

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 10/01/2022 and ending 09/30/2023	
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 JACKSONVILLE MARITIME ASSOCIATION / INTERNATIONAL LONGSHOREMAN'S ASSOCIATION	1b	Three-digit plan number (PN) ▶ 001
		1c	Effective date of plan 11/01/1963
2a	Plan sponsor's name (employer, if for a single-employer plan) Mailing address (include room, apt., suite no. and street, or P.O. Box) City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions) INTERNATIONAL LONGSHOREMAN'S WELFARE AND PENSION ADMINISTRATION 9550 REGENCY SQUARE BLVD, SUITE 401 JACKSONVILLE, FL 32225	2b	Employer Identification Number (EIN) 82-3722523
		2c	Plan Sponsor's telephone number 904-354-7258
		2d	Business code (see instructions) 488300

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.	04/02/2024	WARREN K. SMITH
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	Filed with authorized/valid electronic signature.	04/04/2024	JAMES R. GRAY JR
	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 1115
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) 650
a(2) Total number of active participants at the end of the plan year		6a(2) 653
b Retired or separated participants receiving benefits		6b 295
c Other retired or separated participants entitled to future benefits.....		6c 0
d Subtotal. Add lines 6a(2) , 6b , and 6c		6d 948
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.		6e 168
f Total. Add lines 6d and 6e		6f 1116
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item).....		6g 0
h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested.....		6h 0
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)		7 13
8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions: 1B		
b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristics Codes in the instructions:		
9a Plan funding arrangement (check all that apply) (1) ☐ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor		9b Plan benefit arrangement (check all that apply) (1) ☐ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor
10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)		
a Pension Schedules (1) ☒ R (Retirement Plan Information) (2) ☒ MB (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary (3) ☐ SB (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary		b General Schedules (1) ☒ H (Financial Information) (2) ☐ I (Financial Information – Small Plan) (3) ☐ A (Insurance Information) (4) ☒ C (Service Provider Information) (5) ☐ D (DFE/Participating Plan Information) (6) ☐ G (Financial Transaction Schedules)

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

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

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

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

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

Receipt Confirmation Code _____

SCHEDULE MB (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6059 of the Internal Revenue Code (the Code). ► File as an attachment to Form 5500 or 5500-SF.	OMB No. 1210-0110 2022 This Form is Open to Public Inspection
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For calendar plan year 2022 or fiscal plan year beginning 10/01/2022 and ending 09/30/2023

- 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 JACKSONVILLE MARITIME ASSOCIATION / INTERNATIONAL LONGSHOREMAN'S ASSOCIATION	B Three-digit plan number (PN) 001
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF INTERNATIONAL LONGSHOREMAN'S WELFARE AND PENSION ADMINISTRATION	D Employer Identification Number (EIN) 82-3722523

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

1a Enter the valuation date: Month 10 Day 01 Year 2022	
b Assets	
(1) Current value of assets	1b(1) 84275631
(2) Actuarial value of assets for funding standard account	1b(2) 84275631
c (1) Accrued liability for plan using immediate gain methods	1c(1)
(2) Information for plans using spread gain methods:	
(a) Unfunded liability for methods with bases	1c(2)(a) 0
(b) Accrued liability under entry age normal method	1c(2)(b) 105405685
(c) Normal cost under entry age normal method	1c(2)(c) 2274971
(3) Accrued liability under unit credit cost method	1c(3) 95500349
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) 146650091
(b) Expected increase in current liability due to benefits accruing during the plan year	1d(2)(b) 3409137
(c) Expected release from "RPA '94" current liability for the plan year	1d(2)(c) 0
(3) Expected plan disbursements for the plan year	1d(3) 7792634

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	04/25/2024
Signature of actuary	Date
JARMON WELCH	23-01108
Type or print name of actuary	Most recent enrollment number
PENSION BOARD CONSULTANTS, INC	404-702-7802
Firm name	Telephone number (including area code)
195 FOURTEENTH STREET NE, SUITE 2307, ATLANTA, GA 30309	
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	84275631
b "RPA '94" current liability/participant count breakdown:	(1) Number of participants	(2) Current liability
(1) For retired participants and beneficiaries receiving payment.....	479	64764947
(2) For terminated vested participants	0	0
(3) For active participants:		
(a) Non-vested benefits		4329383
(b) Vested benefits		77555761
(c) Total active	650	81885144
(4) Total	1129	146650091
c If the percentage resulting from dividing line 2a by line 2b(4), column (2), is less than 70%, enter such percentage	2c	57.47 %

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
10/15/2022	550020	0	03/15/2023	458524	0
11/15/2022	468838	0	04/15/2023	577542	0
12/15/2022	457098	0	05/15/2023	450887	0
01/15/2023	554194	0	06/15/2023	476622	0
02/15/2023	391358	0	07/15/2023	678269	0
		Totals ▶	3(b)	6147747	3(c) 0
(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	88.2 %
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	

2 Operational information as of beginning of this plan year:

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

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
08/15/2023	499282	0			
09/15/2023	585113	0			
Totals ▶			3(b)		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	%
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	
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	2.35 %
	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)	0 6P+2
(2) Females	6c(2)	0 6FP+2
d Valuation liability interest rate	6d	6.75 % 6.75 %
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)	6.70 %
g Estimated investment return on actuarial value of assets for year ending on the valuation date	6g	-16.3 %
h Estimated investment return on current value of assets for year ending on the valuation date	6h	-16.3 %
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)	
(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

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	6399777

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)		
9c(2)		
9c(3)		

d Interest as applicable on lines 9a, 9b, and 9c.....**9d** 431985**e** Total charges. Add lines 9a through 9d.....**9e** 6831762**Credits to funding standard account:****f** Prior year credit balance, if any**9f** 22338721**g** Employer contributions. Total from column (b) of line 3.....**9g** 6147747**h** Amortization credits as of valuation date.....

	Outstanding balance	
9h		

i Interest as applicable to end of plan year on lines 9f, 9g, and 9h.....**9i** 1709570**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)	0	
9j(2)	0	
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** 30196038**m** Credit balance: If line 9l is greater than line 9e, enter the difference**9m** 23364276**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****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 10/01/2022 and ending 09/30/2023	
A Name of plan JACKSONVILLE MARITIME ASSOCIATION / INTERNATIONAL LONGSHOREMAN'S ASSOCIATION	B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 INTERNATIONAL LONGSHOREMAN'S WELFARE AND PENSION ADMINISTRATION	D Employer Identification Number (EIN) 82-3722523

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

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

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

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

MORGAN STANLEY

26-8764829

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
15 19 27 28 33 49 50 51 55 64 71 72 99	NONE	357146	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☐ No ☐

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

PENSION BOARD CONSULTANTS, INC.

59-1997474

(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 50	NONE	114960	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

MOSELEY PRICHARD PARRISH KNIGHT & J

59-1309328

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
29 50	NONE	91027	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)

GEOGRAMETRIX

9838 OLD BAYMEADOWS RD #347
JACKSONVILLE, FL 32256

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
15 50	NONE	58431	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

SCHULTHEIS & PANETTIERI, LLP

13-1577780

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
10 50	NONE	47500	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

SMITH, GAMBRELL & RUSSELL, LLP

58-0967450

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
29 50	NONE	39011	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)

VENTURE POINTE

8659 BAYPINE ROAD
JACKSONVILLE, FL 32256

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
15 50	NONE	30457	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

THE LAMBOS FIRM

13-3864093

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
29 50	NONE	23217	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

ROBEIN, URANN, SPENCER, PICARD, & C

2540 SEVERN AVE
SUITE 400
METARIE, LA 70002

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
29 50	NONE	15238	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)

WAYNETTA MCGRAW

59-0834277

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
10 50	NONE	10894	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

COMPREHENSIVE CONSULTING

5038 DORSEY HALL DRIVE
ELLCOTT, MD 21042

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
16 50	NONE	9030	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

JOHN E. SANDS

7777 GLADES ROAD
SUITE 100
BOCA RATON, FL 33434

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
29 50	NONE	7514	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)

SOUTHERN PC TECHNOLOGY

9957 MOORINGS DRIVE
JACKSONVILLE, FL 32257

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
16 50	NONE	5759	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

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

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

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

Part I Service Provider Information (continued)

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE 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 10/01/2022 and ending 09/30/2023		
A Name of plan JACKSONVILLE MARITIME ASSOCIATION / INTERNATIONAL LONGSHOREMAN'S ASSOCIATION		B Three-digit plan number (PN) ► 001
C Plan sponsor's name as shown on line 2a of Form 5500 INTERNATIONAL LONGSHOREMAN'S WELFARE AND PENSION ADMINISTRATION		D Employer Identification Number (EIN) 82-3722523

Part I Asset and Liability Statement			
1 Current value of plan assets and liabilities at the beginning and end of the plan year. Combine the value of plan assets held in more than one trust. Report the value of the plan's interest in a commingled fund containing the assets of more than one plan on a line-by-line basis unless the value is reportable on lines 1c(9) through 1c(14). Do not enter the value of that portion of an insurance contract which guarantees, during this plan year, to pay a specific dollar benefit at a future date. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 1b(1), 1b(2), 1c(8), 1g, 1h, and 1i. CCTs, PSAs, and 103-12 IEs also do not complete lines 1d and 1e. See instructions.			
Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash.....	1a		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions.....	1b(1)	351876	361426
(2) Participant contributions.....	1b(2)		
(3) Other.....	1b(3)	156512	229994
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit).....	1c(1)	1740145	2171367
(2) U.S. Government securities.....	1c(2)	25047866	22822364
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred.....	1c(3)(A)	1955626	1728237
(B) All other.....	1c(3)(B)	778416	4006271
(4) Corporate stocks (other than employer securities):			
(A) Preferred.....	1c(4)(A)		
(B) Common.....	1c(4)(B)	39268145	45853100
(5) Partnership/joint venture interests.....	1c(5)		
(6) Real estate (other than employer real property).....	1c(6)		
(7) Loans (other than to participants).....	1c(7)		
(8) Participant loans.....	1c(8)		
(9) Value of interest in common/collective trusts.....	1c(9)		
(10) Value of interest in pooled separate accounts.....	1c(10)		
(11) Value of interest in master trust investment accounts.....	1c(11)		
(12) Value of interest in 103-12 investment entities.....	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds).....	1c(13)	15115653	14982853
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)		
(15) Other.....	1c(15)	45683	45738

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	84459922	92201350

Liabilities

g Benefit claims payable	1g		
h Operating payables	1h	46072	70985
i Acquisition indebtedness	1i		
j Other liabilities	1j	138219	37683
k Total liabilities (add all amounts in lines 1g through 1j)	1k	184291	108668

Net Assets

l Net assets (subtract line 1k from line 1f)	1l	84275631	92092682
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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)	6147748	
(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)		6147748
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	10873	
(B) U.S. Government securities	2b(1)(B)	621876	
(C) Corporate debt instruments	2b(1)(C)	111696	
(D) Loans (other than to participants)	2b(1)(D)		
(E) Participant loans	2b(1)(E)		
(F) Other	2b(1)(F)		
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		744445
(2) Dividends: (A) Preferred stock	2b(2)(A)		
(B) Common stock	2b(2)(B)	846977	
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	334213	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		1181190
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)	33251983	
(B) Aggregate carrying amount (see instructions)	2b(4)(B)	39276111	
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)		-6024128
(5) Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)		
(B) Other	2b(5)(B)	13388524	
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		13388524

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities.....	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		
c Other income	2c		
d Total income. Add all income amounts in column (b) and enter total	2d		15437779
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	6185138	
(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)		6185138
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)	338467	
(2) Contract administrator fees	2i(2)		
(3) Investment advisory and management fees	2i(3)	387460	
(4) Other	2i(4)	709663	
(5) Total administrative expenses. Add lines 2i(1) through (4)	2i(5)		1435590
j Total expenses. Add all expense amounts in column (b) and enter total	2j		7620728
Net Income and Reconciliation			
k Net income (loss). Subtract line 2j from line 2d	2k		7817051
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: SCHULTHEIS & PANETTIERI, LLP

(2) EIN: 13-1577780

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		2000000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		X	
4f		X	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?			
4g		X	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?			
4h		X	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	X		
4i	X		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.)			
4j		X	
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?			
4k		X	
l Has the plan failed to provide any benefit when due under the plan?			
4l		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)			
4m			
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 504996.

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 10/01/2022 and ending 09/30/2023		
A Name of plan JACKSONVILLE MARITIME ASSOCIATION / INTERNATIONAL LONGSHOREMAN'S ASSOCIATION		B Three-digit plan number (PN) ► 001
C Plan sponsor's name as shown on line 2a of Form 5500 INTERNATIONAL LONGSHOREMAN'S WELFARE AND PENSION ADMINISTRATION		D Employer Identification Number (EIN) 82-3722523
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 SSA/COOPER LLC

b EIN 91-2171689 **c** Dollar amount contributed by employer 3403069

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month 09 Day 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) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☒ Other (specify): HOURLY FROM \$2.70-\$7.20

a Name of contributing employer APS STEVEDORING

b EIN 45-3075525 **c** Dollar amount contributed by employer 948252

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month 09 Day 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) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☒ Other (specify): HOURLY FROM \$7.00-\$7.15

a Name of contributing employer DAMES POINT JACKSONVILLE LLC

b EIN 20-2147744 **c** Dollar amount contributed by employer 860083

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month 09 Day 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) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☒ Other (specify): HOURLY FROM \$2.70-\$7.15

a Name of contributing employer CONTAINER MAINTENANCE CORP.

b EIN 58-1788184 **c** Dollar amount contributed by employer 351616

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month 09 Day 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) 7.15

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

a Name of contributing employer GULF TERMINAL INTERNATIONAL

b EIN 74-1696737 **c** Dollar amount contributed by employer 329448

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month 09 Day 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) 7.00

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

a Name of contributing employer COASTAL GREAT SOUTHERN

b EIN 94-3228406 **c** Dollar amount contributed by employer 171568

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month 09 Day 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) 7.15

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

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

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

a Name of contributing employer **ADVANTAGE COMMERCIAL TIRE & SERVICE, INC.**

b EIN **27-2485397**

c Dollar amount contributed by employer **29017**

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month **09** Day **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) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☒ Other (specify): **HOURLY FROM \$2.70-\$7.15**

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

14	Enter the number of deferred vested and retired participants (inactive participants), as of the beginning of the plan year, whose contributing employer is no longer making contributions to the plan for:	
a	The current plan year. Check the box to indicate the counting method used to determine the number of inactive participants: ☒ last contributing employer ☐ alternative ☐ reasonable approximation (see instructions for required attachment).....	14a 0
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 0
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 0
15	Enter the ratio of the number of participants under the plan on whose behalf no employer had an obligation to make an employer contribution during the current plan year to:	
a	The corresponding number for the plan year immediately preceding the current plan year.....	15a
b	The corresponding number for the second preceding plan year.....	15b
16	Information with respect to any employers who withdrew from the plan during the preceding plan year:	
a	Enter the number of employers who withdrew during the preceding plan year	16a
b	If line 16a is greater than 0, enter the aggregate amount of withdrawal liability assessed or estimated to be assessed against such withdrawn employers.....	16b
17	If assets and liabilities from another plan have been transferred to or merged with this plan during the plan year, check box and see instructions regarding supplemental information to be included as an attachment ☐	

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

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

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

a Enter the percentage of plan assets held as:
 Stock: 61 % Investment-Grade Debt: 37 % High-Yield Debt: _____ % Real Estate: _____ % Other: 2 %

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 _____



Schultheis & Panettieri LLP

Accountants and Consultants

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Independent Auditor's Report**Board of Trustees**

Jacksonville Maritime Association / International
Longshoremen's Association Pension Fund

Opinion

We have audited the accompanying financial statements of the Jacksonville Maritime Association / International Longshoremen's Association 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 September 30, 2023 and 2022, and the related statements of changes in net assets available for benefits for the years ended September 30, 2023 and 2022, and the related notes to the financial statements.

In our opinion, the financial statements referred to above present fairly, in all material respects, the net assets available for benefits of the Plan as of September 30, 2023, and the changes therein for the year ended September 30, 2023 and its financial status as of September 30, 2022, and its changes therein for the year ended September 30, 2022 in accordance with accounting principles generally accepted in the United States of America.

Basis for Opinion

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

Responsibilities of Management for the Financial Statements

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

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

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

Auditor's Responsibilities for the Audit of the Financial Statements

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

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

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

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

Supplemental Schedules Required by ERISA

Our audits were conducted for the purpose of forming an opinion on the financial statements as a whole. The supplemental information on pages 15 through 30 is presented for purposes of additional analysis and is 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 generally accepted auditing standards.

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

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

Supplemental Information

Our audits were conducted for the purpose of forming an opinion on the financial statements as a whole. The supplemental information on page 31 is presented for purposes of additional analysis and is not a required part of the financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audits of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the information is fairly stated in all material respects in relation to the financial statements as a whole.

Handwritten signature of Schulteis & Parulli LLP in cursive script.

Hauppauge, New York
April 5, 2024

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

Pension Benefit Guaranty Corporation

Annual Return/Report of Employee Benefit Plan

This form is required to be filed for employee benefit plans under sections 104 and 4085 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6057(b) and 6058(a) of the Internal Revenue Code (the Code).

▶ **Complete all entries in accordance with the instructions to the Form 5500.**OMB Nos. 1210-0110
1210-0089**2022****This Form is Open to Public Inspection****Part I Annual Report Identification Information**For calendar plan year 2022 or fiscal plan year beginning 10/01/2022 and ending 09/30/2023

- 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
JACKSONVILLE MARITIME ASSOCIATION / INTERNATIONAL
LONGSHOREMEN'S ASSOCIATION PENSION PLAN**1b** Three-digit plan number (PN) ▶ 001**1c** Effective date of plan
07/01/1958**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)
BOT INTERNATIONAL LONGSHOREMEN'S
WELFARE & PENSION ADMINISTRATION**2b** Employer Identification Number (EIN)
82-3722523**2c** Plan Sponsor's telephone number (904) 354-7258**2d** Business code (see instructions)
4883009550 REGENCY SQUARE BLVD, SUITE 401JACKSONVILLEFL 32225**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		Date <u>4/3/24</u>	Enter name of individual signing as plan administrator <u>Warren K. Smith</u>
SIGN HERE		Date <u>4/5/24</u>	Enter name of individual signing as employer or plan sponsor <u>James R. Gray Jr</u>
SIGN HERE	Signature of DFE	Date	Enter name of individual signing as DFE

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

Form 5500 (2022)
v. 220413

3a Plan administrator's name and address ☒ Same as Plan Sponsor	3b Administrator's EIN 3c Administrator's telephone number
4 If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report: a Sponsor's name c Plan Name	4b EIN 4d PN
5 Total number of participants at the beginning of the plan year	5 1,115
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) 650
a(2) Total number of active participants at the end of the plan year	6a(2) 653
b Retired or separated participants receiving benefits.....	6b 295
c Other retired or separated participants entitled to future benefits	6c 0
d Subtotal. Add lines 6a(2) , 6b , and 6c	6d 948
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	6e 168
f Total. Add lines 6d and 6e	6f 1,116
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	6g 0
h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested	6h 0
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	7 13

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

1B

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

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

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

a Pension Schedules

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

b General Schedules

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

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

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

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

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

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

Receipt Confirmation Code _____

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

For calendar plan year 2022 or fiscal plan year beginning 10/01/2022 and ending 09/30/2023

- ▶ **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 <u>JACKSONVILLE MARITIME ASSOCIATION / INTERNATIONAL LONGSHOREMEN'S ASSOCIATION</u>	B Three-digit plan number (PN) ▶ <u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF <u>INTERNATIONAL LONGSHOREMEN'S WELFARE AND PENSION ADMINISTRATION</u>	D Employer Identification Number (EIN) <u>82-3722523</u>

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

1a Enter the valuation date: Month <u>10</u> Day <u>01</u> Year <u>2022</u>	
b Assets	
(1) Current value of assets	1b(1) <u>84275631</u>
(2) Actuarial value of assets for funding standard account	1b(2) <u>84275631</u>
c (1) Accrued liability for plan using immediate gain methods	1c(1) <u>0</u>
(2) Information for plans using spread gain methods:	
(a) Unfunded liability for methods with bases	1c(2)(a) <u>0</u>
(b) Accrued liability under entry age normal method	1c(2)(b) <u>105405685</u>
(c) Normal cost under entry age normal method	1c(2)(c) <u>2274971</u>
(3) Accrued liability under unit credit cost method	1c(3) <u>95500349</u>
d Information on current liabilities of the plan:	
(1) Amount excluded from current liability attributable to pre-participation service (see instructions)	1d(1) <u>0</u>
(2) "RPA '94" information:	
(a) Current liability	1d(2)(a) <u>146650091</u>
(b) Expected increase in current liability due to benefits accruing during the plan year	1d(2)(b) <u>3409137</u>
(c) Expected release from "RPA '94" current liability for the plan year	1d(2)(c) <u>0</u>
(3) Expected plan disbursements for the plan year	1d(3) <u>7792634</u>

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 <u>Jarmon Welch</u> Signature of actuary	<u>04/25/2024</u> Date
<u>JARMON WELCH</u> Type or print name of actuary	<u>23-01108</u> Most recent enrollment number
<u>PENSION BOARD CONSULTANTS, INC</u> Firm name	<u>404-702-7802</u> Telephone number (including area code)
<u>195 FOURTEENTH STREET NE, SUITE 2307, ATLANTA, GA 30309</u> 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	84275631
b "RPA '94" current liability/participant count breakdown:	(1) Number of participants	(2) Current liability
(1) For retired participants and beneficiaries receiving payment.....	479	64764947
(2) For terminated vested participants	0	0
(3) For active participants:		
(a) Non-vested benefits		4329383
(b) Vested benefits		77555761
(c) Total active	650	81885144
(4) Total	1129	146650091
c If the percentage resulting from dividing line 2a by line 2b(4), column (2), is less than 70%, enter such percentage	2c	57.47 %

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	
10/15/2022	550020	0	03/15/2023	458524		0
11/15/2022	468838	0	04/15/2023	577542		0
12/15/2022	457098	0	05/15/2023	450887		0
01/15/2023	554194	0	06/15/2023	476622		0
02/15/2023	391358	0	07/15/2023	678269		0
Totals ▶			3(b)	6147747	3(c)	0
(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	88.2 %
b Enter code to indicate plan's status (see instructions for attachment of supporting evidence of plan's status). If entered code is "N," go to line 5	4b	N
c Is the plan making the scheduled progress under any applicable funding improvement or rehabilitation plan?		☐ Yes ☐ No
d If the plan is in critical status or critical and declining status, were any benefits reduced (see instructions)?		☐ Yes ☐ No
e If line d is "Yes," enter the reduction in liability resulting from the reduction in benefits (see instructions), measured as of the valuation date	4e	
f If the plan is in critical status or critical and declining status, and is: • Projected to emerge from critical status within 30 years, enter the plan year in which it is projected to emerge; • Projected to become insolvent within 30 years, enter the plan year in which insolvency is expected and check here..... ☐ • Neither projected to emerge from critical status nor become insolvent within 30 years, enter "9999."	4f	

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

a ☐ Attained age normal	b ☐ Entry age normal	c ☐ Accrued benefit (unit credit)	d ☒ Aggregate
e ☐ Frozen initial liability	f ☐ Individual level premium	g ☐ Individual aggregate	h ☐ Shortfall
i ☐ Other (specify):			
j If box h is checked, enter period of use of shortfall method.....			5j
k Has a change been made in funding method for this plan year?.....			☐ Yes ☒ No
l If line k is "Yes," was the change made pursuant to Revenue Procedure 2000-40 or other automatic approval?			☐ Yes ☐ No
m If line k is "Yes," and line l is "No," enter the date (MM-DD-YYYY) of the ruling letter (individual or class) approving the change in funding method			5m

2 Operational information as of beginning of this plan year:

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

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
08/15/2023	499282	0			
09/15/2023	585113	0			
Totals ▶			3(b)		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	%
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	
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	2.35 %
	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)	0 6P+2
(2) Females	6c(2)	0 6FP+2
d Valuation liability interest rate.....	6d	6.75 % 6.75%
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)	6.75 %
g Estimated investment return on actuarial value of assets for year ending on the valuation date	6g	-16.3 %
h Estimated investment return on current value of assets for year ending on the valuation date	6h	-16.3 %
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)	2.00 %
(2) If expense load is a dollar amount that varies from year to year, enter the dollar amount included in line 9b	6i(2)	
(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

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	6399777

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)		
9c(2)		
9c(3)		

d Interest as applicable on lines 9a, 9b, and 9c.....	9d	431985
e Total charges. Add lines 9a through 9d.....	9e	6831762

Credits to funding standard account:

f Prior year credit balance, if any	9f	22338721
g Employer contributions. Total from column (b) of line 3.....	9g	6147747

	Outstanding balance	
h Amortization credits as of valuation date.....	9h	

i Interest as applicable to end of plan year on lines 9f, 9g, and 9h.....	9i	1709570
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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)		
9j(2)		
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	30196038
--	-----------	----------

m Credit balance: If line 9l is greater than line 9e, enter the difference	9m	23364276
---	-----------	----------

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

JACKSONVILLE MARITIME ASSOCIATION/INTERNATIONAL
LONGSHOREMEN'S ASSOCIATION PENSION PLAN
EIN: 82-3722523 Plan: 001

Schedule of Projection of Employer Contributions and Withdrawal Liability Payments

<u>Plan Year</u>	<u>Employer Contributions</u>	<u>Withdrawal Liability Payments</u>	<u>TOTAL</u>
10/01/2022 – 09/30/2023	6,147,752	0	6,147,752
10/01/2023 – 09/30/2024	6,209,230	0	6,209,230
10/01/2024 – 09/30/2025	6,271,322	0	6,271,322
10/01/2025 – 09/30/2026	6,334,035	0	6,334,035
10/01/2026 – 09/30/2027	6,397,375	0	6,397,375
10/01/2027 – 09/30/2028	6,461,349	0	6,461,349
10/01/2028 – 09/30/2029	6,525,962	0	6,525,962
10/01/2029 – 09/30/2030	6,591,222	0	6,591,222
10/01/2030 – 09/30/2031	6,657,134	0	6,657,134
10/01/2031 – 09/30/2032	6,723,705	0	6,723,705

JACKSONVILLE MARITIME ASSOCIATION/INTERNATIONAL
LONGSHOREMEN'S ASSOCIATION PENSION PLAN
EIN: 82-3722523 Plan: 001

Statement of Actuarial Assumptions/Methods

Actuarial Assumptions

1. Investment Yield: 6.75% annually.
2. Mortality: Postretirement using RP-2014 Blue Collar Healthy Annuitant, separate by sex, with projection scale MP-2021, fully generational with 2-year increase in age. Postdisablement: Disabled RP-2014; static, aged 2 years.
3. Average Retirement Age: 65 or immediate if older
4. Active Married: 70% for \$52 accruals and 100% for \$100 accruals; both with female 6 years younger
5. Estimated Future Credited Service: Same as prior year.
6. Pre-Retirement Rates: were not used because they were immaterial.
7. Expense Load: 2% load on liabilities for expenses.

Actuarial Methods

8. Aggregate Cost Method and Market Value of assets.

Changes Since Last Valuation:

1. Expense load increased from 1% to 2% of liabilities.

JACKSONVILLE MARITIME ASSOCIATION/INTERNATIONAL
LONGSHOREMEN'S ASSOCIATION PENSION PLAN

EIN: 82-3722523 Plan: 001

Summary of Plan Provisions

Inception	October 1, 1960										
Eligibility	Following 1,000 Hours of Service during the first 12 months or any Plan Year. Prior Hours of Service count upon entering the Plan.										
Employer	A contributing employer, the Union, the Fund Office, the Container Royalty Fund and the South Atlantic ILA/Employers District Escrow Fund.										
Classifications	A: all employees not otherwise classified in the Plan B: warehousemen										
Hour of Working Service (for benefit accrual)	Hours worked for which contributions are made plus military service required to be recognized.										
Hour of Service (for vesting)	Hours of Working Service plus, from October 1, 2001 to September 30, 2014, for workman's compensation, weekly indemnity, or Welfare Plan disability: (i) if at least 1,000 hours of Service in prior Plan Year; (ii) 25 hours per week up to 1,000 hours total for the fiscal year; (iii) for up to two years after year of injury or sickness. In addition to the above, certain hours before October 1, 2014 are credited to prevent a Break in Service. Contiguous non-covered service is also recognized for vesting. Effective October 1, 2014, the Plan no longer gives credit for workman's compensation, even for Break in Service purposes. The Plan does provide up to 501 non-working Hours of Service for weekly indemnity and LTD to prevent a BIS, but no longer provides additional 25 Hours of Service to meet 1,000 Hours of Service for vesting.										
Vesting Service	A Plan Year with 1,000 or more Hours of Service.										
Credited Service	The Hours worked required for a year of benefit service are as follows: <table> <tr> <td>Before 10/1/76</td><td>400</td></tr> <tr> <td>10/1/76 – 9/30/97</td><td>700</td></tr> <tr> <td>10/1/97 – 9/30/98</td><td>800</td></tr> <tr> <td>10/1/98 – 9/30/99</td><td>900</td></tr> <tr> <td>After 10/1/99</td><td>1,000</td></tr> </table>	Before 10/1/76	400	10/1/76 – 9/30/97	700	10/1/97 – 9/30/98	800	10/1/98 – 9/30/99	900	After 10/1/99	1,000
Before 10/1/76	400										
10/1/76 – 9/30/97	700										
10/1/97 – 9/30/98	800										
10/1/98 – 9/30/99	900										
After 10/1/99	1,000										

JACKSONVILLE MARITIME ASSOCIATION/INTERNATIONAL
LONGSHOREMEN'S ASSOCIATION PENSION PLAN

EIN: 82-3722523 Plan: 001

Summary of Plan Provisions

Accrued Benefit

(1) Regular Monthly Benefit:

<u>Effective Date</u>	<u>Classification</u>		<u>Applicable Service</u>
	<u>A</u>	<u>B</u>	
10/1/17	\$100.00	N/A	future only
1/1/00	\$52.00	\$38.00	all
10/1/96	\$50.00	\$36.50	all
1/1/94	\$48.00	\$34.60	all
10/1/91	\$46.00	\$33.60	all

(2) Additional Benefit (Cash):

Fixed dollar amounts credited, primarily before October 1, 2005, payable unreduced at retirement.

Termination Benefits

100% after 5 years Vesting Service (10 years if no hour was worked after 10/1/97 or after 10/1/89 for non-collectively bargained employees).

Preretirement Spouse's Benefit

The spouse of a deceased vested Participant will receive a monthly benefit for life. This is equal to 50% of the benefit a Participant would have received had he retired at his date of death. The benefit commences at the later of the Participant's date of death or 57th birthday.

Disability Retirement

Age 40 with 10 years Credited Service. Must have 1,000 Hours Worked in prior or current fiscal year. Disability must be recognized by the Social Security Administration as total and permanent.

Early Retirement Date

First day of month following age 57 (age 60 if hired on or after October 1, 2010) and 10 years Vesting Service. Accrued benefits are reduced 0.5% for each month retirement precedes Normal Retirement Date.

Normal Retirement Date

Age 62 (age 65 if hired on or after October 1, 2010) and 5 years Vesting Service, or
Age 65 and fifth anniversary of first Hour of Service, with at least one hour worked in the Plan Year these two requirements are met.

JACKSONVILLE MARITIME ASSOCIATION/INTERNATIONAL
LONGSHOREMEN'S ASSOCIATION PENSION PLAN
EIN: 82-3722523 Plan: 001

Summary of Plan Provisions

Payment While in Service	Distribution may commence the month after attaining age 70½ even if still working. The Participant continues to accrue full benefits, and may choose whether to start receiving payments or not. If not, benefits are actuarially increased.
Normal Form of Payment	Joint and 50% Survivor benefits for married Participants and Life Annuity for single Participants for benefit accruals prior to 10/1/2017. Joint and 50% Survivor benefits for all benefit accruals earned after 9/30/2017.
Optional Lump Sum Form	Participant may elect to receive up to 25% of his life annuity benefit <u>earned before 10/1/03</u> in cash at early, normal, or disability retirement. The 50% spouse's benefit is unchanged by this election. The spouse of a deceased vested Participant may elect this option as it applies to the Preretirement Spouses' Benefit.
Optional Forms of Payment	For benefits earned prior to 10/1/2019, with spousal consent: (a) 50%, 75% or 100% Joint and Survivor (b) 50%, 75% or 100% Joint and Last Survivor (c) Life Annuity (d) 10 Year Certain and Life All benefit accruals earned after 9/30/2019, with spousal consent: (a) 50% or 75% Joint and Survivor (b) Life Annuity
Pensioner Annuity COLA	Effective 10/1/18 5% increase. Effective 1/1/00 (3% minimum increase) and 10/1/96: Minimum \$50/month increase granted to retirees on September 30th, with 50% to surviving spouses. The retiree increase is reduced by any lump sum percentage elected. Prior to 10/1/96 active and pensioner benefit levels were identical.
Discretionary Pensioner Lump Sum COLA	Calendar year 2022: Retirees \$800; Surviving Spouse \$400
Limitations upon Return to Employment	Two year prohibition on earning new benefits if lump sum(s) were paid.
Changes Since Last Valuation: None.	

JACKSONVILLE MARITIME ASSOCIATION/INTERNATIONAL
LONGSHOREMEN'S ASSOCIATION PENSION PLAN
EIN: 82-3722523 Plan: 001

Schedule of Projection of Expected Benefit Payments

<u>Plan Year</u> <u>Beginning</u>	<u>Active</u> <u>Participants</u>	<u>Retired</u> <u>and</u> <u>Beneficiaries</u>	<u>TOTAL</u>
2022	1,685,400	6,107,234	7,792,634
2023	1,830,234	5,832,795	7,663,029
2024	2,191,799	5,555,465	7,747,264
2025	2,390,563	5,276,295	7,666,858
2026	2,653,977	4,966,322	7,650,299
2027	2,836,873	4,716,596	7,553,469
2028	2,883,147	4,438,179	7,321,326
2029	3,046,428	4,162,133	7,208,561
2030	3,290,040	3,889,485	7,179,524
2031	3,459,080	3,621,222	7,080,302
2032	3,793,903	3,358,300	7,152,203
2033	3,864,797	3,101,619	6,966,416
2034	3,965,522	2,852,060	6,817,582
2035	4,015,386	2,610,481	6,625,867
2036	4,102,292	2,377,698	6,479,990
2037	4,156,842	2,154,450	6,311,293
2038	4,221,187	1,941,428	6,162,615
2039	4,216,706	1,739,280	5,955,986
2040	4,089,574	1,548,620	5,638,194
2041	4,027,354	1,370,023	5,397,377
2042	3,936,283	1,203,968	5,140,250
2043	3,833,138	1,050,790	4,883,928
2044	3,782,344	910,663	4,693,007
2045	3,635,269	783,593	4,418,862
2046	3,468,097	669,414	4,137,512
2047	3,272,799	567,757	3,840,556
2048	3,106,449	478,096	3,584,545
2049	2,927,239	399,771	3,327,011
2050	2,765,612	332,014	3,097,626

JACKSONVILLE MARITIME ASSOCIATION/INTERNATIONAL
LONGSHOREMEN'S ASSOCIATION PENSION PLAN
EIN: 82-3722523 Plan: 001

Schedule of Projection of Expected Benefit Payments

<u>Plan Year</u> <u>Beginning</u>	<u>Active</u> <u>Participants</u>	<u>Retired</u> <u>and</u> <u>Beneficiaries</u>	<u>TOTAL</u>
2051	2,598,158	273,965	2,872,123
2052	2,469,634	224,716	2,694,350
2053	2,305,190	183,317	2,488,507
2054	2,120,844	148,814	2,269,658
2055	1,961,876	120,283	2,082,158
2056	1,795,715	96,852	1,892,567
2057	1,633,927	77,729	1,711,656
2058	1,483,071	62,198	1,545,269
2059	1,345,995	49,631	1,395,626
2060	1,218,014	39,495	1,257,509
2061	1,100,392	31,339	1,131,730
2062	987,259	24,791	1,012,050
2063	879,814	19,544	899,358
2064	785,148	15,346	800,494
2065	693,374	11,994	705,368
2066	610,233	9,323	619,556
2067	535,300	7,201	542,502
2068	468,083	5,524	473,607
2069	408,045	4,204	412,249
2070	354,632	3,174	357,806
2071	307,291	2,376	309,667

JACKSONVILLE MARITIME ASSOCIATION/INTERNATIONAL
LONGSHOREMEN'S ASSOCIATION PENSION PLAN
EIN: 82-3722523 Plan: 001

Schedule of Active Participant Data

Active Participants Earning One Year of Service (> or = 1,000 Working Hours)

Normal Retirement Age of 62

Age and Service Distribution as of October 1, 2022

<u>Age Group</u>	<u>Service by Number of Actives</u>									<u>TOTAL</u>
	<u>0-4</u>	<u>5-9</u>	<u>10-14</u>	<u>15-19</u>	<u>20-24</u>	<u>25-29</u>	<u>30-34</u>	<u>35-39</u>	<u>40+</u>	
<20										
20-24										
25-29										
30-34	3	1	8							12
35-39	2	3	8	2						15
40-44	6	6	16	10	2					40
45-49	11	15	23	12	10	3	1			75
50-54	13	13	23	15	10	4	9	1		88
55-59	2	6	13	12	7	11	8	7		66
60-64	6	6	13	8	7	5	10	8	7	70
65-69		6	7	12	4	9	8	5	2	53
70-74	1	1		1		1				4
75-79		1		1			1			3
80+	3									3
TOTAL	47	58	111	73	40	33	37	21	9	429

JACKSONVILLE MARITIME ASSOCIATION/INTERNATIONAL
LONGSHOREMEN'S ASSOCIATION PENSION PLAN
EIN: 82-3722523 Plan: 001

Schedule of Active Participant Data

Active Participants NOT Earning One Year of Service (< 1,000 Working Hours)

Normal Retirement Age of 62

Age and Service Distribution as of October 1, 2022

<u>Age Group</u>	<u>Service by Number of Actives</u>								<u>TOTAL</u>
	<u>0-4</u>	<u>5-9</u>	<u>10-14</u>	<u>15-19</u>	<u>20-24</u>	<u>25-29</u>	<u>30-34</u>	<u>35-39</u>	
<20									
20-24									
25-29									
30-34	1	1							2
35-39	7	1	1						9
40-44	3	1	2	2					8
45-49	1	4	1	2	1				9
50-54	4	6	1	5	2	1			19
55-59	3	6	2	1		1		2	15
60-64	4	6	3	2	2	1	3		21
65-69	4	3	2	4					13
70-74	2		3						5
75-79									
80+									
TOTAL	29	28	15	16	5	3	3	2	101

JACKSONVILLE MARITIME ASSOCIATION/INTERNATIONAL
LONGSHOREMEN'S ASSOCIATION PENSION PLAN
EIN: 82-3722523 Plan: 001

Schedule of Active Participant Data

Active Participants With Normal Retirement Age of 65
Age and Service Distribution as of October 1, 2022

<u>Age Group</u>	<u>Service by Number of Actives</u>								<u>TOTAL</u>
	<u>0-4</u>	<u>5-9</u>	<u>10-14</u>	<u>15-19</u>	<u>20-24</u>	<u>25-29</u>	<u>30-34</u>	<u>35-39</u>	
<20									
20-24	9								9
25-29	8	3							11
30-34	11	1	1						13
35-39	7	1							8
40-44	12	2							14
45-49	10	4							14
50-54	10	1							11
55-59	7	1							8
60-64	4								4
65-69	3								3
70-74									
75-79									
80+									
TOTAL	81	13	1						95

JACKSONVILLE MARITIME ASSOCIATION/INTERNATIONAL
LONGSHOREMEN'S ASSOCIATION PENSION PLAN
EIN: 82-3722523 Plan: 001

Justification for Change in Actuarial Assumptions

1. Expense load was increased from 1% to 2% of liabilities to reflect future emerging expenses.
2. Projection scale MP 2020 was updated to MP 2021 to reflect industry procedure.

**JACKSONVILLE MARITIME ASSOCIATION / INTERNATIONAL LONGSHOREMEN'S
ASSOCIATION PENSION FUND**

FINANCIAL STATEMENTS

YEARS ENDED SEPTEMBER 30, 2023 AND 2022

**JACKSONVILLE MARITIME ASSOCIATION / INTERNATIONAL LONGSHOREMEN'S ASSOCIATION
PENSION FUND**

YEARS ENDED SEPTEMBER 30, 2023 AND 2022

TABLE OF CONTENTS

	Page
Independent Auditor's Report	1 - 3
Financial Statements	
Statements of Net Assets Available for Benefits	4
Statements of Changes in Net Assets Available for Benefits	5
Notes to Financial Statements	6 - 14
Supplemental Information	
Schedule of Interest Bearing Cash	15
Schedule of U.S. Government Securities	16 - 17
Schedule of Corporate Debt Instruments - Preferred	18
Schedule of Corporate Debt Instruments - Other	19
Schedule of Corporate Stock - Common	20 - 29
Schedule of Registered Investment Companies	30
Schedules of Administrative Expenses	31



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Independent Auditor's Report**Board of Trustees**

Jacksonville Maritime Association / International
Longshoremen's Association Pension Fund

Opinion

We have audited the accompanying financial statements of the Jacksonville Maritime Association / International Longshoremen's Association 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 September 30, 2023 and 2022, and the related statements of changes in net assets available for benefits for the years ended September 30, 2023 and 2022, and the related notes to the financial statements.

In our opinion, the financial statements referred to above present fairly, in all material respects, the net assets available for benefits of the Plan as of September 30, 2023, and the changes therein for the year ended September 30, 2023 and its financial status as of September 30, 2022, and its changes therein for the year ended September 30, 2022 in accordance with accounting principles generally accepted in the United States of America.

Basis for Opinion

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

Responsibilities of Management for the Financial Statements

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

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

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

Auditor's Responsibilities for the Audit of the Financial Statements

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

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

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

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

Supplemental Schedules Required by ERISA

Our audits were conducted for the purpose of forming an opinion on the financial statements as a whole. The supplemental information on pages 15 through 30 is presented for purposes of additional analysis and is 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 generally accepted auditing standards.

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

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

Supplemental Information

Our audits were conducted for the purpose of forming an opinion on the financial statements as a whole. The supplemental information on page 31 is presented for purposes of additional analysis and is not a required part of the financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audits of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the information is fairly stated in all material respects in relation to the financial statements as a whole.

Handwritten signature of Schulteis & Parutelli LLP in cursive script.

Hauppauge, New York
April 5, 2024

**JACKSONVILLE MARITIME ASSOCIATION / INTERNATIONAL LONGSHOREMEN'S ASSOCIATION
PENSION FUND**

STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS

SEPTEMBER 30, 2023 AND 2022

	<u>2023</u>	<u>2022</u>
Assets		
Investments at fair value		
Interest bearing cash	\$ 2,171,367	\$ 1,740,145
U.S. government securities	22,822,364	25,047,866
Corporate debt instruments	5,734,508	2,734,042
Corporate stock	45,853,100	39,268,145
Registered investment companies	<u>14,982,853</u>	<u>15,115,653</u>
Total investments	91,564,192	83,905,851
Receivables		
Employers' contributions	361,426	351,876
Accrued interest/dividends	199,286	156,512
Net trades pending settlement	30,708	-
Other	<u>45,738</u>	<u>45,683</u>
Total assets	<u>92,201,350</u>	<u>84,459,922</u>
Liabilities		
Accounts payable	70,985	46,072
Related organizations - net	37,683	86,025
Net trades pending settlement	<u>-</u>	<u>52,194</u>
Total liabilities	<u>108,668</u>	<u>184,291</u>
Net assets available for benefits	<u><u>\$ 92,092,682</u></u>	<u><u>\$ 84,275,631</u></u>

**JACKSONVILLE MARITIME ASSOCIATION / INTERNATIONAL LONGSHOREMEN'S ASSOCIATION
PENSION FUND**

STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS

YEARS ENDED SEPTEMBER 30, 2023 AND 2022

	<u>2023</u>	<u>2022</u>
<i>Additions to net assets attributed to:</i>		
Investment income (loss)		
Net appreciation (depreciation) in fair value of investments	\$ 7,364,396	\$ (18,272,114)
Interest	744,445	516,104
Dividends	<u>1,181,190</u>	<u>1,252,725</u>
Total investment income (loss)	9,290,031	(16,503,285)
Less investment expenses	<u>(387,460)</u>	<u>(456,786)</u>
Net investment income (loss)	8,902,571	(16,960,071)
Contributions		
Employers'	<u>6,147,748</u>	<u>6,264,343</u>
Total additions	<u>15,050,319</u>	<u>(10,695,728)</u>
<i>Deductions from net assets attributed to:</i>		
Benefits paid directly to participants or beneficiaries	6,185,138	6,839,772
Administrative expenses	<u>1,048,130</u>	<u>928,591</u>
Total deductions	<u>7,233,268</u>	<u>7,768,363</u>
Net increase (decrease)	7,817,051	(18,464,091)
Net assets available for benefits		
Beginning of year	<u>84,275,631</u>	<u>102,739,722</u>
End of year	<u><u>\$ 92,092,682</u></u>	<u><u>\$ 84,275,631</u></u>

**JACKSONVILLE MARITIME ASSOCIATION / INTERNATIONAL LONGSHOREMEN'S ASSOCIATION
PENSION FUND**

NOTES TO FINANCIAL STATEMENTS

YEARS ENDED SEPTEMBER 30, 2023 AND 2022

Note 1 - Description of Plan and Significant Accounting Policies

The following description of the Jacksonville Maritime Association / International Longshoremen's Association Pension Fund (the "Plan") provides only general information. Participants should refer to the plan document for a more complete description of the Plan's provisions.

General

The Plan first became effective July 01, 1958 and is a defined benefit pension plan established under an Agreement and Declaration of Trust pursuant to collective bargaining agreements between the International Longshoremen's Association Local Unions 1408 and 1593 (the "Unions") and Jacksonville Maritime Association, Inc., representing various employers in the longshoremen's industry in the Port of Jacksonville. It is subject to the provisions of the Employee Retirement Income Security Act of 1974 ("ERISA").

Management has evaluated subsequent events through the date of the auditor's report, the date the financial statements were available to be issued.

Purpose

The purpose of the Plan is to provide legal service benefits to eligible participants.

Participation

A participant is a pensioner, beneficiary or individual covered by a collective bargaining agreement requiring contributions on his/her behalf. Salaried employees of the Plan, the Unions, the South Atlantic District Escrow Fund, the Jacksonville Maritime Association/International Longshoremen's Association Welfare Fund (the "Welfare Fund"), and the Jacksonville Maritime Association/International Longshoremen's Association Container Royalty Plan (the "Container Royalty Plan") are also participants.

Benefits

In general, participants with five or more years vesting service are entitled to monthly pension benefits beginning at normal retirement age 62. Normal retirement age for participants who do not have an hour of service before October 1, 2010 is age 65. The Plan permits early retirement as early as age 57 and other forms of retirement based on age and years of credited service (pension credits).

Pension credits are based on hours worked in covered employment. A participant may accumulate up to a maximum of 1 credit per year.

**JACKSONVILLE MARITIME ASSOCIATION / INTERNATIONAL LONGSHOREMEN'S ASSOCIATION
PENSION FUND**

NOTES TO FINANCIAL STATEMENTS

YEARS ENDED SEPTEMBER 30, 2023 AND 2022

Note 1 - Description of Plan and Significant Accounting Policies (cont'd)

For warehouse service, monthly pension benefits are based on \$38 per year of credited service.

For all other types of service, monthly pension benefits are based on \$100 per year of credited service beginning October 1, 2017, for participants in active status on September 30, 2018, and beginning October 1, 2018, for participants not in active status on September 30, 2018. Prior to these effective dates, monthly pension benefits are based on the years of credited service multiplied by \$52.

Participants who elect early retirement will receive a reduced benefit.

Additional benefits may be paid based on years of service and type of work performed. The benefit is calculated based on yearly formulas described in the Plan document. The participant may elect to receive this benefit in a lump sum or convert it to a monthly annuity. Additional benefits will not be awarded for any period of reemployment for a participant who previously received a lump sum payment.

A participant may elect an optional lump sum form of benefit to receive up to 25% of the actuarial equivalent of their accrued benefit. The participant's election of a lump sum payment will reduce the participant's monthly pension but not the surviving spouse's monthly pension benefit. Lump sum payments will not be permitted from the portion of the accrued benefit that accrued on or after October 1, 2003.

Preretirement surviving spouse benefit - If a fully vested, married participant dies before they retire, their spouse will receive monthly pension benefits equal to 50% of the monthly benefit calculation and may elect a one time lump sum payment. This benefit will become available to the spouse as of the later of the participant's date of death or 57th birthday.

Plan termination

The Trustees expect and intend to continue the Plan indefinitely, but reserve the right to amend or terminate it as provided for by the applicable Trust Agreement and Plan provisions, in accordance with applicable law. The Plan is insured by the Pension Benefit Guaranty Corporation ("PBGC"); however, the PBGC does not guarantee the payment of all benefits provided under the Plan. In addition, the PBGC guarantees apply only when the Plan becomes insolvent; that is, when available resources are insufficient to pay benefits under the Plan.

Basis of accounting

The financial statements are presented on the accrual basis of accounting.

**JACKSONVILLE MARITIME ASSOCIATION / INTERNATIONAL LONGSHOREMEN'S ASSOCIATION
PENSION FUND**

NOTES TO FINANCIAL STATEMENTS

YEARS ENDED SEPTEMBER 30, 2023 AND 2022

Note 1 - Description of Plan and Significant Accounting Policies (cont'd)

Investment valuation and income recognition

The Plan's investments are stated at fair value. See "Fair value measurements" footnote for additional information.

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

Administrative expense allocation

The administrative office is occupied by the Plan, Welfare Fund, and Container Royalty Plan, related organizations. Certain expenses not specifically applicable to a particular entity are allocated based on the estimated benefit received by each entity. Amounts reported as receivable from related organizations or payable to related organizations generally include balances for shared expenses.

Reimbursements paid to related organizations for the years ended September 30, 2023 and 2022 were \$569,292 and \$529,206, respectively.

Use of estimates

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the amounts reported in the financial statements and accompanying notes. Actual results could differ from these estimates.

Note 2 - Fair value measurements

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

Level 1 inputs to the valuation methodology are unadjusted quoted prices, in active markets, for identical assets that the Plan has the ability to access.

Level 2 inputs to the valuation methodology include: quoted prices for similar assets in active markets, quoted prices for identical or similar assets in inactive markets, inputs other than quoted prices that are observable for the asset, and inputs that are derived principally from or corroborated by observable market data by correlation or other means. If the asset has a specified (contractual) term, the level 2 input must be observable for substantially the full term of the asset.

**JACKSONVILLE MARITIME ASSOCIATION / INTERNATIONAL LONGSHOREMEN'S ASSOCIATION
PENSION FUND**

NOTES TO FINANCIAL STATEMENTS

YEARS ENDED SEPTEMBER 30, 2023 AND 2022

Note 2 - Fair value measurements (cont'd)

Level 3 inputs to the valuation methodology are unobservable and significant to the fair value measurement. Level 3 inputs are generally based on the best information available, which may include the reporting entity's own assumptions and data.

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

Interest bearing cash: Valued at cost.

U.S. government securities: U.S. Treasury notes are valued at the closing price reported on the active market on which the individual securities are traded. Other U.S. government and agency obligations are valued using pricing models maximizing the use of observable inputs for similar securities.

Corporate debt instruments: Valued using pricing models maximizing the use of observable inputs for similar securities. This includes basing value on yields currently available on comparable securities of issuers with similar credit ratings. When quoted prices are not available for identical or similar bonds, the bond is valued under a discounted cash flows approach that maximizes observable inputs, such as current yields of similar instruments, but includes adjustments for certain risks that may not be observable, such as credit and liquidity risks or a broker quote if available.

Corporate stock and registered investment companies: Valued at the closing price reported in the active market in which the securities are traded.

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

**JACKSONVILLE MARITIME ASSOCIATION / INTERNATIONAL LONGSHOREMEN'S ASSOCIATION
PENSION FUND**

NOTES TO FINANCIAL STATEMENTS

YEARS ENDED SEPTEMBER 30, 2023 AND 2022

Note 2 - Fair value measurements (cont'd)

The following table sets forth, by level within the fair value hierarchy, the Plan's investments, as of September 30, 2023, with fair value measurements on a recurring basis:

	<u>2023</u>	<u>Level 1</u>	<u>Level 2</u>	<u>Level 3</u>
Investments at fair value				
Interest bearing cash	\$ 2,171,367	\$ 2,171,367	\$ -	\$ -
U.S. government securities	22,822,364	21,502,493	1,319,871	-
Corporate debt instruments	5,734,508	-	5,734,508	-
Corporate stock	45,853,100	45,853,100	-	-
Registered investment companies	<u>14,982,853</u>	<u>14,982,853</u>	<u>-</u>	<u>-</u>
Total assets in the fair value hierarchy	\$ <u>91,564,192</u>	\$ <u>84,509,813</u>	\$ <u>7,054,379</u>	\$ <u>-</u>

The following table sets forth, by level within the fair value hierarchy, the Plan's investments, as of September 30, 2022, with fair value measurements on a recurring basis:

	<u>2022</u>	<u>Level 1</u>	<u>Level 2</u>	<u>Level 3</u>
Investments at fair value				
Interest bearing cash	\$ 1,740,145	\$ 1,740,145	\$ -	\$ -
U.S. government securities	25,047,866	23,288,720	1,759,146	-
Corporate debt instruments	2,734,042	-	2,734,042	-
Corporate stock	39,268,145	39,268,145	-	-
Registered investment companies	<u>15,115,653</u>	<u>15,115,653</u>	<u>-</u>	<u>-</u>
Total assets in the fair value hierarchy	\$ <u>83,905,851</u>	\$ <u>79,412,663</u>	\$ <u>4,493,188</u>	\$ <u>-</u>

Note 3 - Cash

At times throughout the year the Plan may have, on deposit in banks, amounts in excess of FDIC insurance limits. The Plan has not experienced any losses in such accounts and the Trustees believe it is not exposed to any significant credit risks.

**JACKSONVILLE MARITIME ASSOCIATION / INTERNATIONAL LONGSHOREMEN'S ASSOCIATION
PENSION FUND**

NOTES TO FINANCIAL STATEMENTS

YEARS ENDED SEPTEMBER 30, 2023 AND 2022

Note 4 - Party-in-interest transactions

Certain Plan investments are held by the manager of the investment; therefore, transactions relating to those investments qualify as exempt party-in-interest transactions and are identified as such on the supplemental schedules of investments.

Note 5 - Risks and uncertainties

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

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

Note 6 - Employers' contributions

In accordance with collective bargaining agreements, employers are required to make contributions to the Plan on behalf of employees performing covered work. The hourly rates range between \$8.70 and \$14.50. The allocation of the contribution rate between the Plan and other entities (both related and non-related) is determined by the Allocation Committee. The Plan's portion of the predominant hourly rates in effect during the years ended September 30, 2023 and 2022 was \$7.15.

Three employers represented approximately 85% and 77% of total contributions for the years ended September 30, 2023 and 2022, respectively.

Note 7 - Additional benefit

The Board of Trustees approved lump sum cost of living adjustments ("COLA") to pensioners and/or beneficiaries during the years ended September 30, 2023 and 2022. The benefits paid in 2023 were \$800 per pensioner and \$400 per beneficiary. The benefits paid in 2022 were \$1,725 per pensioner and \$925 per beneficiary. The total COLA for years ended September 30, 2023 and 2022 amounted to \$275,001 and \$571,125, respectively.

Note 8 - Reconciliation of financial statements to Form 5500

For financial statement purposes, investment expenses are reported as a reduction of investment income. The reporting requirements of the Department of Labor require these fees be shown as administrative expenses.

**JACKSONVILLE MARITIME ASSOCIATION / INTERNATIONAL LONGSHOREMEN'S ASSOCIATION
PENSION FUND**

NOTES TO FINANCIAL STATEMENTS

YEARS ENDED SEPTEMBER 30, 2023 AND 2022

Note 8 - Reconciliation of financial statements to Form 5500 (cont'd)

The following is a reconciliation of the reclassifications:

	Per Financial Statements	Reclassification	Per Form 5500
Investment income	\$ 8,902,571	\$ 387,460	\$ 9,290,031
Contributions	<u>6,147,748</u>	<u>-</u>	<u>6,147,748</u>
Total additions	<u>15,050,319</u>	<u>387,460</u>	<u>15,437,779</u>
Benefits paid directly to participants or beneficiaries	6,185,138	-	6,185,138
Administrative expenses	<u>1,048,130</u>	<u>387,460</u>	<u>1,435,590</u>
Total deductions	<u>7,233,268</u>	<u>387,460</u>	<u>7,620,728</u>
Net increase	<u>\$ 7,817,051</u>	<u>\$ -</u>	<u>\$ 7,817,051</u>

Note 9 - Accumulated plan benefits

The latest available calculations of the actuarial present value of accumulated plan benefits were made by consulting actuaries as of October 1, 2022 and 2021. Details of accumulated plan benefit information as of such dates are as follows:

	October 1, 2022	October 1, 2021
Actuarial present value of accumulated plan benefits:		
Vested benefits:		
Participants currently receiving benefit payments	\$ 49,781,550	\$ 45,316,877
Other vested participants	<u>43,939,471</u>	<u>44,652,384</u>
Total vested benefits	93,721,021	89,969,261
Nonvested benefits	<u>1,779,328</u>	<u>1,541,208</u>
Total actuarial present value of accumulated plan benefits	<u>\$ 95,500,349</u>	<u>\$ 91,510,469</u>

**JACKSONVILLE MARITIME ASSOCIATION / INTERNATIONAL LONGSHOREMEN'S ASSOCIATION
PENSION FUND**

NOTES TO FINANCIAL STATEMENTS

YEARS ENDED SEPTEMBER 30, 2023 AND 2022

Note 9 - Accumulated plan benefits (cont'd)

The changes in the actuarial present value of accumulated plan benefits from the previous benefit information date were as follows:

	October 1, 2022	October 1, 2021
Actuarial present value of accumulated plan benefits - Beginning of year	\$ <u>91,510,469</u>	\$ <u>88,041,216</u>
Increase (decrease) during the year attributable to:		
Benefits paid	(6,261,197)	(5,839,188)
Additional benefit accruals	3,939,462	3,248,572
Interest	<u>6,311,615</u>	<u>6,059,869</u>
Net increase (decrease) in actuarial present value of accumulated plan benefits	<u>3,989,880</u>	<u>3,469,253</u>
Actuarial present value of accumulated plan benefits - End of year	\$ <u><u>95,500,349</u></u>	\$ <u><u>91,510,469</u></u>

Through October 1, 2023, the Plan met minimum funding standard requirements under ERISA.

The significant methods and assumptions underlying the actuarial computations are as follows:

Actuarial cost method	Aggregate method
Assumed rate of return on investments	6.75%
Mortality basis	Postretirement using RP-2014 Blue Collar Healthy Annuitant, separate by sex assuming all participants are male and all spouses are female, with projection scale MP-2020, fully generational with 2 year increase in age.
Assumed election of 25% lump sum benefit option	100%, using GATT
Normal retirement age	62 to 65

As of October 1, 2023 and 2022, the actuary has certified that the Plan is in the Green Zone and is not in the Endangered or Critical status as identified under the Pension Protection Act of 2006 and the Multiemployer Pension Reform Act of 2014.

**JACKSONVILLE MARITIME ASSOCIATION / INTERNATIONAL LONGSHOREMEN'S ASSOCIATION
PENSION FUND**

NOTES TO FINANCIAL STATEMENTS

YEARS ENDED SEPTEMBER 30, 2023 AND 2022

Note 10 - Tax status

The Plan has received a determination letter from the IRS dated March 4, 2016, stating that the Plan is qualified under Section 401(a) and is exempt from federal income taxes under Section 501(a) of the Internal Revenue Code. The Trustees believe that the Plan, including amendments subsequent to the IRS determination, is currently designed and operated in compliance with the requirements of the Internal Revenue Code. Therefore, they believe that the Plan was qualified and the related trust was tax exempt as of the financial statement date.

**JACKSONVILLE MARITIME ASSOCIATION / INTERNATIONAL LONGSHOREMEN'S ASSOCIATION
PENSION FUND**

SCHEDULE OF INTEREST BEARING CASH

SEPTEMBER 30, 2023

EIN 82-3722523, PLAN NO. 001

FORM 5500, SCHEDULE H, LINE 4I - ASSETS HELD FOR INVESTMENT PURPOSES AT END OF YEAR

(a)	(b)	(c) - DESCRIPTION INTEREST BEARING CASH		(d)	(e)
		INTEREST RATE	MATURITY DATE	COST	CURRENT VALUE
	ISSUER				
	FIRST HORIZON BANK	VARIABLE	DEMAND	\$ 580,774	\$ 580,774
*	MORGAN STANLEY - ACTIVE ASSETS MONEY	VARIABLE	DEMAND	<u>1,590,593</u>	<u>1,590,593</u>
				<u>\$ 2,171,367</u>	<u>\$ 2,171,367</u>

* PARTY-IN-INTEREST

**JACKSONVILLE MARITIME ASSOCIATION / INTERNATIONAL LONGSHOREMEN'S ASSOCIATION
PENSION FUND**

SCHEDULE OF U.S. GOVERNMENT SECURITIES

SEPTEMBER 30, 2023

EIN 82-3722523, PLAN NO. 001

FORM 5500, SCHEDULE H, LINE 4I - ASSETS HELD FOR INVESTMENT PURPOSES AT END OF YEAR

(a) NOT APPLICABLE

(b) ISSUER	(c) - DESCRIPTION U.S. GOVERNMENT SECURITIES			(d) COST	(e) CURRENT VALUE
	INTEREST RATE	MATURITY DATE	PAR OR		
			MATURITY VALUE - a		
UNITED STATES TREASURY NOTE	2.88%	10/31/2023	\$ 297,000	\$ 295,841	\$ 296,478
UNITED STATES TREASURY NOTE	2.13%	11/30/2023	99,000	98,710	98,484
UNITED STATES TREASURY BILL	0.00%	12/07/2023	100,000	97,446	99,027
UNITED STATES TREASURY BILL	0.00%	12/07/2023	50,000	48,723	49,513
UNITED STATES TREASURY NOTE	2.63%	12/31/2023	99,000	99,062	98,339
UNITED STATES TREASURY NOTE	2.25%	12/31/2023	99,000	98,814	98,236
UNITED STATES TREASURY NOTE	2.50%	05/15/2024	98,000	97,881	96,231
UNITED STATES TREASURY NOTE	2.00%	05/31/2024	98,000	96,959	95,789
UNITED STATES TREASURY NOTE	0.25%	06/15/2024	342,000	340,437	329,709
UNITED STATES TREASURY NOTE	2.00%	06/30/2024	98,000	96,886	95,508
UNITED STATES TREASURY NOTE	2.13%	07/31/2024	99,000	96,916	96,307
UNITED STATES TREASURY NOTE	2.38%	08/15/2024	98,000	97,552	95,414
UNITED STATES TREASURY NOTE	2.13%	09/30/2024	98,000	96,928	94,867
UNITED STATES TREASURY NOTE	2.25%	10/31/2024	98,000	97,150	94,752
UNITED STATES TREASURY NOTE	2.25%	11/15/2024	146,000	144,688	141,044
UNITED STATES TREASURY NOTE	2.13%	11/30/2024	198,000	195,024	190,768
UNITED STATES TREASURY NOTE	2.13%	11/30/2024	352,000	348,476	339,144
UNITED STATES TREASURY NOTE	2.25%	12/31/2024	198,000	196,113	190,683
UNITED STATES TREASURY NOTE	2.00%	02/15/2025	482,000	482,189	461,044
UNITED STATES TREASURY NOTE	2.00%	02/15/2025	352,000	336,050	336,696
UNITED STATES TREASURY NOTE	2.75%	02/28/2025	248,000	248,435	239,470
UNITED STATES TREASURY NOTE	1.75%	03/15/2025	295,000	287,867	280,567
UNITED STATES TREASURY NOTE	2.88%	04/30/2025	145,000	145,542	139,863
UNITED STATES TREASURY NOTE	2.13%	05/15/2025	96,000	93,450	91,451
UNITED STATES TREASURY NOTE	2.75%	06/30/2025	196,000	196,356	188,229
UNITED STATES TREASURY NOTE	4.63%	06/30/2025	150,000	148,799	148,714
UNITED STATES TREASURY NOTE	2.00%	08/15/2025	289,000	282,949	273,094
UNITED STATES TREASURY NOTE	2.75%	08/31/2025	248,000	248,492	237,455
UNITED STATES TREASURY NOTE	3.00%	09/30/2025	356,000	350,489	342,281
UNITED STATES TREASURY NOTE	0.25%	10/31/2025	471,000	425,849	427,065
UNITED STATES TREASURY NOTE	2.25%	11/15/2025	290,000	286,035	274,061
UNITED STATES TREASURY NOTE	2.63%	01/31/2026	148,000	147,977	140,461
UNITED STATES TREASURY NOTE	1.63%	02/15/2026	95,000	91,482	88,023
UNITED STATES TREASURY NOTE	2.50%	02/28/2026	291,000	289,488	275,188
UNITED STATES TREASURY NOTE	2.25%	03/31/2026	250,000	246,416	234,600
UNITED STATES TREASURY NOTE	2.38%	04/30/2026	147,000	145,553	138,128
UNITED STATES TREASURY NOTE	1.63%	05/15/2026	495,000	491,879	455,671
UNITED STATES TREASURY NOTE	2.13%	05/31/2026	190,000	186,296	177,093
UNITED STATES TREASURY NOTE	2.13%	05/31/2026	636,000	599,779	592,797
UNITED STATES TREASURY NOTE	1.88%	06/30/2026	150,000	145,611	138,797
UNITED STATES TREASURY NOTE	0.88%	06/30/2026	475,000	475,948	427,444
UNITED STATES TREASURY NOTE	1.88%	07/31/2026	392,000	371,634	361,758
UNITED STATES TREASURY NOTE	1.50%	08/15/2026	624,000	602,633	568,913
UNITED STATES TREASURY NOTE	0.88%	09/30/2026	94,000	92,423	83,895
UNITED STATES TREASURY NOTE	2.00%	11/15/2026	442,000	425,186	406,657
UNITED STATES TREASURY NOTE	2.00%	11/15/2026	370,000	358,197	340,414
UNITED STATES TREASURY NOTE	1.25%	12/31/2026	67,000	64,671	60,020
UNITED STATES TREASURY NOTE	1.50%	01/31/2027	335,000	318,787	301,683
UNITED STATES TREASURY NOTE	1.50%	01/31/2027	507,000	459,114	456,577
UNITED STATES TREASURY NOTE	2.25%	02/15/2027	616,000	599,819	568,573
UNITED STATES TREASURY NOTE	2.25%	02/15/2027	896,000	839,942	827,015
UNITED STATES TREASURY NOTE	2.50%	03/31/2027	388,000	379,725	360,476
UNITED STATES TREASURY NOTE	2.75%	04/30/2027	197,000	192,814	184,257
UNITED STATES TREASURY NOTE	2.38%	05/15/2027	500,000	495,645	461,211

**JACKSONVILLE MARITIME ASSOCIATION / INTERNATIONAL LONGSHOREMEN'S ASSOCIATION
PENSION FUND**

SCHEDULE OF U.S. GOVERNMENT SECURITIES

SEPTEMBER 30, 2023

EIN 82-3722523, PLAN NO. 001

FORM 5500, SCHEDULE H, LINE 4I - ASSETS HELD FOR INVESTMENT PURPOSES AT END OF YEAR

(a) NOT APPLICABLE

(b) ISSUER	(c) - DESCRIPTION U.S. GOVERNMENT SECURITIES			(d)	(e)
	INTEREST RATE	MATURITY DATE	PAR OR MATURITY VALUE - a	COST	CURRENT VALUE
UNITED STATES TREASURY NOTE	2.63%	05/31/2027	197,000	191,759	183,148
UNITED STATES TREASURY NOTE	2.25%	08/15/2027	350,000	348,315	319,936
UNITED STATES TREASURY NOTE	2.25%	11/15/2027	350,000	344,490	318,377
UNITED STATES TREASURY NOTE	2.88%	08/15/2028	1,448,000	1,379,503	1,337,251
UNITED STATES TREASURY NOTE	3.13%	11/15/2028	594,000	589,871	553,348
UNITED STATES TREASURY NOTE	2.63%	02/15/2029	491,000	493,955	444,317
UNITED STATES TREASURY NOTE	2.88%	04/30/2029	741,000	725,044	676,684
UNITED STATES TREASURY NOTE	3.25%	06/30/2029	1,426,000	1,379,278	1,325,456
UNITED STATES TREASURY NOTE	3.50%	01/31/2030	77,000	75,779	72,184
UNITED STATES TREASURY NOTE	2.88%	05/15/2032	744,000	697,648	653,034
UNITED STATES TREASURY NOTE	2.75%	08/15/2032	623,000	573,004	539,333
FHLMC 30 YR GOLD G61570	5.50%	06/01/2041	97,000	35,418	33,158
FEDERAL NATIONAL MTG ASSN POOL MA4587	2.50%	04/01/2042	65,000	57,879	48,277
FHLMC 20 YR GOLD RB5163	3.00%	05/01/2042	43,000	35,662	33,101
FEDERAL NATIONAL MTG ASSN POOL BM4681	5.50%	05/01/2044	221,000	84,958	79,503
FHLMC 30 YR GOLD G61653	5.00%	12/01/2044	96,000	29,040	27,077
FEDERAL +C2:C55NATIONAL MTG ASSN POOL AL9903	5.50%	02/01/2047	870,000	230,027	208,764
UNITED STATES TREASURY BOND	3.00%	05/15/2047	821,000	822,975	601,126
FEDERAL NATIONAL MTG ASSN POOL BM1948	6.00%	10/04/2047	317,000	100,266	92,769
FEDERAL NATIONAL MTG ASSN POOL BM3066	5.00%	11/01/2047	371,000	104,464	94,583
FEDERAL NATIONAL MTG ASSN POOL BM4414	6.00%	07/31/2048	50,000	18,628	17,533
FEDERAL NATIONAL MTG ASSN POOL BM4493	5.00%	08/31/2048	55,000	18,707	17,296
FEDERAL NATIONAL MTG ASSN POOL BM4495	6.00%	08/31/2048	234,000	91,082	85,344
UNITED STATES TREASURY BOND	3.00%	02/15/2049	84,000	68,169	61,248
UNITED STATES TREASURY BOND	2.00%	02/15/2050	164,000	155,770	95,466
UNITED STATES TREASURY BOND	2.38%	05/15/2051	163,000	114,784	103,148
FEDERAL NATIONAL MTG ASSN POOL MA4438	2.50%	10/01/2051	137,000	110,285	92,887
FEDERAL NATIONAL MTG ASSN POOL MA4512	2.50%	12/01/2051	4,000	2,975	2,842
FHLMC 30 YR GOLD RA6815	2.50%	02/01/2052	70,000	55,272	48,807
FEDERAL NATIONAL MTG ASSN POOL FS4377	3.00%	04/01/2052	192,000	168,341	155,746
FEDERAL NATIONAL MTG ASSN POOL MA4600	3.50%	05/01/2052	88,000	73,354	69,875
UNITED STATES TREASURY BOND	2.88%	05/15/2052	747,000	618,296	528,503
FEDERAL NATIONAL MTG ASSN POOL MA4656	4.50%	07/01/2052	92,000	83,879	78,123
FEDERAL NATIONAL MTG ASSN POOL MA4732	4.00%	09/01/2052	40,000	36,011	33,724
FHLMC 30 YR GOLD SD8267	5.00%	11/01/2052	56,000	52,166	49,767
FEDERAL NATIONAL MTG ASSN POOL MA4842	5.50%	12/01/2052	56,000	52,773	50,695
			<u>\$ 26,764,000</u>	<u>\$ 24,216,954</u>	<u>\$ 22,822,364</u>

a - REPRESENTS MATURITY VALUE OF ZERO COUPON BONDS

**JACKSONVILLE MARITIME ASSOCIATION / INTERNATIONAL LONGSHOREMEN'S ASSOCIATION
PENSION FUND**

SCHEDULE OF CORPORATE DEBT INSTRUMENTS - PREFERRED

SEPTEMBER 30, 2023

EIN 82-3722523, PLAN NO. 001

FORM 5500, SCHEDULE H, LINE 4I - ASSETS HELD FOR INVESTMENT PURPOSES AT END OF YEAR

(a) NOT APPLICABLE

(b)	(c) - DESCRIPTION CORPORATE DEBT INSTRUMENTS - PREFERRED			(d)	(e)
ISSUER	INTEREST RATE	MATURITY DATE	PAR OR MATURITY VALUE	COST	CURRENT VALUE
TORONTO-DOMINION BANK/THE	0.75%	01/06/2026	\$ 286,000	\$ 255,509	\$ 255,495
VISA INC	1.90%	04/15/2027	186,000	170,018	166,877
AMAZON.COM INC	1.65%	05/12/2028	393,000	379,749	338,391
PFIZER INVESTMENT ENTERPRISES PTE LTD	4.45%	05/19/2028	172,000	171,883	166,045
PEPSICO INC	1.63%	05/01/2030	205,000	170,133	164,636
AMAZON.COM INC	1.50%	06/03/2030	69,000	68,631	54,695
APPLE INC	1.70%	08/05/2031	69,000	66,599	54,306
BRISTOL-MYERS SQUIBB CO	2.95%	03/15/2032	192,000	169,742	160,567
UNITEDHEALTH GROUP INC	2.75%	05/15/2040	75,000	71,177	50,968
WALMART INC	2.50%	09/22/2041	473,000	437,109	316,257
			\$ 2,120,000	\$ 1,960,550	\$ 1,728,237

**JACKSONVILLE MARITIME ASSOCIATION / INTERNATIONAL LONGSHOREMEN'S ASSOCIATION
PENSION FUND**

SCHEDULE OF CORPORATE DEBT INSTRUMENTS - OTHER

SEPTEMBER 30, 2023

EIN 82-3722523, PLAN NO. 001

FORM 5500, SCHEDULE H, LINE 4I - ASSETS HELD FOR INVESTMENT PURPOSES AT END OF YEAR

(a) NOT APPLICABLE

(b)	(c) - DESCRIPTION			(d)	(e)
	CORPORATE DEBT INSTRUMENTS - OTHER				
ISSUER	INTEREST RATE	MATURITY DATE	PAR OR MATURITY VALUE	COST	CURRENT VALUE
ABBVIE INC	3.75%	11/14/2023	\$ 172,000	\$ 170,643	\$ 171,578
HONDA MOTOR CO LTD	2.27%	03/10/2025	179,000	170,442	170,811
MCDONALD'S CORP	3.30%	07/01/2025	174,000	168,660	167,636
COMCAST CORP	3.95%	10/15/2025	173,000	169,751	167,914
WALT DISNEY CO/THE	1.75%	01/13/2026	183,000	169,489	168,596
ORACLE CORP	1.65%	03/25/2026	187,000	169,733	169,398
JPMORGAN CHASE & CO	3.30%	04/01/2026	360,000	358,732	339,874
WELLS FARGO & CO	3.00%	10/23/2026	371,000	368,115	340,582
BANK OF MONTREAL	0.95%	01/22/2027	191,000	170,438	170,571
GOLDMAN SACHS GROUP INC/THE	3.85%	01/26/2027	361,000	361,485	338,743
CVS HEALTH CORP	1.30%	08/21/2027	297,000	255,186	252,383
LOCKHEED MARTIN CORP	5.10%	11/15/2027	166,000	170,997	165,129
AT&T INC	1.65%	02/01/2028	295,000	255,398	249,089
CVS HEALTH CORP	4.30%	03/25/2028	58,000	62,895	54,915
CITIGROUP INC	3.67%	07/24/2028	59,000	60,495	54,136
JPMORGAN CHASE & CO	4.20%	07/23/2029	77,000	81,025	71,290
ENTERPRISE PRODUCTS OPERATING LLC	2.80%	01/31/2030	42,000	42,663	35,678
GOLDMAN SACHS GROUP INC/THE	2.60%	02/07/2030	65,000	66,480	53,263
BANK OF AMERICA CORP	2.88%	10/22/2030	402,000	395,143	335,037
COMCAST CORP	1.95%	01/15/2031	68,000	66,585	53,237
WELLS FARGO & CO	2.57%	02/11/2031	44,000	44,460	35,586
BANK OF AMERICA CORP	2.50%	02/13/2031	68,000	67,425	54,628
VERIZON COMMUNICATIONS INC	2.55%	03/21/2031	67,000	67,645	53,410
WASTE MANAGEMENT INC	4.88%	02/15/2034	352,000	339,981	332,787
			\$ 4,411,000	\$ 4,253,866	\$ 4,006,271

**JACKSONVILLE MARITIME ASSOCIATION / INTERNATIONAL LONGSHOREMEN'S ASSOCIATION
PENSION FUND**

SCHEDULE OF CORPORATE STOCK - COMMON

SEPTEMBER 30, 2023

EIN 82-3722523, PLAN NO. 001

FORM 5500, SCHEDULE H, LINE 4I - ASSETS HELD FOR INVESTMENT PURPOSES AT END OF YEAR

(a) NOT APPLICABLE

(b) ISSUER	(c) - DESCRIPTION COMMON STOCK	(d)	(e)
	NO. OF SHARES	COST	CURRENT VALUE
ABB LTD ADR	979	\$ 17,580	\$ 35,102
ABBOTT LABORATORIES	1,000	91,886	96,850
ABBVIE INC COM	788	116,973	117,459
ABBVIE INC COM	1,662	188,290	247,738
ACCENTURE PLC IRELAND CL A	239	79,172	73,399
ACCENTURE PLC IRELAND CL A	522	111,066	160,311
ACCENTURE PLC IRELAND CL A	450	72,568	138,200
ACUITY BRANDS INC	257	33,468	43,770
ACV AUCTIONS CL A	1,941	34,677	29,464
ADOBE INC	193	11,328	98,411
ADVANCED MICRO DEVICES	1,530	135,690	157,315
ADVANCED MICRO DEVICES	1,022	118,868	105,082
ADYEN N V UNSPONSRED ADR	1,269	20,662	9,482
AIA GROUP LTD SPON ADR	1,132	46,567	36,915
AIA GROUP LTD SPON ADR	1,672	58,677	54,524
AIA GROUP LTD SPON ADR	2,170	95,327	70,764
AIR LIQUIDE ADR	1,776	49,906	60,111
AIRBNB INC CL A	441	58,970	60,510
AIRBUS SE UNSPONSORED ADR	1,273	35,241	42,786
AIRBUS SE UNSPONSORED ADR	1,913	51,591	64,296
AKZO NOBEL NV ADR	1,372	45,639	33,159
ALARM COM HLDGS INC COM	1,074	75,851	65,664
ALCON INC	838	53,727	64,576
ALIBABA GROUP HLDG LTD	806	83,997	69,912
ALIGN TECHNOLOGY	172	42,066	52,515
ALPHABET INC CL A	2,091	172,426	273,628
ALPHABET INC CL C	2,040	73,319	268,974
ALPHABET INC CL C	1,870	162,088	246,560
AMADEUS IT GROUP S.A ADR	993	69,438	60,220
AMAZON COM INC	3,128	167,716	397,631
AMAZON COM INC	4,537	506,142	576,743
AMEREN CORP (HLDG CO)	768	45,728	57,469
AMERICA MOVIL SAB DE CV ADR	764	16,472	13,232
AMERICAN ELEC PWR CO INC	986	77,756	74,167
AMERICAN EXPRESS CO	1,046	172,071	156,053
AMERICAN HOMES 4 RENT CL A	1,268	24,031	42,719
AMERICAN TOWER CORP	285	66,817	46,868
AMERIPRISE FINCL INC	262	13,861	86,376
AMETEK INC NEW	429	18,404	63,389
AMN HEALTHCARE SVCS INC	323	19,207	27,513
AMPHENOL CORP NEW CL A	554	6,439	46,530
ANALOG DEVICES INC	397	60,208	69,511
ANALOG DEVICES INC	987	124,873	172,814
ANGLO AMERN PLC SPONSORED ADR	1,417	30,251	19,591
ANGLO AMERN PLC SPONSORED ADR	1,798	35,488	24,859
ANSYS INC	397	126,384	118,127
AON PLC CL A	235	33,383	76,192
AON PLC CL A	695	141,934	225,333
APPLE INC	1,467	38,316	251,165
APPLE INC	2,759	423,796	472,368
ARCH CAPITAL GROUP LTD	891	38,934	71,022
ARGENX SE ADR	80	40,701	39,204
ARM HOLDINGS PLC ADR	362	23,529	19,374
ASE TECHNOLOGY HLDG CO LTD ADR	9,533	71,896	71,688

**JACKSONVILLE MARITIME ASSOCIATION / INTERNATIONAL LONGSHOREMEN'S ASSOCIATION
PENSION FUND**

SCHEDULE OF CORPORATE STOCK - COMMON

SEPTEMBER 30, 2023

EIN 82-3722523, PLAN NO. 001

FORM 5500, SCHEDULE H, LINE 4I - ASSETS HELD FOR INVESTMENT PURPOSES AT END OF YEAR

(a) NOT APPLICABLE

(b)	(c) - DESCRIPTION COMMON STOCK	(d)	(e)
ISSUER	NO. OF SHARES	COST	CURRENT VALUE
ASICS CORP ADR	874	15,640	30,591
ASM INTERNATIONAL NV	95	33,752	39,788
ASML HOLDING NV NY REG NEW	162	79,096	95,363
ASML HOLDING NV NY REG NEW	125	74,387	73,583
ASML HOLDING NV NY REG NEW	248	100,239	145,988
ASTRAZENECA PLC ADR	916	63,570	62,032
ASTRAZENECA PLC ADR	1,107	78,545	74,966
AT&T INC	8,238	121,254	123,735
ATLAS COPCO AS A ADR A NEW	3,286	43,014	44,538
ATLASSIAN CORPORATION CL A	579	101,421	116,674
AUTOMATIC DATA PROCESSING INC	451	52,609	108,502
AUTOZONE INC	21	7,732	54,394
AVALONBAY COMM INC	224	30,968	38,470
AVALONBAY COMM INC	343	72,051	58,907
AVERY DENNISON CORPORATION	388	50,575	70,876
BALL CORP	530	26,397	26,383
BANCO DO BRASIL SA SPON ADR	4,816	41,347	45,463
BANDAI NAMCO HLDGS INC ADR	2,097	25,346	21,375
BANK OF AMERICA CORP	4,174	96,248	114,284
BATH & BODY WORKS INC	864	41,457	29,203
BDO UNIBANK INC SPON ADR	1,633	40,614	40,957
BECTON DICKINSON & CO	573	143,918	148,138
BERKLEY W R CORP	668	9,921	42,411
BEST BUY CO	314	11,182	21,814
BID CORP LTD SPONSORED ADR	818	17,885	18,334
BIDVEST GROUP LTD SPONS ADR	921	27,442	26,671
BIO-TECHNE CORP	1,160	87,505	78,961
BLACKLINE INC	782	84,179	43,378
BLACKROCK INC	168	75,542	108,610
BLACKSTONE INC	466	34,682	49,927
BOEING CO	161	34,095	30,860
BOOZ ALLEN HAMILTON HLDG CL-A	480	44,369	52,450
BOSTON PROPERTIES INC	488	48,800	29,026
BOSTON SCIENTIFIC CORP	688	26,407	36,326
BOSTON SCIENTIFIC CORP	2,039	105,732	107,659
BP PLC ADS	1,563	39,890	60,519
BRAMBLES LTD SPONSORED ADR	2,446	40,876	45,212
BRISTOL MYERS SQUIBB CO	1,714	95,330	99,481
BRIXMOR PPTY GROUP INC	1,148	19,484	23,855
BROADCOM INC	152	86,454	126,248
BROADCOM INC	221	191,185	183,558
BROADCOM INC	367	92,232	304,823
BUREAU VERITAS SA ADR	798	48,322	39,726
CADENCE DESIGN SYSTEM	286	57,087	67,010
CANADIAN PACIFIC KANSAS CITY	1,192	84,309	88,697
CAPGEMINI S E UNSPONSORED ADR	807	29,531	28,332
CAPITEC BANK HOLDINGS LTD ADR	932	35,700	42,454
CARLISLE CO INC	196	9,159	50,815
CARLSBERG AS	1,288	30,063	32,602
CARTER'S	559	43,899	38,655
CATERPILLAR INC	402	113,468	109,746
CBRE GROUP INC CL A	585	22,380	43,208
CDW CORPORATION	350	30,864	70,616
CELANESE CORP SERIES A COM STK	147	14,595	18,451

**JACKSONVILLE MARITIME ASSOCIATION / INTERNATIONAL LONGSHOREMEN'S ASSOCIATION
PENSION FUND**

SCHEDULE OF CORPORATE STOCK - COMMON

SEPTEMBER 30, 2023

EIN 82-3722523, PLAN NO. 001

FORM 5500, SCHEDULE H, LINE 4I - ASSETS HELD FOR INVESTMENT PURPOSES AT END OF YEAR

(a) NOT APPLICABLE

(b)	(c) - DESCRIPTION COMMON STOCK	(d)	(e)
ISSUER	NO. OF SHARES	COST	CURRENT VALUE
CELLNEX TELECOM SA UNS ADR	1,455	43,133	25,396
CEMEX SAB DE CV	3,566	25,973	23,179
CENCORA INC	414	22,455	74,508
CENTRAIS ELEC BRAS SP ADR CM	3,347	29,344	24,467
CERTARA INC	1,876	65,718	27,277
CHARLES RIVER LABS INTL INC	295	75,864	57,814
CHEVRON CORP	1,714	177,927	289,015
CHINA MENGNIU DAIRY CO LTD ADR	450	28,780	15,083
CHIPOTLE MEXICAN GRILL INC COM	79	48,575	144,848
CHUBB LTD	808	96,179	168,209
CHUBB LTD	851	108,985	177,161
CISCO SYS INC	5,454	219,242	293,207
CITIGROUP INC NEW	2,140	108,146	88,018
CME GROUP INC	747	125,834	149,564
CMS ENERGY CP	1,295	40,687	68,777
CMS ENERGY CP	859	42,024	45,621
COCA COLA CO	2,631	143,041	147,283
COCA-COLA EUROPACIFIC PARTNERS	502	28,087	31,624
COGNEX CORP	1,055	69,077	44,774
COMCAST CORP (NEW) CLASS A	6,143	247,959	272,381
COMCAST CORP (NEW) CLASS A	6,301	216,536	279,386
COMPAGNIE FIN RICHEMONTAG ADR	2,914	39,702	35,676
COMPASS GROUP PLC SPD ADR	2,172	45,707	53,021
COMPASS GROUP PLC SPD ADR	1,402	28,638	34,224
COMPUTERSHARE LTD SPN ADR	1,819	29,772	30,477
CONOCOPHILLIPS	2,242	154,610	268,592
CONOCOPHILLIPS	850	50,915	101,830
CONSTELLATION BRANDS INC CL A	148	12,742	37,197
CONTL AG SPONS ADR	5,059	44,345	35,757
COSTAR GROUP INC	1,516	127,270	116,565
COSTCO WHOLESALE CORP NEW	197	43,401	111,297
COSTCO WHOLESALE CORP NEW	164	72,112	92,653
COTERRA ENERGY INC	1,720	31,654	46,526
COVESTRO AG SPONSORED ADR	762	17,459	20,597
CRH PLC	934	38,164	51,118
CROWDSTRIKE HLDGS INC CL A	255	14,560	42,682
CUMMINS INC	424	69,281	96,867
DAIICHI SANKYO CO LTD SPON ADR	2,419	73,520	66,561
DAIKIN INDS LTD UNSPON ADR	2,191	40,632	34,467
DAIWA HOUSE IND LTD ADR	1,027	35,764	27,632
DARDEN RESTAURANTS	230	23,473	32,941
DBS GROUP HOLDINGS LTD SP	251	17,473	24,745
DEFINITIVE HEALTHCARE CL A	1,578	40,257	12,608
DEUTSCHE BOERSE AG UNSPON ADR	3,768	64,722	65,307
DEUTSCHE TELEKOM AG ADR	4,309	82,010	90,640
DEXCOM INC	285	10,943	26,591
DEXCOM INC	405	38,283	37,787
DIAGEO PLC SPON ADR NEW	433	68,135	64,595
DIAGEO PLC SPON ADR NEW	795	130,834	118,598
DIAMONDBACK ENERGY INC	410	35,035	63,501
DISCO CORP ADR	1,552	15,617	28,684
DISCOVER FINCL SVCS	338	12,530	29,281
DOMINION ENERGY INC	2,825	188,856	126,193
DOVER CORP	349	50,742	48,689

**JACKSONVILLE MARITIME ASSOCIATION / INTERNATIONAL LONGSHOREMEN'S ASSOCIATION
PENSION FUND**

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SEPTEMBER 30, 2023

EIN 82-3722523, PLAN NO. 001

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(a) NOT APPLICABLE

(b)	(c) - DESCRIPTION COMMON STOCK	(d)	(e)
ISSUER	NO. OF SHARES	COST	CURRENT VALUE
DTE ENERGY COMPANY	394	28,081	39,116
DUKE ENERGY CORPORATION	2,005	176,225	176,961
DUPONT DE NEMOURS INC	1,728	130,560	128,892
EATON CORP PLC SHS	531	31,156	113,252
EATON CORP PLC SHS	774	77,838	165,079
EDENRED S A ADR	284	9,397	8,912
EDISON INTERNATIONAL	535	37,379	33,860
EDP ENERGIAS DE PORTUGAL SA	1,894	100,681	78,927
ELEVANCE HEALTH INC	310	155,220	134,980
ELI LILLY & CO	376	74,917	201,961
ELI LILLY & CO	236	111,355	126,763
ENERGIZER HLDGS INC	790	23,165	25,312
ENGIE SPONS ADR	4,576	61,929	70,397
ENTEGRIS INC	458	46,485	43,011
ENTERGY CORP NEW	782	87,881	72,335
EOG RESOURCES INC	1,346	81,066	170,619
ESSEX PROPERTY TRUST INC	90	20,780	19,088
ESSILORLUXOTTICA ADR	512	47,658	44,765
EVERSOURCE ENERGY COM	682	43,013	39,658
EXPEDIA GROUP INC	372	32,172	38,342
EXPONENT INC	607	50,660	51,959
EXXON MOBIL CORP	2,684	191,073	315,585
FASTENAL CO	2,191	104,908	119,716
FEDERAL RLTY INVT TR SH BEN	226	25,280	20,482
FIFTH 3RD BANCORP OHIO	1,850	25,283	46,861
FIRST CITIZ BANCSHARES A	40	36,598	55,824
FIVE BELOW	713	109,857	114,722
FIVE9 INC COM	418	61,853	26,877
FLEETCOR TECHNOLOGIES	99	24,968	25,373
FLOOR & DECOR HLDGS INC CL-A	715	61,102	64,708
FORTUNE BRANDS INNOVATIONS INC	914	38,094	56,814
FREEMPORT-MCMORAN CL-B	2,082	43,360	77,638
FREEMPORT-MCMORAN CL-B	560	18,823	20,882
FRESHPET INC	401	38,541	26,418
GALAXY ENTMT GROUP LTD ADR	874	28,720	26,308
GARTNER INC	292	75,443	100,334
GENL DYNAMICS CORP	730	165,382	161,308
GENUINE PARTS CO	229	19,143	33,063
GENUINE PARTS CO	380	62,182	54,864
GIVAUDAN SA ADR	677	53,523	44,314
GLOBANT S.A	600	110,729	118,710
GLOBE LIFE INC	290	32,749	31,532
GLOBUS MEDICAL INC A	422	24,690	20,952
GODADDY INC.	841	64,410	62,638
GODADDY INC.	483	34,853	35,974
GOLDMAN SACHS GRP INC	137	44,597	44,329
GRAND CANYON ED INC COM	852	72,419	99,582
GREEK ORGANISATION OF FOOTBALL	3,803	30,263	31,930
GRID DYNAMICS HLDGS CL A	2,359	62,638	28,733
GRUPO AEROPORTUARIO DEL	159	14,717	26,135
GRUPO FINANCIERO BANORTE SAB	944	25,332	39,673
GUIDEWIRE SOFTWARE INC	700	80,403	63,000
HALEON PLC ADR	7,155	52,278	59,601
HARTFORD FIN SERS GRP INC	794	22,276	56,303

**JACKSONVILLE MARITIME ASSOCIATION / INTERNATIONAL LONGSHOREMEN'S ASSOCIATION
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SEPTEMBER 30, 2023

EIN 82-3722523, PLAN NO. 001

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(a) NOT APPLICABLE

(b)	(c) - DESCRIPTION COMMON STOCK	(d)	(e)
ISSUER	NO. OF SHARES	COST	CURRENT VALUE
HDFC BANK LTD ADR	1,629	59,363	96,127
HEICO CORP NEW	799	106,542	129,382
HENKEL KGAA PFD SHARS SPON ADR	1,174	21,614	20,885
HENRY SCHEIN INC	936	52,912	69,498
HILTON WORLDWIDE HLDGS INC	567	62,389	85,152
HIMAX TECHNOLOGIES INC.	4,195	28,137	24,499
HOME DEPOT INC	209	64,338	63,151
HOME DEPOT INC	844	150,758	255,023
HONEYWELL INTL INC	900	146,161	166,266
HONEYWELL INTL INC	940	126,864	173,656
HONG KONG EXCHANGES & CLEARING	1,387	52,625	51,818
HOST HOTELS & RESORTS INC	1,037	17,036	16,665
HOYA CORP SPONS ADR	341	36,483	35,020
HSBC HOLDINGS PLC SPON ADR NEW	1,704	51,391	67,240
HUBBELL INC	246	28,387	77,099
HUNTINGTON BANCSHARES	5,339	48,858	55,526
IAC INC NEW	367	34,044	18,493
IAC INC NEW	860	78,199	43,335
IBERDROLA SA SPON ADR	1,285	60,810	57,658
ICICI BANK LTD	2,933	61,922	67,811
ICON PLC	169	37,200	41,616
IDEX CORPORATION DELAWARE	207	14,770	43,060
IDEX LABS	247	102,767	108,006
ILL TOOL WORKS INC	576	102,306	132,659
ILL TOOL WORKS INC	296	73,335	68,172
IMCD GROUP N V ADR	247	17,826	15,691
INDUSTRIA DE DISENO TEXTIL IND	5,059	78,070	94,512
INDUSTRIAL & COML BK CHINA ADR	8,238	103,857	79,307
INFINEON TECHNOLOGIES AG	906	29,736	30,076
INFOSYS LIMITED ADR	4,414	47,236	75,524
INTESA SANPAOLO S.P.A. ADR	2,830	41,898	43,865
INTL BUSINESS MACHINES CORP	1,141	134,171	160,082
INTUITIVE SURGICAL INC	246	72,262	71,903
INTUITIVE SURGICAL INC	656	171,131	191,742
ITAU UNIBANCO MULTIPLE ADR	5,490	34,741	29,481
ITT INC	693	42,408	67,852
JABIL CIRCUIT INC	423	26,674	53,674
JACK HENRY & ASSOC INC	222	35,521	33,553
JAZZ PHARMACEUTICALS PLC	309	50,073	39,997
JD COM INC SPON ADR CL A	753	59,413	21,935
JOHNSON & JOHNSON	848	95,543	132,076
JOHNSON & JOHNSON	1,754	221,434	273,186
JPMORGAN CHASE & CO	2,002	185,807	290,330
JPMORGAN CHASE & CO	2,685	280,114	389,379
KASIKORNBANK PUB CO LTD UNSPON	1,944	30,262	26,907
KB FINANCIAL GRP INC SONS ADR	1,638	75,874	67,338
KBC GROUP NV UNSPONS ADR	974	32,221	30,493
KENVUE INC	6,456	149,743	129,636
KERING S A ADR NEW	1,164	70,341	53,226
KEURIG DR PEPPER INC COM	1,269	30,661	40,062
KIMCO REALTY CORP MD	1,754	36,930	30,853
KINSALE CAP GROUP INC	111	31,130	45,968
KKR & CO INC CL A	1,775	114,411	109,340
KLA CORPORATION	208	70,882	95,401

**JACKSONVILLE MARITIME ASSOCIATION / INTERNATIONAL LONGSHOREMEN'S ASSOCIATION
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SEPTEMBER 30, 2023

EIN 82-3722523, PLAN NO. 001

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(a) NOT APPLICABLE

(b)	(c) - DESCRIPTION COMMON STOCK	(d)	(e)
ISSUER	NO. OF SHARES	COST	CURRENT VALUE
KLA CORPORATION	401	37,638	183,923
KORNIT DIGITAL LTD SHS	1,023	80,716	19,345
KOSMOS ENERGY LTD	3,314	22,528	27,109
KROGER CO	732	13,085	32,757
KT CORP SPON ADR	2,889	33,958	37,037
L OREAL CO ADR	800	59,185	66,608
L OREAL CO ADR	678	56,210	56,450
LABORATORY CP AMER HLDGS NEW	190	22,724	38,200
LAM RESEARCH CORPORATION	284	137,573	178,003
LAM RESEARCH CORPORATION	239	33,025	149,798
LEGRAND SA	1,971	41,167	36,436
LEGRAND SA	2,930	50,202	54,164
LIBERTY MEDIA COR SER C LBRT L	373	13,816	11,973
LIBERTY MEDIA COR SER C LBRT S	1,492	39,530	37,986
LINCOLN ELEC HLDGS INC	350	27,848	63,627
LINDE PLC	113	35,392	42,076
LINDE PLC	211	53,273	78,566
LINDE PLC	381	63,490	141,865
LINDE PLC	364	98,323	135,535
LKQ CORPORATION	1,176	47,171	58,224
LOCKHEED MARTIN CORP	284	77,885	116,145
LOEWS CORPORATION	1,423	55,090	90,090
LONDON STK EXCHANGE GROUP ADR	1,178	30,773	29,597
LONDON STK EXCHANGE GROUP ADR	4,948	131,408	124,319
LOWES COMPANIES INC	689	115,134	143,202
LULULEMON ATHLETICA INC	256	43,419	98,716
LULULEMON ATHLETICA INC	301	94,931	116,069
LVMH MOET HENNESSY LOUIS VUITT	723	90,873	109,678
LVMH MOET HENNESSY LOUIS VUITT	712	76,196	108,009
M&T BANK CORP	574	62,015	72,582
MARRIOTT INTL INC NEW CL A	208	29,141	40,884
MARRIOTT INTL INC NEW CL A	472	71,447	92,776
MARSH & MCLENNAN COS INC	831	94,163	158,139
MARSH & MCLENNAN COS INC	1,130	90,541	215,039
MARTIN MARIETTA MATERIALS	176	40,996	72,244
MASTERCARD INC CL A	396	35,755	156,780
MASTERCARD INC CL A	508	61,084	201,122
MC DONALDS CORP	395	106,625	104,059
MC DONALDS CORP	624	117,615	164,387
MCKESSON CORP	463	76,988	201,336
MEDPACE HOLDINGS INC.	177	24,800	42,857
MEDTRONIC PLC SHS	1,947	162,245	152,567
MERCADOLIBRE INC	51	31,081	64,662
MERCK & CO INC NEW COM	1,939	108,109	199,620
MERCK KGAA SPD ADR	1,107	32,824	37,071
META PLATFORMS INC CL A	690	146,411	207,145
META PLATFORMS INC CL A	1,202	276,110	360,852
MGIC INVT CORP	2,564	38,132	42,793
MICROCHIP TECHNOLOGY INC	465	39,484	36,293
MICROCHIP TECHNOLOGY INC	1,648	110,662	128,626
MICRON TECH INC	369	26,949	25,103
MICROSOFT CORP	1,338	141,463	422,474
MICROSOFT CORP	2,836	461,912	895,467
MICROSOFT CORP	1,191	121,763	376,058

**JACKSONVILLE MARITIME ASSOCIATION / INTERNATIONAL LONGSHOREMEN'S ASSOCIATION
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SEPTEMBER 30, 2023

EIN 82-3722523, PLAN NO. 001

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(a) NOT APPLICABLE

(b)	(c) - DESCRIPTION COMMON STOCK	(d)	(e)
ISSUER	NO. OF SHARES	COST	CURRENT VALUE
MID AMER APART COMM INC	165	25,323	21,227
MIDDLEBY CORP DEL	426	45,020	54,528
MOBILEYE GLOBAL INC CL A	366	15,040	15,207
MOHAWK INDUSTRIES INC	288	28,069	24,713
MONDELEZ INTL INC COM	1,936	99,164	134,358
MONGODB INC CL A	179	71,107	61,909
MONOLITHIC PWR SYSTEMS INC	157	79,998	72,534
MONOTARO CO LTD ADR	1,166	28,673	12,505
MOODYS CORP	170	55,408	53,749
MOODYS CORP	274	26,724	86,631
MORGAN STANLEY	1,874	149,532	153,050
MORGAN STANLEY	1,607	155,207	131,244
MOTOROLA SOLUTIONS INC	139	18,747	37,841
MSCI INC COM	177	46,733	90,815
MTU AERO ENGINES AG	192	19,525	17,457
NASDAQ INC COM	2,385	99,360	115,887
NATL FUEL GAS CO	719	32,705	37,323
NEOGEN CORP	1,804	66,186	33,446
NESTLE SPON ADR REP REG SHR	1,235	102,257	140,051
NESTLE SPON ADR REP REG SHR	1,483	162,462	168,175
NETEASE.COM INC ADS	257	5,272	25,741
NETFLIX INC	222	62,841	83,827
NETFLIX INC	157	67,870	59,283
NEWELL BRANDS INC	2,682	46,267	24,218
NEXTERA ENERGY INC	1,295	54,253	74,191
NICE LTD ADR	177	51,509	30,090
NIKE INC B	451	33,425	43,125
NIKE INC B	621	59,685	59,380
NOMURA RESH INST LTD ADR	1,398	37,753	36,471
NORTHERN TRUST CORP	419	23,878	29,112
NORTHROP GRUMMAN CP(HLDG CO)	317	101,550	139,540
NORTHROP GRUMMAN CP(HLDG CO)	327	114,494	143,942
NOVO NORDISK A/S ADR	840	70,688	76,390
NOVO NORDISK A/S ADR	1,704	63,160	154,962
NOVO NORDISK A/S ADR	1,394	77,895	126,770
NVIDIA CORPORATION	1,019	71,215	443,255
NVIDIA CORPORATION	867	111,033	377,136
NXP SEMICONDUCTORS NV	425	46,361	84,966
OLYMPUS CORP ADR	5,008	93,416	65,159
O'REILLY AUTOMOTIVE INC NEW	123	101,952	111,790
O'REILLY AUTOMOTIVE INC NEW	109	94,688	99,066
ORTHOPEDIATRICS CORP	862	39,115	27,584
PACCAR INC	424	35,049	36,048
PACKAGING CORP AMER	377	41,908	57,888
PACKAGING CORP AMER	277	25,763	42,533
PARKER HANNIFIN CORP	303	103,688	118,025
PARKER HANNIFIN CORP	474	92,571	184,632
PAYCOM SOFTWARE INC	360	125,400	93,337
PAYLOCITY HOLDING CORPORATION	474	85,051	86,126
PEPSICO INC NC	522	70,736	88,448
PEPSICO INC NC	574	62,666	97,259
PERNOD RICARD SA ADR	766	33,673	25,604
PERNOD RICARD SA ADR	868	30,325	29,013
PETROLEO BRASILEIRO SA	2,951	40,493	44,235

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SEPTEMBER 30, 2023

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(b)	(c) - DESCRIPTION COMMON STOCK	(d)	(e)
ISSUER	NO. OF SHARES	COST	CURRENT VALUE
PFIZER INC	6,401	283,313	212,321
PG&E CORP	3,699	64,080	59,665
PHILIP MORRIS INTL INC	1,660	133,929	153,683
PING AN INSURANCE ADR	3,007	60,955	34,439
PIONEER NATURAL RESOURCES CO	521	95,027	119,596
PNC FINL SVCS GP	624	79,587	76,608
PNC FINL SVCS GP	939	110,746	115,281
POST HOLDINGS INC	386	21,046	33,096
PPG INDUSTRIES INC	775	106,898	100,595
PRIVIA HEALTH GROUP INC	1,678	45,420	38,594
PROCTER & GAMBLE	1,694	164,105	247,087
PROGRESSIVE CORP OHIO	1,372	130,790	191,120
PROGYNY INC	1,259	52,033	42,831
PROLOGIS INC COM	1,906	225,096	213,872
PROLOGIS INC COM	474	56,272	53,188
PT ASTRA INTERNATIONAL TBK ADR	2,581	22,177	20,793
PT BK CENT ASIA TBK ADR	2,256	33,614	32,204
PT BK MANDIRI PERSERO TBK UNSP	2,414	16,423	37,644
PT TELEKOMUNIKASI INDONESIA	790	14,284	19,039
PUBLIC STORAGE	196	56,452	51,650
QUEST DIAGNOSTICS INC	276	39,779	33,633
R P M INC	613	52,032	58,119
RALPH LAUREN CORP CL A	412	35,466	47,829
RAYMOND JAMES FINCL INC	645	24,075	64,777
RAYONIER INCORPORATED	1,466	42,516	41,722
RB GLOBAL INC	1,646	104,524	102,875
RECRUIT HOLDINGS CO. LTD. ADR	2,933	19,075	18,117
RECRUIT HOLDINGS CO. LTD. ADR	4,524	42,807	27,945
REGENCY CTRS CORP	526	22,733	31,265
REGIONS FINANCIAL CORP NEW	3,651	50,283	62,797
RELX PLC SPONSORED ADR	2,572	60,383	86,676
RELX PLC SPONSORED ADR	1,949	53,520	65,681
RENASAS ELECTRONICS CORP ADR	3,351	21,598	25,662
RENTOKIL INITIAL PLC ADR	2,353	82,544	87,179
REPLIGEN CP	284	47,725	45,159
REXFORD INDL REALTY INC	413	22,001	20,382
ROCHE HOLDINGS ADR	1,956	91,923	66,367
ROLLINS INC	2,157	83,500	80,521
RYANAIR HLDGS PLC ADR	470	41,215	45,689
S&P GLOBAL INC COM	132	49,754	48,234
SAFRAN SA	2,004	72,417	78,843
SALESFORCE INC	519	60,498	105,243
SALESFORCE INC	839	177,139	170,132
SAMPO OYJ UNSPON ADR	1,851	48,699	40,156
SANDVIK AB SPONS ADR	1,195	23,655	22,174
SANDVIK AB SPONS ADR	1,464	27,491	27,166
SAP AG	268	37,651	34,658
SAP AG	731	88,817	94,533
SERVICENOW INC	159	77,988	88,875
SERVICENOW INC	512	228,120	286,188
SHELL PLC ADR	371	24,222	23,885
SHENZHOU INTL GROUP HLDGS LTD	2,103	24,831	20,138
SHERWIN WILLIAMS COMPANY OHIO	370	92,075	94,369
SHIMANO INC ADR	1,284	19,993	17,351

**JACKSONVILLE MARITIME ASSOCIATION / INTERNATIONAL LONGSHOREMEN'S ASSOCIATION
PENSION FUND**

SCHEDULE OF CORPORATE STOCK - COMMON

SEPTEMBER 30, 2023

EIN 82-3722523, PLAN NO. 001

FORM 5500, SCHEDULE H, LINE 4I - ASSETS HELD FOR INVESTMENT PURPOSES AT END OF YEAR

(a) NOT APPLICABLE

(b)	(c) - DESCRIPTION COMMON STOCK	(d)	(e)
ISSUER	NO. OF SHARES	COST	CURRENT VALUE
SHISEIDO LTD SPON ADR	1,190	82,437	41,867
SHOPIFY INC	266	14,408	14,516
SIEMENS HEALTHINEERS AG ADR	1,069	24,783	27,163
SILGAN HOLDINGS INC	1,033	26,572	44,533
SMC CORP JAPAN SPONSORED ADR	1,516	36,120	34,024
SNAP-ON INC	270	30,641	68,866
SNOWFLAKE INC CL A	382	113,851	58,358
SNOWFLAKE INC CL A	558	87,630	85,246
SOLAREGE TECHNOLOGIES INC	90	27,133	11,693
SONY GROUP CORPORATION ADR	1,123	93,961	92,546
SOUTHERN CO	2,624	148,753	169,825
SOUTHERN CO	1,265	86,908	81,871
SOUTHWEST AIRLINES	598	20,650	16,188
SPS COMMERCE INC	345	43,700	58,860
SQUARESPACE INC CL A	683	20,758	19,787
STATE STREET CORP	824	67,460	55,175
STRAUMANN HLDG AG ADR	2,608	34,450	33,414
SUMITOMO MITSUI FINL GROUP INC	3,754	29,148	36,977
SUN COMMUNITIES INC	218	31,372	25,798
SUNCOR ENERGY INC	1,616	45,054	55,558
SUNCOR ENERGY INC	2,100	68,051	72,198
SUZUKI MTR CORP ADR	170	33,723	27,414
SYNOPSYS INC	289	105,768	132,642
T ROWE PRICE GROUP INC	283	16,186	29,678
TAIWAN SMCNDCR MFG CO LTD ADR	2,070	32,743	179,883
TAKE TWO INTERACTIVE SOFTWARE	232	25,811	32,570
TAPESTRY INC	1,010	40,862	29,038
TARGET CORPORATION	1,160	173,977	128,261
TECHTRONIC IND LTD SPONS ADR	599	11,264	29,063
TELEDYNE TECH INC	161	63,060	65,781
TENCENT HLDGS LTD UNSPON ADR	3,692	102,412	142,770
TENCENT HLDGS LTD UNSPON ADR	1,004	46,860	38,825
TESLA INC	1,005	22,508	251,471
TESLA INC	151	25,986	37,783
TEXAS INSTRUMENTS	982	126,108	156,148
TEXAS INSTRUMENTS	613	58,386	97,473
THALES USDSPONSORD ADR	1,593	40,315	44,897
THE CIGNA GROUP	929	197,651	265,759
THE CIGNA GROUP	253	74,967	72,376
THE ENSIGN GROUP INC	624	59,244	57,988
THERMO FISHER SCIENTIFIC	210	81,800	106,296
THOMSON REUTERS CORP	453	36,281	55,411
TIMKEN CO	533	42,060	39,170
TJX COS INC NEW	681	42,312	60,527
TOAST INC CL A	2,217	49,175	41,524
TOKYO ELECTRON LTD UNSPON ADR	1,352	87,078	92,594
TRADE DESK INC CLASS A	408	10,141	31,885
TRANE TECHNOLOGIES PLC	540	41,571	109,571
TRIP COM GROUP LTD ADR	974	33,342	34,061
TYLER TECHNOLOGIES INC	296	121,828	114,297
UBER TECHNOLOGIES INC	2,570	75,376	118,194
UBER TECHNOLOGIES INC	2,833	104,040	130,290
ULTA BEAUTY INC	136	67,949	54,325
UNILEVER PLC (NEW) ADS	941	45,707	46,485

**JACKSONVILLE MARITIME ASSOCIATION / INTERNATIONAL LONGSHOREMEN'S ASSOCIATION
PENSION FUND**

SCHEDULE OF CORPORATE STOCK - COMMON

SEPTEMBER 30, 2023

EIN 82-3722523, PLAN NO. 001

FORM 5500, SCHEDULE H, LINE 4I - ASSETS HELD FOR INVESTMENT PURPOSES AT END OF YEAR

(a) NOT APPLICABLE

(b)	(c) - DESCRIPTION COMMON STOCK	(d)	(e)
ISSUER	NO. OF SHARES	COST	CURRENT VALUE
UNILEVER PLC (NEW) ADS	1,095	58,989	54,093
UNION PACIFIC CORP	997	191,986	203,019
UNION PACIFIC CORP	931	118,431	189,580
UNITED PARCEL SER INC CL-B	1,045	129,018	162,884
UNITEDHEALTH GP INC	144	58,968	72,603
UNITEDHEALTH GP INC	206	23,447	103,863
UNITEDHEALTH GP INC	332	75,440	167,391
UNIVERSAL HEALTH SERVICES B	176	20,637	22,128
UNIVERSAL MUSIC GROUP NV ADR	3,099	33,890	40,569
US FOODS HOLDING CORP	1,202	41,056	47,719
VALERO ENERGY CP DELA NEW	924	80,089	130,940
VENTAS INC	419	26,329	17,652
VERISK ANALYTICS INC COM	188	38,531	44,413
VERTEX PHARMACEUTICALS	177	51,575	61,550
VERTEX PHARMACEUTICALS	414	133,316	143,964
VISA INC CL A	726	58,407	166,987
VISA INC CL A	585	11,552	134,556
VISA INC CL A	729	169,122	167,677
VONOVIA SE ADR	2,187	46,756	26,408
VOYA FINL INC	461	26,091	30,633
W P CAREY INC COM	429	29,582	23,200
WAL-MART DE MEXICO SA SPON ADR	725	25,681	27,442
WALMART INC	1,342	160,421	214,626
WASTE MGMT INC (DELA)	674	55,974	102,745
WATSCO INC	178	41,562	67,234
WEC ENERGY GROUP INC COM	896	48,841	72,173
WEC ENERGY GROUP INC COM	781	53,058	62,910
WELLS FARGO & CO NEW	2,986	137,217	122,008
WEST PHARMACEUTICAL SVCS INC	345	96,188	129,447
WEYERHAEUSER CO	1,563	44,974	47,922
WILLIAMS CO INC	2,040	53,747	68,728
WNS HOLDINGS LIMITED	610	51,329	41,761
WOLTERS KLUWER NV SPON ADR	152	7,545	18,451
WORKDAY INC CL A	762	157,377	163,716
WORKIVA INC CLASS A	902	64,605	91,409
WUXI BIOLOGICS CAYMAN INC ADR	1,169	20,405	13,628
XCEL ENERGY INC	1,056	31,796	60,424
YANDEX N.V. A	535	38,938	-
YUM CHINA HLDNGS	1,130	57,160	62,964
ZEBRA TECH CL-A	116	29,863	27,437
ZIMMER BIOMET HLDGS INC COM	432	48,836	48,479
ZOOMINFO TECHNO INC STK COM	907	31,569	14,875
ZOZO INC ADR	4,826	23,434	17,745
		\$ 35,941,674	\$ 45,853,100

**JACKSONVILLE MARITIME ASSOCIATION / INTERNATIONAL LONGSHOREMEN'S ASSOCIATION
PENSION FUND**

SCHEDULE OF REGISTERED INVESTMENT COMPANIES

SEPTEMBER 30, 2023

EIN 82-3722523, PLAN NO. 001

FORM 5500, SCHEDULE H, LINE 4I - ASSETS HELD FOR INVESTMENT PURPOSES AT END OF YEAR

(a) NOT APPLICABLE

(b)	(c) - DESCRIPTION REGISTERED INVESTMENT COMPANIES	(d)	(e)
ISSUER	NO. OF SHARES	COST	CURRENT VALUE
JPMORGAN HEDGED EQUITY 2 I	645,737	\$ 10,925,600	\$ 9,841,033
PIA BBB BOND FD-COMPLETION SH	393,882	3,688,869	3,103,789
PIA MBS BOND-COMPLETION SH	41,425	347,592	327,669
WA SMASH SRS CR CMPLTN FUND	112,385	1,019,300	664,195
WESTERN ASSET SMASH SERIES C	67,486	595,891	581,729
WESTERN ASSET SMASH SERIES M	63,103	665,642	464,438
		<u>\$ 17,242,894</u>	<u>\$ 14,982,853</u>

**JACKSONVILLE MARITIME ASSOCIATION / INTERNATIONAL LONGSHOREMEN'S ASSOCIATION
PENSION FUND**

SCHEDULES OF ADMINISTRATIVE EXPENSES

YEARS ENDED SEPTEMBER 30, 2023 AND 2022

	<u>2023</u>	<u>2022</u>
Payroll	\$ 303,854	\$ 279,426
Payroll taxes	23,074	22,267
Employee benefits	71,853	85,134
Occupancy	26,571	26,856
Office	67,000	70,646
Legal	176,007	99,661
Accounting	47,500	45,000
Actuarial consulting	114,960	109,490
Computer	108,716	84,142
Outside services	10,894	11,567
Insurance	97,701	93,929
Depreciation	<u>-</u>	<u>473</u>
Total administrative expenses	<u><u>\$ 1,048,130</u></u>	<u><u>\$ 928,591</u></u>

**JACKSONVILLE MARITIME ASSOCIATION / INTERNATIONAL LONGSHOREMEN'S ASSOCIATION
PENSION FUND**

SCHEDULE OF INTEREST BEARING CASH

SEPTEMBER 30, 2023

EIN 82-3722523, PLAN NO. 001

FORM 5500, SCHEDULE H, LINE 4I - ASSETS HELD FOR INVESTMENT PURPOSES AT END OF YEAR

(a)	(b)	(c) - DESCRIPTION		(d)	(e)
		INTEREST BEARING CASH			
	ISSUER	INTEREST RATE	MATURITY DATE	COST	CURRENT VALUE
	FIRST HORIZON BANK	VARIABLE	DEMAND	\$ 580,774	\$ 580,774
*	MORGAN STANLEY - ACTIVE ASSETS MONEY	VARIABLE	DEMAND	<u>1,590,593</u>	<u>1,590,593</u>
				<u>\$ 2,171,367</u>	<u>\$ 2,171,367</u>

* PARTY-IN-INTEREST

**JACKSONVILLE MARITIME ASSOCIATION / INTERNATIONAL LONGSHOREMEN'S ASSOCIATION
PENSION FUND**

SCHEDULE OF U.S. GOVERNMENT SECURITIES

SEPTEMBER 30, 2023

EIN 82-3722523, PLAN NO. 001

FORM 5500, SCHEDULE H, LINE 4I - ASSETS HELD FOR INVESTMENT PURPOSES AT END OF YEAR

(a) NOT APPLICABLE

(b) ISSUER	(c) - DESCRIPTION U.S. GOVERNMENT SECURITIES			(d) COST	(e) CURRENT VALUE
	INTEREST RATE	MATURITY DATE	PAR OR		
			MATURITY VALUE - a		
UNITED STATES TREASURY NOTE	2.88%	10/31/2023	\$ 297,000	\$ 295,841	\$ 296,478
UNITED STATES TREASURY NOTE	2.13%	11/30/2023	99,000	98,710	98,484
UNITED STATES TREASURY BILL	0.00%	12/07/2023	100,000	97,446	99,027
UNITED STATES TREASURY BILL	0.00%	12/07/2023	50,000	48,723	49,513
UNITED STATES TREASURY NOTE	2.63%	12/31/2023	99,000	99,062	98,339
UNITED STATES TREASURY NOTE	2.25%	12/31/2023	99,000	98,814	98,236
UNITED STATES TREASURY NOTE	2.50%	05/15/2024	98,000	97,881	96,231
UNITED STATES TREASURY NOTE	2.00%	05/31/2024	98,000	96,959	95,789
UNITED STATES TREASURY NOTE	0.25%	06/15/2024	342,000	340,437	329,709
UNITED STATES TREASURY NOTE	2.00%	06/30/2024	98,000	96,886	95,508
UNITED STATES TREASURY NOTE	2.13%	07/31/2024	99,000	96,916	96,307
UNITED STATES TREASURY NOTE	2.38%	08/15/2024	98,000	97,552	95,414
UNITED STATES TREASURY NOTE	2.13%	09/30/2024	98,000	96,928	94,867
UNITED STATES TREASURY NOTE	2.25%	10/31/2024	98,000	97,150	94,752
UNITED STATES TREASURY NOTE	2.25%	11/15/2024	146,000	144,688	141,044
UNITED STATES TREASURY NOTE	2.13%	11/30/2024	198,000	195,024	190,768
UNITED STATES TREASURY NOTE	2.13%	11/30/2024	352,000	348,476	339,144
UNITED STATES TREASURY NOTE	2.25%	12/31/2024	198,000	196,113	190,683
UNITED STATES TREASURY NOTE	2.00%	02/15/2025	482,000	482,189	461,044
UNITED STATES TREASURY NOTE	2.00%	02/15/2025	352,000	336,050	336,696
UNITED STATES TREASURY NOTE	2.75%	02/28/2025	248,000	248,435	239,470
UNITED STATES TREASURY NOTE	1.75%	03/15/2025	295,000	287,867	280,567
UNITED STATES TREASURY NOTE	2.88%	04/30/2025	145,000	145,542	139,863
UNITED STATES TREASURY NOTE	2.13%	05/15/2025	96,000	93,450	91,451
UNITED STATES TREASURY NOTE	2.75%	06/30/2025	196,000	196,356	188,229
UNITED STATES TREASURY NOTE	4.63%	06/30/2025	150,000	148,799	148,714
UNITED STATES TREASURY NOTE	2.00%	08/15/2025	289,000	282,949	273,094
UNITED STATES TREASURY NOTE	2.75%	08/31/2025	248,000	248,492	237,455
UNITED STATES TREASURY NOTE	3.00%	09/30/2025	356,000	350,489	342,281
UNITED STATES TREASURY NOTE	0.25%	10/31/2025	471,000	425,849	427,065
UNITED STATES TREASURY NOTE	2.25%	11/15/2025	290,000	286,035	274,061
UNITED STATES TREASURY NOTE	2.63%	01/31/2026	148,000	147,977	140,461
UNITED STATES TREASURY NOTE	1.63%	02/15/2026	95,000	91,482	88,023
UNITED STATES TREASURY NOTE	2.50%	02/28/2026	291,000	289,488	275,188
UNITED STATES TREASURY NOTE	2.25%	03/31/2026	250,000	246,416	234,600
UNITED STATES TREASURY NOTE	2.38%	04/30/2026	147,000	145,553	138,128
UNITED STATES TREASURY NOTE	1.63%	05/15/2026	495,000	491,879	455,671
UNITED STATES TREASURY NOTE	2.13%	05/31/2026	190,000	186,296	177,093
UNITED STATES TREASURY NOTE	2.13%	05/31/2026	636,000	599,779	592,797
UNITED STATES TREASURY NOTE	1.88%	06/30/2026	150,000	145,611	138,797
UNITED STATES TREASURY NOTE	0.88%	06/30/2026	475,000	475,948	427,444
UNITED STATES TREASURY NOTE	1.88%	07/31/2026	392,000	371,634	361,758
UNITED STATES TREASURY NOTE	1.50%	08/15/2026	624,000	602,633	568,913
UNITED STATES TREASURY NOTE	0.88%	09/30/2026	94,000	92,423	83,895
UNITED STATES TREASURY NOTE	2.00%	11/15/2026	442,000	425,186	406,657
UNITED STATES TREASURY NOTE	2.00%	11/15/2026	370,000	358,197	340,414
UNITED STATES TREASURY NOTE	1.25%	12/31/2026	67,000	64,671	60,020
UNITED STATES TREASURY NOTE	1.50%	01/31/2027	335,000	318,787	301,683
UNITED STATES TREASURY NOTE	1.50%	01/31/2027	507,000	459,114	456,577
UNITED STATES TREASURY NOTE	2.25%	02/15/2027	616,000	599,819	568,573
UNITED STATES TREASURY NOTE	2.25%	02/15/2027	896,000	839,942	827,015
UNITED STATES TREASURY NOTE	2.50%	03/31/2027	388,000	379,725	360,476
UNITED STATES TREASURY NOTE	2.75%	04/30/2027	197,000	192,814	184,257
UNITED STATES TREASURY NOTE	2.38%	05/15/2027	500,000	495,645	461,211

**JACKSONVILLE MARITIME ASSOCIATION / INTERNATIONAL LONGSHOREMEN'S ASSOCIATION
PENSION FUND**

SCHEDULE OF U.S. GOVERNMENT SECURITIES

SEPTEMBER 30, 2023

EIN 82-3722523, PLAN NO. 001

FORM 5500, SCHEDULE H, LINE 4I - ASSETS HELD FOR INVESTMENT PURPOSES AT END OF YEAR

(a) NOT APPLICABLE

(b) ISSUER	(c) - DESCRIPTION U.S. GOVERNMENT SECURITIES			(d)	(e)
	INTEREST RATE	MATURITY DATE	PAR OR MATURITY VALUE - a	COST	CURRENT VALUE
UNITED STATES TREASURY NOTE	2.63%	05/31/2027	197,000	191,759	183,148
UNITED STATES TREASURY NOTE	2.25%	08/15/2027	350,000	348,315	319,936
UNITED STATES TREASURY NOTE	2.25%	11/15/2027	350,000	344,490	318,377
UNITED STATES TREASURY NOTE	2.88%	08/15/2028	1,448,000	1,379,503	1,337,251
UNITED STATES TREASURY NOTE	3.13%	11/15/2028	594,000	589,871	553,348
UNITED STATES TREASURY NOTE	2.63%	02/15/2029	491,000	493,955	444,317
UNITED STATES TREASURY NOTE	2.88%	04/30/2029	741,000	725,044	676,684
UNITED STATES TREASURY NOTE	3.25%	06/30/2029	1,426,000	1,379,278	1,325,456
UNITED STATES TREASURY NOTE	3.50%	01/31/2030	77,000	75,779	72,184
UNITED STATES TREASURY NOTE	2.88%	05/15/2032	744,000	697,648	653,034
UNITED STATES TREASURY NOTE	2.75%	08/15/2032	623,000	573,004	539,333
FHLMC 30 YR GOLD G61570	5.50%	06/01/2041	97,000	35,418	33,158
FEDERAL NATIONAL MTG ASSN POOL MA4587	2.50%	04/01/2042	65,000	57,879	48,277
FHLMC 20 YR GOLD RB5163	3.00%	05/01/2042	43,000	35,662	33,101
FEDERAL NATIONAL MTG ASSN POOL BM4681	5.50%	05/01/2044	221,000	84,958	79,503
FHLMC 30 YR GOLD G61653	5.00%	12/01/2044	96,000	29,040	27,077
FEDERAL +C2:C55NATIONAL MTG ASSN POOL AL9903	5.50%	02/01/2047	870,000	230,027	208,764
UNITED STATES TREASURY BOND	3.00%	05/15/2047	821,000	822,975	601,126
FEDERAL NATIONAL MTG ASSN POOL BM1948	6.00%	10/04/2047	317,000	100,266	92,769
FEDERAL NATIONAL MTG ASSN POOL BM3066	5.00%	11/01/2047	371,000	104,464	94,583
FEDERAL NATIONAL MTG ASSN POOL BM4414	6.00%	07/31/2048	50,000	18,628	17,533
FEDERAL NATIONAL MTG ASSN POOL BM4493	5.00%	08/31/2048	55,000	18,707	17,296
FEDERAL NATIONAL MTG ASSN POOL BM4495	6.00%	08/31/2048	234,000	91,082	85,344
UNITED STATES TREASURY BOND	3.00%	02/15/2049	84,000	68,169	61,248
UNITED STATES TREASURY BOND	2.00%	02/15/2050	164,000	155,770	95,466
UNITED STATES TREASURY BOND	2.38%	05/15/2051	163,000	114,784	103,148
FEDERAL NATIONAL MTG ASSN POOL MA4438	2.50%	10/01/2051	137,000	110,285	92,887
FEDERAL NATIONAL MTG ASSN POOL MA4512	2.50%	12/01/2051	4,000	2,975	2,842
FHLMC 30 YR GOLD RA6815	2.50%	02/01/2052	70,000	55,272	48,807
FEDERAL NATIONAL MTG ASSN POOL FS4377	3.00%	04/01/2052	192,000	168,341	155,746
FEDERAL NATIONAL MTG ASSN POOL MA4600	3.50%	05/01/2052	88,000	73,354	69,875
UNITED STATES TREASURY BOND	2.88%	05/15/2052	747,000	618,296	528,503
FEDERAL NATIONAL MTG ASSN POOL MA4656	4.50%	07/01/2052	92,000	83,879	78,123
FEDERAL NATIONAL MTG ASSN POOL MA4732	4.00%	09/01/2052	40,000	36,011	33,724
FHLMC 30 YR GOLD SD8267	5.00%	11/01/2052	56,000	52,166	49,767
FEDERAL NATIONAL MTG ASSN POOL MA4842	5.50%	12/01/2052	56,000	52,773	50,695
			<u>\$ 26,764,000</u>	<u>\$ 24,216,954</u>	<u>\$ 22,822,364</u>

a - REPRESENTS MATURITY VALUE OF ZERO COUPON BONDS

**JACKSONVILLE MARITIME ASSOCIATION / INTERNATIONAL LONGSHOREMEN'S ASSOCIATION
PENSION FUND**

SCHEDULE OF CORPORATE DEBT INSTRUMENTS - PREFERRED

SEPTEMBER 30, 2023

EIN 82-3722523, PLAN NO. 001

FORM 5500, SCHEDULE H, LINE 4I - ASSETS HELD FOR INVESTMENT PURPOSES AT END OF YEAR

(a) NOT APPLICABLE

(b)	(c) - DESCRIPTION CORPORATE DEBT INSTRUMENTS - PREFERRED			(d)	(e)
ISSUER	INTEREST RATE	MATURITY DATE	PAR OR MATURITY VALUE	COST	CURRENT VALUE
TORONTO-DOMINION BANK/THE	0.75%	01/06/2026	\$ 286,000	\$ 255,509	\$ 255,495
VISA INC	1.90%	04/15/2027	186,000	170,018	166,877
AMAZON.COM INC	1.65%	05/12/2028	393,000	379,749	338,391
PFIZER INVESTMENT ENTERPRISES PTE LTD	4.45%	05/19/2028	172,000	171,883	166,045
PEPSICO INC	1.63%	05/01/2030	205,000	170,133	164,636
AMAZON.COM INC	1.50%	06/03/2030	69,000	68,631	54,695
APPLE INC	1.70%	08/05/2031	69,000	66,599	54,306
BRISTOL-MYERS SQUIBB CO	2.95%	03/15/2032	192,000	169,742	160,567
UNITEDHEALTH GROUP INC	2.75%	05/15/2040	75,000	71,177	50,968
WALMART INC	2.50%	09/22/2041	473,000	437,109	316,257
			<u>\$ 2,120,000</u>	<u>\$ 1,960,550</u>	<u>\$ 1,728,237</u>

**JACKSONVILLE MARITIME ASSOCIATION / INTERNATIONAL LONGSHOREMEN'S ASSOCIATION
PENSION FUND**

SCHEDULE OF CORPORATE DEBT INSTRUMENTS - OTHER

SEPTEMBER 30, 2023

EIN 82-3722523, PLAN NO. 001

FORM 5500, SCHEDULE H, LINE 4I - ASSETS HELD FOR INVESTMENT PURPOSES AT END OF YEAR

(a) NOT APPLICABLE

(b)	(c) - DESCRIPTION			(d)	(e)
	CORPORATE DEBT INSTRUMENTS - OTHER				
ISSUER	INTEREST RATE	MATURITY DATE	PAR OR MATURITY VALUE	COST	CURRENT VALUE
ABBVIE INC	3.75%	11/14/2023	\$ 172,000	\$ 170,643	\$ 171,578
HONDA MOTOR CO LTD	2.27%	03/10/2025	179,000	170,442	170,811
MCDONALD'S CORP	3.30%	07/01/2025	174,000	168,660	167,636
COMCAST CORP	3.95%	10/15/2025	173,000	169,751	167,914
WALT DISNEY CO/THE	1.75%	01/13/2026	183,000	169,489	168,596
ORACLE CORP	1.65%	03/25/2026	187,000	169,733	169,398
JPMORGAN CHASE & CO	3.30%	04/01/2026	360,000	358,732	339,874
WELLS FARGO & CO	3.00%	10/23/2026	371,000	368,115	340,582
BANK OF MONTREAL	0.95%	01/22/2027	191,000	170,438	170,571
GOLDMAN SACHS GROUP INC/THE	3.85%	01/26/2027	361,000	361,485	338,743
CVS HEALTH CORP	1.30%	08/21/2027	297,000	255,186	252,383
LOCKHEED MARTIN CORP	5.10%	11/15/2027	166,000	170,997	165,129
AT&T INC	1.65%	02/01/2028	295,000	255,398	249,089
CVS HEALTH CORP	4.30%	03/25/2028	58,000	62,895	54,915
CITIGROUP INC	3.67%	07/24/2028	59,000	60,495	54,136
JPMORGAN CHASE & CO	4.20%	07/23/2029	77,000	81,025	71,290
ENTERPRISE PRODUCTS OPERATING LLC	2.80%	01/31/2030	42,000	42,663	35,678
GOLDMAN SACHS GROUP INC/THE	2.60%	02/07/2030	65,000	66,480	53,263
BANK OF AMERICA CORP	2.88%	10/22/2030	402,000	395,143	335,037
COMCAST CORP	1.95%	01/15/2031	68,000	66,585	53,237
WELLS FARGO & CO	2.57%	02/11/2031	44,000	44,460	35,586
BANK OF AMERICA CORP	2.50%	02/13/2031	68,000	67,425	54,628
VERIZON COMMUNICATIONS INC	2.55%	03/21/2031	67,000	67,645	53,410
WASTE MANAGEMENT INC	4.88%	02/15/2034	352,000	339,981	332,787
			\$ 4,411,000	\$ 4,253,866	\$ 4,006,271

**JACKSONVILLE MARITIME ASSOCIATION / INTERNATIONAL LONGSHOREMEN'S ASSOCIATION
PENSION FUND**

SCHEDULE OF CORPORATE STOCK - COMMON

SEPTEMBER 30, 2023

EIN 82-3722523, PLAN NO. 001

FORM 5500, SCHEDULE H, LINE 4I - ASSETS HELD FOR INVESTMENT PURPOSES AT END OF YEAR

(a) NOT APPLICABLE

(b) ISSUER	(c) - DESCRIPTION COMMON STOCK	(d)	(e)
	NO. OF SHARES	COST	CURRENT VALUE
ABB LTD ADR	979	\$ 17,580	\$ 35,102
ABBOTT LABORATORIES	1,000	91,886	96,850
ABBVIE INC COM	788	116,973	117,459
ABBVIE INC COM	1,662	188,290	247,738
ACCENTURE PLC IRELAND CL A	239	79,172	73,399
ACCENTURE PLC IRELAND CL A	522	111,066	160,311
ACCENTURE PLC IRELAND CL A	450	72,568	138,200
ACUITY BRANDS INC	257	33,468	43,770
ACV AUCTIONS CL A	1,941	34,677	29,464
ADOBE INC	193	11,328	98,411
ADVANCED MICRO DEVICES	1,530	135,690	157,315
ADVANCED MICRO DEVICES	1,022	118,868	105,082
ADYEN N V UNSPONSRED ADR	1,269	20,662	9,482
AIA GROUP LTD SPON ADR	1,132	46,567	36,915
AIA GROUP LTD SPON ADR	1,672	58,677	54,524
AIA GROUP LTD SPON ADR	2,170	95,327	70,764
AIR LIQUIDE ADR	1,776	49,906	60,111
AIRBNB INC CL A	441	58,970	60,510
AIRBUS SE UNSPONSORED ADR	1,273	35,241	42,786
AIRBUS SE UNSPONSORED ADR	1,913	51,591	64,296
AKZO NOBEL NV ADR	1,372	45,639	33,159
ALARM COM HLDGS INC COM	1,074	75,851	65,664
ALCON INC	838	53,727	64,576
ALIBABA GROUP HLDG LTD	806	83,997	69,912
ALIGN TECHNOLOGY	172	42,066	52,515
ALPHABET INC CL A	2,091	172,426	273,628
ALPHABET INC CL C	2,040	73,319	268,974
ALPHABET INC CL C	1,870	162,088	246,560
AMADEUS IT GROUP S.A ADR	993	69,438	60,220
AMAZON COM INC	3,128	167,716	397,631
AMAZON COM INC	4,537	506,142	576,743
AMEREN CORP (HLDG CO)	768	45,728	57,469
AMERICA MOVIL SAB DE CV ADR	764	16,472	13,232
AMERICAN ELEC PWR CO INC	986	77,756	74,167
AMERICAN EXPRESS CO	1,046	172,071	156,053
AMERICAN HOMES 4 RENT CL A	1,268	24,031	42,719
AMERICAN TOWER CORP	285	66,817	46,868
AMERIPRISE FINCL INC	262	13,861	86,376
AMETEK INC NEW	429	18,404	63,389
AMN HEALTHCARE SVCS INC	323	19,207	27,513
AMPHENOL CORP NEW CL A	554	6,439	46,530
ANALOG DEVICES INC	397	60,208	69,511
ANALOG DEVICES INC	987	124,873	172,814
ANGLO AMERN PLC SPONSORED ADR	1,417	30,251	19,591
ANGLO AMERN PLC SPONSORED ADR	1,798	35,488	24,859
ANSYS INC	397	126,384	118,127
AON PLC CL A	235	33,383	76,192
AON PLC CL A	695	141,934	225,333
APPLE INC	1,467	38,316	251,165
APPLE INC	2,759	423,796	472,368
ARCH CAPITAL GROUP LTD	891	38,934	71,022
ARGENX SE ADR	80	40,701	39,204
ARM HOLDINGS PLC ADR	362	23,529	19,374
ASE TECHNOLOGY HLDG CO LTD ADR	9,533	71,896	71,688

**JACKSONVILLE MARITIME ASSOCIATION / INTERNATIONAL LONGSHOREMEN'S ASSOCIATION
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EIN 82-3722523, PLAN NO. 001

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(a) NOT APPLICABLE

(b)	(c) - DESCRIPTION COMMON STOCK	(d)	(e)
ISSUER	NO. OF SHARES	COST	CURRENT VALUE
ASICS CORP ADR	874	15,640	30,591
ASM INTERNATIONAL NV	95	33,752	39,788
ASML HOLDING NV NY REG NEW	162	79,096	95,363
ASML HOLDING NV NY REG NEW	125	74,387	73,583
ASML HOLDING NV NY REG NEW	248	100,239	145,988
ASTRAZENECA PLC ADR	916	63,570	62,032
ASTRAZENECA PLC ADR	1,107	78,545	74,966
AT&T INC	8,238	121,254	123,735
ATLAS COPCO AS A ADR A NEW	3,286	43,014	44,538
ATLASSIAN CORPORATION CL A	579	101,421	116,674
AUTOMATIC DATA PROCESSING INC	451	52,609	108,502
AUTOZONE INC	21	7,732	54,394
AVALONBAY COMM INC	224	30,968	38,470
AVALONBAY COMM INC	343	72,051	58,907
AVERY DENNISON CORPORATION	388	50,575	70,876
BALL CORP	530	26,397	26,383
BANCO DO BRASIL SA SPON ADR	4,816	41,347	45,463
BANDAI NAMCO HLDGS INC ADR	2,097	25,346	21,375
BANK OF AMERICA CORP	4,174	96,248	114,284
BATH & BODY WORKS INC	864	41,457	29,203
BDO UNIBANK INC SPON ADR	1,633	40,614	40,957
BECTON DICKINSON & CO	573	143,918	148,138
BERKLEY W R CORP	668	9,921	42,411
BEST BUY CO	314	11,182	21,814
BID CORP LTD SPONSORED ADR	818	17,885	18,334
BIDVEST GROUP LTD SPONS ADR	921	27,442	26,671
BIO-TECHNE CORP	1,160	87,505	78,961
BLACKLINE INC	782	84,179	43,378
BLACKROCK INC	168	75,542	108,610
BLACKSTONE INC	466	34,682	49,927
BOEING CO	161	34,095	30,860
BOOZ ALLEN HAMILTON HLDG CL-A	480	44,369	52,450
BOSTON PROPERTIES INC	488	48,800	29,026
BOSTON SCIENTIFIC CORP	688	26,407	36,326
BOSTON SCIENTIFIC CORP	2,039	105,732	107,659
BP PLC ADS	1,563	39,890	60,519
BRAMBLES LTD SPONSORED ADR	2,446	40,876	45,212
BRISTOL MYERS SQUIBB CO	1,714	95,330	99,481
BRIXMOR PPTY GROUP INC	1,148	19,484	23,855
BROADCOM INC	152	86,454	126,248
BROADCOM INC	221	191,185	183,558
BROADCOM INC	367	92,232	304,823
BUREAU VERITAS SA ADR	798	48,322	39,726
CADENCE DESIGN SYSTEM	286	57,087	67,010
CANADIAN PACIFIC KANSAS CITY	1,192	84,309	88,697
CAPGEMINI S E UNSPONSORED ADR	807	29,531	28,332
CAPITEC BANK HOLDINGS LTD ADR	932	35,700	42,454
CARLISLE CO INC	196	9,159	50,815
CARLSBERG AS	1,288	30,063	32,602
CARTER'S	559	43,899	38,655
CATERPILLAR INC	402	113,468	109,746
CBRE GROUP INC CL A	585	22,380	43,208
CDW CORPORATION	350	30,864	70,616
CELANESE CORP SERIES A COM STK	147	14,595	18,451

**JACKSONVILLE MARITIME ASSOCIATION / INTERNATIONAL LONGSHOREMEN'S ASSOCIATION
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EIN 82-3722523, PLAN NO. 001

FORM 5500, SCHEDULE H, LINE 4I - ASSETS HELD FOR INVESTMENT PURPOSES AT END OF YEAR

(a) NOT APPLICABLE

(b)	(c) - DESCRIPTION COMMON STOCK	(d)	(e)
ISSUER	NO. OF SHARES	COST	CURRENT VALUE
CELLNEX TELECOM SA UNS ADR	1,455	43,133	25,396
CEMEX SAB DE CV	3,566	25,973	23,179
CENCORA INC	414	22,455	74,508
CENTRAIS ELEC BRAS SP ADR CM	3,347	29,344	24,467
CERTARA INC	1,876	65,718	27,277
CHARLES RIVER LABS INTL INC	295	75,864	57,814
CHEVRON CORP	1,714	177,927	289,015
CHINA MENGNIU DAIRY CO LTD ADR	450	28,780	15,083
CHIPOTLE MEXICAN GRILL INC COM	79	48,575	144,848
CHUBB LTD	808	96,179	168,209
CHUBB LTD	851	108,985	177,161
CISCO SYS INC	5,454	219,242	293,207
CITIGROUP INC NEW	2,140	108,146	88,018
CME GROUP INC	747	125,834	149,564
CMS ENERGY CP	1,295	40,687	68,777
CMS ENERGY CP	859	42,024	45,621
COCA COLA CO	2,631	143,041	147,283
COCA-COLA EUROPACIFIC PARTNERS	502	28,087	31,624
COGNEX CORP	1,055	69,077	44,774
COMCAST CORP (NEW) CLASS A	6,143	247,959	272,381
COMCAST CORP (NEW) CLASS A	6,301	216,536	279,386
COMPAGNIE FIN RICHEMONTAG ADR	2,914	39,702	35,676
COMPASS GROUP PLC SPD ADR	2,172	45,707	53,021
COMPASS GROUP PLC SPD ADR	1,402	28,638	34,224
COMPUTERSHARE LTD SPN ADR	1,819	29,772	30,477
CONOCOPHILLIPS	2,242	154,610	268,592
CONOCOPHILLIPS	850	50,915	101,830
CONSTELLATION BRANDS INC CL A	148	12,742	37,197
CONTL AG SPONS ADR	5,059	44,345	35,757
COSTAR GROUP INC	1,516	127,270	116,565
COSTCO WHOLESALE CORP NEW	197	43,401	111,297
COSTCO WHOLESALE CORP NEW	164	72,112	92,653
COTERRA ENERGY INC	1,720	31,654	46,526
COVESTRO AG SPONSORED ADR	762	17,459	20,597
CRH PLC	934	38,164	51,118
CROWDSTRIKE HLDGS INC CL A	255	14,560	42,682
CUMMINS INC	424	69,281	96,867
DAIICHI SANKYO CO LTD SPON ADR	2,419	73,520	66,561
DAIKIN INDS LTD UNSPON ADR	2,191	40,632	34,467
DAIWA HOUSE IND LTD ADR	1,027	35,764	27,632
DARDEN RESTAURANTS	230	23,473	32,941
DBS GROUP HOLDINGS LTD SP	251	17,473	24,745
DEFINITIVE HEALTHCARE CL A	1,578	40,257	12,608
DEUTSCHE BOERSE AG UNSPON ADR	3,768	64,722	65,307
DEUTSCHE TELEKOM AG ADR	4,309	82,010	90,640
DEXCOM INC	285	10,943	26,591
DEXCOM INC	405	38,283	37,787
DIAGEO PLC SPON ADR NEW	433	68,135	64,595
DIAGEO PLC SPON ADR NEW	795	130,834	118,598
DIAMONDBACK ENERGY INC	410	35,035	63,501
DISCO CORP ADR	1,552	15,617	28,684
DISCOVER FINCL SVCS	338	12,530	29,281
DOMINION ENERGY INC	2,825	188,856	126,193
DOVER CORP	349	50,742	48,689

**JACKSONVILLE MARITIME ASSOCIATION / INTERNATIONAL LONGSHOREMEN'S ASSOCIATION
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EIN 82-3722523, PLAN NO. 001

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(a) NOT APPLICABLE

(b)	(c) - DESCRIPTION COMMON STOCK	(d)	(e)
ISSUER	NO. OF SHARES	COST	CURRENT VALUE
DTE ENERGY COMPANY	394	28,081	39,116
DUKE ENERGY CORPORATION	2,005	176,225	176,961
DUPONT DE NEMOURS INC	1,728	130,560	128,892
EATON CORP PLC SHS	531	31,156	113,252
EATON CORP PLC SHS	774	77,838	165,079
EDENRED S A ADR	284	9,397	8,912
EDISON INTERNATIONAL	535	37,379	33,860
EDP ENERGIAS DE PORTGUAL SA	1,894	100,681	78,927
ELEVANCE HEALTH INC	310	155,220	134,980
ELI LILLY & CO	376	74,917	201,961
ELI LILLY & CO	236	111,355	126,763
ENERGIZER HLDGS INC	790	23,165	25,312
ENGIE SPONS ADR	4,576	61,929	70,397
ENTEGRIS INC	458	46,485	43,011
ENTERGY CORP NEW	782	87,881	72,335
EOG RESOURCES INC	1,346	81,066	170,619
ESSEX PROPERTY TRUST INC	90	20,780	19,088
ESSILORLUXOTTICA ADR	512	47,658	44,765
EVERSOURCE ENERGY COM	682	43,013	39,658
EXPEDIA GROUP INC	372	32,172	38,342
EXPONENT INC	607	50,660	51,959
EXXON MOBIL CORP	2,684	191,073	315,585
FASTENAL CO	2,191	104,908	119,716
FEDERAL RLTY INVT TR SH BEN	226	25,280	20,482
FIFTH 3RD BANCORP OHIO	1,850	25,283	46,861
FIRST CITIZ BANCSHARES A	40	36,598	55,824
FIVE BELOW	713	109,857	114,722
FIVE9 INC COM	418	61,853	26,877
FLEETCOR TECHNOLOGIES	99	24,968	25,373
FLOOR & DECOR HLDGS INC CL-A	715	61,102	64,708
FORTUNE BRANDS INNOVATIONS INC	914	38,094	56,814
FREEMPORT-MCMORAN CL-B	2,082	43,360	77,638
FREEMPORT-MCMORAN CL-B	560	18,823	20,882
FRESHPET INC	401	38,541	26,418
GALAXY ENTMT GROUP LTD ADR	874	28,720	26,308
GARTNER INC	292	75,443	100,334
GENL DYNAMICS CORP	730	165,382	161,308
GENUINE PARTS CO	229	19,143	33,063
GENUINE PARTS CO	380	62,182	54,864
GIVAUDAN SA ADR	677	53,523	44,314
GLOBANT S.A	600	110,729	118,710
GLOBE LIFE INC	290	32,749	31,532
GLOBUS MEDICAL INC A	422	24,690	20,952
GODADDY INC.	841	64,410	62,638
GODADDY INC.	483	34,853	35,974
GOLDMAN SACHS GRP INC	137	44,597	44,329
GRAND CANYON ED INC COM	852	72,419	99,582
GREEK ORGANISATION OF FOOTBALL	3,803	30,263	31,930
GRID DYNAMICS HLDGS CL A	2,359	62,638	28,733
GRUPO AEROPORTUARIO DEL	159	14,717	26,135
GRUPO FINANCIERO BANORTE SAB	944	25,332	39,673
GUIDEWIRE SOFTWARE INC	700	80,403	63,000
HALEON PLC ADR	7,155	52,278	59,601
HARTFORD FIN SERS GRP INC	794	22,276	56,303

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ISSUER	NO. OF SHARES	COST	CURRENT VALUE
HDFC BANK LTD ADR	1,629	59,363	96,127
HEICO CORP NEW	799	106,542	129,382
HENKEL KGAA PFD SHARS SPON ADR	1,174	21,614	20,885
HENRY SCHEIN INC	936	52,912	69,498
HILTON WORLDWIDE HLDGS INC	567	62,389	85,152
HIMAX TECHNOLOGIES INC.	4,195	28,137	24,499
HOME DEPOT INC	209	64,338	63,151
HOME DEPOT INC	844	150,758	255,023
HONEYWELL INTL INC	900	146,161	166,266
HONEYWELL INTL INC	940	126,864	173,656
HONG KONG EXCHANGES & CLEARING	1,387	52,625	51,818
HOST HOTELS & RESORTS INC	1,037	17,036	16,665
HOYA CORP SPONS ADR	341	36,483	35,020
HSBC HOLDINGS PLC SPON ADR NEW	1,704	51,391	67,240
HUBBELL INC	246	28,387	77,099
HUNTINGTON BANCSHARES	5,339	48,858	55,526
IAC INC NEW	367	34,044	18,493
IAC INC NEW	860	78,199	43,335
IBERDROLA SA SPON ADR	1,285	60,810	57,658
ICICI BANK LTD	2,933	61,922	67,811
ICON PLC	169	37,200	41,616
IDEX CORPORATION DELAWARE	207	14,770	43,060
IDEX LABS	247	102,767	108,006
ILL TOOL WORKS INC	576	102,306	132,659
ILL TOOL WORKS INC	296	73,335	68,172
IMCD GROUP N V ADR	247	17,826	15,691
INDUSTRIA DE DISENO TEXTIL IND	5,059	78,070	94,512
INDUSTRIAL & COML BK CHINA ADR	8,238	103,857	79,307
INFINEON TECHNOLOGIES AG	906	29,736	30,076
INFOSYS LIMITED ADR	4,414	47,236	75,524
INTESA SANPAOLO S.P.A. ADR	2,830	41,898	43,865
INTL BUSINESS MACHINES CORP	1,141	134,171	160,082
INTUITIVE SURGICAL INC	246	72,262	71,903
INTUITIVE SURGICAL INC	656	171,131	191,742
ITAU UNIBANCO MULTIPLE ADR	5,490	34,741	29,481
ITT INC	693	42,408	67,852
JABIL CIRCUIT INC	423	26,674	53,674
JACK HENRY & ASSOC INC	222	35,521	33,553
JAZZ PHARMACEUTICALS PLC	309	50,073	39,997
JD COM INC SPON ADR CL A	753	59,413	21,935
JOHNSON & JOHNSON	848	95,543	132,076
JOHNSON & JOHNSON	1,754	221,434	273,186
JPMORGAN CHASE & CO	2,002	185,807	290,330
JPMORGAN CHASE & CO	2,685	280,114	389,379
KASIKORNBANK PUB CO LTD UNSPON	1,944	30,262	26,907
KB FINANCIAL GRP INC SONS ADR	1,638	75,874	67,338
KBC GROUP NV UNSPONS ADR	974	32,221	30,493
KENVUE INC	6,456	149,743	129,636
KERING S A ADR NEW	1,164	70,341	53,226
KEURIG DR PEPPER INC COM	1,269	30,661	40,062
KIMCO REALTY CORP MD	1,754	36,930	30,853
KINSALE CAP GROUP INC	111	31,130	45,968
KKR & CO INC CL A	1,775	114,411	109,340
KLA CORPORATION	208	70,882	95,401

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ISSUER	NO. OF SHARES	COST	CURRENT VALUE
KLA CORPORATION	401	37,638	183,923
KORNIT DIGITAL LTD SHS	1,023	80,716	19,345
KOSMOS ENERGY LTD	3,314	22,528	27,109
KROGER CO	732	13,085	32,757
KT CORP SPON ADR	2,889	33,958	37,037
L OREAL CO ADR	800	59,185	66,608
L OREAL CO ADR	678	56,210	56,450
LABORATORY CP AMER HLDGS NEW	190	22,724	38,200
LAM RESEARCH CORPORATION	284	137,573	178,003
LAM RESEARCH CORPORATION	239	33,025	149,798
LEGRAND SA	1,971	41,167	36,436
LEGRAND SA	2,930	50,202	54,164
LIBERTY MEDIA COR SER C LBRT L	373	13,816	11,973
LIBERTY MEDIA COR SER C LBRT S	1,492	39,530	37,986
LINCOLN ELEC HLDGS INC	350	27,848	63,627
LINDE PLC	113	35,392	42,076
LINDE PLC	211	53,273	78,566
LINDE PLC	381	63,490	141,865
LINDE PLC	364	98,323	135,535
LKQ CORPORATION	1,176	47,171	58,224
LOCKHEED MARTIN CORP	284	77,885	116,145
LOEWS CORPORATION	1,423	55,090	90,090
LONDON STK EXCHANGE GROUP ADR	1,178	30,773	29,597
LONDON STK EXCHANGE GROUP ADR	4,948	131,408	124,319
LOWES COMPANIES INC	689	115,134	143,202
LULULEMON ATHLETICA INC	256	43,419	98,716
LULULEMON ATHLETICA INC	301	94,931	116,069
LVMH MOET HENNESSY LOUIS VUITT	723	90,873	109,678
LVMH MOET HENNESSY LOUIS VUITT	712	76,196	108,009
M&T BANK CORP	574	62,015	72,582
MARRIOTT INTL INC NEW CL A	208	29,141	40,884
MARRIOTT INTL INC NEW CL A	472	71,447	92,776
MARSH & MCLENNAN COS INC	831	94,163	158,139
MARSH & MCLENNAN COS INC	1,130	90,541	215,039
MARTIN MARIETTA MATERIALS	176	40,996	72,244
MASTERCARD INC CL A	396	35,755	156,780
MASTERCARD INC CL A	508	61,084	201,122
MC DONALDS CORP	395	106,625	104,059
MC DONALDS CORP	624	117,615	164,387
MCKESSON CORP	463	76,988	201,336
MEDPACE HOLDINGS INC.	177	24,800	42,857
MEDTRONIC PLC SHS	1,947	162,245	152,567
MERCADOLIBRE INC	51	31,081	64,662
MERCK & CO INC NEW COM	1,939	108,109	199,620
MERCK KGAA SPD ADR	1,107	32,824	37,071
META PLATFORMS INC CL A	690	146,411	207,145
META PLATFORMS INC CL A	1,202	276,110	360,852
MGIC INVT CORP	2,564	38,132	42,793
MICROCHIP TECHNOLOGY INC	465	39,484	36,293
MICROCHIP TECHNOLOGY INC	1,648	110,662	128,626
MICRON TECH INC	369	26,949	25,103
MICROSOFT CORP	1,338	141,463	422,474
MICROSOFT CORP	2,836	461,912	895,467
MICROSOFT CORP	1,191	121,763	376,058

**JACKSONVILLE MARITIME ASSOCIATION / INTERNATIONAL LONGSHOREMEN'S ASSOCIATION
PENSION FUND**

SCHEDULE OF CORPORATE STOCK - COMMON

SEPTEMBER 30, 2023

EIN 82-3722523, PLAN NO. 001

FORM 5500, SCHEDULE H, LINE 4I - ASSETS HELD FOR INVESTMENT PURPOSES AT END OF YEAR

(a) NOT APPLICABLE

(b)	(c) - DESCRIPTION COMMON STOCK	(d)	(e)
ISSUER	NO. OF SHARES	COST	CURRENT VALUE
MID AMER APART COMM INC	165	25,323	21,227
MIDDLEBY CORP DEL	426	45,020	54,528
MOBILEYE GLOBAL INC CL A	366	15,040	15,207
MOHAWK INDUSTRIES INC	288	28,069	24,713
MONDELEZ INTL INC COM	1,936	99,164	134,358
MONGODB INC CL A	179	71,107	61,909
MONOLITHIC PWR SYSTEMS INC	157	79,998	72,534
MONOTARO CO LTD ADR	1,166	28,673	12,505
MOODYS CORP	170	55,408	53,749
MOODYS CORP	274	26,724	86,631
MORGAN STANLEY	1,874	149,532	153,050
MORGAN STANLEY	1,607	155,207	131,244
MOTOROLA SOLUTIONS INC	139	18,747	37,841
MSCI INC COM	177	46,733	90,815
MTU AERO ENGINES AG	192	19,525	17,457
NASDAQ INC COM	2,385	99,360	115,887
NATL FUEL GAS CO	719	32,705	37,323
NEOGEN CORP	1,804	66,186	33,446
NESTLE SPON ADR REP REG SHR	1,235	102,257	140,051
NESTLE SPON ADR REP REG SHR	1,483	162,462	168,175
NETEASE.COM INC ADS	257	5,272	25,741
NETFLIX INC	222	62,841	83,827
NETFLIX INC	157	67,870	59,283
NEWELL BRANDS INC	2,682	46,267	24,218
NEXTERA ENERGY INC	1,295	54,253	74,191
NICE LTD ADR	177	51,509	30,090
NIKE INC B	451	33,425	43,125
NIKE INC B	621	59,685	59,380
NOMURA RESH INST LTD ADR	1,398	37,753	36,471
NORTHERN TRUST CORP	419	23,878	29,112
NORTHROP GRUMMAN CP(HLDG CO)	317	101,550	139,540
NORTHROP GRUMMAN CP(HLDG CO)	327	114,494	143,942
NOVO NORDISK A/S ADR	840	70,688	76,390
NOVO NORDISK A/S ADR	1,704	63,160	154,962
NOVO NORDISK A/S ADR	1,394	77,895	126,770
NVIDIA CORPORATION	1,019	71,215	443,255
NVIDIA CORPORATION	867	111,033	377,136
NXP SEMICONDUCTORS NV	425	46,361	84,966
OLYMPUS CORP ADR	5,008	93,416	65,159
O'REILLY AUTOMOTIVE INC NEW	123	101,952	111,790
O'REILLY AUTOMOTIVE INC NEW	109	94,688	99,066
ORTHOPEDIATRICS CORP	862	39,115	27,584
PACCAR INC	424	35,049	36,048
PACKAGING CORP AMER	377	41,908	57,888
PACKAGING CORP AMER	277	25,763	42,533
PARKER HANNIFIN CORP	303	103,688	118,025
PARKER HANNIFIN CORP	474	92,571	184,632
PAYCOM SOFTWARE INC	360	125,400	93,337
PAYLOCITY HOLDING CORPORATION	474	85,051	86,126
PEPSICO INC NC	522	70,736	88,448
PEPSICO INC NC	574	62,666	97,259
PERNOD RICARD SA ADR	766	33,673	25,604
PERNOD RICARD SA ADR	868	30,325	29,013
PETROLEO BRASILEIRO SA	2,951	40,493	44,235

**JACKSONVILLE MARITIME ASSOCIATION / INTERNATIONAL LONGSHOREMEN'S ASSOCIATION
PENSION FUND**

SCHEDULE OF CORPORATE STOCK - COMMON

SEPTEMBER 30, 2023

EIN 82-3722523, PLAN NO. 001

FORM 5500, SCHEDULE H, LINE 4I - ASSETS HELD FOR INVESTMENT PURPOSES AT END OF YEAR

(a) NOT APPLICABLE

(b)	(c) - DESCRIPTION COMMON STOCK	(d)	(e)
ISSUER	NO. OF SHARES	COST	CURRENT VALUE
PFIZER INC	6,401	283,313	212,321
PG&E CORP	3,699	64,080	59,665
PHILIP MORRIS INTL INC	1,660	133,929	153,683
PING AN INSURANCE ADR	3,007	60,955	34,439
PIONEER NATURAL RESOURCES CO	521	95,027	119,596
PNC FINL SVCS GP	624	79,587	76,608
PNC FINL SVCS GP	939	110,746	115,281
POST HOLDINGS INC	386	21,046	33,096
PPG INDUSTRIES INC	775	106,898	100,595
PRIVIA HEALTH GROUP INC	1,678	45,420	38,594
PROCTER & GAMBLE	1,694	164,105	247,087
PROGRESSIVE CORP OHIO	1,372	130,790	191,120
PROGYNY INC	1,259	52,033	42,831
PROLOGIS INC COM	1,906	225,096	213,872
PROLOGIS INC COM	474	56,272	53,188
PT ASTRA INTERNATIONAL TBK ADR	2,581	22,177	20,793
PT BK CENT ASIA TBK ADR	2,256	33,614	32,204
PT BK MANDIRI PERSERO TBK UNSP	2,414	16,423	37,644
PT TELEKOMUNIKASI INDONESIA	790	14,284	19,039
PUBLIC STORAGE	196	56,452	51,650
QUEST DIAGNOSTICS INC	276	39,779	33,633
R P M INC	613	52,032	58,119
RALPH LAUREN CORP CL A	412	35,466	47,829
RAYMOND JAMES FINCL INC	645	24,075	64,777
RAYONIER INCORPORATED	1,466	42,516	41,722
RB GLOBAL INC	1,646	104,524	102,875
RECRUIT HOLDINGS CO. LTD. ADR	2,933	19,075	18,117
RECRUIT HOLDINGS CO. LTD. ADR	4,524	42,807	27,945
REGENCY CTRS CORP	526	22,733	31,265
REGIONS FINANCIAL CORP NEW	3,651	50,283	62,797
RELX PLC SPONSORED ADR	2,572	60,383	86,676
RELX PLC SPONSORED ADR	1,949	53,520	65,681
RENASAS ELECTRONICS CORP ADR	3,351	21,598	25,662
RENTOKIL INITIAL PLC ADR	2,353	82,544	87,179
REPLIGEN CP	284	47,725	45,159
REXFORD INDL REALTY INC	413	22,001	20,382
ROCHE HOLDINGS ADR	1,956	91,923	66,367
ROLLINS INC	2,157	83,500	80,521
RYANAIR HLDGS PLC ADR	470	41,215	45,689
S&P GLOBAL INC COM	132	49,754	48,234
SAFRAN SA	2,004	72,417	78,843
SALESFORCE INC	519	60,498	105,243
SALESFORCE INC	839	177,139	170,132
SAMPO OYJ UNSPON ADR	1,851	48,699	40,156
SANDVIK AB SPONS ADR	1,195	23,655	22,174
SANDVIK AB SPONS ADR	1,464	27,491	27,166
SAP AG	268	37,651	34,658
SAP AG	731	88,817	94,533
SERVICENOW INC	159	77,988	88,875
SERVICENOW INC	512	228,120	286,188
SHELL PLC ADR	371	24,222	23,885
SHENZHOU INTL GROUP HLDGS LTD	2,103	24,831	20,138
SHERWIN WILLIAMS COMPANY OHIO	370	92,075	94,369
SHIMANO INC ADR	1,284	19,993	17,351

**JACKSONVILLE MARITIME ASSOCIATION / INTERNATIONAL LONGSHOREMEN'S ASSOCIATION
PENSION FUND**

SCHEDULE OF CORPORATE STOCK - COMMON

SEPTEMBER 30, 2023

EIN 82-3722523, PLAN NO. 001

FORM 5500, SCHEDULE H, LINE 4I - ASSETS HELD FOR INVESTMENT PURPOSES AT END OF YEAR

(a) NOT APPLICABLE

(b)	(c) - DESCRIPTION COMMON STOCK	(d)	(e)
ISSUER	NO. OF SHARES	COST	CURRENT VALUE
SHISEIDO LTD SPON ADR	1,190	82,437	41,867
SHOPIFY INC	266	14,408	14,516
SIEMENS HEALTHINEERS AG ADR	1,069	24,783	27,163
SILGAN HOLDINGS INC	1,033	26,572	44,533
SMC CORP JAPAN SPONSORED ADR	1,516	36,120	34,024
SNAP-ON INC	270	30,641	68,866
SNOWFLAKE INC CL A	382	113,851	58,358
SNOWFLAKE INC CL A	558	87,630	85,246
SOLAREDGE TECHNOLOGIES INC	90	27,133	11,693
SONY GROUP CORPORATION ADR	1,123	93,961	92,546
SOUTHERN CO	2,624	148,753	169,825
SOUTHERN CO	1,265	86,908	81,871
SOUTHWEST AIRLINES	598	20,650	16,188
SPS COMMERCE INC	345	43,700	58,860
SQUARESPACE INC CL A	683	20,758	19,787
STATE STREET CORP	824	67,460	55,175
STRAUMANN HLDG AG ADR	2,608	34,450	33,414
SUMITOMO MITSUI FINL GROUP INC	3,754	29,148	36,977
SUN COMMUNITIES INC	218	31,372	25,798
SUNCOR ENERGY INC	1,616	45,054	55,558
SUNCOR ENERGY INC	2,100	68,051	72,198
SUZUKI MTR CORP ADR	170	33,723	27,414
SYNOPSYS INC	289	105,768	132,642
T ROWE PRICE GROUP INC	283	16,186	29,678
TAIWAN SMCNDCR MFG CO LTD ADR	2,070	32,743	179,883
TAKE TWO INTERACTIVE SOFTWARE	232	25,811	32,570
TAPESTRY INC	1,010	40,862	29,038
TARGET CORPORATION	1,160	173,977	128,261
TECHTRONIC IND LTD SPONS ADR	599	11,264	29,063
TELEDYNE TECH INC	161	63,060	65,781
TENCENT HLDGS LTD UNSPON ADR	3,692	102,412	142,770
TENCENT HLDGS LTD UNSPON ADR	1,004	46,860	38,825
TESLA INC	1,005	22,508	251,471
TESLA INC	151	25,986	37,783
TEXAS INSTRUMENTS	982	126,108	156,148
TEXAS INSTRUMENTS	613	58,386	97,473
THALES USDSPONSORD ADR	1,593	40,315	44,897
THE CIGNA GROUP	929	197,651	265,759
THE CIGNA GROUP	253	74,967	72,376
THE ENSIGN GROUP INC	624	59,244	57,988
THERMO FISHER SCIENTIFIC	210	81,800	106,296
THOMSON REUTERS CORP	453	36,281	55,411
TIMKEN CO	533	42,060	39,170
TJX COS INC NEW	681	42,312	60,527
TOAST INC CL A	2,217	49,175	41,524
TOKYO ELECTRON LTD UNSPON ADR	1,352	87,078	92,594
TRADE DESK INC CLASS A	408	10,141	31,885
TRANE TECHNOLOGIES PLC	540	41,571	109,571
TRIP COM GROUP LTD ADR	974	33,342	34,061
TYLER TECHNOLOGIES INC	296	121,828	114,297
UBER TECHNOLOGIES INC	2,570	75,376	118,194
UBER TECHNOLOGIES INC	2,833	104,040	130,290
ULTA BEAUTY INC	136	67,949	54,325
UNILEVER PLC (NEW) ADS	941	45,707	46,485

**JACKSONVILLE MARITIME ASSOCIATION / INTERNATIONAL LONGSHOREMEN'S ASSOCIATION
PENSION FUND**

SCHEDULE OF CORPORATE STOCK - COMMON

SEPTEMBER 30, 2023

EIN 82-3722523, PLAN NO. 001

FORM 5500, SCHEDULE H, LINE 4I - ASSETS HELD FOR INVESTMENT PURPOSES AT END OF YEAR

(a) NOT APPLICABLE

(b)	(c) - DESCRIPTION COMMON STOCK	(d)	(e)
ISSUER	NO. OF SHARES	COST	CURRENT VALUE
UNILEVER PLC (NEW) ADS	1,095	58,989	54,093
UNION PACIFIC CORP	997	191,986	203,019
UNION PACIFIC CORP	931	118,431	189,580
UNITED PARCEL SER INC CL-B	1,045	129,018	162,884
UNITEDHEALTH GP INC	144	58,968	72,603
UNITEDHEALTH GP INC	206	23,447	103,863
UNITEDHEALTH GP INC	332	75,440	167,391
UNIVERSAL HEALTH SERVICES B	176	20,637	22,128
UNIVERSAL MUSIC GROUP NV ADR	3,099	33,890	40,569
US FOODS HOLDING CORP	1,202	41,056	47,719
VALERO ENERGY CP DELA NEW	924	80,089	130,940
VENTAS INC	419	26,329	17,652
VERISK ANALYTICS INC COM	188	38,531	44,413
VERTEX PHARMACEUTICALS	177	51,575	61,550
VERTEX PHARMACEUTICALS	414	133,316	143,964
VISA INC CL A	726	58,407	166,987
VISA INC CL A	585	11,552	134,556
VISA INC CL A	729	169,122	167,677
VONOVIA SE ADR	2,187	46,756	26,408
VOYA FINL INC	461	26,091	30,633
W P CAREY INC COM	429	29,582	23,200
WAL-MART DE MEXICO SA SPON ADR	725	25,681	27,442
WALMART INC	1,342	160,421	214,626
WASTE MGMT INC (DELA)	674	55,974	102,745
WATSCO INC	178	41,562	67,234
WEC ENERGY GROUP INC COM	896	48,841	72,173
WEC ENERGY GROUP INC COM	781	53,058	62,910
WELLS FARGO & CO NEW	2,986	137,217	122,008
WEST PHARMACEUTICAL SVCS INC	345	96,188	129,447
WEYERHAEUSER CO	1,563	44,974	47,922
WILLIAMS CO INC	2,040	53,747	68,728
WNS HOLDINGS LIMITED	610	51,329	41,761
WOLTERS KLUWER NV SPON ADR	152	7,545	18,451
WORKDAY INC CL A	762	157,377	163,716
WORKIVA INC CLASS A	902	64,605	91,409
WUXI BIOLOGICS CAYMAN INC ADR	1,169	20,405	13,628
XCEL ENERGY INC	1,056	31,796	60,424
YANDEX N.V. A	535	38,938	-
YUM CHINA HLDNGS	1,130	57,160	62,964
ZEBRA TECH CL-A	116	29,863	27,437
ZIMMER BIOMET HLDGS INC COM	432	48,836	48,479
ZOOMINFO TECHNO INC STK COM	907	31,569	14,875
ZOZO INC ADR	4,826	23,434	17,745
		\$ 35,941,674	\$ 45,853,100

**JACKSONVILLE MARITIME ASSOCIATION / INTERNATIONAL LONGSHOREMEN'S ASSOCIATION
PENSION FUND**

SCHEDULE OF REGISTERED INVESTMENT COMPANIES

SEPTEMBER 30, 2023

EIN 82-3722523, PLAN NO. 001

FORM 5500, SCHEDULE H, LINE 4I - ASSETS HELD FOR INVESTMENT PURPOSES AT END OF YEAR

(a) NOT APPLICABLE

(b)	(c) - DESCRIPTION REGISTERED INVESTMENT COMPANIES	(d)	(e)
ISSUER	NO. OF SHARES	COST	CURRENT VALUE
JPMORGAN HEDGED EQUITY 2 I	645,737	\$ 10,925,600	\$ 9,841,033
PIA BBB BOND FD-COMPLETION SH	393,882	3,688,869	3,103,789
PIA MBS BOND-COMPLETION SH	41,425	347,592	327,669
WA SMASH SRS CR CMPLTN FUND	112,385	1,019,300	664,195
WESTERN ASSET SMASH SERIES C	67,486	595,891	581,729
WESTERN ASSET SMASH SERIES M	63,103	665,642	464,438
		<u>\$ 17,242,894</u>	<u>\$ 14,982,853</u>

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	and ending
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	B Three-digit plan number (PN)
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF	D Employer Identification Number (EIN)

E Type of plan:	(1) Multiemployer Defined Benefit	(2) Money Purchase (see instructions)
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1a Enter the valuation date: Month Day Year	
b Assets	
(1) Current value of assets	1b(1)
(2) Actuarial value of assets for funding standard account	1b(2)
c (1) Accrued liability for plan using immediate gain methods	1c(1)
(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)
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)
(b) Expected increase in current liability due to benefits accruing during the plan year	1d(2)(b)
(c) Expected release from "RPA '94" current liability for the plan year	1d(2)(c)
(3) Expected plan disbursements for the plan year	1d(3)

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

SIGN HERE	Signature of actuary	Date
	Type or print name of actuary	Most recent enrollment number
	Firm name	Telephone number (including area code)
	Address of the firm	

2 Operational information as of beginning of this plan year:

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

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
Totals ▶			3(b)		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	%
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	
c Is the plan making the scheduled progress under any applicable funding improvement or rehabilitation plan? ☐ Yes ☐ No		
d If the plan is in critical status or critical and declining status, were any benefits reduced (see instructions)? ☐ Yes ☐ No		
e If line d is "Yes," enter the reduction in liability resulting from the reduction in benefits (see instructions), measured as of the valuation date	4e	
f If the plan is in critical status or critical and declining status, and is: • Projected to emerge from critical status within 30 years, enter the plan year in which it is projected to emerge; • Projected to become insolvent within 30 years, enter the plan year in which insolvency is expected and check here..... ☐ • Neither projected to emerge from critical status nor become insolvent within 30 years, enter "9999."	4f	

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

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

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

6 Checklist of certain actuarial assumptions:

a Interest rate for "RPA '94" current liability	6a	%
	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)	
(2) Females	6c(2)	
d Valuation liability interest rate	6d	%
e Salary scale	6e	% ☐ N/A
f Withdrawal liability interest rate:		
(1) Type of interest rate	6f(1)	☐ Single rate ☐ ERISA 4044 ☐ Other ☐ N/A
(2) If "Single rate" is checked in (1), enter applicable single rate	6f(2)	%
g Estimated investment return on actuarial value of assets for year ending on the valuation date	6g	%
h Estimated investment return on current value of assets for year ending on the valuation date	6h	%
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)	
(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

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	

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)**9c(2)****9c(3)****d** Interest as applicable on lines 9a, 9b, and 9c.....**9d****e** Total charges. Add lines 9a through 9d.....**9e****Credits to funding standard account:****f** Prior year credit balance, if any.....**9f****g** Employer contributions. Total from column (b) of line 3.....**9g**

Outstanding balance

h Amortization credits as of valuation date.....**9h****i** Interest as applicable to end of plan year on lines 9f, 9g, and 9h**9i****j** Full funding limitation (FFL) and credits:**(1)** ERISA FFL (accrued liability FFL).....**9j(1)****(2)** "RPA '94" override (90% current liability FFL)**9j(2)****(3)** FFL credit**9j(3)****k (1)** Waived funding deficiency**9k(1)****(2)** Other credits**9k(2)****l** Total credits. Add lines 9f through 9i, 9j(3), 9k(1), and 9k(2)**9l****m** Credit balance: If line 9l is greater than line 9e, enter the difference**9m****n** Funding deficiency: If line 9e is greater than line 9l, enter the difference**9n****o** Current year's accumulated reconciliation account:**(1)** Due to waived funding deficiency accumulated prior to the 2022 plan year**9o(1)****(2)** Due to amortization bases extended and amortized using the interest rate under section 6621(b) of the Code:**(a)** Reconciliation outstanding balance as of valuation date**9o(2)(a)****(b)** Reconciliation amount (line 9c(3) balance minus line 9o(2)(a))**9o(2)(b)****(3)** Total as of valuation date**9o(3)****10** Contribution necessary to avoid an accumulated funding deficiency. (see instructions.).....**10****11** Has a change been made in the actuarial assumptions for the current plan year? If "Yes," see instructions☐ Yes ☐ No