

Form 5500 Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Annual Return/Report of Employee Benefit Plan This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6057(b) and 6058(a) of the Internal Revenue Code (the Code). ▶ Complete all entries in accordance with the instructions to the Form 5500.	OMB Nos. 1210-0110 1210-0089 2022 This Form is Open to Public Inspection
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Part I	Annual Report Identification Information
For calendar plan year 2022 or fiscal plan year beginning 01/01/2022 and ending 12/31/2022	
A	This return/report is for: ☒ a multiemployer plan ☐ a multiple-employer plan (Filers checking this box must attach a list of participating employer information in accordance with the form instructions.) ☐ a single-employer plan ☐ a DFE (specify) _____
B	This return/report is: ☐ the first return/report ☐ the final return/report ☒ an amended return/report ☐ a short plan year return/report (less than 12 months)
C	If the plan is a collectively-bargained plan, check here. ☒
D	Check box if filing under: ☒ Form 5558 ☐ automatic extension ☐ the DFVC program ☐ special extension (enter description)
E	If this is a retroactively adopted plan permitted by SECURE Act section 201, check here. ☐

Part II	Basic Plan Information—enter all requested information		
1a	Name of plan OPERATING ENGINEERS LOCAL 112 DEFINED CONTRIBUTION PENSION PLAN	1b	Three-digit plan number (PN) ▶ 001
		1c	Effective date of plan 12/14/2012
2a	Plan sponsor's name (employer, if for a single-employer plan) Mailing address (include room, apt., suite no. and street, or P.O. Box) City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions) BOARD OF TRUSTEES OPERATING ENGINEERS 112 DEFINED CONTRIBUTION PENSION 2716 S RANGELINE ROAD ANDERSON, IN 46017-0000	2b	Employer Identification Number (EIN) 46-1563622
		2c	Plan Sponsor's telephone number 765-643-5112
		2d	Business code (see instructions) 238900

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.	05/07/2024	RANDALL HUGHES
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	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 1348
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) 1151
a(2) Total number of active participants at the end of the plan year		6a(2) 1166
b Retired or separated participants receiving benefits		6b 21
c Other retired or separated participants entitled to future benefits.....		6c 190
d Subtotal. Add lines 6a(2) , 6b , and 6c		6d 1377
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.		6e 2
f Total. Add lines 6d and 6e		6f 1379
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item).....		6g 1201
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 10
8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions: 2E		
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) ☐ 0 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 C (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Service Provider Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110
		2022
		This Form is Open to Public Inspection.

For calendar plan year 2022 or fiscal plan year beginning 01/01/2022 and ending 12/31/2022		
A Name of plan OPERATING ENGINEERS LOCAL 112 DEFINED CONTRIBUTION PENSION PLAN	B Three-digit plan number (PN) ▶	001
C Plan sponsor's name as shown on line 2a of Form 5500 BOARD OF TRUSTEES OPERATING ENGINEERS 112 DEFINED CONTRIBUTION PENSION	D Employer Identification Number (EIN) 46-1563622	

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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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)

IUOE LOCAL 112

45-0546196

(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?
14	NONE	58967	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

JOHNSON INVESTMENT COUNSEL

3777 WEST FORK ROAD
CINCINNATI, OH 45247

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
51	NONE	41381	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

MILLIMAN

91-0675641

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
15 38 64	NONE	33463	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)

THE SEGAL COMPANY

13-1975125

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
23	NONE	31398	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

SEIX INVESTMENT ADVISORS

1 MAYNARD DR #3200
PARK RIDGE, NJ 07656

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
51	NONE	27184	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

PENCHECKS TRUST COMPANY OF AMERICA

401 EAST 8TH STREET, SUITE 305
SIOUX FALLS, SD 57103

(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	NONE	26329	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)

CLIFTONLARSONALLEN LLP

41-0746749

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
10	NONE	21416	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

INVESTMENT CONSULTING SERVICES, LLC

32-0016703

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
51	NONE	14000	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

HAMMOND & SHINNERS PC

43-1164305

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
29	NONE	8872	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)

AMALGAMATED BANK

275 SEVENTH AVENUE
NEW YORK, NY 10001

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
19	NONE	8124	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 <u>01/01/2022</u> and ending <u>12/31/2022</u>		
A Name of plan <u>OPERATING ENGINEERS LOCAL 112 DEFINED CONTRIBUTION PENSION PLAN</u>	B Three-digit plan number (PN) ►	<u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>BOARD OF TRUSTEES OPERATING ENGINEERS 112 DEFINED CONTRIBUTION PENSION</u>	D Employer Identification Number (EIN) <u>46-1563622</u>	

Part I Asset and Liability Statement			
1 Current value of plan assets and liabilities at the beginning and end of the plan year. Combine the value of plan assets held in more than one trust. Report the value of the plan's interest in a commingled fund containing the assets of more than one plan on a line-by-line basis unless the value is reportable on lines 1c(9) through 1c(14). Do not enter the value of that portion of an insurance contract which guarantees, during this plan year, to pay a specific dollar benefit at a future date. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 1b(1), 1b(2), 1c(8), 1g, 1h, and 1i. CCTs, PSAs, and 103-12 IEs also do not complete lines 1d and 1e. See instructions.			
Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash.....	1a	3862068	2947441
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions.....	1b(1)	387400	314156
(2) Participant contributions.....	1b(2)		
(3) Other.....	1b(3)	166024	195445
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit).....	1c(1)	935105	713689
(2) U.S. Government securities	1c(2)	21260940	20813786
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)	14815734	11205964
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common.....	1c(4)(B)		
(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)	22675212	17679556
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)		
(15) Other	1c(15)		

1d Employer-related investments:		(a) Beginning of Year	(b) End of Year
(1) Employer securities	1d(1)		
(2) Employer real property	1d(2)		
e Buildings and other property used in plan operation	1e		
f Total assets (add all amounts in lines 1a through 1e)	1f	64102483	53870037

Liabilities

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

Net Assets

l Net assets (subtract line 1k from line 1f)	1l	64102483	53870037
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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)	4859491	
(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)		4859491
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	8021	
(B) U.S. Government securities	2b(1)(B)	306827	
(C) Corporate debt instruments	2b(1)(C)	436696	
(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)		751544
(2) Dividends: (A) Preferred stock	2b(2)(A)		
(B) Common stock	2b(2)(B)		
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	326343	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		326343
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)	26356674	
(B) Aggregate carrying amount (see instructions)	2b(4)(B)	27554971	
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)		-1198297
(5) Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)		
(B) Other	2b(5)(B)	-2630389	
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		-2630389

		(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)		-2992689
c Other income	2c		-1086
d Total income. Add all income amounts in column (b) and enter total	2d		-885083
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	9078557	
(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)		9078557
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)	165935	
(2) Contract administrator fees	2i(2)		
(3) Investment advisory and management fees	2i(3)	102871	
(4) Other	2i(4)		
(5) Total administrative expenses. Add lines 2i(1) through (4)	2i(5)		268806
j Total expenses. Add all expense amounts in column (b) and enter total	2j		9347363
Net Income and Reconciliation			
k Net income (loss). Subtract line 2j from line 2d	2k		-10232446
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: CLIFTONLARSONALLEN LLP

(2) EIN: 41-0746749

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.)		X	
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.)		X	
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.)		X	
4d		X	
e Was this plan covered by a fidelity bond?	X		4000000
4e	X		4000000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		X	
4f		X	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
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?		X	
4h		X	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	X		
4i	X		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.)	X		
4j	X		
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?		X	
4k		X	
l Has the plan failed to provide any benefit when due under the plan?		X	
4l		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)		X	
4m		X	
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.			
4n			

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

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

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

5c Was the plan a defined benefit plan covered under the PBGC insurance program at any time during this plan year? (See ERISA section 4021 and instructions.) ☐ Yes ☐ No ☐ Not determined

If "Yes" is checked, enter the My PAA confirmation number from the PBGC premium filing for this plan year _____.

**INTERNATIONAL UNION OF OPERATING ENGINEERS
LOCAL 112 DEFINED CONTRIBUTION PENSION PLAN**

**FINANCIAL STATEMENTS AND
ERISA-REQUIRED SUPPLEMENTAL SCHEDULES**

YEARS ENDED DECEMBER 31, 2022 AND 2021



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**INTERNATIONAL UNION OF OPERATING ENGINEERS LOCAL 112 DEFINED
CONTRIBUTION PENSION PLAN
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INDEPENDENT AUDITORS' REPORT

Board of Trustees
International Union of Operating Engineers Local 112 Defined
Contribution Pension Plan
Anderson, Indiana

Report on the Audit of the Financial Statements

Opinion

We have audited the accompanying financial statements of International Union of Operating Engineers Local 112 Defined Contribution Pension Plan, an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (ERISA), which comprise the statements of net assets available for benefits as of December 31, 2022 and 2021, and the related statement of changes in net assets available for benefits for the years then ended, and the related notes to the financial statements.

In our opinion, the financial statements referred to above present fairly, in all material respects, the net assets available for benefits of International Union of Operating Engineers Local 112 Defined Contribution Pension Plan as of December 31, 2022 and 2021, and the changes in its net assets available for benefits for the years then ended, in accordance with accounting principles generally accepted in the United States of America.

Basis for Opinion

We conducted our audits in accordance with auditing standards generally accepted in the United States of America (GAAS). Our responsibilities under those standards are further described in the Auditors' Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of International Union of Operating Engineers Local 112 Defined Contribution Pension Plan and to meet our other ethical responsibilities in accordance with the relevant ethical requirements relating to our audits. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

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 International Union of Operating Engineers Local 112 Defined Contribution Pension Plan's ability to continue as a going concern for one year after the date that the financial statements are available to be issued.

Board of Trustees
International Union of Operating Engineers Local 112 Defined
Contribution Pension Plan

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

Auditors' Responsibilities for the Audit of the Financial Statements

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

In performing an audit in accordance with GAAS, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of International Union of Operating Engineers Local 112 Defined Contribution Pension Plan's internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about International Union of Operating Engineers Local 112 Defined Contribution Pension Plan's ability to continue as a going concern for a reasonable period of time.

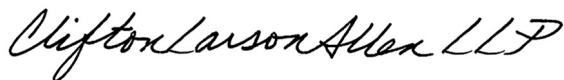
We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit, significant audit findings, and certain internal control related matters that we identified during the audit.

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 schedule of assets (held at end of year) and schedule of reportable transactions as of or for the year ended December 31, 2022 are presented for purposes of additional analysis and are not a required part of the financial statements but is supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information included in the supplemental schedules has been subjected to the auditing procedures applied in the audits of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with GAAS.

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

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



CliftonLarsonAllen LLP

Indianapolis, Indiana
April 24, 2024

**INTERNATIONAL UNION OF OPERATING ENGINEERS LOCAL 112 DEFINED
CONTRIBUTION PENSION PLAN
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
DECEMBER 31, 2022 AND 2021**

	<u>2022</u>	<u>2021</u>
ASSETS		
INVESTMENTS (at Fair Value)	\$ 50,412,995	\$ 59,686,991
RECEIVABLES		
Employer Contributions Receivable	314,156	387,400
Accrued Investment Income Receivable	<u>195,445</u>	<u>166,024</u>
Total Receivables	509,601	553,424
CASH - NONINTEREST-BEARING	<u>2,947,441</u>	<u>3,862,068</u>
Total Assets	<u>53,870,037</u>	<u>64,102,483</u>
NET ASSETS AVAILABLE FOR BENEFITS	<u><u>\$ 53,870,037</u></u>	<u><u>\$ 64,102,483</u></u>

See accompanying Notes to Financial Statements.

**INTERNATIONAL UNION OF OPERATING ENGINEERS LOCAL 112 DEFINED
CONTRIBUTION PENSION PLAN
STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
YEARS ENDED DECEMBER 31, 2022 AND 2021**

	<u>2022</u>	<u>2021</u>
ADDITIONS:		
INVESTMENT INCOME (LOSS)		
Interest, Dividends, and Other Investment Income	\$ 1,076,801	\$ 1,140,356
Net Appreciation (Depreciation) in Fair Value of Investments	<u>(6,821,375)</u>	<u>1,883,784</u>
Total Investment Income	(5,744,574)	3,024,140
Less: Custodial and Investment Fees	<u>(102,871)</u>	<u>(102,871)</u>
Net Investment Income	(5,847,445)	2,921,269
EMPLOYER CONTRIBUTIONS	<u>4,859,491</u>	<u>6,095,017</u>
Total Additions	(987,954)	9,016,286
DEDUCTIONS:		
BENEFITS PAID TO PARTICIPANTS	9,078,557	6,665,516
ADMINISTRATIVE EXPENSES	<u>165,935</u>	<u>187,625</u>
Total Deductions	<u>9,244,492</u>	<u>6,853,141</u>
NET INCREASE (DECREASE)	(10,232,446)	2,163,145
NET ASSETS AVAILABLE FOR BENEFITS:		
Beginning of Year	<u>64,102,483</u>	<u>61,939,338</u>
End of Year	<u><u>\$ 53,870,037</u></u>	<u><u>\$ 64,102,483</u></u>

See accompanying Notes to Financial Statements.

**INTERNATIONAL UNION OF OPERATING ENGINEERS LOCAL 112 DEFINED
CONTRIBUTION PENSION PLAN
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2022 AND 2021**

NOTE 1 DESCRIPTION OF THE PLAN

The following description of the International Union of Operating Engineers Local 112 Defined Contribution Pension Plan (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 is a defined contribution profit sharing plan established on January 1, 2013, for the benefit of eligible employees. The Plan has been amended throughout the years to comply with tax legislation and most recently amended effective April 20, 2020. The rights and benefits of participants shall be determined as provided in the Plan document.

The Plan is administered by a joint Board of Trustees consisting of representatives from the participating employers and from the employees represented by the International Union of Operating Engineers Local 112 (the Local). A participating employer is an employer that is required to pay contributions to the Plan pursuant to a collective bargaining agreement. A trust agreement dictates the duties and responsibilities of the Board of Trustees. The assets of the Plan shall be invested in accordance with the provisions of the trust agreement. The Plan is subject to ERISA.

Eligibility

A person shall become a participant in the Plan on the date for which he is paid as an employee under the collective bargaining agreement or other agreement with a participating employer.

Employer Contributions

Employers make contributions to the Plan on behalf of the participants at rates specified in the applicable collective bargaining agreements, for each hour worked. Rates vary based on each collective bargaining agreement. Employer contribution rates ranged from \$2.00 to \$5.10 and \$2.00 to \$4.80 per hour per member for 2022 and 2021, respectively. The Board of Trustees, in connection with participating employers, regularly evaluate contribution rates to ensure the Plan has adequate assets to satisfy Plan obligations.

Participant Accounts

A separate account has been established for each participant. Each participant's account is credited with the value of contributions made on the participant's behalf adjusted for investment earnings and Plan expenses.

As of December 31 (valuation date), the value of each participant's account is adjusted for a proportional share of the net investment income (loss), less administrative expenses. The amount allocated to each participant's account is based on the account balance as of the valuation date before adjustment for investment income and expenses. The benefit to which a participant is entitled is the benefit that can be provided by the participant's vested account.

**INTERNATIONAL UNION OF OPERATING ENGINEERS LOCAL 112 DEFINED
CONTRIBUTION PENSION PLAN
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2022 AND 2021**

NOTE 1 DESCRIPTION OF THE PLAN (CONTINUED)

Vesting

Participants are immediately and fully vested in their participant account.

Benefit Payments

A participant is entitled to a lump-sum payout upon complete withdrawal from employment within the collective bargaining jurisdiction of the Local or upon becoming totally and permanently disabled. If the terminated participant's account balance does not exceed \$1,000, the Board of Trustees will authorize the benefit payment without the participant's consent. If the balance of the terminated participant's account is between \$1,000 and \$5,000, the Board of Trustees may authorize that the benefit payment be rolled into an individual retirement account in the participant's name.

In the event a participant dies before receiving the amount in their participant account, their account shall be paid to their beneficiary in the form of a lump-sum payout.

NOTE 2 SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of Accounting

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

Use of Estimates

The preparation of financial statements in accordance with accounting principles generally accepted in the United States of America requires the Plan administrator to make estimates and assumptions that affect the reported amounts of assets and liabilities and changes therein, and disclosure of contingent assets and liabilities. Actual results could differ from those estimates.

Investment Valuation and Income Recognition

Investments are reported at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. The Plan's Board of Trustees determines the Plan's valuation policies utilizing information provided by its investment advisors. See Note 3 for a discussion of fair value measurements.

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

**INTERNATIONAL UNION OF OPERATING ENGINEERS LOCAL 112 DEFINED
CONTRIBUTION PENSION PLAN
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2022 AND 2021**

NOTE 2 SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

Employer Contributions Receivable

Employer contributions receivable represent employer contributions due to the Plan for hours worked prior to the end of the Plan year. Employer contributions receivable are carried at reported amounts less an estimate made for doubtful receivables. Management determines the allowance for doubtful accounts by regularly evaluating individual employer receivables and considering an employer's financial condition, payment history, and current economic conditions. Employer contributions receivable are written off against the allowance for doubtful accounts when deemed uncollectible. Employer contribution reports are required to be submitted monthly. Contributions are considered delinquent if not received within 15 days following the end of the month. Management has determined that no allowance for doubtful accounts is necessary at December 31, 2022 and 2021.

Benefit Payments

Benefit payments are recorded when paid.

Administrative Expenses

The Plan pays administrative expenses that consist primarily of administrative fees paid to the investment custodian and consultants. These expenses are reported on the statements of changes in net assets available for benefits as Administrative Expenses.

Subsequent Events

The Plan has evaluated subsequent events through April 24, 2024, the date the financial statements were available to be issued.

NOTE 3 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) and the lowest priority to unobservable inputs (Level 3). The three levels of the fair value hierarchy are described as follows:

Level 1 – Inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets that the Plan has the ability to access.

**INTERNATIONAL UNION OF OPERATING ENGINEERS LOCAL 112 DEFINED
CONTRIBUTION PENSION PLAN
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2022 AND 2021**

NOTE 3 FAIR VALUE MEASUREMENTS (CONTINUED)

Level 2 – Inputs other than quoted prices included within Level 1 that are observable for the asset or liability, either directly or indirectly, such as:

- quoted prices for similar assets or liabilities in active markets;
- quoted prices for identical or similar assets or liabilities in inactive markets;
- inputs other than quoted prices that are observable for the asset or liability;
- inputs that are derived principally from or corroborated by observable market data by correlation or other means.

If the asset or liability has a specified (contractual) term, the Level 2 input must be observable for substantially the full term of the asset or liability.

Level 3 – Inputs to the valuation methodology are unobservable and significant to the fair market value measurement.

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

Interest-Bearing Cash and Cash Equivalents: Valued at cost plus accrued interest, which approximates fair value.

Certificates of Deposit: Valued at amortized cost, which approximates fair value.

Corporate Bonds, Municipal Bonds, and United States Government and Agency Securities: 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 is available.

Registered Investment Companies: Valued at the daily closing price as reported by the fund. Funds held by the Plan are open-end mutual funds and exchange-traded funds that are registered with the Securities and Exchange Commission. These funds are required to publish their daily net asset value (NAV) and to transact at that price. The funds held by the Plan are deemed to be actively traded.

**INTERNATIONAL UNION OF OPERATING ENGINEERS LOCAL 112 DEFINED
CONTRIBUTION PENSION PLAN
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2022 AND 2021**

NOTE 3 FAIR VALUE MEASUREMENTS (CONTINUED)

The following tables set forth by level, within the fair value hierarchy, the Plan's assets at fair value as of December 31:

Fair Value Measurements at December 31, 2022				
	Total	Level 1	Level 2	Level 3
Interest-Bearing Cash and Cash Equivalents	\$ 249,363	\$ 249,363	\$ -	\$ -
Certificates of Deposit	464,326	-	464,326	-
United States Government and Agency Securities	20,575,373	-	20,575,373	-
Municipal Bonds	238,413	-	238,413	-
Corporate Bonds	11,205,964	-	11,205,964	-
Registered Investment Companies	17,679,556	17,679,556	-	-
Total Investments at Fair Value	<u>\$ 50,412,995</u>	<u>\$ 17,928,919</u>	<u>\$ 32,484,076</u>	<u>\$ -</u>

Fair Value Measurements at December 31, 2021				
	Total	Level 1	Level 2	Level 3
Interest-Bearing Cash and Cash Equivalents	\$ 449,296	\$ 449,296	\$ -	\$ -
Certificates of Deposit	485,809	-	485,809	-
United States Government and Agency Securities	20,965,365	-	20,965,365	-
Limited Liability Company	-	-	-	-
Municipal Bonds	295,575	-	295,575	-
Corporate Bonds	14,815,734	-	14,815,734	-
Registered Investment Companies	22,675,212	22,675,212	-	-
Total Investments at Fair Value	<u>\$ 59,686,991</u>	<u>\$ 23,124,508</u>	<u>\$ 36,562,483</u>	<u>\$ -</u>

NOTE 4 PLAN TERMINATION

Although it has not expressed any intention to do so, the Board of Trustees has the right under the Plan to terminate the Plan subject to the provisions of ERISA. In the event of termination of the Plan, the assets remaining, after providing for the expenses of the Plan and for the payment of any account balances theretofore approved, shall be distributed amongst the participants. Each affected participant will receive part of the total remaining assets in the same ratio as their account balance bears to the aggregate amount of the account balances of all participants. Distributions under this section shall be made as soon as administratively feasible after the Plan termination date. No assets of the Plan may revert to the participating employers or be used for purposes other than for the exclusive benefit of the Plan's participants.

**INTERNATIONAL UNION OF OPERATING ENGINEERS LOCAL 112 DEFINED
CONTRIBUTION PENSION PLAN
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2022 AND 2021**

NOTE 5 TAX STATUS

The Internal Revenue Service (IRS) has determined and informed the Plan that the Plan and related trust are designed in accordance with applicable sections of the Internal Revenue Code (IRC). The Plan has obtained a favorable tax determination from the IRS dated January 23, 2015. The Plan has been amended since receiving the determination letter. However, the Plan administrator believes that the Plan is designed, and is currently being operated, in compliance with the applicable requirements of the IRC and, therefore, believes that the Plan is qualified, and the related trust is tax-exempt.

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

NOTE 6 PARTY-IN-INTEREST TRANSACTIONS

As described in Notes 1 and 2, the Plan has several arrangements with service providers. These transactions qualify as party-in-interest transactions, which are exempt from the prohibited transaction rules of ERISA.

The Plan shares office and administrative services with the Local. The Plan is charged for its share of office and administrative expenses by the Local. The charges are based on a formula which allocates indirect expenses based on estimates of administrative staff time. Administrative expenses charged to the Plan by the Local were \$58,967 and \$57,303 in 2022 and 2021, respectively. There were no amounts of administrative expenses payable to the Local at December 31, 2022 and 2021, respectively.

NOTE 7 PARTICIPATING EMPLOYER CONCENTRATIONS

For the year ended December 31, 2022, the Plan has three major contributing employers which comprised approximately 74% of total contributions. For the year ended December 31, 2021, the Plan has two major contributing employers which comprised approximately 67% of total contributions. At December 31, 2022 and 2021, contributions receivable due from these employers were approximately \$230,000 and \$235,000, respectively.

NOTE 8 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 the investment securities will occur in the near term and that such changes could materially affect participants' account balances and the amounts reported in the statements of net assets available for benefits.

**INTERNATIONAL UNION OF OPERATING ENGINEERS LOCAL 112 DEFINED
CONTRIBUTION PENSION PLAN
E.I.N. 46-1563622 PLAN NO. 001
SCHEDULE H, LINE 4i—SCHEDULE OF ASSETS (HELD AT END OF YEAR)
DECEMBER 31, 2022**

Identity of Issue, Borrower	Description of Investment			Cost	Current Value
	Units/ Par Value	Interest Rate	Maturity Date		
Interest-Bearing Cash and Cash Equivalents:					
JPMORGAN 100% U.S. TREASURY MONEY MARKET	90,037	N/A	N/A	\$ 90,037	\$ 90,037
JPMORGAN 100% U.S. TREASURY MONEY MARKET	26,572	N/A	N/A	26,572	26,572
JPMORGAN 100% U.S. TREASURY MONEY MARKET	28,348	N/A	N/A	28,348	28,348
JPMORGAN 100% U.S. TREASURY MONEY MARKET	10,557	N/A	N/A	10,557	10,557
JPMORGAN 100% U.S. TREASURY MONEY MARKET	87,024	N/A	N/A	87,024	87,024
U.S. DOLLAR CURRENCY	6,825	N/A	N/A	6,825	6,826
Total Interest-Bearing Cash and Cash Equivalents				249,362	249,363
Certificates of Deposits:					
JP MORGAN CHASE BANK NA FLTG	245,000	N/A	12/4/2023	244,081	237,136
HSBC BANK USA NA	245,000	1.30%	05/07/25	244,081	227,190
Total Certificates of Deposits				488,162	464,326
Municipal Bonds					
OHIO ST	300,000	1.58%	08/01/30	300,000	238,413
Total Municipal Bonds				300,000	238,413
U.S. Government and Agency Securities:					
FHLMC GLD PL #C91370	523,329	4.50%	05/01/31	35,142	32,291
FHLMC GLD PL #C91385	2,450,000	4%	08/01/2031	199,397	181,666
FHLMC GLD PL #G05741	2,815,000	4.50%	12/01/2039	114,119	104,236
FHLMC GLD PL #G08720	698,000	4.50%	08/01/2046	137,238	125,213
FHLMC GLD PL #G16157	160,000	3.50%	04/01/2032	46,399	43,583
FHLMC GLD PL #G16303	250,000	4.50%	10/01/2028	30,451	27,929
FHLMC GLD PL #G18623	322,971	3%	12/01/2031	80,760	75,295
FHLMC GLD PL #J12250	280,000	4%	06/01/2025	3,848	3,530
FHLMC GLD PL #T61672	426,000	3.50%	08/01/2043	3,558	3,270
FHLMC GLD PL #U90690	250,000	3.50%	06/01/2042	45,320	40,922
FHLMC REMIC 3456 JB	920,000	5%	06/15/2028	37,260	33,627
FHLMC REMIC 3704 ED	185,000	4%	12/15/2036	9,197	8,717
FHLMC REMIC 3870 NL	1,200,000	3.50%	01/15/2041	30,242	28,135
FHLMC REMIC 3925 LD	240,000	2.50%	01/15/2041	8,894	8,424
FHLMC REMIC 4021 P 3	165,000	3%	03/15/2027	10,708	9,924
FHLMC REMIC 4150 BU	250,000	4%	02/15/2042	45,835	41,371
FHLMC REMIC 4171 NG	363,000	2%	06/15/2042	40,051	36,352
FHLMC REMIC 4316 JY	570,000	3%	01/15/2044	36,924	33,295
FHLMC REMIC 4390 CA	400,000	3.50%	06/15/2050	39,744	37,576
FNMA PL #AL3562 FLTG	63,000	FLTG	04/01/2023	6,586	6,422
FNMA PL #AB2046	309,000	3%	01/01/2026	12,840	11,596
FNMA PL #AD6960	258,441	4.50%	7/1/2040	11,335	9,997

**INTERNATIONAL UNION OF OPERATING ENGINEERS LOCAL 112 DEFINED
CONTRIBUTION PENSION PLAN
E.I.N. 46-1563622 PLAN NO. 001
SCHEDULE H, LINE 4i—SCHEDULE OF ASSETS (HELD AT END OF YEAR) (CONTINUED)
DECEMBER 31, 2022**

Identity of Issue, Borrower	Description of Investment			Cost	Current Value
	Units/ Par Value	Interest Rate	Maturity Date		
U.S. Government and Agency Securities (Continued):					
FNMA PL #AE7582	205,825	4.50%	11/1/2040	\$ 7,761	\$ 6,971
FNMA PL #AI6093	325,000	4.50%	06/01/2031	20,404	18,245
FNMA PL #AL0160	140,000	4.50%	05/01/2041	8,505	7,540
FNMA PL #AL1464	350,000	4.50%	01/01/2032	24,765	22,98
FNMA PL #AL1722	290,000	4.50%	04/01/2032	23,642	21,174
FNMA PL #AL3414	837,000	4.50%	09/01/2041	89,877	79,803
FNMA PL #AL6178	215,000	4%	12/01/2044	47,711	41,406
FNMA PL #AL6185	41,000	3%	10/01/2029	7,828	6,998
FNMA PL #AL7211	85,000	3.50%	01/01/2035	16,288	15,047
U.S. TREASURY NOTE	964,000	0.875%	06/30/2026	950,130	862,028
U.S. TREASURY NOTE	3,227,000	1.875%	02/28/2027	3,142,185	2,955,480
U.S. TREASURY NOTE	623,000	2.750%	07/31/2027	589,830	589,439
U.S. TREASURY NOTE	980,000	4.125%	11/15/2032	1,000,672	1,000,061
U.S. TREASURY NOTES	743,000	0.500%	3/31/2025	708,141	682,401
U.S. TREASURY NOTES	1,215,000	0.125%	12/15/2023	1,211,727	1,163,885
U.S. TREASURY NOTES	1,115,000	1.500%	02/15/2030	1,112,333	950,192
U.S. TREASURY NOTES	855,000	1.500%	11/30/2024	884,923	809,044
U.S. TREASURY NOTES	1,050,000	1.625%	05/15/2026	1,107,709	966,368
U.S. TREASURY NOTES	555,000	2.000%	08/15/2025	529,078	524,064
U.S. TREASURY NOTES	1,055,000	2.000%	11/15/2026	1,101,876	975,421
U.S. TREASURY NOTES	900,000	2.250%	08/15/2027	835,160	832,536
U.S. TREASURY NOTES	1,175,000	2.625%	02/15/2029	1,250,113	1,085,959
U.S. TREASURY NOTES	1,035,000	3.125%	11/15/2028	1,189,396	987,173
U.S. TREASURY NTS	1,601,000	0.250%	% 09/30/25	1,472,646	1,437,522
U.S. TREASURY NTS	1,608,000	0.375%	07/15/2024	1,587,188	1,506,310
U.S. TREASURY NTS	1,035,000	0.625%	12/31/2027	919,036	876,800
U.S. TREASURY NOTE	725,000	2.875%	05/15/2032	664,090	668,131
U.S. TREASURY TIPS	615,000	0.125%	01/15/2032	631,093	579,021
Total U.S. Government and Agency Securities				22,119,956	20,575,373
Corporate Bonds:					
BURLINGTON NO RAILWAY	135,000	5.72%	01/15/2024	12,747	13,333
FHLMC MULTIFAMILY CMO	382,000	3.111	02/25/2023	84,638	81,771
ACE INA HOLDINGS	225,000	3.15%	03/15/2025	220,235	217,260
AMERICAN EXPRESS	300,000	2.55%	03/04/2027	267,159	272,910
AMERICAN EXPRESS	29,000	3.95%	08/01/2025	28,971	28,410
AON CORP	275,000	3.75%	05/02/2029	313,096	253,671
AT&T INC	98,000	2.25%	02/01/2032	97,823	76,814
BANK OF AMERICA	410,000	3.25%	10/21/2027	454,325	378,561

**INTERNATIONAL UNION OF OPERATING ENGINEERS LOCAL 112 DEFINED
CONTRIBUTION PENSION PLAN
E.I.N. 46-1563622 PLAN NO. 001
SCHEDULE H, LINE 4i—SCHEDULE OF ASSETS (HELD AT END OF YEAR) (CONTINUED)
DECEMBER 31, 2022**

Identity of Issue, Borrower	Description of Investment			Cost	Current Value
	Units/ Par Value	Interest Rate	Maturity Date		
Corporate Bonds (Continued):					
BERKSHIRE HATHAW	365,000	3.25%	04/15/2028	\$ 418,611	\$ 337,676
BOARDWALK PIPELINES LP	31,000	3.40%	2/15/2031	30,995	25,928
BOARDWALK PIPELINES LP	21,000	4.45%	07/15/2027	21,203	19,972
BROADCOM INC SR GLBL 4	82,000	4.30%	11/15/2032	75,737	72,270
CONSOLIDATED EDISON CO	64,000	3.35%	4/1/2030	64,899	57,559
CVS HEALTH CORP	253,000	4.30%	3/25/2028	280,004	244,712
DOVER CORP SR GLBL NT	300,000	3.15%	11/15/2025	330,951	285,642
DUKE ENERGY CORP	280,000	2.65%	09/01/2026	307,171	258,611
ENTERPRISE PRODUCTS OP	285,000	4.15%	10/16/2028	326,337	269,867
EQUINIX INC SR N	62,000	3.90%	04/15/2032	55,490	55,083
ESSEX PORTFOLIO	315,000	3.00%	01/15/2030	335,799	266,386
EVERSOURCE ENERGY	280,000	3.30%	01/15/2028	315,930	257,830
FIDELITY NATL FINANCIAL	26,000	3.40%	06/15/2030	26,361	21,946
FIFTH THIRD BANCORP	310,000	4.30%	01/16/2024	339,455	306,764
FREEPORT- MCMORAN IN	56,000	5.40%	11/14/2034	66,360	52,885
GENERAL DYNAMICS COR	30,000	3.375	05/15/2023	32,336	29,833
GEORGIA POWER COMPAN	290,000	2.20%	9/15/2024	306,165	276,544
GLOBAL PMTS INC SR N	30,000	4.95%	08/15/2027	29,977	29,100
GOLDMAN SACHS GROUP	94,000	VAR	09/10/2027	94,000	81,087
INTERSTATE PWR & LIG	210,000	3.25%	12/01/2024	203,074	202,566
KEYCORP 2.55% 10/01/	310,000	2.55%	10/01/2029	315,955	261,122
LAZARD GROUP LLC 4.3	61,000	4.37	03/11/2029	66,884	56,324
MARATHON PETE CORP 4	56,000	4.70%	05/01/2025	62,065	55,144
MICRON TECHNOLOGY IN	63,000	2.70%	04/15/2032	63,000	47,107
MORGAN STANLEY 3.7%	285,000	3.70%	10/23/2024	318,365	278,166
NATIONAL RURAL UTILS	415,000	3.40%	02/07/2028	447,785	384,236
PACIFIC GAS & ELEC 2	51,000	2.50%	2/1/2031	50,761	39,570
PIONEER NATURAL RESO	132,000	1.90%	08/15/2030	130,806	103,372
PNC FINANCIAL SERVIC	374,000	2.55%	01/22/2030	331,008	317,298
ROPER TECHNOLOGIES I	335,000	1%	09/15/2025	321,908	300,147
SOUTHERN CO 3.7% 4/3	28,000	3.70%	4/30/2030	32,088	25,271
SUNTRUST BANKS INC 4	355,000	4%	5/01/2025	405,158	347,009
TANGER PPTYS LTD 2.7	46,000	2.75%	09/01/2031	45,400	33,309
TAPESTRY INC SNR NTS	48,000	3.05%	03/15/2032	38,796	37,359
TARGA RES CORP 4.2%	36,000	4.20%	02/01/2033	35,933	30,973
TRANSCONTINENTAL GAS	137,000	3.25%	05/15/2030	146,208	118,887
UNION PACIFIC CORP 3	139,000	3.95%	09/10/2028	142,010	133,615

**INTERNATIONAL UNION OF OPERATING ENGINEERS LOCAL 112 DEFINED
CONTRIBUTION PENSION PLAN
E.I.N. 46-1563622 PLAN NO. 001
SCHEDULE H, LINE 4i—SCHEDULE OF ASSETS (HELD AT END OF YEAR) (CONTINUED)
DECEMBER 31, 2022**

Identity of Issue, Borrower	Description of Investment			Cost	Current Value
	Units/ Par Value	Interest Rate	Maturity Date		
Corporate Bonds (Continued):					
US BANCORP	450,000	3%	07/30/2029	\$ 480,588	\$ 395,091
VERIZON COM	300,000	4.02%	12/03/2029	351,537	280,215
VIACOMCBS I	45,000	4.20%	05/19/2032	47,510	36,831
VIRGINIA EL	117,000	3.15%	01/15/2026	116,328	111,263
VIRGINIA EL	185,000	3.50%	03/15/2027	211,085	174,832
WALT DISNEY	20,000	2%	09/01/202	19,814	16,766
WALT DISNEY	345,000	3.80%	3/22/2030	397,204	321,547
WELLS FARGO	400,000	4.10%	6/03/2026	443,696	387,300
XCEL ENERGY	275,000	4%	6/15/2028	324,739	263,208
XYLEM INC 1	330,000	1.95%	01/30/2028	328,895	283,790
UNITED AIR	60,000	5.88%	04/15/2029	47,423	46,757
CANADIAN PAC RY	59,000	2.45%	12/02/2031	50,012	48,864
EQUINOR ASA 2.37	48,000	2.38%	5/22/2030	49,632	40,822
JOHNSON CONTROLS	300,000	3.90%	02/14/2026	336,672	291,318
BANK NEW YORK ME	67,000	VAR	07/24/2026	67,000	65,979
BANK OF AMERICA CORP	108,000	FLT	G 09/25/25	108,117	99,401
BK OF AMERICA CORP VAR	176,000	VAR	06/14/2029	176,000	148,102
BK OF AMERICA CORP VAR	57,000	VAR	10/20/2032	57,000	44,642
HUNTINGTON BANCSHARES	300,000	VAR	08/04/2028	300,465	285,756
HYATT HOTELS CORP VAR	32,000	VAR	10/01/2024	31,998	29,984
MORGAN STANLEY FLTG	77,000	FLTG	07/22/2025	77,642	73,614
MORGAN STANLEY FR VA	78,000	VAR	01/22/2025	78,000	73,792
WELLS FARGO & CO SR	80,000	VAR	03/24/2028	80,000	74,080
WELLS FARGO & CO VAR	33,000	VAR	03/02/2033	33,000	27,799
WELLS FARGO & COMPANY	61,000	VAR	08/15/2026	61,000	59,778
JPMORGAN CHASE & CO FT	415,000	FT RT	3/24/2031	471,494	387,593
JPMORGAN CHASE & CO SR	71,000	VAR	04/22/2027	71,000	62,385
US BANCORP FR VAR 10	30,000	VAR	10/21/2026	30,000	30,555
Total Corporate Bonds				12,941,826	11,205,964
Registered Investment Companies:					
ISHARES GLOBAL INFRASTRUCTUR	54,736	N/A	N/A	2,432,749	2,509,098
PROSHARES S&P 500 DIVIDEND A	44,260	N/A	N/A	3,122,306	3,982,957
VANGUARD I/T TRSRY INDX-ADM	143,160	N/A	N/A	3,395,072	2,824,537
VANGUARD TOTAL STOCK MKT INDEX FUND-INST	89,808	N/A	N/A	5,887,313	8,362,963
Total Registered Investment Companies				14,837,439	17,679,556
Total Investments				\$ 50,936,746	\$ 50,412,996

**INTERNATIONAL UNION OF OPERATING ENGINEERS LOCAL 112 DEFINED
CONTRIBUTION PENSION PLAN
E.I.N. 46-1563622 PLAN NO. 001
SCHEDULE H, LINE 4j—SCHEDULE OF REPORTABLE TRANSACTIONS
YEAR ENDED DECEMBER 31, 2022**

(a)	(b)	(c)	(d)	(g)	(h) Current Value of Asset on Transaction Date	(l) Net Gain or (Loss)
Identity of Party Involved	Description of Assets	Purchase Price	Selling Price	Cost of Asset		
<u>Category (i) - Single Transaction in Excess of 5% of Plan Assets</u>						
AMALGAMATED	INTEREST BEARING ACCT	\$ 5,500,000	\$ -	\$ 5,500,000	\$ 5,500,000	\$ -
AMALGAMATED	INTEREST BEARING ACCT	-	5,500,000	5,500,000	5,500,000	-
<u>Category (iii) - A Series of Transactions in Excess of 5% of Plan Assets at Beginning of Year</u>						
JPMORGAN	100% U.S. TREASURY MONEY MARKET					
	171 Purchases	9,094,363	-	9,094,363	9,094,363	-
	55 Sales	-	9,424,600	9,424,600	9,424,600	-
AMALGAMATED	INTEREST BEARING ACCT					
	2 Purchases	7,500,000	-	7,500,000	7,500,000	-
	2 Sales	-	7,500,000	7,500,000	7,500,000	-

*There were no category (ii) or (iv) reportable transactions for the year ended December 31, 2022.
Columns (e) and (f) are hidden as they are not applicable.*

Schedule H, Line 4j
Schedule of Reportable Transactions

See the Supplemental Schedule, page 16, in the attached Financial Statement

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

See the Supplemental Schedule, pages 12 - 15, in the attached Financial Statement