terminate from covered employment with at least five years of vesting service or five pension credits. A participant must also not be eligible for another type of pension under the Plan. A deferred vested pension begins upon attainment of normal retirement age or the end of the fifth consecutive year of participation in the Plan, if later. If a participant terminates covered employment prior to age 62 with at least 25 years of credited service, the deferred vested pension may begin at a reduced amount at age 62.

Beneficiaries of deceased participants may be eligible for a post-retirement or pre-retirement death benefit in the amount of \$5,000 or \$10,000.

Benefits may be paid in several options, including life annuity and variations of monthly payments. Pension benefits are generally paid in equal installments as determined by the elected form of payment.

Participants should refer to the summary plan description for more complete information.

NOTE 2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Method of Accounting - The accompanying financial statements have been prepared using the accrual basis of accounting.

Investments - Investments are reported at fair value. The fair value of a financial instrument is the amount that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date (the exit price). Net appreciation or depreciation includes the Plan's gains and losses on investments bought and sold, as well as held during the year.

Purchases and sales of investments are reflected on a trade date basis.

Interest income is recorded on the accrual basis. Dividend income is recorded on the ex-dividend date.

Contributions Receivable - Employer contributions due and not paid at year end are recorded as contributions receivable. Employer contributions owed as a result of payroll compliance audits are recorded as income when agreed upon between the employer and the Plan. An allowance for doubtful accounts is considered unnecessary and is not provided.

Actuarial Present Value of Accumulated Plan Benefits - Accumulated plan benefits are those future periodic payments, including lump-sum distributions, that are attributable under the Plan's provisions to the service which employees have rendered. Accumulated plan benefits include benefits expected to be paid to (a) retired or terminated employees or their beneficiaries, (b) beneficiaries of employees who have died, and (c) present employees or their beneficiaries.

Revenue Recognition - Revenue derived from employer contributions is recognized in the period in which covered work is performed, based on the number of covered participants or the hours worked in covered employment and the contribution rates currently in effect, as set forth in the collective bargaining agreements. Employers are required to remit contributions monthly. The Plan carries out its purpose described in Note 1 within a jurisdiction primarily located in the Chicagoland area.

Payment of Benefits - Benefit payments to participants are recorded upon distribution.

Expenses - Certain investment related expenses are included in net appreciation (depreciation) in fair value of investments.

Estimates - The preparation of financial statements in conformity with generally accepted accounting principles requires management to make estimates and assumptions that affect certain reported amounts and disclosures in the financial statements. Actual results could differ from those estimates.

Subsequent Events - Subsequent events have been evaluated through April 11, 2024, which is the date the financial statements were available to be issued.

NOTE 3. PRIORITIES UPON TERMINATION

It is the intent of the Trustees to continue the Plan in full force and effect; however, the right to discontinue the Plan is reserved to the Trustees. Termination shall not permit any part of the Plan assets to be used for or diverted to purposes other than the exclusive benefit of pensioners, beneficiaries and participants. In the event of termination, the net assets of the Plan will be allocated to pay benefits in priorities as prescribed by ERISA and its related regulations. Whether or not a particular participant will receive full benefits should the Plan terminate at some future time will depend on the sufficiency of the Plan's net assets at that time and the priority of those benefits.

In addition, certain benefits under the Plan are insured by the Pension Benefit Guaranty Corporation (PBGC) if the Plan terminates. Generally, the PBGC guarantees most vested normal age retirement benefits, early retirement benefits and certain disability and survivor pensions. The PBGC does not guarantee all types of benefits and the amount of any individual participant's benefit protection is subject to certain limitations, particularly with respect to benefit increases as a result of plan amendments in effect for less than five years. Some benefits may be fully or partially provided for while other benefits may not be provided at all.

NOTE 4. TAX STATUS

The Plan's latest determination letter is dated October 20, 2015, in which the Internal Revenue Service (IRS) stated that the Plan and related trust, as then designed, was in compliance with the applicable requirements of the Internal Revenue Code (IRC). The Plan has been amended since receiving the determination letter. The Plan's administrator and the Plan's legal counsel believe that the Plan is currently designed and being operated in compliance with the applicable requirements of the IRC, and therefore believe that the Plan was qualified and the related trust was tax-exempt as of the financial statement date. The Plan is subject to tax, however, on the flow-through of partnership income through its investments structured as limited partnerships. For the years ended June 30, 2023 and 2022, the Plan has not determined whether income taxes are due for its activities. Accordingly, no provision for income taxes has been recorded in the accompanying financial statements.

Accounting principles generally accepted in the United States of America require the Plan to evaluate tax positions taken and recognize a tax liability if the Plan has taken uncertain tax positions that more likely than not would not be sustained upon examination by tax authorities. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress.

NOTE 5. FAIR VALUE MEASUREMENTS

The *Fair Value Measurements and Disclosures* Topic of the Financial Accounting Standards Board Accounting Standards Codification established a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1 measurements) and the lowest priority to unobservable inputs (Level 3 measurements). The following describes the three levels of the fair value hierarchy.

NOTE 5. FAIR VALUE MEASUREMENTS (CONTINUED)

Basis of Fair Value Measurement

Level 1	Unadjusted quoted prices in active markets that are accessible at the measurement date for identical, unrestricted assets or liabilities
Level 2	Quoted prices in markets that are not considered to be active or financial instruments for which all significant inputs are observable, either directly or indirectly
Level 3	Prices or valuations that require inputs that are both significant to the fair value measurement and unobservable

The methods used to measure fair value may produce an amount 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.

The following tables set forth, by level within the fair value hierarchy, the Plan's investment assets at fair value as of June 30, 2023 and 2022. As required, assets and liabilities are classified in their entirety based on the lowest level of input that is significant to the fair value measurement. In accordance with generally accepted accounting principles, certain investments that are measured at fair value using the net asset value per share (or its equivalent) practical expedient have not been classified in the fair value hierarchy. The fair value amounts presented in the following tables are intended to permit reconciliation of the fair value hierarchy to the amounts presented in the statements of net assets available for benefits.

		Fair Value Measurements at 6/30/23 Using		
		Quoted Prices in Active Markets for Identical Assets (Level 1)	Significant Other Observable Inputs (Level 2)	Significant Unobservable Inputs (Level 3)
	<u>Total</u>			
Mutual funds	\$ 34,146,324	\$ 34,146,324	\$ -	\$ -
Common and preferred stocks	17,701,473	17,701,473	-	-
U.S. Government and Government Agency obligations	7,778,155	5,734,802	2,043,353	-
Corporate bonds and notes	4,351,120	-	4,351,120	-
Collateralized mortgage obligations	5,536,686	-	5,536,686	-
Municipal bonds	804,361	-	804,361	-
Short-term investments	7,704,608	7,704,608	-	-
	<u>78,022,727</u>	<u>\$ 65,287,207</u>	<u>\$ 12,735,520</u>	<u>\$ -</u>
Investments measured at net asset value:				
Common collective trusts	139,901,938			
Pooled separate account	8,102,748			
Limited partnerships	48,363,905			
Hedge funds	10,117,051			
Total	<u>\$ 284,508,369</u>			

NOTE 5. FAIR VALUE MEASUREMENTS (CONTINUED)

		Fair Value Measurements at 6/30/22 Using		
		Quoted Prices in Active Markets for Identical Assets (Level 1)	Significant Other Observable Inputs (Level 2)	Significant Unobservable Inputs (Level 3)
	Total			
Mutual funds	\$ 32,508,978	\$ 32,508,978	\$ -	\$ -
Common and preferred stocks	14,928,768	14,928,768	-	-
U.S. Government and Government Agency obligations	7,130,333	6,033,282	1,097,051	-
Corporate bonds and notes	4,458,867	-	4,458,867	-
Collateralized mortgage obligations	5,437,551	-	5,437,551	-
Municipal bonds	1,421,495	-	1,421,495	-
Short-term investments	15,237,590	15,237,590	-	-
	81,123,582	\$ 68,708,618	\$ 12,414,964	\$ -
Investments measured at net asset value:				
Common collective trusts	118,984,002			
Pooled separate account	9,223,545			
Limited partnerships	44,573,987			
Hedge funds	10,089,491			
Total	\$ 263,994,607			

Level 1 Measurements

The fair values of the mutual funds are determined by reference to the funds' underlying assets, which are principally marketable equity and fixed income securities. Shares held in mutual funds are traded on national securities exchanges and are valued at the net asset value as of the last business day of each period presented.

Common and preferred stocks and U.S. Treasury securities are traded in active markets on national and international securities exchanges and are valued at closing prices on the last business day of each period presented.

Short-term investments represent shares held in mutual funds

Level 2 Measurements

U.S. Government and Government Agency obligations, corporate bonds and notes, collateralized mortgage obligations and municipal bonds are valued using by benchmarking model-derived prices to quoted market prices and trade data for identical or comparable securities. To the extent that quoted prices are not available, fair value is determined based on a valuation model that includes inputs such as interest rate yield curves and credit spreads. Securities traded in markets that are not considered active are valued based on quoted market prices, broker or dealer quotations, or alternative pricing sources with reasonable levels of price transparency. Securities that trade infrequently and therefore have little or no price transparency are valued using the investment manager's best estimates.

NOTE 5. FAIR VALUE MEASUREMENTS (CONTINUED)**Measurements Using Net Asset Value as a Practical Expedient**

Certain investments use net asset value as a practical expedient to estimate fair value. Net asset value is based on the fair value of the underlying investments held by the fund less its liability. This practical expedient is not used when it is determined to be probable that the fund will sell the investment for an amount different than the reported net asset value.

The common collective trusts, pooled separate account and one limited partnership are direct filing entities (DFEs) and file a Form 5500 annual report with the U.S. Department of Labor. The Plan is not required to disclose the significant investment strategies of DFE investments. The common collective trusts have redemption frequencies ranging from daily to quarterly. Certain common collective trusts require redemption notification ranging from 3 to 45 days. The pooled separate account has a quarterly redemption frequency and requires a 90-day notification. The limited partnership has a quarterly redemption frequency and requires a 45-day notice after an initial four-year lock up period. The fair value of the limited partnership was \$6,910,686 and \$6,775,660 at June 30, 2023 and 2022, respectively.

The following table summarizes information regarding investments valued at net asset value per share for investments, other than DFEs, as of June 30, 2023 and 2022:

	Fair Value		Underlying Assets/Strategy	Redemption	
	2023	2022		Frequency	Notice Period
Limited partnership	\$ 16,052,683	\$ 10,383,966	Non-U.S. developed and emerging market equities	Monthly	7 days
Limited partnership	\$ 6,145,800	\$ 6,962,325	Limited partnerships	Quarterly	90 days
Limited partnership	\$ 5,606,796	\$ 6,335,262	Private equity partnerships	Not eligible	N/A
Limited partnership	\$ 5,793,906	\$ 6,009,990	Commercial real estate leased to U.S. Government	Quarterly	60 days
Limited partnership	\$ 2,625,953	\$ 2,924,096	Investment portfolios	Not eligible	N/A
Limited partnership	\$ 2,065,169	\$ 2,385,248	Master partnership	Not eligible	N/A
Limited partnership	\$ 2,359,592	\$ 1,353,035	Master partnership	Not eligible	N/A
Limited partnership	\$ 515,779	\$ 994,504	Private equity investments	Not eligible	N/A
Limited partnership	\$ 272,460	\$ 365,298	Private equity investments	Not eligible	N/A
Limited partnership	\$ 15,081	\$ 84,603	In liquidation	N/A	N/A
Hedge fund	\$ 9,414,379	\$ 9,370,916	Master fund	Not eligible	N/A
Hedge fund	\$ 546,870	\$ 451,662	Portfolio funds which generally implement alternative investment strategies	Quarterly	95 days
Hedge fund	\$ 155,802	\$ 266,913	Master fund	Not eligible	N/A

NOTE 6. COMMITMENTS

The Plan had outstanding purchase commitments totaling approximately \$5,356,000 under arrangements with various limited partnerships and hedge fund managers at June 30, 2023.

NOTE 7. CONCENTRATION OF INVESTMENTS

As of June 30, 2023 and 2022, the Plan held units in the BNY Mellon AFL-CIO SL Large Cap Stock Index Fund with a fair value of \$91,199,814 and \$70,751,391 (approximately 32% and 27% of net assets available for benefits), respectively. This fund seeks to track the performance of the Russell 1000 Index.

NOTE 8. ACTUARIAL INFORMATION

An actuarial valuation of the Plan was made by Cheiron as of June 30, 2022. Information shown in the report included the following:

Vested benefits:	
Participants currently receiving payments	\$ 95,772,465
Other	<u>170,949,196</u>
Total vested benefits	266,721,661
Non-vested benefits	<u>3,405,882</u>
Total actuarial present value of accumulated plan benefits	<u><u>\$ 270,127,543</u></u>

As reported by the actuary, the changes in the present value of accumulated plan benefits for the year ended June 30, 2022 were as follows:

Actuarial present value of accumulated plan benefits at beginning of year		\$ 244,407,207
Increase (decrease) during the year attributable to:		
Benefits accumulated, net of experience gain or loss	\$ 4,958,001	
Interest	15,797,471	
Change in actuarial assumptions	441,801	
Administrative expenses paid	(1,072,324)	
Plan amendment	16,726,262	
Benefits paid	<u>(11,130,875)</u>	
Net increase		<u>25,720,336</u>
Actuarial present value of accumulated plan benefits at end of year		<u><u>\$ 270,127,543</u></u>

The Plan was amended effective January 1, 2022, to reflect that the Plan's maximum pension credits increased to 40, and the accrual rate per pension credit increased to \$37.50 not to exceed a maximum benefit of \$1,500 per month for participants who terminate on or after January 1, 2022.

NOTE 8. ACTUARIAL INFORMATION (CONTINUED)

The actuarial valuation was made using the unit credit cost method. Some of the more significant actuarial assumptions used in the valuation were as follows:

Mortality:

Healthy - RP-2014 Blue Collar Mortality table projected to 2017 using Scale MP-2014

Disabled - RP-2014 Disabled Retiree Mortality table projected to 2017 using
Scale MP-2014

Retirement age - Ranges from 62 to 70 with varying percentages at each age

Investment rate of return - 6.50% compounded annually

Changes to the actuarial assumptions include a change in the current liability mortality and interest rates, and present value of expected administrative expenses.

The actuarial assumptions are based on the presumption that the Plan will continue. Were the Plan to terminate, different actuarial assumptions and other factors might be applicable in determining actuarial results. Pension benefits in excess of the present assets of the Plan are dependent upon contributions received under collective bargaining agreements with employers and income from investments.

Since information on the accumulated plan benefits at June 30, 2023, and the changes therein for the year then ended and are not included, these financial statements do not purport to present a complete presentation of the financial status of the Plan as of June 30, 2023, and the changes therein for the year then ended, but only a presentation of the net assets available for benefits and the changes therein as of and for the year ended June 30, 2023. The complete financial status is presented as of June 30, 2022.

As of July 1, 2023, the Plan was certified by its actuary to be in neither critical nor endangered status ("green zone"), within the meaning of the Pension Protection Act of 2006, as amended.

NOTE 9. RISKS AND UNCERTAINTIES

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.

The Plan holds several alternative investments in which the general partner or investment manager is generally required to value the underlying investments at estimated fair values using various subjective techniques. Due to inherent uncertainties involved in the valuations of investments that are not publicly traded, estimated fair values may differ materially from the values that would have been used had a ready market for the underlying securities existed.

NOTE 9. RISKS AND UNCERTAINTIES (CONTINUED)

The actuarial present value of accumulated plan benefits is 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.

NOTE 10. PARTY-IN-INTEREST TRANSACTIONS

The Plan's investments are held by Amalgamated Bank, who provides certain custodial services to the Plan. In addition, one of the Plan's investments is managed by Amalgamated Bank. Transactions with Amalgamated Bank qualify as party-in-interest transactions, which Plan management believes are exempt from the prohibited transaction rules of ERISA.

NOTE 11. FUNDING POLICY

The Plan is primarily funded by employer contributions. Participating employers contribute such amounts as specified in their collective bargaining agreements. During the years ended June 30, 2023 and 2022, the monthly contribution rate was \$242.66. Employers covered under the Apartment Building Owners and Manager Association of Illinois collective bargaining agreement also pay an hourly contribution rate of \$1.40 for employees other than regular full-time employees.

The Plan's actuary has advised that the minimum funding requirements of ERISA were being met as of July 1, 2022.

NOTE 12. RELATED PARTY TRANSACTIONS

The Plan shares certain common governance with a local union, a welfare plan, a retirement savings plan, a 401(k) retirement plan and a training fund.

Contributions for the Plan are received and deposited into a lockbox account held by the related welfare plan. Any contributions held in the lockbox account at year end are transferred to the Plan shortly after year end and are included in amounts due from related organizations in the accompanying financial statements. Lockbox fees are also shared with the related welfare plan and the Plan's portion of fees to be reimbursed are included in amounts due to related organization in the accompanying financial statements.

REPORT OF INDEPENDENT AUDITORS ON SUPPLEMENTAL SCHEDULES

To the Participants and Trustees of
Service Employees International Union
Local No. 1 Pension Fund

We have audited the financial statements of Service Employees International Union Local No. 1 Pension Fund (the Plan) as of June 30, 2023 and 2022 and our report thereon dated April 11, 2024, which expressed an unmodified opinion on those financial statements, appears on pages 1 and 2. Our audits were conducted for the purposes of forming an opinion on the financial statements as a whole. Supplemental Schedules 1 and 2 are presented for purposes of additional analysis and are not a required part of the financial statements but is supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audits of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with GAAS.

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

Legacy Professionals LLP

Westchester, Illinois

April 11, 2024

Schedule MB Attachment (Form 5500) — 2022 Plan Year
S.E.I.U. Local No. 1 Pension Trust Fund
EIN: 51-6055057, Plan No.: 001

Schedule MB, line 6 — Summary of Plan Provisions

This summary of plan provisions provides an overview of the major provisions of the Fund used in the actuarial valuation. It is not intended to replace the more precise language of the Plan document, and if there is any difference between the description of the Plan herein and the actual text of the plan document, the Plan document will govern.

1. Effective Date

The Fund was established on October 1, 1967. The most recent amendment was effective January 1, 2022.

2. Participation

Employees become participants on the first day of the calendar quarter following their entrance into Covered Employment.

3. Covered Employment

Any period of employment with a contributing employer for which a contribution was required to be made on their behalf.

4. Future Pension Credit

A participant is credited with future pension credit since January 1, 2008 as follows:

Amount of Contribution During Calendar Year	Pension Credit
Less than \$472.00	No Credit
\$472.00, but less than \$945.00	1/4 Credit
\$945.00, but less than \$1,417.00	1/2 Credit
\$1,417.00, but less than \$1,890.00	3/4 Credit
\$1,890.00 or more	1 Credit

5. Years of Vesting Service

A participant is credited with one year of vesting service for each calendar year in which they completed at least 1,000 hours of work in Covered Employment or in which they are credited with at least 1/2 pension credit.

6. Normal Retirement Benefit

Eligibility: Age 65 or more with at least 25 pension credits

Benefit: Effective January 1, 2022, the monthly amount is equal to \$37.50 multiplied by the participant's pension credit (not to exceed 40 pension credits) for termination on or after January 1, 2022.

7. Early Retirement Benefit

Eligibility: Age 62 with at least 25 pension credits

Benefit: Effective for terminations from Covered Employment on or after July 1, 2016, the monthly amount is equal to participant's normal retirement pension multiplied by the early retirement factor below based on the participant's attained age for each full year less than age 65.

Age at Annuity Starting Date of Pension	Early Retirement Factor
Age 62 (3 full years less than 65)	0.76093
Age 63 (2 full years less than 65)	0.83721
Age 64 (1 full year less than 65)	0.91907
Age 65 (or less than 1 full year before 65)	1.00000

Schedule MB, line 6 — Summary of Plan Provisions (Continued)

8. Deferred Vested Benefit

Eligibility: Either (a) or (b) below:

(a) Age 65 with at least one of the following:

- 5 years of vesting service on or after July 1, 1997,
- 5 pension credits, or
- 5th year of continuous participation in the Fund

(b) Age 62 with at least 25 pension credits

Benefit: Either (a), (b), or (c) below, then multiplied by the early retirement factor. If payment of the deferred vested pension begins prior to the participant's normal retirement age, the monthly amount shall be reduced by 8.5% for each full year preceding age 65.

(a) *For terminations prior to January 1, 2021:*

Equals 3% of the maximum normal retirement benefit pension in effect at the date of the participant's termination from Covered Employment multiplied by their pension credits (up to a maximum of 33-1/3 pension credits).

(b) *For terminations on or after January 1, 2021 and before January 1, 2022:*

For participants who earn an Hour of Service during this period, the monthly amount is equal to \$32.50 multiplied by the participant's pension credits (not to exceed 35 pension credits).

(c) *For terminations on or after January 1, 2022:*

For participants who earn an Hour of Service on or after January 1, 2022, the monthly amount is equal to \$37.50 multiplied by the participant's pension credits (not to exceed 40 pension credits).

9. Disability Retirement Benefit

Eligibility: Totally and permanently disabled at age 45 with at least 15 pension credits

Benefit: The normal retirement benefit earned to the date the participant retired due to disability, unreduced for age.

10. Death Benefit

(a) *Pre-Retirement*

Eligibility: Participant who dies on or after December 1, 2009, who had monthly contributions made for them in the month of their death and in the immediately preceding two months.

Benefit: \$10,000.00 death benefit awarded to the beneficiary.

(b) *Post-Retirement*

Eligibility: Pensioner receiving a pension on the day of their death based on 20 or more pension credits.

Benefit: \$10,000.00 death benefit awarded to the Beneficiary if the Pensioner that deceased had completed at least one hour of work as a participant on or after December 1, 2009, \$5,000.00 otherwise.

11. Surviving Spouse's Pension

Eligibility: A benefit is payable to the surviving spouse of any participant who dies after earning the right to a vested benefit or dies while receiving a disability pension prior to their normal retirement date; provided they have been married for at least one year prior to the participant's death.

Benefit: 50% of the amount that would have been payable had the participant retired and commenced benefits on the date of death or at the participant's earliest retirement age; payable in the form of a qualified Joint & Survivor pension.

Schedule MB Attachment (Form 5500) — 2022 Plan Year
S.E.I.U. Local No. 1 Pension Trust Fund
EIN: 51-6055057, Plan No.: 001

Schedule MB, line 6 — Summary of Plan Provisions (Continued)

12. Forms of payment

Normal Form:

- If Married: 50% Joint & Survivor Annuity
- If Single: Single Life Annuity

Optional Forms:

- 75% Joint & Survivor Annuity
- 100% Joint & Survivor Annuity

13. Changes to Plan Provisions Since Last Valuation

None

Supplemental Schedule 1

Local No. 1 Pension Trust Fund

EIN: 51-6055057 PN: 001

Schedule Supporting Form 5500 for 2022

Schedule H, Line 4i - Schedule of Assets (Held at End of Year)

		Statement Balance	Adjustments	Market Value	Cost Value
Interest-bearing Cash					
Amalgamated Page 2	Goldman Financial Square	\$ 7,703,827	\$ -	\$ 7,703,827	See Attached
Amalgamated Page 3	Goldman Financial Square Treasury Obligation	774	-	774	See Attached
Amalgamated Page 34	Dreyfus Government Cash Management	7	-	7	See Attached
	Total Interest-bearing Cash	7,704,608	-	7,704,608	
US Government Securities					
Amalgamated Page 4	US Government Obligations	5,734,803	-	5,734,803	See Attached
Amalgamated Page 7	Mortgage Backed Securities	2,043,352	-	2,043,352	See Attached
	Total US Government Securities	7,778,155	-	7,778,155	
Corporate Debt Instruments					
Amalgamated Page 3	Commercial Paper	87,487	-	87,487	See Attached
Amalgamated Page 19	Collateralized Mortgage Obligations	5,536,686	-	5,536,686	See Attached
	Total Corporate Debt Instruments	5,624,173	-	5,624,173	
Corporate Debt Instruments - preferred					
Amalgamated Page 30	Corporate Bonds	4,263,633	-	4,263,633	See Attached
Corporate Stocks					
Amalgamated Page 33	Common Stock - Less Landmark	17,701,473	-	17,701,473	See Attached
Partnership/Joint Venture Interests					
	Shares				
Amalgamated Page 34	LSV International Concentrated Equity Fund	16,089,826	(37,143)	16,052,683	See Attached
Amalgamated Page 34	Blackrock Vesey Street Fund V	2,884,020	(258,067)	2,625,953	See Attached
Amalgamated Page 33	Hamilton Lane Strategic Opportunity Offshore Fund IV	2,385,248	(320,079)	2,065,169	See Attached
Amalgamated Page 33	Hopewell Ventures LP	84,602	(69,521)	15,081	See Attached
Amalgamated Page 34	Boyd Watterson GSA	5,945,717	(151,811)	5,793,906	See Attached
Amalgamated Page 34	GCM Grosvenor Advance Feeder Fund LP	1,017,800	1,341,792	2,359,592	See Attached
Amalgamated Page 34	Landmark Equity Partners XV	994,504	(478,725)	515,779	See Attached
Amalgamated Page 34	Mesirow Financial Private Equity Fund VI	7,237,946	(1,631,150)	5,606,796	See Attached
Amalgamated Page 33	Landmark Equity Partners XIV	365,298	(92,838)	272,460	See Attached
	Prudential Investments - PRISA II	4,096.0948	-	6,145,800	
	Total Partnership/Joint Venture	43,150,761	(1,697,542)	41,453,219	
103-12 Investment entities					
Amalgamated Page 34	ULLICO Infrastructure Tax Exempt Fund	6,898,774	11,912	6,910,686	See Attached
Common/Collective Trusts					
	Shares				
Amalgamated Page 33	Invesco Global Asset Allocation Strategy Fund	18,132,643	133,684	18,266,327	See Attached
Amalgamated Page 33	NIS High Yield Fund, LLC	1,520,124	-	1,520,124	See Attached
Amalgamated Page 33	Voya Senior Loan Collective Trust Fund	10,870,075	616,721	11,486,796	See Attached
Amalgamated Page 34	Longview Small Cap 600 Index Fund	10,352,576	616,119	10,968,695	See Attached
Amalgamated Page 34	BNY Mellon AFL-CIO Stock Index Fund	87,000,000	4,199,814	91,199,814	See Attached
	Newtower - Multi-Employer Property Trust	449.4860	-	6,460,182	
	Total Common/Collective Trusts	134,335,600	5,566,338	139,901,938	
Pooled Separate Accounts					
	Shares				
	Prudential Investments - PRISA	93.9000	-	8,102,748	
Registered Investment Companies					
Amalgamated Page 33	PIMCO Total Return Bond Fund	20,248,708	-	20,248,708	See Attached
Amalgamated Page 34	William Blair International Leaders Fund Class I	13,897,616	-	13,897,616	See Attached
	Total Registered Investment Companies	34,146,324	-	34,146,324	
Other Investments					
Amalgamated Page 21	Municipal Obligations	804,361	-	804,361	See Attached
Amalgamated Page 33	Entrust Capital Special Opportunity Fund	451,662	95,208	546,870	See Attached
Amalgamated Page 33	GCM Grosvenor OFCV	79,854	15,638	95,492	See Attached
Amalgamated Page 33	Grosvenor Opportunistic Credit Fund V	9,433,734	(114,847)	9,318,887	See Attached
Amalgamated Page 33	Grosvenor Opportunistic Credit Fund III	205,457	(49,655)	155,802	See Attached
	Total Other Investments	10,975,068	(53,656)	10,921,412	
	Total Investments Held	\$ 280,681,317	\$ 3,827,052	\$ 284,508,369	

*As reported by Bank Administrator

SHORT TERM INVESTMENTS

7,703,827.3	GOLDMAN FINANCIAL SQUARE GOVT-A FD# 465 (AMALFGOV) MASTER #2839100 5.02% 38141W273	7,703,827.30	7,703,827.30	386,732	5.02
		To page 1	To page 1		

Investment Review - Detail Of General Investments

SHARES/FACE	ASSET	CARRYING VALUE	CURRENT PRICE	MARKET VALUE	EST ANN INC	YIELD TO MKT
773.42	GOLDMAN FINANCIAL SQUARE TREAS OBLIGATIONS-A FD# 468 (AMALFTRSY) MASTER#2839100 5% U38141W34	773.42 To page 1		773.42 To page 1	39	5.00
	TOTAL SHORT TERM INVESTMENTS	7,704,600.72		7,704,600.72	386,771	5.02
	COMMERCIAL PAPER					
40,000	ALEXANDRIA REAL ESTATE EQUITY COMMERCIAL PAPER 4.5% 07/30/2029 015271AG4	37,978.80	94.446	37,778.40	1,800	4.76
50,000	PUB SVC OKLAHOMA COMMERCIAL PAPER 01/15/2033 744533BQ2	51,899.50	99.418	49,709.00	190-	0.38-
	TOTAL COMMERCIAL PAPER	89,878.30 To page 1		87,487.40 To page 1	1,610	1.84
	U S GOVERNMENT OBLIGATIONS					
180,000	U.S. TREASURY BONDS 2.5% 02/15/2045 912810RK6	149,738.73	77.27	139,086.00	4,500	3.24
1,027,000	U.S. TREASURY BONDS 3.375% 11/15/2048 912810SE9	923,718.25	90.176	926,107.52	34,661	3.74
432,000	U.S. TREASURY NOTES 1.75% 08/15/2041 912810TA6	312,132.49	70.129	302,957.28	7,560	2.50
318,000	U.S. TREASURY NOTES 2.25% 02/15/2052 912810TD0	261,934.90	72.141	229,408.38	7,155	3.12
110,000	U.S. TREASURY NOTES 4% 11/15/2042 912810TM0	112,548.47	99.203	109,123.30	4,400	4.03
348,000	U.S. TREASURY NOTES 3.625% 02/15/2053 912810TN8	332,438.96	95.813	333,429.24	12,615	3.78
364,000	U.S. TREASURY BONDS 3.875% 02/15/2043 912810TQ1	360,283.59	97.328	354,273.92	14,105	3.98
445,000	U.S. TREASURY NOTES 1% 07/31/2028 91282CCR0	405,619.00	85.731	381,502.95	4,450	1.17

Investment Review - Detail Of General Investments

SHARES/FACE	ASSET	CARRYING VALUE	CURRENT PRICE	MARKET VALUE	EST ANN INC	YIELD TO MKT
149,000	U.S. TREASURY NOTES .375% 08/15/2024 91282CCT6	143,026.32	94.582	140,927.18	559	0.40
380,000	U.S. TREASURY NOTES .625% 10/15/2024 91282CDB4	363,226.56	94.191	357,925.80	2,375	0.66
180,000	U.S. TREASURY NOTES 1.5% 02/15/2025 91282CDZ1	173,381.03	94.371	169,867.80	2,700	1.59
578,000	U.S. TREASURY NOTES 2.375% 03/31/2029 91282CEE7	544,064.21	91.266	527,517.48	13,728	2.60
610,000	U.S. TREASURY NOTES 2.875% 05/15/2032 91282CEP2	588,658.26	92.672	565,299.20	17,538	3.10
43,000	U.S. TREASURY BONDS 2.75% 07/31/2027 91282CFB2	41,429.84	94.238	40,522.34	1,183	2.92
268,000	U.S. TREASURY NOTES 3.875% 12/31/2027 91282CGC9	264,729.73	98.566	264,156.88	10,385	3.93
248,000	U.S. TREASURY NOTES 3.875% 01/15/2026 91282CGE5	242,692.89	98.113	243,320.24	9,610	3.95
40,000	U.S. TREASURY NOTES 3.625% 03/31/2028 91282CGT2	39,270.31	97.648	39,059.20	1,450	3.71
311,000	U.S. TREASURY NOTES 3.5% 04/30/2030 91282CGZ8	312,377.35	97.063	301,865.93	10,885	3.61
320,000	U.S. TREASURY NOTES 3.375% 05/15/2033 91282CHC8	311,219.38	96.391	308,451.20	10,800	3.50
	TOTAL U S GOVERNMENT OBLIGATIONS	5,882,490.27		5,734,801.84	170,659	2.98
	MORTGAGE BACKED SECURITIES					
9,153.69	FHLMC POOL #C92025 4.5% 10/01/2038 3128P8HA2	9,579.90	98.217	8,990.48	412	4.58

Investment Review - Detail Of General Investments

SHARES/FACE	ASSET	CARRYING VALUE	CURRENT PRICE	MARKET VALUE	EST ANN INC	YIELD TO MKT
8,563.12	FHLMC POOL #A97047 4.5% 02/01/2041 312945ZL5	9,197.65	98.901	8,469.01	385	4.55
90,470.32	FHLMC POOL FR SC0047 3% 01/01/2040 3132D9BQ6	84,929.01	91.169	82,480.89	2,714	3.29
94,801.72	FHLMC POOL FR SC0300 3% 07/01/2042 3132D9KM5	86,269.56	89.813	85,144.27	2,844	3.34
59,680.8365	FREDDIE MAC POOL FR SD1538 3% 12/01/2050 3132DNV75	55,409.92	89.233	53,255.00	1,790	3.36
112,461.55	FREDDIE MAC POOL FS SD1512 3% 11/01/2047 3132DNVD2	102,884.76	89.683	100,858.89	3,374	3.35
19,254.7	FHLMC GOLD POOL #G60876 4% 03/01/2042 31335A6M5	20,325.76	96.256	18,533.80	770	4.16
120,644.8198	FGLMC POOL FG G60985 3% 05/01/2047 31335BCW4	115,482.70	90.089	108,687.71	3,619	3.33
40,083.54	FNMA POOL #AL9135 4% 01/01/2043 3138EREH9	42,309.42	96.142	38,537.12	1,603	4.16
29,170.3	FNMA POOL #AV0692 4% 12/01/2043 3138XBW9	31,311.31	96.076	28,025.66	1,167	4.16
45,864.81	FNMA POOL #725229 6% 03/01/2034 31402CVW9	51,611.87	103.243	47,352.21	2,752	5.81
87,189.6977	FNMA POOL #BF0214 3.5% 02/01/2052 3140FXGY2	92,291.15	92.896	80,995.74	3,052	3.77
41,259.63	FNMA POOL # BM1257 2.5% 04/01/2037 3140J5MF3	43,142.09	90.29	37,253.32	1,031	2.77
75,003.77	FNMA POOL FN BM3484 3% 02/01/2048 3140J72S3	65,182.96	89.511	67,136.62	2,250	3.35

Investment Review - Detail Of General Investments

SHARES/FACE	ASSET	CARRYING VALUE	CURRENT PRICE	MARKET VALUE	EST ANN INC	YIELD TO MKT
19,947.63	FNMA POOL #BM3491 4.5% 01/01/2038 3140J72Z7	20,873.31	97.665	19,481.85	898	4.61
50,648.8335	FNMA POOL #BM3322 3% 12/01/2037 3140J7VQ5	54,154.67	92.133	46,664.29	1,519	3.26
72,275.314	FNMA POOL#CA4594 3% 11/01/2039 3140QCC87	75,267.96	91.297	65,985.19	2,168	3.29
15,359.62	FNMA POOL# FM1647 4% 07/01/2038 3140X4ZM1	16,139.62	96.501	14,822.19	614	4.15
89,149.1278	FNMA POOL FN FM3079 4% 02/01/2043 3140X6M57	89,873.47	96.142	85,709.75	3,566	4.16
33,987.9101	FNMA POOL #FM7607 3% 04/01/2038 3140XBNZ9	36,197.13	93.553	31,796.71	1,020	3.21
98,094.5977	FNMA POOL FN FS1203 3% 01/01/2048 3140XGKR9	88,195.19	89.621	87,913.36	2,943	3.35
89,147.568	FANNIE MAE UMBS POOL FN FS2119 4% 03/01/2046 3140XHK97	91,696.64	96.145	85,710.93	3,566	4.16
62,491.6	FANNIE MAE POOL FS3389 3% 08/01/2048 3140XJXT5	57,482.52	89.544	55,957.48	1,875	3.35
52,513.4	FANNIE MAE POOL FN FS3462 2.5% 09/01/2042 3140XJZ48	47,237.43	88.566	46,509.02	1,313	2.82
100,064.28	FANNIE MAE POOL FN FS3446 3% 05/01/2042 3140XJZL0	89,948.42	89.814	89,871.73	3,002	3.34
112,473.3677	FNMA POOL FS4084 2.5% 02/01/2042 3140XKRE2	99,166.06	87.421	98,325.34	2,812	2.86
24,917.01	FNMA POOL #890644 4% 08/01/2035 31410LP55	26,820.81	97.57	24,311.53	997	4.10
44,909.69	FNMA POOL #MA1959 3.5% 07/01/2034 31418BE93	47,458.67	94.651	42,507.47	1,572	3.70

Investment Review - Detail Of General Investments

SHARES/FACE	ASSET	CARRYING VALUE	CURRENT PRICE	MARKET VALUE	EST ANN INC	YIELD TO MKT
13,066.83	FNMA POOL #MA2198 3.5% 03/01/2035 31418BNQ5	13,899.84	94.648	12,367.49	457	3.70
102,268.89	FNMA POOL FN MA2833 3% 12/01/2046 31418CEF7	96,452.35	89.86	91,898.82	3,068	3.34
17,881.42	FNMA POOL #MA2914 4% 02/01/2037 31418CGY4	19,015.19	96.332	17,225.53	715	4.15
15,742.04	FNMA POOL #MA2937 4% 03/01/2037 31418CHP2	16,778.80	96.332	15,164.62	630	4.15
6,577.55	FNMA POOL #MA3440 3.5% 08/01/2038 31418CZE7	6,534.36	94.058	6,186.71	230	3.72
100,148.7286	FNMA POOL FN MA4570 2% 03/01/2042 31418ECG3	90,838.03	84.665	84,790.92	2,003	2.36
110,309.285	FNMA POOL #MA4587 2.5% 04/01/2042 31418ECZ1	103,096.10	86.815	95,765.01	2,758	2.88
12,399.92	FNMA POOL #AE9758 4% 12/01/2040 31419LZY2	12,250.75	96.141	11,921.41	496	4.16
57,359.1	GNMA II POOL #MA3597 3.5% 04/20/2046 36179R7J2	61,195.00	93.677	53,732.28	2,008	3.74
17,244.36	GNMA II POOL #784052 5.5% 07/20/2044 3622A2QD7	19,227.46	103.071	17,773.93	948	5.34
79,653.26	GNMA POOL GN #784571 3.5% 06/15/2048 3622A3CG3	84,930.28	94.455	75,236.49	2,788	3.71
	TOTAL MORTGAGE BACKED SECURITIES	2,174,658.12		2,043,350.77	71,729	3.51
	COLLATERALIZED MTG OBLIG					
14,814.77	ACE SECURITIES CORP SERIES 02-HE2 CLASS M1 FLOATING RATE BOND 3.7605% 08/25/2032 004421AX1	15,060.13	105.2716	15,595.74	557	3.57

Investment Review - Detail Of General Investments

SHARES/FACE	ASSET	CARRYING VALUE	CURRENT PRICE	MARKET VALUE	EST ANN INC	YIELD TO MKT
100,000	AMERICAN EXPRESS CR ACCT MSTR TR 3.75% 08/16/2027 02582JIV3	99,998.40	96.9538	96,953.81	3,750	3.87
9,099.28	AMERICAN HOME MTG INV TR SERIES 04-3 CLASS 4A 4.19% 10/25/2034 02660TBN2	9,130.56	98.9647	9,005.07	381	4.23
13,225.82	AMERICAN HOME MTG INV TR SERIES 2004-4 CLASS 6A1 FLOATING RATE BOND 6% 02/25/2045 02660TCJ0	13,729.11	95.8564	12,677.79	794	6.26
50,000	BARCLAYS COMMERCIAL MTG 2 SERIES 22 SER 22-C16 CL A5 4.6% 06/15/2055 05552YAE6	51,349.50	94.8295	47,414.75	2,300	4.85
15,000	BX TRUST SERIES 19-OC11 CLASS A 3.2019996% 12/09/2041 05606FAA1	15,784.14	85.4241	12,813.61	480	3.75
25,000	BX TRUST SERIES 19-OC11 CLASS D FLOATING RATE BOND 4.0754568% 12/09/2041 05606FAL7	22,988.28	83.0414	20,760.36	1,019	4.91
70,000	BX TRUST 2 SER 22-GPA CL A 4.665% 10/15/2039 05608UAA6	69,737.50	99.8432	69,890.25	3,266	4.67
12,930.61	BANC OF AMERICA FUNDING CORP SERIES 06-G CLASS 3A3 FLOATING RATE 4.463% 07/20/2036 05950MAJ9	13,023.55	97.7757	12,642.99	577	4.56
70,000	US CMBS BANK SEREIS 20-BN28 CL A4 1.844% 03/15/2063 06540YAH2	62,792.19	79.1045	55,373.15	1,291	2.33
55,000	US CMBS SERIES 22-BNK43 CL A5 4.399% 08/15/2055 06541QAZ8	50,002.73	93.653	51,509.13	2,419	4.70
50,000	BARCLAYS COMMERCIAL MORTGAGE SERIES 22-C14 CL A5 2.946% 02/15/2055 07336AAE7	50,000.00	83.7445	41,872.25	1,473	3.52

Investment Review - Detail Of General Investments

SHARES/FACE	ASSET	CARRYING VALUE	CURRENT PRICE	MARKET VALUE	EST ANN INC	YIELD TO MKT
102,534.61	BEAR STEARNS ARM TRUST SERIES 04-10 CLASS 12A3 FLOATING RATE BOND 3.83887% 01/25/2035 07384M4C3	100,268.61	94.887	97,292.05	3,936	4.05
70,576.61	BEAR STEARNS ARM TRUST SERIES 04-12 CLASS2A1 VARIABLE RATE 2.68897% 02/25/2035 07384M6H0	71,480.88	93.9116	66,279.64	1,898	2.86
25,236.31	BEAR STEARNS ASSET BACKED SEC SERIES 2003-AC5 CLASS A1 5.25% 10/25/2033 07384YMA1	26,396.59	101.2837	25,560.28	1,325	5.18
13,867.46	BEAR STEARNS ASSET BACKED SEC SERIES 2003-AC5 CLASS A5 4.75% 10/25/2033 07384YNA0	14,224.69	96.5339	13,386.80	659	4.92
21,321.54	BEAR STEARNS ALT-A TRUST SERIES 04-7 CLASS 2A1 4.35611% 08/25/2034 07386HKK6	21,641.35	95.9386	20,455.59	929	4.54
45,000	BENCHMARK MORTGAGE TRUST SERIES 2019-B15 CLASS AS 3.231% 11/15/2029 08160KAG9	48,643.95	80.9262	36,416.79	1,454	3.99
65,000	BENCHMARK MORTGAGE TRUST SERIES 2019-B10 CLASS A4 3.717% 03/15/2029 08162VAE8	60,272.27	90.3632	58,736.11	2,416	4.11
10,000	BENCHMARK MORTGAGE TRUST SERIES 20-B19 CLASS AS 2.148% 09/15/2053 08162WBE5	10,299.22	73.7127	7,371.27	215	2.91
30,000	BENCHMARK MORTGAGE TRUST SERIES 19-B14 CLASS AS 3.3515% 12/15/2061 08162YAF9	30,899.82	85.8471	25,754.12	1,005	3.90
70,000	BENCHMARK MORTGAGE TRUST SERIES 21-N28 CLASSAS 2.4291% 08/15/2054 08163GAW0	69,540.63	76.9714	53,879.98	1,700	3.16

Investment Review - Detail Of General Investments

SHARES/FACE	ASSET	CARRYING VALUE	CURRENT PRICE	MARKET VALUE	EST ANN INC	YIELD TO MKT
35,000	BENCHMARK MORTGAGE TRUST SERIES 20-B21 CLASS AS 2.2543% 12/15/2053 08163LAQ2	36,049.83	74.8047	26,181.64	789	3.01
15,392.22	CIT GROUP HOME EQUITY LOAN TR SERIES 03-1 CLASS M1 5.17% 10/20/2032 12558MBM3	15,892.47	98.7875	15,205.59	796	5.23
35,125.3	CLI FUNDING LLC 2.72% 01/18/2047 12565KAE7	31,670.40	84.8759	29,812.91	955	3.20
55,000	COMM MORTGAGE TRUST SERIES 2015-PCI CLASS A5 3.9020004% 07/10/2050 12593GAF9	57,500.92	95.5379	52,545.83	2,146	4.08
39,162.58	CREDIT SUISSE MRTG TR SERIES 14-IVR3 CLASS B2 4.12632% 07/25/2044 12648TAR0	39,994.80	93.0094	36,424.88	1,616	4.44
49,875.91	CREDIT SUISSE MORTGAGE TRUST SERIES 2019-ICE4 CLASS C FLOATING RATE 3.893% 05/15/2036 12653VAE6	49,938.25	98.9211	49,337.80	1,942	3.94
60,000	COMM MORTGAGE TRUST SERIES 19-GC44 CLASS A5 2.95% 08/15/2057 12655TBM0	65,074.22	85.5697	51,341.82	1,770	3.45
78,169.27	COUNTRYWIDE ALTERNATIVE LOAN TR SERIES 04-2CB CL 14A9 5.75% 03/25/2034 12667FAQ8	75,432.38	98.7437	77,187.25	4,495	5.82
30,926.45	COUNTRYWIDE ALT LOAN TRUST SERIES 03-4CB CLASS 1A1 5.75% 04/25/2033 12669DN20	31,085.79	95.8265	29,635.72	1,778	6.00
22,987.5	CAL FUNDING IV LTD SERIES 20-1A CLASS A 2.22% 09/25/2045 12807CAA1	22,987.50	87.0269	20,005.31	510	2.55
65,000	CARVANA AUTO SERIES 21-N3 CLASS D 1.58% 06/12/2028 14687GAE5	64,847.66	93.3841	60,699.63	1,027	1.69

Investment Review - Detail Of General Investments

SHARES/FACE	ASSET	CARRYING VALUE	CURRENT PRICE	MARKET VALUE	EST ANN INC	YIELD TO MKT
26,711.25	CHASE MTGE FIN CORP SERIES 16-2 CLASS M3 3.75% 02/25/2044 16164AAD7	26,724.24	85.8742	22,938.07	1,002	4.37
9,964.38	CITIGROUP MTGE LOAN TR INC SERIES 05-2 CLASS 142A 3.53289% 05/25/2035 17307GQZ4	10,179.24	96.9685	9,662.31	352	3.64
61,492.98	CITIGROUP MTGE LOAN TR INC SERIES 05-6 CLASS A1 FLOATING RATE 6.08% 09/25/2035 17307GXP8	60,764.27	100.4374	61,761.95	3,739	6.05
11,598.34	CREDIT SUISSE FIRST BOSTON MTGE SERIES 04-AR6 CLASS 7A1 3.46426% 10/25/2034 22541SNZ7	11,768.69	99.8152	11,576.91	402	3.47
28,306.62	CREDIT SUISSE FIRST BOSTON MTGE SERIES 04-FRE1 CLASS B2 FLOATING RATE BOND 2.85657% 04/25/2034 22541SSW9	28,819.69	96.0043	27,175.56	809	2.98
36,919.52	CSFB SERIES 05-CF1 CLASS M2 4.61% 03/25/2045 225458M62	37,346.39	102.1746	37,722.36	1,702	4.51
100,000	EXETER AUTOMOBILE RECEIVABLES 1.96% 01/17/2028 30165JAF3	99,993.20	92.1521	92,152.10	1,960	2.13
53,005.58	EXTENDED STAY AMERICA TR SERIES 21-ESH CL C 1.802% 07/15/2038 30227FAG5	52,972.45	97.3017	51,575.35	955	1.85
55,000	FREMF MTGE TR SERIES 2015-K47 CLASS C 3.60075% 05/25/2025 30293AAQ3	52,613.09	95.1725	52,344.89	1,980	3.78
24,830.41	FRESB MULTIFAMILY MORTGAGE SERIES 2018-SB49 CLASS A10H 3.35% 03/25/2028 302961AE7	24,133.04	93.0827	23,112.82	832	3.60
84,241.92	FNMA 2 SERIES 12-80 CL DB 3.5% 08/25/2042 3136A7WD0	80,905.16	92.4776	77,904.92	2,948	3.78
38,473.76	FNMA SERIES 19-M4 CL A2 3.61% 02/25/2031 3136B3SZ9	37,557.00	94.3801	36,311.57	1,389	3.82

Investment Review - Detail Of General Investments

SHARES/FACE	ASSET	CARRYING VALUE	CURRENT PRICE	MARKET VALUE	EST ANN INC	YIELD TO MKT
30,819.74	FNMA SER 2019-M1 CL A2 3.547% 09/25/2028 3136B3XY1	29,007.89	95.2813	29,365.44	1,130	3.85
45,000	FANNIE MAE SERIES 21 M17 CLA2 1.714% 07/25/2031 3136BGFQ9	39,157.03	81.7721	36,797.44	771	2.10
35,000	FHLMC SERIES K077 CLASS A2 3.85% 05/25/2028 3137FG6X8	38,108.98	96.7883	33,875.92	1,348	3.98
65,000	FGLMC SERIES K089 CLASS AM 3.633% 01/25/2029 3137FL6Q2	70,334.57	94.9303	61,704.71	2,361	3.83
35,462.62	FHLMC SERIES K-1514 CLASS A1 2.481% 07/25/2034 3137FQJY0	35,638.11	87.5266	31,039.21	880	2.83
19,052.91	FHLMC SERIES K-1516 CLASS A1 1.238% 01/25/2035 3137FUZH0	19,052.59	79.8337	15,210.65	236	1.55
30,000	FHLMC MULTIFAMILY SERIES K117 CLASS A2 1.406% 08/25/2030 3137FX3Q9	25,546.88	81.0229	24,306.86	422	1.74
50,000	FHLMC MUTIFAMILY SERIES K-150 CL A2 3.71% 09/25/2032 3137H9C98	47,269.53	94.1204	47,060.20	1,855	3.94
90,361.12	FNMA FN BF0394 4.5% 07/01/2051 3140FXNL2	42,113.46	97.921	88,482.51	4,066	4.60
66,257.58	GSAA HOME EQUITY TRUST SERIES 04-3 CLASS AF4 6.72% 04/25/2034 36228F3P9	65,760.66	95.8227	63,489.77	4,453	7.01
89,176.4	GSAA HOME EQUITY TRUST SERIES 03-SEA2 CLASS A1 5.42147% 07/25/2033 36228FYS9	87,119.95	92.8222	82,775.52	4,835	5.84
14,150.97	GSR MORTGAGE LOAN TRUST SERIES 05-7F CLASS 2A6 5.5% 09/25/2035 362341MR7	14,778.75	94.7043	13,401.57	778	5.81

Investment Review - Detail Of General Investments

SHARES/FACE	ASSET	CARRYING VALUE	CURRENT PRICE	MARKET VALUE	EST ANN INC	YIELD TO MKT
55,000	GS MORTGAGE SECURITIES TRUST SERIES 20-GC45 CLASS A5 2.9106% 02/13/2053 36258YBG2	57,464.26	85.4706	47,008.84	1,601	3.41
56,368.51	GLOBAL MTGE SEC LTD SERIES 05-A CLA1 5% 04/25/2032 378961AP1	56,932.21	96.6566	54,483.87	2,818	5.17
1,142.56	GNMA 2001-58 6.65975% 09/16/2041 38373MBE9	1,201.68	99.6857	1,138.97	76	6.68
75,185.2187	GNMA SERIES 18-103 CL WY 5.42598% 02/20/2048 38380YGW9	78,568.56	100.1407	75,290.97	4,080	5.42
32,059.38	GNMA SERIES 19-137 CLASS PT 6.21195% 04/20/2049 38382AXR1	36,617.81	102.0535	32,717.71	1,992	6.09
21,088.56	GNMA SER 19-137 CL WA 5.01064% 07/20/2040 38382AXS9	23,256.73	97.7123	20,606.12	1,057	5.13
29,335.77	GNMA SERIES 20-11 CLASS PT 5.3617% 12/20/2049 38382B5R0	32,122.68	99.025	29,049.74	1,573	5.41
31,285.88	GNMA SERIES 19-152 CLASS WT 5.05685% 12/20/2049 38382BYN7	34,737.09	98.2364	30,734.13	1,582	5.15
56,889.61	GNMA SERIES 22-5 CL WT 5.19572% 05/20/2049 38383FH63	60,854.12	97.8009	55,638.53	2,956	5.31
61,413.03	GINNIE MAE SERIES 23-32 CLW 5.21674% 06/20/2045 38383VRB6	62,871.58	98.8638	60,715.26	3,204	5.28
80,000	GNMA SERIES 23-81 CL WA 6.225% 07/20/2041 38384BBZ3	82,700.00	103.375	82,700.00	4,980	6.02
80,000	HILTON USA TRUST SERIES 2016-SFP CLASS C 4.122238% 11/05/2035 43289VAL7	80,000.00	85.2607	68,208.52	3,298	4.83
65,000	HYUNDAI AUTO RECEIVABLES SERIES 21-C CLASS C 1.66% 06/15/2028 44935FAG9	64,994.29	89.7751	58,353.83	1,079	1.85

Investment Review - Detail Of General Investments

SHARES/FACE	ASSET	CARRYING VALUE	CURRENT PRICE	MARKET VALUE	EST ANN INC	YIELD TO MKT
15,167.84	RESIDENTIAL ASSET SEC TRUST SERIES 2004-A2 CLASS 1A8 5.25% 05/25/2034 45660NB95	15,796.22	92.7753	14,072.01	796	5.66
12,433.04	RESIDENTIAL ASSET SEC TRUST SERIES 2003-A15 CLASS 1A8 5.5% 02/25/2034 45660NWZ4	13,213.98	90.8648	11,297.26	684	6.05
77,398.23	RESIDENTIAL ASSET SEC TRUST SERIES 04-AR6 CLASS 4A 4.47965% 10/25/2034 45660NX75	78,101.42	92.2807	71,423.61	3,467	4.85
93,143.64	RESIDENTIAL ASSET SEC TRUST 5.25% 02/25/2034 45660NXG5	91,804.69	93.2402	86,847.35	4,890	5.63
62,739.38	JP MORGAN MORTGAGE TRUST SERIES 2005-AL CLASS 11A3 FLOATING RATE BOND 4.17308% 06/25/2035 466247QZ9	63,678.28	93.1847	58,463.50	2,618	4.48
94,774.37	JP MORGAN MORTGAGE SERIES 07-CH1 CLASS AF5 5.92% 11/25/2036 46630LAF1	97,461.64	96.182	91,155.92	5,611	6.15
16,323.77	JPM TAXABLE HFA TRUST SERIES 2013-1 CLASS A 3% 11/17/2041 46639LAA3	16,576.28	93.49	15,261.09	490	3.21
85,000	JPMBB COMM MTGE SEC TRUST SERIES 2015-C27 CLASS A4 3.1794% 02/15/2048 46644ABF8	85,946.19	94.334	80,183.93	2,702	3.37
75,000	JPMBB COMM MTGE SECURITIES TRUST SERIES 2015-C30 CLASS A5 3.8218% 07/15/2048 46644UBA5	74,613.28	94.2672	70,700.39	2,866	4.05
27,477.55	JPM MTGE TRUST SERIES 16-3 CLASS B2 3.3886% 10/25/2046 46647EBB6	27,713.69	91.1211	25,037.83	931	3.72
57,703.5	JP MORGAN MORTGAGE TRUST SERIES 164 CLASS B3 3.89228% 10/25/2046 46647JBB5	61,305.47	87.7576	50,639.19	2,246	4.44

Investment Review - Detail Of General Investments

SHARES/FACE	ASSET	CARRYING VALUE	CURRENT PRICE	MARKET VALUE	EST ANN INC	YIELD TO MKT
80,834.812	JP MORGAN MORTGAGE TRUST SERIES 17-3 CLASS B3 3.76497% 08/25/2047 46647SCU2	82,754.64	86.2728	69,738.44	3,043	4.36
105,629.17	JP MORGAN MORTGAGE TRUST SERIES 21-INV2 CL A2 2.5% 12/25/2051 46653TAB5	88,979.39	80.3622	84,885.92	2,641	3.11
24,100	JIMMY JOHN'S FUNDING LLC SERIES 17-1A CLASS A2II 4.846% 07/30/2047 47760QAB9	24,112.60	92.1761	22,214.44	1,168	5.26
55,000	LOUISIANA ST LOCAL GOVT ENVRNMNT 4.145% 02/01/2033 54627RAM2	54,579.10	96.582	53,120.10	2,280	4.29
61,001.98	MVW OWNER TRUST SERIES 21-2A CLASS B 1.83% 05/20/2039 55400KAB1	60,991.28	88.1804	53,791.81	1,116	2.08
8,826.5	MASTER ALTERNATIVE LOANS TR SERIES 05-1 CLASS 2A1 6% 02/25/2035 576434D84	9,596.99	97.656	8,619.61	530	6.14
8,917.33	MASTER ALTERNATIVE LOANS TR SERIES 2003-5 CLASS 4A1 5.5% 07/25/2033 576434FF6	9,430.09	95.8532	8,547.55	490	5.74
15,062.9	MASTER ALTERNATIVE LOANS TR SERIES 04-11 CLASS 1A1 6.1259% 10/25/2034 576434WV2	16,305.58	95.6521	14,407.98	923	6.40
3,883.55	MASTER ALTERNATIVE LOANS TR SERIES 2004-12 CLASS 4A1 5.5% 12/25/2034 576434YG3	4,169.97	96.3449	3,741.60	214	5.71
62,957.1338	MASTER ASSET BACKED SEC TRUST SERIES 03-WMC2 CLASS M2 FLOATING RATE BOND 7.092% 08/25/2033 57643LBZ8	63,901.49	101.3935	63,834.43	4,465	6.99
38,743.71	MERIT SECURITIES CORP SERIES 12-1 CLASS 1M1 STEP CPN 7.63% 07/28/2033 589962CN7	40,765.53	99.4371	38,525.62	2,956	7.67

Investment Review - Detail Of General Investments

SHARES/FACE	ASSET	CARRYING VALUE	CURRENT PRICE	MARKET VALUE	EST ANN INC	YIELD TO MKT
15,028.08	MID-STATE TRUST SERIES 2005-1 CLASS M1 6.106% 01/15/2040 595481AB8	17,197.75	97.7786	14,694.25	918	6.24
69,062.89	MID-STATE TRUST SERIES 2006-1 CLASS A 5.787% 10/15/2040 59548PAA7	72,999.49	96.4615	66,619.11	3,997	6.00
20,284.28	MID-STATE TRUST SERIES 11 CLASS A1 4.864% 07/15/2038 59549WAA1	21,658.78	96.3309	19,540.03	987	5.05
89,864.43	MILL CITY MORTGAGE TRUST SERIES 1802 CLASS M1 3.75% 05/25/2058 59980MAG6	95,153.33	93.7003	84,203.26	3,370	4.00
8,390.63	MORGAN STANLEY MTG LOAN TRUST SERIES 2004-3 CLASS 3A 6% 04/25/2034 61745MA45	8,195.33	96.8698	8,127.99	503	6.19
16,167.01	NATIONSTAR MORTGAGE LOAN TRUST SERIES 13-A CLASS B3 FLOATING RATE BOND 5.77171% 12/25/2052 63861HAG3	17,397.21	91.2674	14,755.21	933	6.32
8,017.75	NAVIENT STUDENT LOAN TRUST SERIES 18-EA CLASS A2 4% 12/15/2059 63890BAB2	8,064.13	96.6503	7,749.18	321	4.14
21,223	NAVIENT STUDENT LOAN TRUST SERIES 19-BA CLASS A2A 3.39% 12/15/2059 63941LAB9	22,357.09	94.4433	20,043.71	719	3.59
47,571.395	NAVIENT STUDENT LOAN TR 2 SERIES 21-FA CL A 1.11% 02/18/2070 63942GAA1	38,235.50	83.4383	39,692.76	528	1.33
69,855.68	NEW RESIDENTIAL MORTGAGE LOAN SERIES 18-2A CLASS A1 4.5% 02/25/2058 64828CAA7	66,821.33	94.4972	66,011.63	3,144	4.76
67,815.32	NEW RESIDENTIAL MORTGAGE LOAN SERIES 18-2A CLASS B3 5% 02/25/2058 64828CCL1	72,361.08	94.1926	63,876.99	3,391	5.31

Investment Review - Detail Of General Investments

SHARES/FACE	ASSET	CARRYING VALUE	CURRENT PRICE	MARKET VALUE	EST ANN INC	YIELD TO MKT
29,496.99	NEW RESIDENTIAL MTGE LOAN TR SERIES 15-1A CLASS B2 4.9% 04/25/2052 64829CAJ7	30,437.26	94.4593	27,862.65	1,445	5.19
34,256.26	NEW RESIDENTIAL MTGE LOAN TR SERIES 16-1A CLASS B3 FLOATING RATE BOND 5.51037% 03/25/2056 64829FAL5	36,786.66	93.0778	31,884.96	1,888	5.92
72,832.51	NEW RESIDENTIAL MORTGAGE LOAN SERIES 16-+4A CLASS A1 3.75% 11/25/2056 64829LAA6	73,002.54	90.871	66,183.60	2,731	4.13
89,737.41	NEW RESIDENTIAL MTGE SERIES 18-5A CLASS A1 4.75% 12/25/2057 64829XAA0	88,671.78	96.1473	86,280.12	4,263	4.94
64,459.44	NEW RESIDENTIAL MORTGAGE LOAN SERIES 18-1A CLASS B2 4.5% 12/25/2057 64830GAU0	68,014.43	94.367	60,828.43	2,901	4.77
37,318.64	NEW RESIDENTIAL MORTGAGE LOAN SERIES 18-1A CLASS B3 5% 12/25/2057 64830GBC9	40,852.25	95.199	35,526.98	1,866	5.25
102,970.84	NEW RESIDENTIAL MORTGAGE SERIES 19-4A CLASS B1 4% 12/25/2058 64830WAQ4	106,245.77	91.604	94,325.43	4,119	4.37
6,939.38	NOMURA ASSET ACCEPTANCE CORP SERIES 2004-AP3 CLASS A5A 6.071% 10/25/2034 65535VFY9	7,462.00	97.1669	6,742.78	421	6.25
30,601.31	NOMURA ASSET ACCEPTANCE CORP SERIES 05-WF1 CLASS 1A1 FLOATING RATE 5.76359% 03/25/2035 65535VLB2	32,077.46	97.8052	29,929.68	1,764	5.89
27,557.3369	RESIDENTIAL ASSET MTGE PRODUCTS SERIES 04-RS12 CLASS M11 5.186% 12/25/2034 76112BFV7	28,139.11	97.8517	26,965.32	1,429	5.30
32,000	SLM STUDENT LOAN TRUST SERIES 2003-A CLASS A3 FLOATING RATE BOND 8.0565336% 06/15/2032 78443CAJ3	31,960.00	98.00	31,360.00	2,578	8.22

Investment Review - Detail Of General Investments

SHARES/FACE	ASSET	CARRYING VALUE	CURRENT PRICE	MARKET VALUE	EST ANN INC	YIELD TO MKT
55,000	SANTANDER DRIVE AUTO REC SERIES 21-4 CLASS D 1.67% 10/15/2027 80285VAF6	54,982.59	92.2837	50,756.04	919	1.81
18,292.51	SEQUOIA MORTGAGE TRUST SERIES 13-8 CLASS B3 FLOATING RATE 3.48812% 06/25/2043 81745EAE9	17,721.96	93.1406	17,037.76	638	3.74
5,683.03	SHELLPOINT ASSET FUNDING TRUST SERIES 13-1 CLASS B2 3.4758696% 07/25/2043 822804AD2	5,649.04	96.8338	5,503.09	198	3.59
55,000	SBA 2023-25A 4.91% 01/01/2048 83162CR96	56,069.92	100.059	55,032.45	2,701	4.91
55,000	SBA 2023-25B 4.61% 02/01/2048 83162CS38	55,034.38	99.296	54,612.80	2,536	4.64
30,000	SBA 4.48% 04/01/2048 83162CS95	29,128.13	97.545	29,263.50	1,344	4.59
50,000	SBA SMALL BUS ADMIN PROGRAM SBAP 2023-25F 4.93% 06/01/2048 83162CT60	50,000.00	99.74	49,870.00	2,465	4.94
16,586.62	SMB PRIVATE EDUCATION SERIES 17-B CLASS A2A 2.82% 10/15/2035 83189DAB6	17,168.47	95.1271	15,778.36	468	2.96
58,300	SONIC CAPITAL LLC SERIES 20-1A CLASS A2I 3.845% 01/20/2050 83546DAG3	61,026.53	90.42	52,714.86	2,242	4.25
54,175	TACO BELL FUNDING, LLC SERIES 21-1A CLASS A2II 2.294% 08/25/2051 87342RAH7	45,481.60	82.1001	44,477.73	1,243	2.79
65,000	TOWD POINT MORTGAGE TRUST SERIES 19-MH1 CLASS M2 3.5% 11/25/2058 89177WAD1	65,858.20	91.1083	59,220.38	2,275	3.84
30,650	TRITON CONTAINER FINANCE LLC SERIES 20-1A CLASS A 2.11% 09/20/2045 89680HAA0	26,248.85	85.6261	26,244.41	647	2.46

Investment Review - Detail Of General Investments

SHARES/FACE	ASSET	CARRYING VALUE	CURRENT PRICE	MARKET VALUE	EST ANN INC	YIELD TO MKT
50,000	VERIZON MASTER TRUST SERIES 21-1 CLASS A .5% 05/20/2027 92348KAA1	49,996.33	95.4556	47,727.81	250	0.52
60,000	VERIZON MASTER TRUST SERIES 21-1 CLASS B .69% 05/20/2027 92348KAB9	60,168.75	95.0878	57,052.66	414	0.73
64,045.524	WASHINGTON MUTUAL SERIES 05-AR4 CLASS A5 4.8635% 04/25/2035 92922FG77	65,326.45	94.3454	60,423.98	3,115	5.15
56,265.95	WASHINGTON MUTUAL SERIES 04-S3 CLASS 3A3 6% 07/25/2034 92922FVG0	58,586.94	99.7603	56,131.09	3,376	6.01
6,744.59	WASHINGTON MUTUAL SERIES 2004-CB4 CLASS 12A 6.5% 12/25/2034 92922FZX9	7,258.88	99.4857	6,709.90	438	6.53
	TOTAL COLLATERALIZED MTG OBLIG	5,919,319.29		5,536,685.48	239,781	4.33
	MUNICIPAL OBLIGATIONS	To page 1		To page 1		
75,000	ALABAMA FEDERAL AID HIGHWAY FIN 2.65% 09/01/2037-2031 010268CX6	73,256.02	77.186	57,889.50	1,988	3.43
30,000	CALIFORNIA STATE HEALTH FACE FIN 4.19% 06/01/2037-2032 13032UD88	29,313.95	93.382	28,014.60	1,257	4.49
75,000	CALIFORNIA ST 4.6% 04/01/2038-2028 13063DGE2	74,172.28	95.861	71,895.75	3,450	4.80
15,000	CUYAHOGA CNTY OH SALES TAX REV 3.667% 01/01/2035-2024 232287CA8	15,455.25	89.758	13,463.70	550	4.09
15,000	FLORIDA ST BRD OF ADMIN FIN CORP 2.154% 07/01/2030 341271AF1	14,825.78	83.351	12,502.65	323	2.58
45,000	JOBSONIO BEVERAGE SYS STWD LIQ 2.833% 01/01/2038 47770VBQ2	42,455.55	79.813	35,915.85	1,275	3.55
40,000	LOUISIANA ST LOCAL GOVT 5.197% 09/01/2039 54628CG30	40,000.00	102.217	40,886.80	2,079	5.08

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SHARES/FACE	ASSET	CARRYING VALUE	CURRENT PRICE	MARKET VALUE	EST ANN INC	YIELD TO MKT
10,000	MASSACHUSETTS ST. 4.11% 07/15/2031 576004HG3	9,551.60	97.111	9,711.10	411	4.23
10,000	MASSACHUSETTS ST WTR RESOURCES 2.823% 08/01/2041-2031 576051ZT6	8,139.20	77.991	7,799.10	282	3.62
35,000	NEW YORK NY 5.985% 12/01/2036 64966HTX8	38,474.55	107.607	37,662.45	2,095	5.56
40,000	NEW YORK NY 6.271% 12/01/2037 64966JAR7	43,679.25	111.376	44,550.40	2,508	5.63
40,000	NYC NY TRANSITIONAL FIN AUTH REV NEW YORK CITY NY TRANSIT 5.508% 08/01/2037 64971M4P4	43,568.98	104.033	41,613.20	2,203	5.29
20,000	NYC NY TRANSITIONAL FIN AUTH REV 5.767% 08/01/2036 64971MZG0	21,227.60	105.058	21,011.60	1,153	5.49
15,000	NY ST DORM AUTH PERSONAL INC TAX 5.6% 03/15/2040 649902T37	15,525.15	105.983	15,897.45	840	5.28
35,000	NEW YORK ST DORM AUTH ST 2.202% 03/15/2034 64990FE42	29,559.25	78.608	27,512.80	771	2.80
24,525.75	OKLAHOMA ST DEV FIN AUTH SINKABLE BOND 4.135% 12/01/2033 6789084F8	24,525.75	98.412	24,136.28	1,014	4.20
50,000	OREGON EDU DIST 2.895% 06/30/2040-2031 68587FBL7	43,269.20	74.919	37,459.50	1,448	3.86
20,000	COUNTY OF RIVERSIDE CA 3.818% 02/15/2038 76913CBF5	20,838.40	90.554	18,110.80	764	4.22
20,000	RIVERSIDE CNTY CA 3.185% 11/01/2041-2031 76913DGJ0	20,000.00	76.431	15,286.20	637	4.17
15,000	SAN JOSE CA FING AUTH REV TXBL REF CIVIC REF PROJ SER A 2.812% 06/01/2037-2030 798153NS7	15,000.00	78.398	11,759.70	422	3.59

Investment Review - Detail Of General Investments

SHARES/FACE	ASSET	CARRYING VALUE	CURRENT PRICE	MARKET VALUE	EST ANN INC	YIELD TO MKT
50,000	SANTA CLARA VLY CA TRANSPRTN 5.876% 04/01/2032 80168NEP0	52,898.00	104.517	52,258.50	2,938	5.62
20,000	SULPHUR SPRINGS CA 2.971% 09/01/2039-2031 865483HB0	20,022.80	76.053	15,210.60	594	3.91
20,000	TEXAS ST 5.517% 04/01/2039 882722KF7	21,647.57	107.156	21,431.20	1,103	5.15
15,000	TEXAS ST TRANSPRTN COMM 2.562% 04/01/2042-2030 882830AP7	11,549.60	76.104	11,415.60	384	3.37
65,000	TEXAS ST TRANSPRTN COMM 2.472% 10/01/2044-2030 882830BH4	47,060.05	70.841	46,046.65	1,607	3.49
35,000	TEXAS ST 4% 10/01/2033 88283LKV7	34,591.20	94.906	33,217.10	1,400	4.21
53,258.47	VIRGINIA ST HSG DEV AUTH 2.125% 07/25/2051 92812UR26	51,172.51	74.076	39,451.74	1,132	2.87
15,000	VIRGINIA ST HSG DEV AUTH 2.85% 06/01/2035-2030 92812VD52	14,856.75	81.671	12,250.65	428	3.49
	TOTAL MUNICIPAL OBLIGATIONS	876,636.24		804,361.47	35,056	4.36
	CORPORATE BONDS					
50,000	AT&T INC 3.65% 06/01/2051 00206RKA9	47,409.35	73.307	36,653.50	1,825	4.98
30,000	ALEXANDRIA REAL ESTATE EQUITY 4.9% 12/15/2030 015271AU3	29,124.60	96.764	29,029.20	1,470	5.06
30,000	ALLY FINANCIAL INC 5.75% 11/20/2025 02005NBF6	34,446.00	96.289	28,886.70	1,725	5.97
20,000	AMEREN CORPORATION 1.75% 03/15/2028 023608AK8	17,238.20	85.59	17,118.00	350	2.04

Investment Review - Detail Of General Investments

SHARES/FACE	ASSET	CARRYING VALUE	CURRENT PRICE	MARKET VALUE	EST ANN INC	YIELD TO MKT
36,469.44	AMER AIRLINE 17-2 AA PTT SINKABLE BOND 3.35% 10/15/2029 02376AAA7	31,910.75	88.7636	32,371.59	1,222	3.77
44,891.26	AMERICAN AIRLINE SERIES 16-1AA PTT CLASS AA 3.575% 01/15/2028 02376UAA3	40,199.26	92.5685	41,555.16	1,605	3.86
30,000	AMERICO LIFE INC. 3.45% 04/15/2031 03060NAD2	29,914.50	76.718	23,015.40	1,035	4.50
30,000	AMGEN INC 5.25% 03/02/2033 031162DR8	29,905.50	100.134	30,040.20	1,575	5.24
25,000	AON CORP/AON GLOBAL HOLD 2.05% 08/23/2031 03740LAA0	24,928.00	79.722	19,930.50	513	2.57
55,000	APPLE INC 4.85% 05/10/2053 037833EW6	54,724.45	102.235	56,229.25	2,668	4.74
45,000	AUTONATION INC 2.4% 08/01/2031 05329WAS1	33,796.80	75.672	34,052.40	1,080	3.17
85,000	BANK OF AMERICA CORP 3.419% 12/20/2028 06051GHD4	82,153.83	91.679	77,927.15	2,906	3.73
35,000	BANK OF AMERICA CORP 3.97% 03/05/2029 06051GHG7	32,661.65	93.581	32,753.35	1,390	4.24
40,000	BANK OF AMERICA CORP 5.288% 04/25/2034 06051GLH0	40,000.00	99.016	39,606.40	2,115	5.34
30,000	BANK OF MONTREAL VARIABLE RATE BOND 3.803% 12/15/2032 06368BGS1	30,601.36	88.016	26,404.80	1,141	4.32
35,000	BANK OF MONTREAL .949% 01/22/2027 06368EDC3	35,003.50	89.217	31,225.95	332	1.06
45,000	BANK OF MONTREAL 5.203% 02/01/2028 06368LGV2	44,998.20	99.797	44,908.65	2,341	5.21

Investment Review - Detail Of General Investments

SHARES/FACE	ASSET	CARRYING VALUE	CURRENT PRICE	MARKET VALUE	EST ANN INC	YIELD TO MKT
30,000	BANK OF NY MELLON CORP 4.289% 06/13/2033 06406RBH9	26,811.60	94.564	28,369.20	1,287	4.54
25,000	BARCLAYS PLC 7.385% 11/02/2028 06738ECD5	25,017.50	104.143	26,035.75	1,846	7.09
70,000	BRANCH BANKING & TRUST VARIABLE RATE BOND 2.636% 09/17/2029 07330MAC1	67,777.85	92.301	64,610.70	1,845	2.86
15,000	BOSTON UNIVERSITY 7.625% 07/15/2097 10115PAA3	20,025.00	107.261	16,089.15	1,144	7.11
45,000	BP CAP MARKETS AMERICA 4.812% 02/13/2033 10373QBU3	44,960.85	98.494	44,322.30	2,165	4.89
50,000	BROADCOM INC 4.15% 11/15/2030 11135FAQ4	46,089.50	91.959	45,979.50	2,075	4.51
35,000	BURLINGTON NORTH SANTA FE 2.875% 06/15/2052 12189LBH3	34,595.08	68.252	23,888.20	1,006	4.21
35,000	CDW LLC/CDW FINANCE 3.276% 12/01/2028 12513GBH1	35,000.00	86.636	30,322.60	1,147	3.78
50,000	THE CIGNA GROUP 5.4% 03/15/2033 125523CS7	50,033.50	101.751	50,875.50	2,700	5.31
45,000	CANADIAN IMPERIAL BANK 5.001% 04/28/2028 13607LNG4	45,000.00	98.397	44,278.65	2,250	5.08
45,000	CAPITAL ONE FINANCIAL CO VARIABLE 2.359% 07/29/2032 14040HCG8	44,716.95	70.551	31,747.95	1,062	3.34
40,000	CAPITAL ONE FINANCIAL CO 2.618% 11/02/2032 14040HCJ2	40,066.40	76.988	30,795.20	1,047	3.40
35,000	CENTENE CORP 3.375% 02/15/2030 15135BAV3	30,117.45	85.805	30,031.75	1,181	3.93

Investment Review - Detail Of General Investments

SHARES/FACE	ASSET	CARRYING VALUE	CURRENT PRICE	MARKET VALUE	EST ANN INC	YIELD TO MKT
20,000	CHARTER COMM OPT LLC/CAP 6.384% 10/23/2035 161175AZ7	26,379.00	97.405	19,481.00	1,277	6.55
40,000	CHARTER COMM OPT LLC/CAP 4.2% 03/15/2028 161175BK9	41,168.85	93.671	37,468.40	1,680	4.48
25,000	CHARTER COMM OPT LLC/CAP 3.5% 06/01/2041 161175BZ6	23,929.90	67.537	16,884.25	875	5.18
60,000	CHENIERE ENERGY PARTNERS 4.5% 10/01/2029 16411QAG6	54,972.00	91.758	55,054.80	2,700	4.90
45,000	CITIGROUP INC VARIABLE RATE BOND 2.666% 01/29/2031 172967ML2	45,000.00	84.625	38,081.25	1,200	3.15
30,000	CITIGROUP INC 1.462% 06/09/2027 172967NA5	30,000.00	88.791	26,637.30	439	1.65
30,000	CITIGROUP INC 1.6174% 05/25/2034 17327CAR4	30,000.00	100.731	30,219.30	1,852	6.13
45,000	COMCAST CORP 5.35% 05/15/2053 20030NEF4	45,373.50	101.326	45,596.70	2,408	5.28
50,000	DCP MIDSTREAM OPERATING 5.625% 07/15/2027 23311VAJ6	50,030.50	99.842	49,921.00	2,813	5.63
65,000	DUKE ENERGY INDIANA LLC 2.75% 04/01/2050 26443TAC0	59,223.50	63.745	41,434.25	1,788	4.31
35,000	EAGLE MATERIALS INC 2.5% 07/01/2031 26969PAB4	34,178.62	81.567	28,548.45	875	3.06
20,000	ELEVANCE HEALTH INC. 5.125% 02/15/2053 28622HAC5	19,978.40	96.715	19,343.00	1,025	5.30
45,000	ENERGY TRANSFER EQUITY LP 5.75% 02/15/2033 29273VAQ3	44,982.00	100.646	45,290.70	2,588	5.71

Investment Review - Detail Of General Investments

SHARES/FACE	ASSET	CARRYING VALUE	CURRENT PRICE	MARKET VALUE	EST ANN INC	YIELD TO MKT
30,000	EQUINIX INC 2.15% 07/15/2030 29444UBH8	24,333.00	80.783	24,234.90	645	2.66
50,000	ESSEX PORTFOLIO LP 2.55% 06/15/2031 29717PAZ0	48,765.50	80.788	40,394.00	1,275	3.16
40,000	EVERSOURCE ENERGY 1.65% 08/15/2030 30040WAK4	32,687.20	79.242	31,696.80	660	2.08
55,000	EXPEDIA INC 4.625% 08/01/2027 30212PBK0	61,634.65	96.881	53,284.55	2,544	4.77
25,000	EXTRA SPACE STORAGE LP 2.35% 03/15/2032 30225VAG2	24,949.25	78.11	19,527.50	588	3.01
45,000	FIFTH THIRD BANK 5.852% 10/27/2025 31677QBT5	44,693.55	97.399	43,829.55	2,633	6.01
30,000	FIRST HORIZON NATIONAL CORP 4% 05/26/2025 320517AD7	32,996.40	93.387	28,016.10	1,200	4.28
40,000	FIRST TENNESSEE BANK 5.75% 05/01/2030 337158AJ8	40,662.80	86.851	34,740.40	2,300	6.62
65,000	GENERAL MOTORS FINL CO 5.85% 04/06/2030 37045XEG7	65,040.30	99.08	64,402.00	3,803	5.90
45,000	GLOBAL PAYMENTS INC 3.2% 08/15/2029 37940XAB8	45,354.35	87.027	39,162.15	1,440	3.68
40,000	GOLDMAN SACHS GROUP INC 1.992% 01/27/2032 38141GXR0	40,250.00	78.682	31,472.80	797	2.53
45,000	GOLDMAN SACHS GROUP INC 2.64% 02/24/2028 38141GZK3	45,000.00	90.66	40,797.00	1,188	2.91
50,000	HCA INC 5.5% 06/01/2033 404119CQ0	49,966.00	99.776	49,888.00	2,750	5.51

Investment Review - Detail Of General Investments

SHARES/FACE	ASSET	CARRYING VALUE	CURRENT PRICE	MARKET VALUE	EST ANN INC	YIELD TO MKT
35,000	HSBC HOLDINGS PLC VARIABLE RATE BOND 4.292% 09/12/2026 404280BX6	34,458.55	96.15	33,652.50	1,502	4.46
45,000	HEALTHCARE TRUST OF AMERICA 3.1% 02/15/2030 42225UAG9	46,665.00	85.65	38,542.50	1,395	3.62
35,000	HEALTHCARE TRUST OF AMERICA 3.625% 01/15/2028 42225UAK0	38,182.55	88.455	30,959.25	1,269	4.10
35,000	HUMANA INC 1.35% 02/03/2027 444859BQ4	33,898.90	86.966	30,438.10	473	1.55
55,000	HUNTINGTON NATL BK HUNTINGTON NATL BANK 5.65% 01/10/2030 44644MAJ0	55,522.82	95.882	52,735.10	3,108	5.89
30,000	INVITATION HOMES OP 2% 08/15/2031 46188BAA0	22,943.40	76.582	22,974.60	600	2.61
35,893.03	JP MORGAN MORTGAGE TRUST SERIES 2005-A2 CLASS 3A2 4.90649% 04/25/2035 466247NQ2	36,554.82	94.8609	34,048.43	1,761	5.17
60,000	JPMORGAN CHASE CO VARIABLE RATE BOND 2.182% 06/01/2028 46647PBR6	61,464.60	88.851	53,310.60	1,309	2.46
45,000	JPMORGAN CHASE CO 1.045% 11/19/2026 46647PBT2	45,000.00	89.553	40,298.85	470	1.17
25,000	JPMORGAN CHASE CO JP MORGAN CHASE CO 5.35% 06/01/2034 46647PDR4	25,000.00	100.749	25,187.25	1,338	5.31
30,000	KEY BANK NA 5% 01/26/2033 49327M3H5	30,056.10	86.246	25,873.80	1,500	5.80
55,000	KINDER MORGAN INC 5.2% 06/01/2033 49456BAX9	55,651.20	96.73	53,201.50	2,860	5.38
40,000	LCOR ALEXANDRIA SINKABLE BOND 6.8% 09/15/2028 50181QAH1	47,800.00	98.0833	39,233.31	2,720	6.93

Investment Review - Detail Of General Investments

SHARES/FACE	ASSET	CARRYING VALUE	CURRENT PRICE	MARKET VALUE	EST ANN INC	YIELD TO MKT
30,000	LEIDOS INC 5.75% 03/15/2033 52532XAJ4	29,789.10	99.185	29,755.50	1,725	5.80
45,000	M&T BANK CORPORATION 5.053% 01/27/2034 55261FAR5	43,812.45	91.294	41,082.30	2,274	5.53
30,000	MARRIOTT INTL 4.9% 04/15/2029 571903BL6	29,619.60	97.257	29,177.10	1,470	5.04
15,000	MARSHFIELD CLINIC HEALTH 2.703% 02/15/2030 57284PAA9	12,489.15	84.085	12,612.75	405	3.21
5,000	MASS INSTITUTE OF TECH 3.885% 07/01/2116 575718AF8	3,904.95	76.757	3,837.85	194	5.06
30,000	MERCK & CO INC 5% 05/17/2053 58933YBM6	29,879.70	101.267	30,380.10	1,500	4.94
20,000	METRO OPERA ASSOC INC 4.524% 10/01/2042 592239AM9	20,647.60	75.433	15,086.60	905	6.00
40,000	MORGAN STANLEY VARIABLE 1.512% 07/20/2027 61747YEC5	40,206.40	88.55	35,420.00	605	1.71
25,000	MORGAN STANLEY VARIABLE 2.484% 09/16/2036 61747YEF8	24,929.75	75.85	18,962.50	621	3.27
40,000	NASDAQ INC BROKERAGE ASSETMANAGERS 5.55% 02/15/2034 63111XAJ0	39,988.80	100.353	40,141.20	2,220	5.53
40,000	OLD REPUBLIC INTERNATIONAL CORP 3.875% 08/26/2026 680223AK0	38,878.75	94.047	37,618.80	1,550	4.12
65,000	ORACLE CORP 3.95% 03/25/2051 68389XCA1	59,106.40	75.719	49,217.35	2,568	5.22
35,000	PECO ENERGY CO 4.375% 08/15/2052 693304BE6	34,562.50	88.178	30,862.30	1,531	4.96

Investment Review - Detail Of General Investments

SHARES/FACE	ASSET	CARRYING VALUE	CURRENT PRICE	MARKET VALUE	EST ANN INC	YIELD TO MKT
20,000	PNC FINANCIAL SERVICES PNC FINANCIAL SERVICES 5.068% 01/24/2034 693475BM6	19,902.60	95.966	19,193.20	1,014	5.28
40,000	PACIFICORP 5.35% 12/01/2053 695114CZ9	39,907.00	91.014	36,405.60	2,140	5.88
25,000	PARSLEY ENERGY LLC/FINAN 4.125% 02/15/2028 701885AJ4	26,281.25	92.834	23,208.50	1,031	4.44
40,000	PFIZER INVT ENTERPRISES PTE 5.11% 05/19/2043 716973AF9	39,200.00	100.106	40,042.40	2,044	5.10
20,000	PFIZER INVT ENTERPRISES PTE 5.3% 05/19/2053 716973AG7	19,970.20	103.926	20,785.20	1,060	5.10
55,000	PHYSICIANS REALTY LP 3.95% 01/15/2028 71951QAB8	54,561.44	91.223	50,172.65	2,173	4.33
25,000	PHYSICIANS REALTY LP 2.625% 11/01/2031 71951QAC6	24,947.25	77.752	19,438.00	656	3.38
55,000	RAYMOND JAMES FINANCIAL INC 3.75% 04/01/2051 754730AH2	56,289.05	75.68	41,624.00	2,063	4.96
40,000	CITIZENS BANK NA/RI VARIABLE RATE 4.575% 08/09/2028 75524KPG3	39,648.75	90.867	36,346.80	1,830	5.03
50,000	REALTY INCOME CORP 3.25% 01/15/2031 756109AX2	44,022.50	87.369	43,684.50	1,625	3.72
25,000	REGENCY CENTERS LP 3.75% 06/15/2024 75884RAT0	24,854.00	97.087	24,271.75	938	3.86
20,000	REGENCY CENTERS LP 3.9% 11/01/2025 75884RAU7	20,192.20	94.249	18,849.80	780	4.14
70,000	REXFORD INDUSTRIAL 2.125% 12/01/2030 76169XAA2	64,732.65	78.848	55,193.60	1,488	2.70

Investment Review - Detail Of General Investments

SHARES/FACE	ASSET	CARRYING VALUE	CURRENT PRICE	MARKET VALUE	EST ANN INC	YIELD TO MKT
70,000	ROYAL BANK OF CANADA 5% 02/01/2033 78016FZX5	69,397.65	97.966	68,576.20	3,500	5.10
15,000	SCE RECOVERY FUNDING LLC 4.697% 06/15/2040 78433LAG1	14,998.65	97.261	14,589.15	705	4.83
25,000	SCE RECOVERY FUNDING LLC 5.112% 12/15/2047 78433LAH9	24,997.35	98.415	24,603.75	1,278	5.19
30,000	SANTANDER HOLDINGS USA 4.4% 07/13/2027 80282KAP1	30,503.45	93.894	28,168.20	1,320	4.69
35,000	CHARLES SCHWAB CORP 5.643% 05/19/2029 808513CD5	35,000.00	99.841	34,944.35	1,975	5.65
35,000	SPIRIT REALTY LP 3.2% 01/15/2027 84861TAE8	34,995.45	89.978	31,492.30	1,120	3.56
55,000	SPIRIT REALTY LP 3.2% 02/15/2031 84861TAG3	56,421.25	81.602	44,881.10	1,760	3.92
45,000	STATE STREET CORP STATE STREET CORP 4.421% 05/13/2033 857477BU6	45,376.65	94.837	42,676.65	1,989	4.66
35,000	STATE STREET CORP 4.821% 01/26/2034 857477CA9	34,718.25	97.057	33,969.95	1,687	4.97
45,000	TAKE-TWO INTERACTIVE SOFTWARE 4.95% 03/28/2028 874054AK5	44,964.00	98.784	44,452.80	2,228	5.01
30,000	TARGA RESOURCES PARTNERS 4.875% 02/01/2031 87612BBS0	28,956.00	92.414	27,724.20	1,463	5.28
70,000	TEACHERS INSUR & ANNUITY 3.3% 05/15/2050 878091BG1	49,154.00	69.06	48,342.00	2,310	4.78
45,000	TORONTO DOMINION BK 5.156% 01/10/2028 89115A2M3	45,000.00	99.308	44,688.60	2,320	5.19

Investment Review - Detail Of General Investments

SHARES/FACE	ASSET	CARRYING VALUE	CURRENT PRICE	MARKET VALUE	EST ANN INC	YIELD TO MKT
30,000	TRANS-CANADA PIPELINES 2.5% 10/12/2031 89352HBC2	29,815.80	80.611	24,183.30	750	3.10
40,000	TRUST FINANCIAL CORP 5.867% 06/08/2034 89788MAP7	40,098.80	100.007	40,002.80	2,347	5.87
18,352.83	US AIRWAYS 2012 2A PTT 4.625% 06/03/2025 90345WAD6	19,485.77	93.7068	17,197.84	849	4.94
50,000	US BANCORP 2.491% 11/03/2036 91159HJB7	49,336.50	73.249	36,624.50	1,246	3.40
50,000	US BANCORP 5.85% 10/21/2033 91159HJJ0	52,062.33	100.059	50,029.50	2,925	5.85
45,000	US BANCORP 91159HJM3	45,000.00	99.939	44,972.55	0	0.00
10,000	UNITED TECHNOLOGIES CORP 4.125% 11/16/2028 913017CY3	11,068.90	96.252	9,625.20	413	4.29
60,000	VERIZON COMMUNICATIONS 2.55% 03/21/2031 92343VGJ7	53,654.60	83.43	50,058.00	1,530	3.06
35,000	VONTIER CORP 2.4% 04/01/2028 928881AD3	34,721.75	83.277	29,146.95	840	2.88
53,579.16	WASHINGTON MUTUAL MTG SEC CORP SERIES 2003-AR5 CLASS A7 FLOATING RATE BOND 3.07027% 06/25/2033 929227R65	54,047.99	99.3607	53,236.62	1,645	3.09
100,000	WELLS FARGO & COMPANY VARIABLE RATE BOND 2.879% 10/30/2030 95000U2G7	96,261.70	86.33	86,330.00	2,879	3.33
25,000	WELLS FARGO & COMPANY 5.389% 04/24/2034 95000U3D3	25,000.00	99.319	24,829.75	1,347	5.43
	TOTAL CORPORATE BONDS	4,651,335.72		4,263,633.20	186,532	4.37
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Investment Review - Detail Of General Investments

SHARES/FACE	ASSET	CARRYING VALUE	CURRENT PRICE	MARKET VALUE	EST ANN INC	YIELD TO MKT
COMMON STOCK						
16,045	ACUSHNET HLDGS CORP COMMON STOCK 005098108	653,782.06	54.68	877,340.60	12,515	1.43
13,649	ARTISAN PARTNERS ASSETS COMMON STOCK 04316A108	529,299.99	39.31	536,542.19	30,164	5.62
339	ATRION CORP COMMON STOCK 049904105	238,005.20	565.70	191,772.30	2,915	1.52
4,433	BANCFIRST CORPORATION COMMON STOCK 05945F103	311,239.84	92.00	407,836.00	7,093	1.74
9,080	CLEARWATER ANALYTICS COMMON STOCK 185123106	201,062.42	15.87	144,099.60	0	0.00
3,876	CORVEL CORP COMMON STOCK 221006109	488,409.04	193.50	750,006.00	0	0.00
3,885	DONALDSON CO INC 257651109	206,994.72	62.51	242,851.35	3,885	1.60
781	DRIL-QUIP COMMON STOCK 262037104	29,612.78	23.27	18,173.87	0	0.00
7,216	EMCOR GROUP INC COMMON STOCK 29084Q100	664,799.12	184.78	1,333,372.48	5,196	0.39
1,982	ASPEN TECHNOLOGY INC NEW COMMON STOCK 29109X106	361,021.30	167.61	332,203.02	0	0.00
6,877	FTI CONSULTING INC COMMON STOCK 302941109	844,626.80	190.20	1,308,005.40	0	0.00
1,425	FACTSET RESEARCH SYSTEM COMMON STOCK 303075105	420,899.85	400.65	570,926.25	5,586	0.98
26,753	FIRST HAWAIIAN INC COMMON STOCK 32051X108	691,707.81	18.01	481,821.53	27,823	5.77
9,704	GRACO INC COMMON STOCK 384109104	539,413.57	86.35	837,940.40	9,122	1.09

Investment Review - Detail Of General Investments

SHARES/FACE	ASSET	CARRYING VALUE	CURRENT PRICE	MARKET VALUE	EST ANN INC	YIELD TO MKT
1,816	JACK HENRY & ASSOCIATES INC COMMON STOCK 426281101	247,824.88	167.33	303,871.28	3,777	1.24
4,618	KFORCE.COM INC COMMON STOCK 493732101	285,140.96	62.66	289,363.88	6,650	2.30
4,161	LCI INDUSTRIES NEW COMMON STOCK 50189K103	543,329.35	126.36	525,783.96	17,476	3.32
4,400	LANDSTAR SYSTEM INC COMMON STOCK 515098101	716,397.78	192.54	847,176.00	5,280	0.62
5,309	MANHATTAN ASSOCIATES INC COMMON STOCK 562750109	612,826.61	199.88	1,061,162.92	0	0.00
13,297	MOELIS AND CO. COMMON STOCK 60786M105	708,694.85	45.34	602,885.98	31,913	5.29
3,876	PRICESMART INC COMMON STOCK 741511109	284,394.27	74.06	287,056.56	3,566	1.24
5,865	PRIMERICA INC COMMON STOCK 74164M108	723,563.84	197.76	1,159,862.40	15,249	1.31
1,397	PRUDENTIAL FINANCIAL INC COMMON STOCK 744320102	1.00	88.22	123,243.34	6,985	5.67
3,512	RLI CORP COMMON STOCK 749607107	300,015.20	136.47	479,282.64	3,793	0.79
2,721	RBC BEARINGS INC COMMON STOCK 75524B104	480,373.77	217.47	591,735.87	0	0.00
45,465	RIGHTMOVE PLC-UNSP ADR COMMON STOCK 76657Y101	677,549.85	13.303	604,820.90	8,184	1.35
9,120	SIMPSON MANUFACTURING CO INC COMMON STOCK 829073105	787,409.13	138.50	1,263,120.00	9,850	0.78
6,452	TORO CO DELA 891092108	532,470.28	101.65	655,845.80	8,775	1.34
870	PRINCE GEORGE COMMON STOCK 90278Q108	75,479.46	97.05	84,433.50	870	1.03

Investment Review - Detail Of General Investments

SHARES/FACE	ASSET	CARRYING VALUE	CURRENT PRICE	MARKET VALUE	EST ANN INC	YIELD TO MKT
4,294	WATTS INDUSTRIES INC CL A 942749102	609,937.48	183.73	788,936.62	6,183	0.78
1	LANDMARK EQUITY PARTNERS XIV, L.P. LEPXIVLP3	3,528,016.11 To page 1	365298.00	365,298.00 To page 1	0	0.00
	TOTAL COMMON STOCK	17,294,299.32 To page 1		18,066,770.64 To page 1	232,850	1.29
	MUTUAL FUNDS/FIXED					
2,385,006.838	PIMCO TOTAL RETURN BOND FUND #35 693390700	24,841,231.37	8.49	20,248,708.05	720,272	3.56
1	GCM GROSVENOR OFCV GCMGRO338	629,360.00	79854.00	79,854.00	0	0.00
1	GROSVENOR OPPORTUNISTIC CREDIT FUND V GCMOPP009	2,010,449.76	9433734.00	9,433,734.00	0	0.00
1	HAMILTON LANE STRATEGIC OPPORTUNITIES OFFSHORE FUND IV (SERIES 2018) LP HAMLAN009	1,341,505.00	2385248.00	2,385,248.00	0	0.00
166,491.997	INVESCO GLOBAL ASSET ALLOCATION STRATEGY IGA000112	23,605,148.37	108.91	18,132,643.39	0	0.00
1	HOPEWELL VENTURES, LP U10100110	508,941.68	84601.97	84,601.97	0	0.00
1	GROSVENOR OPPORTUNISTIC CREDIT FUND III U30008632	4,638,063.33	205457.00	205,457.00	0	0.00
39.4137	NIS HIGH YIELD FUND, LLC U30201005	934,592.72	38568.3836	1,520,123.82	0	0.00
1	ENTRUST CAPITAL SPECIAL OPPORTUNITIES FD LTD UENTRUCB7	89,150.00	451662.00	451,662.00	0	0.00
575,113.01	VOYA SENIOR LOAN COLLECTIVE TRUST FUND CLASS 1/6462 VSLCTF002	10,914,686.92	18.9008	10,870,075.28	0	0.00

Investment Review - Detail Of General Investments

SHARES/FACE	ASSET	CARRYING VALUE	CURRENT PRICE	MARKET VALUE	EST ANN INC	YIELD TO MKT
	TOTAL MUTUAL FUNDS/FIXED	69,513,129.15		63,412,107.51	720,272	1.14
	MUTUAL FUNDS/EQUITY					
6,233.3	LONGVIEW SMALL CAP 600 INDEX FUND 372074757	5,937,973.27	1660.85	10,352,576.31	0	0.00
714,530.382	WILLIAM BLAIR INTERNATIONAL LEADERS FUND CLASS I 969251685	10,932,640.04	19.45	13,897,615.93	40,014	0.29
7.41	DREYFUS GOVERNMENT CASH MGMT AB2006208	7.41	1.00	7.41	0	0.00
		To page 1		To page 1		
1	BNY MELLON AFL-CIO SL STOCK INDEX FUND BNYMEL556	93,000,000.00	87000000.00	87,000,000.00	0	0.00
4,825.012	BOYD WATTERSON GSA FUND LP BOYDWA228	5,422,240.62	1232.27	5,945,717.54	0	0.00
1	GCM GROSVENOR ADVANCE FEEDER FUND LP GCMGRO213	2,089,407.12	1017800.46	1,017,800.46	0	0.00
1	LANDMARK EQUITY PARTNERS XV L.P. LEPXVLP01	253,346.49	994504.00	994,504.00	0	0.00
104,467.857	LSV INTERNATIONAL CONCENTRATED EQUITY FUND LSVICE117	12,639,995.73	154.017	16,089,825.92	0	0.00
1	MESIROW FINANCIAL PRIVATE EQUITY FUND VI, L.P. MIMS00564	40,479.00	7237946.00	7,237,946.00	0	0.00
29,494.709	ULLICO INFRASTRUCTURE TAX EXEMPT FUND LLC ULLICOI13	6,898,774.38	233.8987	6,898,774.38	0	0.00
1	BLACKROCK VESEY STREET FUND V VESEYS008	3,257,761.00	2884020.00	2,884,020.00	0	0.00
	TOTAL MUTUAL FUNDS/EQUITY	140,472,625.06		152,318,787.95	40,014	0.03

Schedule MB Attachment (Form 5500) — 2022 Plan Year
S.E.I.U. Local No. 1 Pension Trust Fund
EIN: 51-6055057, Plan No.: 001

Schedule MB, line 8b(2) — Schedule of Active Participant Data

Distribution of Active Members by Age and Service July 1, 2022																				
Counts by Age/Service																				
Age	Years of Credited Service																			
	Under 1		1 to 4		5 to 9		10 to 14		15 to 19		20 to 24		25 to 29		30 to 34		35 to 39		40 & up	
	No.	Average Accrued Mon. Ben	No.	Average Accrued Mon. Ben	No.	Average Accrued Mon. Ben	No.	Average Accrued Mon. Ben	No.	Average Accrued Mon. Ben	No.	Average Accrued Mon. Ben	No.	Average Accrued Mon. Ben	No.	Average Accrued Mon. Ben	No.	Average Accrued Mon. Ben	No.	Average Accrued Mon. Ben
Under 25	28	\$ 21	53	\$ 87	3	N/A	0	N/A	0	N/A	0	N/A	0	N/A	0	N/A	0	N/A	0	N/A
25 to 29	31	18	121	100	48	231	1	N/A	0	N/A	0	N/A	0	N/A	0	N/A	0	N/A	0	N/A
30 to 34	41	21	120	105	106	260	21	441	1	N/A	0	N/A	0	N/A	0	N/A	0	N/A	0	N/A
35 to 39	17	N/A	106	111	103	269	46	468	29	623	3	N/A	0	N/A	0	N/A	0	N/A	0	N/A
40 to 44	32	20	125	108	101	271	68	468	45	652	25	840	0	N/A	0	N/A	0	N/A	0	N/A
45 to 49	30	19	113	100	75	274	71	469	64	656	57	822	20	981	0	N/A	0	N/A	0	N/A
50 to 54	20	22	114	105	105	267	77	473	86	665	70	822	46	1,022	29	1,187	0	N/A	0	N/A
55 to 59	19	N/A	102	102	97	274	74	465	99	667	83	822	61	1,026	52	1,199	12	N/A	2	N/A
60 to 64	3	N/A	65	107	72	276	60	473	79	670	85	821	57	1,031	48	1,217	37	1,390	16	N/A
65 to 69	1	N/A	26	116	20	279	28	480	39	652	35	820	28	1,021	27	1,208	22	1,431	20	1,500
70 & up	0	N/A	4	N/A	3	N/A	12	N/A	10	N/A	15	N/A	15	N/A	13	N/A	12	N/A	35	1,500
Total	222	\$ 20	949	\$ 104	733	\$ 267	458	\$ 469	452	\$ 660	373	\$ 822	227	\$ 1,022	169	\$ 1,205	83	\$ 1,403	73	\$ 1,500

Schedule MB Attachment (Form 5500) — 2022 Plan Year
S.E.I.U. Local No. 1 Pension Trust Fund
EIN: 51-6055057, Plan No.: 001

Schedule MB, line 3(d) — Withdrawal Liability Amounts

No Withdrawal Liability payments were made during the 2022 Plan year.

Schedule MB, Line 3(d) – Withdrawal Liability Amounts			
Payment Date	Periodic Amounts	Lump Sum Amounts	Total Amounts
N/A	N/A	N/A	N/A

Schedule MB Attachment (Form 5500) — 2022 Plan Year
S.E.I.U. Local No. 1 Pension Trust Fund
EIN: 51-6055057, Plan No.: 001

Schedule MB, line 9c and 9h — Schedule of Funding Standard Account Bases

Schedule of Amortization Charges Required for Minimum Required Contribution As of July 1, 2022						
Type of Base	Date Established	Initial Amount	Initial Amortization Years	July 1, 2022 Outstanding Balance	Remaining Amortization Years	Beginning of Year Amortization Amount
1. Plan Amendment	1/1/1993	\$ 1,854,495	30.00	\$ 72,429	0.50	\$ 72,429
2. Assumption Change	7/1/1993	3,101,448	30.00	238,190	1.00	238,190
3. Assumption Change	7/1/1994	2,039,163	30.00	302,624	2.00	156,075
4. Plan Amendment	1/1/1996	5,745,323	30.00	1,417,765	3.50	437,438
5. Plan Amendment	1/1/1997	2,683,003	30.00	823,341	4.50	203,633
6. Plan Amendment	7/1/1997	33,651	30.00	11,296	5.00	2,552
7. Plan Amendment	1/1/1998	2,455,757	30.00	891,231	5.50	185,809
8. Plan Amendment	4/1/1999	3,564,762	30.00	1,524,358	6.75	268,671
9. Plan Amendment	12/1/2000	5,436,814	30.00	2,750,257	8.42	407,995
10. Plan Amendment	7/1/2007	3,657,018	30.00	2,692,204	15.00	268,848
11. Plan Amendment	7/1/2007	475,000	30.00	349,685	15.00	34,920
12. Experience Loss	7/1/2008	2,241,722	15.00	230,919	1.00	230,919
13. Assumption Change	7/1/2008	2,276,554	15.00	236,922	1.00	236,922
14. Experience Loss	7/1/2009	5,897,460	15.00	1,173,276	2.00	605,104
15. Experience Loss	7/1/2010	7,657,625	15.00	1,917,883	3.00	679,949
16. Plan Amendment	7/1/2010	1,656,966	15.00	477,705	3.00	169,361
17. Experience Loss	7/1/2011	2,525,116	15.00	938,147	4.00	257,134
18. Experience Loss	7/1/2012	5,896,540	15.00	2,647,828	5.00	598,271
19. Assumption Change	7/1/2012	3,569,811	15.00	1,603,019	5.00	362,199
20. Experience Loss	7/1/2013	3,018,920	15.00	1,574,821	6.00	305,454
21. Plan Amendment (Max Benefit)	7/1/2015	9,481,214	15.00	6,187,547	8.00	954,203
22. Assumption Change (Mortality)	7/1/2015	8,490,273	15.00	5,540,851	8.00	854,474

Schedule MB Attachment (Form 5500) — 2022 Plan Year
S.E.I.U. Local No. 1 Pension Trust Fund
EIN: 51-6055057, Plan No.: 001

Schedule MB, line 9c and 9h — Schedule of Funding Standard Account Bases (continued)

Schedule of Amortization Charges Required for Minimum Required Contribution As of July 1, 2022 (Continued)						
Type of Base	Date Established	Initial Amount	Initial Amortization Years	July 1, 2022 Outstanding Balance	Remaining Amortization Years	Beginning of Year Amortization Amount
23. Assumption Change (Discount Rate)	7/1/2015	\$ 4,354,661	15.00	\$ 2,841,903	8.00	\$ 438,260
24. Experience Loss	7/1/2016	4,618,315	15.00	3,288,910	9.00	463,962
25. Experience Loss	7/1/2017	4,270,314	15.00	3,278,760	10.00	428,254
26. Assumption Change	7/1/2018	5,799,038	15.00	4,754,167	11.00	580,567
27. Plan Amendment	7/1/2018	9,298,485	15.00	7,623,082	11.00	930,912
28. Experience Loss	7/1/2018	1,187,903	15.00	973,867	11.00	118,926
29. Experience Loss	7/1/2019	2,566,639	15.00	2,230,784	12.00	256,735
30. Assumption Change	7/1/2019	2,256,173	15.00	1,960,945	12.00	225,680
31. Experience Loss	7/1/2020	2,801,589	15.00	2,564,450	13.00	280,001
32. Plan Amendment	7/1/2020	17,157,021	15.00	15,704,779	13.00	1,714,734
33. Assumption Change	7/1/2020	76,999	15.00	70,481	13.00	7,696
34. Assumption Change	7/1/2021	7,167,935	15.00	6,871,521	14.00	715,803
35. Plan Amendment	7/1/2021	22,603,771	15.00	21,669,042	14.00	2,257,253
Total Charges		\$ 167,917,478		\$ 107,434,989		\$ 15,949,333

Schedule MB Attachment (Form 5500) — 2022 Plan Year
S.E.I.U. Local No. 1 Pension Trust Fund
EIN: 51-6055057, Plan No.: 001

Schedule MB, line 9c and 9h — Schedule of Funding Standard Account Bases (continued)

Schedule of Amortization Credits Required for Minimum Required Contribution As of July 1, 2022						
Type of Base	Date Established	Initial Amount	Initial Amortization Years	July 1, 2022 Outstanding Balance	Remaining Amortization Years	Beginning of Year Amortization Amount
1. Assumption Change	7/1/1995	\$ 2,011,873	30.00	\$ 432,898	3.00	\$ 153,476
2. Assumption Change	12/1/2000	1,046,971	30.00	529,625	8.42	78,569
3. Experience Gain	7/1/2014	909,947	15.00	536,320	7.00	91,820
4. Experience Gain	7/1/2015	489,510	15.00	319,458	8.00	49,265
5. Assumption Change (Service)	7/1/2016	1,995,934	15.00	1,421,396	9.00	200,514
6. Method Change	7/1/2018	23,669,791	10.00	15,985,459	6.00	3,100,553
7. Experience Gain	7/1/2021	7,053,161	15.00	6,761,493	14.00	704,341
8. Experience Gain	7/1/2022	4,088,942	15.00	4,088,942	15.00	408,329
Total Credits		\$ 41,266,129		\$ 30,075,591		\$ 4,786,867
Net Charge				\$ 77,359,398		\$ 11,162,466

Schedule MB Attachment (Form 5500) — 2022 Plan Year
S.E.I.U. Local No. 1 Pension Trust Fund
EIN: 51-6055057, Plan No.: 001

Schedule MB, line 11 — Justification for Change in Actuarial Assumptions

The RPA '94 Current Liability interest rate was changed from 2.33% to 2.27% to comply with appropriate guidance. In addition, the mortality table used to determine RPA '94 Current Liability is the static mortality table as described under Regulation §1.430(h)(3)-1(a)(3). The 2021 table was updated to 2022 as provided by Notice 2020-85.

The present value of expected administrative expenses as a percent of the Accrued Liabilities decreased from 4.74% to 4.30% for the 2022 Plan year.

Schedule MB Attachment (Form 5500) — 2022 Plan Year
S.E.I.U. Local No. 1 Pension Trust Fund
EIN: 51-6055057, Plan No.: 001

Schedule MB, line 6 — Statement of Actuarial Assumptions/Methods

Actuarial Assumptions

1. Investment Return (net of investment expenses)

Funding purposes 6.50% per year
 Current Liability under RPA 1994 2.27% per year

2. Administrative Expenses

The administrative expenses paid during the prior plan year rounded to the nearest \$1,000. For the 2022 plan year this amount is \$1,072,000, payable at mid-year.

For financial disclosure under FASB ASC 960 the present value of future administrative expenses is assumed to be 4.30% of Accrued Liability.

3. Administrative Expense Inflation Assumption

For ASC 960, administrative expenses per participant are assumed to grow at 2.00% per year.

4. Rates of Mortality

(a) Funding and Accounting

Healthy: Sex-distinct RP-2014 Blue Collar Mortality Table projected to 2017 using scale MP 2014 (Base Year: 2014)

Disabled: Sex-distinct RP-2014 Disabled Retiree Mortality Table projected to 2017 using scale MP 2014 (Base Year: 2014)

(b) RPA '94 Current Liability

IRS 2022 Static Mortality Table as prescribed under IRS regulations.

Terminated vested participants over the age of 90 are assumed to be deceased.

5. Rates of Retirement

Sample rates are shown below:

Attained Age	Age at Entry into Service			
	< 35	35-49	50-59	60+
62	0.03			
63	0.03			
64	0.03			
65	0.17			
66	0.34			
67	0.46	0.34	0.25	
68	0.46	0.46	0.46	0.46
69	0.46	0.46	0.46	0.46
70	1.00	1.00	1.00	1.00

Schedule MB Attachment (Form 5500) — 2022 Plan Year
S.E.I.U. Local No. 1 Pension Trust Fund
EIN: 51-6055057, Plan No.: 001

Schedule MB, line 6 — Statement of Actuarial Assumptions/Methods (Continued)

6. Rates of Turnover

Sample rates are shown below by years of service:

Years of Service	Age at Entry into Service						
	< 25	25-29	30-34	35-39	40-44	45-49	50-54
0	0.14	0.14	0.17	0.19	0.19	0.10	0.10
1	0.12	0.12	0.14	0.17	0.17	0.08	0.08
2	0.12	0.12	0.14	0.17	0.17	0.07	0.07
3	0.12	0.12	0.14	0.16	0.16	0.07	0.07
4	0.12	0.12	0.14	0.14	0.14	0.07	0.07
5-6	0.07	0.07	0.10	0.10	0.07	0.07	0.05
7	0.06	0.07	0.10	0.10	0.07	0.07	0.05
8	0.06	0.07	0.10	0.08	0.07	0.07	0.05
9	0.06	0.07	0.08	0.07	0.07	0.07	0.05
10-14	0.06	0.07	0.07	0.07	0.07	0.07	0.00
15-18	0.06	0.06	0.07	0.07	0.06	0.00	0.00
19	0.06	0.06	0.07	0.06	0.06	0.00	0.00
20-24	0.06	0.06	0.06	0.06	0.00	0.00	0.00
25-27	0.06	0.06	0.06	0.00	0.00	0.00	0.00
28	0.06	0.06	0.00	0.00	0.00	0.00	0.00
29+	0.06	0.00	0.00	0.00	0.00	0.00	0.00

Schedule MB Attachment (Form 5500) — 2022 Plan Year
S.E.I.U. Local No. 1 Pension Trust Fund
EIN: 51-6055057, Plan No.: 001

Schedule MB, line 6 — Statement of Actuarial Assumptions/Methods (Continued)

7. Rates of Disability

Sample rates shown below:

Years of Service	Age at Entry into Service				
	< 25*	25-29*	30-34	35-39	40-44
15			0.0034	0.0057	0.0103
16			0.0038	0.0065	0.0115
17			0.0041	0.0073	0.0135
18		0.0025	0.0046	0.0083	0.0155
19		0.0030	0.0051	0.0093	0.0180
20		0.0034	0.0057	0.0103	
21		0.0038	0.0065	0.0115	
22		0.0041	0.0073	0.0135	
23	0.0025	0.0046	0.0083	0.0155	
24	0.0030	0.0051	0.0093	0.0180	
25	0.0034	0.0057	0.0103		
26	0.0038	0.0065	0.0115		
27	0.0041	0.0073	0.0135		
28	0.0046	0.0083	0.0155		
29	0.0051	0.0093	0.0180		
30	0.0057	0.0103			
31	0.0065	0.0115			
32	0.0073	0.0135			
33	0.0083	0.0155			
34	0.0093	0.0180			
35	0.0103				
36	0.0115				
37	0.0135				
38	0.0155				
39	0.0180				

**but not less than attained age 45*

8. Family Composition

85% of participants are assumed to be married, and female spouses are assumed to be four years younger than male spouses.

9. Form of Payment

50% Joint and Survivor annuity if married, Single Life annuity otherwise

10. Late Retirement for Terminated Vested Participants

For ages prior to and including age 65:

- Monthly benefit payable at age 65.

For ages between 65 and 72:

- Monthly benefit with actuarially equivalent late retirement increase applied, payable immediately.

For ages between 72 and 90, the sum of the following, payable immediately:

- Monthly benefit with actuarially equivalent late retirement increases applied to age 72, and
- One-time lump-sum for the missed payments from age 72 with interest.

For ages at or above 90:

- No participant data is retained for status counts or valuation purposes and no Actuarial Liability is held on their behalf.

Schedule MB, line 6 — Statement of Actuarial Assumptions/Methods (Continued)

11. Rationale for Economic Assumptions

In accordance with Actuarial Standard of Practice No. 27, the rationale for our 6.50% discount rate is based on the Trustees risk preference, the Fund's current asset allocation, and the investment managers capital market outlook.

The present value of expected administrative expenses as a percent of the Accrued Liabilities decreased from 4.74% to 4.30% for the 2022 Plan year.

Based on the Fund's current asset allocation, the investment consultant's expected long-term expected rate of return, and a review of financial information from other sources, an expected rate of return was calculated based on the building block method. This method consists of estimating the expected inflation rate and the real rate of return. The expected interest rate (nominal rate of return) is equal to the sum of the inflation rate and real rate of return.

12. Rationale for Demographic Assumptions

The demographic assumptions are historically based on plan experience. The assumptions used in this report have been provided by the previous actuary and have been checked annually against the sources of liability gains and losses. Based on the review of previous demographic gains and losses, the assumptions both collectively and on an individual basis have not reflected a gain or loss bias and continue to be appropriate for the measurement.

13. Changes in Assumptions Since Last Valuation

The RPA '94 Current Liability interest rate was changed from 2.33% to 2.27% to comply with appropriate guidance. In addition, the mortality table used to determine RPA '94 Current Liability is the static mortality table as described under Regulation §1.430(h)(3)-1(a)(3). The 2021 table was updated to 2022 as provided by Notice 2020-85.

Schedule MB, line 6 — Statement of Actuarial Assumptions/Methods (Continued)

Actuarial Methods

1. Valuation Funding Method

Entry Age Normal Cost Method

2. PPA Funding Method

Unit Credit Cost Method

3. Asset Valuation Method

The Actuarial Value of Assets is determined in accordance with Section 3.16 of Revenue Procedure 2000-40 using a five-year smoothing period. The actuarial value is calculated as the market value minus a decreasing fraction (4/5, 3/5, 2/5, 1/5) of each gain or loss for each of the preceding four plan years. The resulting Actuarial Value of Assets is then limited to be no greater than 120% and no less than 80% of the Market Value of Assets on the valuation date.

4. Changes in Methods Since Last Valuation

None

Schedule MB Attachment (Form 5500) — 2022 Plan Year
S.E.I.U. Local No. 1 Pension Trust Fund
EIN: 51-6055057, Plan No.: 001

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

Schedule MB, Line 8b(1) - Schedule of Projection of Expected Benefit Payments				
Plan Year	Active Participants	Terminated Vested Participants	Retired Participants and Beneficiaries Receiving Payments	Total
2022	\$ 1,733,523	\$ 3,374,979	\$ 10,181,652	\$ 15,290,154
2023	2,424,109	1,634,253	9,867,121	13,925,483
2024	3,084,252	2,060,156	9,545,965	14,690,373
2025	3,794,614	2,506,197	9,218,415	15,519,226
2026	4,562,365	2,853,866	8,884,679	16,300,910
2027	5,368,104	3,208,565	8,544,994	17,121,663
2028	6,175,933	3,528,412	8,199,676	17,904,021
2029	6,945,621	3,810,068	7,849,109	18,604,798
2030	7,707,501	4,045,448	7,493,772	19,246,721
2031	8,403,134	4,190,701	7,134,239	19,728,074
2032	9,082,007	4,315,793	6,771,177	20,168,977
2033	9,717,575	4,412,437	6,405,382	20,535,394
2034	10,286,483	4,487,433	6,037,774	20,811,690
2035	10,793,614	4,616,534	5,669,356	21,079,504
2036	11,212,450	4,694,215	5,301,152	21,207,817
2037	11,541,646	4,743,267	4,934,238	21,219,151
2038	11,829,347	4,755,170	4,569,798	21,154,315
2039	12,057,753	4,775,011	4,209,225	21,041,989
2040	12,140,583	4,761,497	3,854,130	20,756,210
2041	12,196,006	4,680,486	3,506,309	20,382,801
2042	12,213,228	4,580,960	3,167,702	19,961,890
2043	12,189,204	4,444,224	2,840,359	19,473,787
2044	12,143,842	4,354,995	2,526,443	19,025,280
2045	12,014,446	4,252,567	2,228,176	18,495,189
2046	11,817,065	4,117,130	1,947,676	17,881,871

Schedule MB, Line 8b(1) - Schedule of Projection of Expected Benefit Payments				
Plan Year	Active Participants	Terminated Vested Participants	Retired Participants and Beneficiaries Receiving Payments	Total
2047	\$ 11,580,139	\$ 3,975,110	\$ 1,686,817	\$ 17,242,066
2048	11,324,712	3,847,338	1,447,170	16,619,220
2049	11,052,327	3,685,458	1,229,847	15,967,632
2050	10,710,390	3,504,777	1,035,411	15,250,578
2051	10,350,594	3,312,359	863,806	14,526,759
2052	9,956,919	3,107,351	714,395	13,778,665
2053	9,532,994	2,921,259	586,016	13,040,269
2054	9,131,919	2,730,305	477,111	12,339,335
2055	8,685,468	2,559,161	385,851	11,630,480
2056	8,232,832	2,383,300	310,272	10,926,404
2057	7,772,835	2,199,800	248,353	10,220,988
2058	7,319,806	2,022,558	198,119	9,540,483
2059	6,861,598	1,857,250	157,716	8,876,564
2060	6,404,401	1,700,788	125,450	8,230,639
2061	5,961,728	1,548,722	99,813	7,610,263
2062	5,528,927	1,405,425	79,503	7,013,855
2063	5,109,828	1,270,701	63,437	6,443,966
2064	4,706,787	1,145,308	50,716	5,902,811
2065	4,318,847	1,029,311	40,625	5,388,783
2066	3,950,713	922,257	32,603	4,905,573
2067	3,603,607	823,688	26,204	4,453,499
2068	3,277,491	733,135	21,089	4,031,715
2069	2,973,423	650,123	16,995	3,640,541
2070	2,690,789	574,193	13,715	3,278,697
2071	2,428,815	504,907	11,087	2,944,809

Notes on the Expected Annual Benefit Payments:

- Per the 5500 instructions, the above benefit payments assume (1) no additional accruals, (2) experience in line with valuation assumptions, (3) no new entrants, and (4) benefits are paid in the form assumed for valuation purposes
- Do not include expected expenses
- Amounts are payable mid-year

Schedule MB Attachment (Form 5500) — 2022 Plan Year
S.E.I.U. Local No. 1 Pension Trust Fund
EIN: 51-6055057, Plan No.: 001

Schedule MB, line 8b(3) — Schedule of Projection of Employer Contributions and Withdrawal Liability Payments

Schedule MB, line 8b(3) - Schedule of Projection of Employer Contributions and Withdrawal Liability Payments			
Plan Year	Employer Contributions	Withdrawal Liability Payments	Total
2022	\$ 10,620,400	\$ 0	\$ 10,620,400
2023	10,620,400	0	10,620,400
2024	10,620,400	0	10,620,400
2025	10,620,400	0	10,620,400
2026	10,620,400	0	10,620,400
2027	10,620,400	0	10,620,400
2028	10,620,400	0	10,620,400
2029	10,620,400	0	10,620,400
2030	10,620,400	0	10,620,400
2031	10,620,400	0	10,620,400

The projected employer contributions shown above are consistent with the assumptions used to determine the Plan's 2022 PPA Status and documented in the PPA Certification issued September 27, 2022.

Schedule MB Attachment (Form 5500) — 2022 Plan Year
S.E.I.U. Local No. 1 Pension Trust Fund
EIN: 51-6055057, Plan No.: 001

9f – Explanation of Prior Year Credit Balance/Funding Deficiency Discrepancy

The market value of assets used for the July 1, 2021 actuarial valuation and reported on the 2021 Schedule MB filing was different than the amount reported in the final audited financial statement as of June 30, 2021. The below information on the 2021 Schedule MB would have differed as follows:

		Original Filing	Revised Filing
1b	Assets		
1b(1)	Current value of assets	289,720,106	291,473,471
1b(2)	Actuarial value of assets for funding standard account	255,628,845	255,979,518
2a	Current value of assets (see instructions)	289,720,106	291,473,471
2c	If the percentage resulting from dividing line 2a by line 2b(4), column (2) is less than 70%, enter such percentage	61.52%	61.90%
7	New amortization bases established in current year		
7(1)	Type of base	1	1
7(2)	Initial balance	-6,702,488	-7,053,161
7(3)	Amortization Charge/Credit	-669,322	-704,341
9h	Outstanding balance of amortization credits as of valuation date	28,703,845	29,054,518
9h	Amortization credits as of valuation date	4,618,890	4,653,909
9i	Interest as applicable to end of plan year on 9f, 9g, and 9h	5,357,512	5,359,789
9j(1)	ERISA FFL (accrued liability FFL)	98,986,645	98,613,179
9j(2)	“RPA ‘94” override (90% current liability FFL)	177,976,367	177,602,900
9l	Total credits	93,637,916	93,675,212
9m	Credit Balance	71,516,664	71,553,960

SCHEDULE C	OTHER SERVICE PROVIDER SERVICE CODES	STATEMENT 1
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NAME	SERVICE CODES
AMALGAMATED BANK	19
AMALGAMATED BANK	28
AMALGAMATED BANK	51
AMALGAMATED BANK	65

CODES TO SCHEDULE C, LINE 2(B)

SCHEDULE H	OTHER RECEIVABLES	STATEMENT 2
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DESCRIPTION	BEGINNING	ENDING
DUE FROM ORGANIZATION	987,258.	740,876.
ACCRUED INTEREST AND DIVIDENDS	114,698.	174,331.
PREPAID EXPENSES	3,666.	4,527.
TOTAL TO SCHEDULE H, LINE 1B(3)	1,105,622.	919,734.

SCHEDULE H	OTHER GENERAL INVESTMENTS	STATEMENT 3
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DESCRIPTION	BEGINNING	ENDING
MUNICIPAL BONDS	1,421,495.	804,361.
HEDGE FUNDS	10,089,491.	10,117,051.
TOTAL TO SCHEDULE H, LINE 1C(15)	11,510,986.	10,921,412.

SCHEDULE H	OTHER PLAN LIABILITIES	STATEMENT 4
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DESCRIPTION	BEGINNING	ENDING
DUE TO BROKER	150,302.	13,605.
DUE TO RELATED ORGANIZATION	0.	44,000.
TOTAL TO SCHEDULE H, LINE 1J	150,302.	57,605.

SCHEDULE H

OTHER ADMINISTRATIVE EXPENSES

STATEMENT 5

DESCRIPTION

AMOUNT

INSURANCE - BONDING AND FIDUCIARY RESPONSIBILITY

25,769.

MEETING AND CONFERENCES

3,313.

OFFICE SUPPLIES AND EXPENSE

52,877.

PBGC PREMIUMS

281,600.

PRINTING

1,597.

TOTAL TO SCHEDULE H, LINE 2I(4)

365,156.

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. 1510 - 0110 1510 - 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 07/01/2022 and ending 06/30/2023	
A This return/report is for: ☒ a multiemployer plan ☐ a single-employer plan B This return/report is: ☐ the first return/report ☐ an amended return/report C If the plan is a collectively-bargained plan, check here ☒ D Check box if filing under: ☒ Form 5558 ☐ special extension (enter description) E If this is a retroactively adopted plan permitted by SECURE Act section 201, check here ☐	☐ a multiple-employer plan (filers checking this box must attach a list of participating employer information in accordance with the form instr.) ☐ a DFE (specify) _____ ☐ the final return/report ☐ a short plan year return/report (less than 12 months) ☐ automatic extension ☐ the DFVC program

Part II Basic Plan Information - enter all requested information											
1a Name of plan LOCAL NO. 1 PENSION TRUST FUND 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) TRUSTEES OF LOCAL 1 PENSION FUND 1431 OPUS PLACE DOWNERS GROVE IL 60515	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%;">1b Three-digit plan number (PN) ▶</td> <td>001</td> </tr> <tr> <td colspan="2">1c Effective date of plan 01/04/1967</td> </tr> <tr> <td colspan="2">2b Employer Identification Number (EIN) 51-6055057</td> </tr> <tr> <td colspan="2">2c Plan Sponsor's telephone number 630-288-6868</td> </tr> <tr> <td colspan="2">2d Business code (see Instructions) 561790</td> </tr> </table>	1b Three-digit plan number (PN) ▶	001	1c Effective date of plan 01/04/1967		2b Employer Identification Number (EIN) 51-6055057		2c Plan Sponsor's telephone number 630-288-6868		2d Business code (see Instructions) 561790	
1b Three-digit plan number (PN) ▶	001										
1c Effective date of plan 01/04/1967											
2b Employer Identification Number (EIN) 51-6055057											
2c Plan Sponsor's telephone number 630-288-6868											
2d Business code (see Instructions) 561790											

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		4/11/24	James Watts
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE		4/11/24	Efrain Elias
	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
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5 Total number of participants at the beginning of the plan year	5	8800
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)	3739
a (2) Total number of active participants at the end of the plan year	6a(2)	3813
b Retired or separated participants receiving benefits	6b	2098
c Other retired or separated participants entitled to future benefits	6c	2569
d Subtotal. Add lines 6a(2), 6b, and 6c	6d	8480
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits	6e	532
f Total. Add lines 6d and 6e	6f	9012
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	6g	
h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested	6h	
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	7	1028

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

a Pension Schedules

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

b General Schedules

- (1) ☒ **H** (Financial Information)
 (2) ☐ **I** (Financial Information - Small Plan)
 (3) ☒ **1** **A** (Insurance Information)
 (4) ☒ **C** (Service Provider Information)
 (5) ☒ **D** (DFE/Participating Plan Information)
 (6) ☐ **G** (Financial Transaction Schedules)

Supplemental Schedule 2

SERVICE EMPLOYEES INTERNATIONAL UNION

LOCAL NO. 1 PENSION FUND

EIN: 51-6055057 PN: 001

SCHEDULE SUPPORTING FORM 5500 FOR 2022

SCHEDULE H - LINE 4j - SCHEDULE OF REPORTABLE TRANSACTIONS

(a) Identity of Party Involved	(b) Description of Asset	(c) Purchase Price	(d) Selling Price	(e) Cost of Asset	(h) Current Value of Asset on Transaction Date	Net Gain (Loss)
<u>SERIES OF TRANSACTIONS IN EXCESS OF 5%</u>						
Goldman Financial Square Government Fund						
	365 purchases	\$ 14,209,394	\$ -	\$ 14,209,394	\$ 14,209,394	\$ -
	249 sales	-	21,744,921	21,744,921	21,744,921	-

**SCHEDULE MB
(Form 5500)**Department of the Treasury
Internal Revenue ServiceDepartment 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**

For calendar plan year 2022 or fiscal plan year beginning 07/01/2022 and ending 06/30/2023

▶ **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.

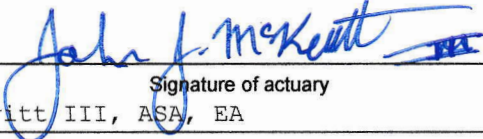
A Name of plan LOCAL NO. 1 PENSION TRUST FUND	B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF TRUSTEES OF LOCAL 1 PENSION FUND	D Employer Identification Number (EIN) 51-6055057

E Type of plan: (1) ☒ Multiemployer Defined Benefit (2) ☐ Money Purchase (see instructions)**1a** Enter the valuation date: Month 7 Day 1 Year 2022**b** Assets

(1) Current value of assets.....	1b(1)	266,468,674
(2) Actuarial value of assets for funding standard account.....	1b(2)	273,593,091
c (1) Accrued liability for plan using immediate gain methods.....	1c(1)	279,398,529
(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)	259,001,160
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)	490,789,137
(b) Expected increase in current liability due to benefits accruing during the plan year.....	1d(2)(b)	15,182,196
(c) Expected release from "RPA '94" current liability for the plan year.....	1d(2)(c)	15,052,665
(3) Expected plan disbursements for the plan year.....	1d(3)	16,366,688

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		3/18/2024
John J. McKeivitt III, ASA, EA	Signature of actuary	Date
Cheiron, Inc.	Type or print name of actuary	23-08580
		Most recent enrollment number
		(312) 629-8401
		Telephone number (including area code)
230 West Monroe, Suite 650	Firm name	
Chicago IL 60606	Address of the firm	

If the actuary has not fully reflected any regulation or ruling promulgated under the statute in completing this schedule, check the box and see instructions ☐**For Paperwork Reduction Act Notice, see the Instructions for Form 5500 or 5500-SF.****Schedule MB (Form 5500) 2022
v. 220413**

2 Operational information as of beginning of this plan year:

a Current value of assets (see instructions)	2a	266,468,674
b "RPA '94" current liability/participant count breakdown:		
	(1) Number of participants	(2) Current liability
(1) For retired participants and beneficiaries receiving payment	2,403	132,265,561
(2) For terminated vested participants	2,672	103,497,747
(3) For active participants:		
(a) Non-vested benefits.....		10,754,994
(b) Vested benefits.....		244,270,835
(c) Total active	3,739	255,025,829
(4) Total	8,814	490,789,137
c If the percentage resulting from dividing line 2a by line 2b(4), column (2), is less than 70%, enter such percentage	2c	54.29%

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
12/31/2022	11,690,444				
Totals ▶			3(b)	11,690,444	3(c)
(d) Total withdrawal liability amounts included in line 3(b) total					3(d)

4 Information on plan status:

a Funded percentage for monitoring plan's status (line 1b(2) divided by line 1c(3)).....	4a	105.6%
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	2.27 %
	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)	6P17
(2) Females	6c(2)	6FP17
d Valuation liability interest rate	6d	6.50 %
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)	6.50%
g Estimated investment return on actuarial value of assets for year ending on the valuation date	6g	7.2%
h Estimated investment return on current value of assets for year ending on the valuation date	6h	-8.4%
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)	1,038,771
(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	-4,088,942	-408,329

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	0
b Employer's normal cost for plan year as of valuation date	9b	4,869,655

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)	107,434,989	15,949,333
9c(2)	0	0
9c(3)	0	0

d Interest as applicable on lines 9a, 9b, and 9c.....**9d** 1,353,234**e** Total charges. Add lines 9a through 9d.....**9e** 22,172,222**Credits to funding standard account:****f** Prior year credit balance, if any.....**9f** 71,553,960**g** Employer contributions. Total from column (b) of line 3.....**9g** 11,690,444**h** Amortization credits as of valuation date.....

	Outstanding balance	
9h	30,075,591	4,786,867

i Interest as applicable to end of plan year on lines 9f, 9g, and 9h**9i** 5,336,112**j** Full funding limitation (FFL) and credits:

(1) ERISA FFL (accrued liability FFL).....

9j(1) 95,161,446

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

9j(2) 177,369,859

(3) FFL credit

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** 93,367,383**m** Credit balance: If line 9l is greater than line 9e, enter the difference**9m** 71,195,161**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