

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 2023 This Form is Open to Public Inspection
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Part I	Annual Report Identification Information
For calendar plan year 2023 or fiscal plan year beginning 01/01/2023 and ending 12/31/2023	
A	This return/report is for: ☒ a multiemployer plan ☐ a multiple-employer plan (Filers checking this box must provide 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 N. ATLANTIC STATES CARP. PENSION FUND
1b	Three-digit plan number (PN) ▶ 001
1c	Effective date of plan 02/06/1962
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 OF THE NORTH ATLANTIC STATES CARPENTERS PENSION FUND 350 FORDHAM ROAD WILMINGTON, MA 01887
2b	Employer Identification Number (EIN) 51-6040899
2c	Plan Sponsor's telephone number 978-694-1000
2d	Business code (see instructions) 236200

Caution: A penalty for the late or incomplete filing of this return/report will be assessed unless reasonable cause is established.			
Under penalties of perjury and other penalties set forth in the instructions, I declare that I have examined this return/report, including accompanying schedules, statements and attachments, as well as the electronic version of this return/report, and to the best of my knowledge and belief, it is true, correct, and complete.			
SIGN HERE	Filed with authorized/valid electronic signature.	10/09/2024	THOMAS J. FLYNN
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	Filed with authorized/valid electronic signature.	10/09/2024	THOMAS S. GUNNING
	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 46134
6 Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines 6a(1) , 6a(2) , 6b , 6c , and 6d). a(1) Total number of active participants at the beginning of the plan year a(2) Total number of active participants at the end of the plan year b Retired or separated participants receiving benefits c Other retired or separated participants entitled to future benefits d Subtotal. Add lines 6a(2) , 6b , and 6c e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits f Total. Add lines 6d and 6e g(1) Number of participants with account balances as of the beginning of the plan year (only defined contribution plans complete this item) g(2) Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item) h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested	6a(1) 17166 6a(2) 16946 6b 16874 6c 7806 6d 41626 6e 4401 6f 46027 6g(1) 6g(2) 6h
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	7 1120

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

1B

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

9a Plan funding arrangement (check all that apply) (1) ☒ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor	9b Plan benefit arrangement (check all that apply) (1) ☒ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor
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10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)

a Pension Schedules

- (1)** ☒ **R** (Retirement Plan Information)
- (2)** ☒ **MB** (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary
- (3)** ☐ **SB** (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary
- (4)** ☐ **DCG** (Individual Plan Information) – Number Attached _____
- (5)** ☐ **MEP** (Multiple-Employer Retirement Plan Information)

b General Schedules

- (1)** ☒ **H** (Financial Information)
- (2)** ☐ **I** (Financial Information – Small Plan)
- (3)** ☒ **A** (Insurance Information) – Number Attached 4
- (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 2023 Form M-1 annual report. If the plan was not required to file the 2023 Form M-1 annual report, enter the Receipt Confirmation Code for the most recent Form M-1 that was required to be filed under the Form M-1 filing requirements. (Failure to enter a valid Receipt Confirmation Code will subject the Form 5500 filing to rejection as incomplete.)

Receipt Confirmation Code _____

SCHEDULE A (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Insurance Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500. ▶ Insurance companies are required to provide the information pursuant to ERISA section 103(a)(2).	OMB No. 1210-0110 2023 This Form is Open to Public Inspection
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For calendar plan year 2023 or fiscal plan year beginning 01/01/2023 and ending 12/31/2023		
A Name of plan N. ATLANTIC STATES CARP. PENSION FUND	B Three-digit plan number (PN) ▶	001
C Plan sponsor's name as shown on line 2a of Form 5500 BOT OF THE NORTH ATLANTIC STATES CARPENTERS PENSION FUND	D Employer Identification Number (EIN) 51-6040899	

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

(a) Name of insurance carrier
AETNA LIFE INSURANCE COMPANY

(b) EIN	(c) NAIC code	(d) Contract or identification number	(e) Approximate number of persons covered at end of policy or contract year	Policy or contract year	
				(f) From	(g) To
06-6033492	60054	000917	48	01/01/2023	12/31/2023

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

(a) Total amount of commissions paid	(b) Total amount of fees paid

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

Part II Investment and Annuity Contract Information

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

4 Current value of plan's interest under this contract in the general account at year end **4** 473010**5** Current value of plan's interest under this contract in separate accounts at year end **5****6** Contracts With Allocated Funds:**a** State the basis of premium rates ▶**b** Premiums paid to carrier **6b****c** Premiums due but unpaid at the end of the year **6c****d** If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, enter amount. **6d**
Specify nature of costs ▶**e** Type of contract: (1) ☐ individual policies (2) ☐ group deferred annuity(3) ☐ other (specify) ▶**f** If contract purchased, in whole or in part, to distribute benefits from a terminating plan, check here ☐**7** Contracts With Unallocated Funds (Do not include portions of these contracts maintained in separate accounts)**a** Type of contract: (1) ☐ deposit administration (2) ☒ immediate participation guarantee(3) ☐ guaranteed investment (4) ☐ other ▶**b** Balance at the end of the previous year **7b** 4818924**c** Additions: (1) Contributions deposited during the year **7c(1)**
(2) Dividends and credits **7c(2)**
(3) Interest credited during the year **7c(3)** 190656
(4) Transferred from separate account **7c(4)**
(5) Other (specify below) **7c(5)**(6) Total additions **7c(6)** 190656**d** Total of balance and additions (add lines **7b** and **7c(6)**) **7d** 5009580**e** Deductions:(1) Disbursed from fund to pay benefits or purchase annuities during year **7e(1)** 4504249(2) Administration charge made by carrier **7e(2)** 32321(3) Transferred to separate account **7e(3)**(4) Other (specify below) **7e(4)**(5) Total deductions **7e(5)** 4536570**f** Balance at the end of the current year (subtract line **7e(5)** from line **7d**) **7f** 473010

Part III Welfare Benefit Contract Information

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

8 Benefit and contract type (check all applicable boxes)

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

9 Experience-rated contracts:

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

10 Nonexperience-rated contracts:

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

Specify nature of costs.

Part IV Provision of Information

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

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

SCHEDULE A (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Insurance Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500. ▶ Insurance companies are required to provide the information pursuant to ERISA section 103(a)(2).	OMB No. 1210-0110 2023 This Form is Open to Public Inspection
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For calendar plan year 2023 or fiscal plan year beginning 01/01/2023 and ending 12/31/2023		
A Name of plan N. ATLANTIC STATES CARP. PENSION FUND	B Three-digit plan number (PN) ▶	001
C Plan sponsor's name as shown on line 2a of Form 5500 BOT OF THE NORTH ATLANTIC STATES CARPENTERS PENSION FUND	D Employer Identification Number (EIN) 51-6040899	

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

(a) Name of insurance carrier
AXA EQUITABLE LIFE INSURANCE COMPANY

(b) EIN	(c) NAIC code	(d) Contract or identification number	(e) Approximate number of persons covered at end of policy or contract year	Policy or contract year	
				(f) From	(g) To
13-5570651	62944	1840	7	01/01/2023	12/31/2023

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

(a) Total amount of commissions paid	(b) Total amount of fees paid

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

Part II Investment and Annuity Contract Information

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

4 Current value of plan's interest under this contract in the general account at year end **4** 401024**5** Current value of plan's interest under this contract in separate accounts at year end **5****6** Contracts With Allocated Funds:**a** State the basis of premium rates ▶**b** Premiums paid to carrier **6b****c** Premiums due but unpaid at the end of the year **6c****d** If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, enter amount. **6d**
Specify nature of costs ▶**e** Type of contract: (1) ☐ individual policies (2) ☐ group deferred annuity(3) ☐ other (specify) ▶**f** If contract purchased, in whole or in part, to distribute benefits from a terminating plan, check here ☐**7** Contracts With Unallocated Funds (Do not include portions of these contracts maintained in separate accounts)**a** Type of contract: (1) ☐ deposit administration (2) ☒ immediate participation guarantee(3) ☐ guaranteed investment (4) ☐ other ▶**b** Balance at the end of the previous year **7b** 408631**c** Additions: (1) Contributions deposited during the year **7c(1)**
(2) Dividends and credits **7c(2)**
(3) Interest credited during the year **7c(3)** 10994
(4) Transferred from separate account **7c(4)**
(5) Other (specify below) **7c(5)**(6) Total additions **7c(6)** 10994**d** Total of balance and additions (add lines **7b** and **7c(6)**) **7d** 419625**e** Deductions:(1) Disbursed from fund to pay benefits or purchase annuities during year **7e(1)** 14954(2) Administration charge made by carrier **7e(2)** 3647(3) Transferred to separate account **7e(3)**(4) Other (specify below) **7e(4)**(5) Total deductions **7e(5)** 18601**f** Balance at the end of the current year (subtract line **7e(5)** from line **7d**) **7f** 401024

Part III Welfare Benefit Contract Information

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

8 Benefit and contract type (check all applicable boxes)

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

9 Experience-rated contracts:

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

10 Nonexperience-rated contracts:

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

Specify nature of costs.

Part IV Provision of Information

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

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

SCHEDULE A (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Insurance Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500. ▶ Insurance companies are required to provide the information pursuant to ERISA section 103(a)(2).	OMB No. 1210-0110 2023 This Form is Open to Public Inspection
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For calendar plan year 2023 or fiscal plan year beginning 01/01/2023 and ending 12/31/2023		
A Name of plan	B Three-digit plan number (PN)	001
N. ATLANTIC STATES CARP. PENSION FUND		
C Plan sponsor's name as shown on line 2a of Form 5500	D Employer Identification Number (EIN)	
BOT OF THE NORTH ATLANTIC STATES CARPENTERS PENSION FUND		
51-6040899		

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

(a) Name of insurance carrier

UNION LABOR LIFE INSURANCE COMPANY

(b) EIN	(c) NAIC code	(d) Contract or identification number	(e) Approximate number of persons covered at end of policy or contract year	Policy or contract year	
				(f) From	(g) To
13-1423090	69744	GA01299		01/01/2023	12/31/2023

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

(a) Total amount of commissions paid	(b) Total amount of fees paid
0	29736

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

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

THE UNION LABOR LIFE INSURANCE CO

8403 COLESVILLE ROAD

13TH FLOOR

SILVER SPRING, MD 20910

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
	29736	ASSET MANAGEMENT FEES	7

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

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

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

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

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

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

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

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	(c) Amount	(d) Purpose	

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

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

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

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

Part II Investment and Annuity Contract Information

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

4 Current value of plan's interest under this contract in the general account at year end	4	
5 Current value of plan's interest under this contract in separate accounts at year end.....	5	5538205

6 Contracts With Allocated Funds:**a** State the basis of premium rates ▶**b** Premiums paid to carrier**6b****c** Premiums due but unpaid at the end of the year.....**6c****d** If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, enter amount.**6d**

Specify nature of costs ▶

e Type of contract: (1) ☐ individual policies (2) ☐ group deferred annuity(3) ☐ other (specify) ▶**f** If contract purchased, in whole or in part, to distribute benefits from a terminating plan, check here ☐**7** Contracts With Unallocated Funds (Do not include portions of these contracts maintained in separate accounts)**a** Type of contract: (1) ☐ deposit administration (2) ☐ immediate participation guarantee(3) ☐ guaranteed investment (4) ☐ other ▶**b** Balance at the end of the previous year**7b****c** Additions: (1) Contributions deposited during the year**7c(1)**

(2) Dividends and credits

7c(2)

(3) Interest credited during the year

7c(3)

(4) Transferred from separate account.....

7c(4)

(5) Other (specify below)

7c(5)

▶

(6) Total additions.....

7c(6)**d** Total of balance and additions (add lines **7b** and **7c(6)**)**7d****e** Deductions:

(1) Disbursed from fund to pay benefits or purchase annuities during year

7e(1)

(2) Administration charge made by carrier

7e(2)

(3) Transferred to separate account.....

7e(3)

(4) Other (specify below)

7e(4)

▶

(5) Total deductions.....

7e(5)**f** Balance at the end of the current year (subtract line **7e(5)** from line **7d**)**7f**

Part III Welfare Benefit Contract Information

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

8 Benefit and contract type (check all applicable boxes)

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

9 Experience-rated contracts:

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

10 Nonexperience-rated contracts:

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

Specify nature of costs.

Part IV Provision of Information

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

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

SCHEDULE A (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Insurance Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500. ▶ Insurance companies are required to provide the information pursuant to ERISA section 103(a)(2).	OMB No. 1210-0110 2023 This Form is Open to Public Inspection
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For calendar plan year 2023 or fiscal plan year beginning 01/01/2023 and ending 12/31/2023		
A Name of plan	B Three-digit plan number (PN)	001
N. ATLANTIC STATES CARP. PENSION FUND		
C Plan sponsor's name as shown on line 2a of Form 5500	D Employer Identification Number (EIN)	
BOT OF THE NORTH ATLANTIC STATES CARPENTERS PENSION FUND		
51-6040899		

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

(a) Name of insurance carrier

UNION LABOR LIFE INSURANCE COMPANY

(b) EIN	(c) NAIC code	(d) Contract or identification number	(e) Approximate number of persons covered at end of policy or contract year	Policy or contract year	
				(f) From	(g) To
13-1423090	69744	GA02210		01/01/2023	12/31/2023

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

(a) Total amount of commissions paid	(b) Total amount of fees paid
0	170382

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

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

THE UNION LABOR LIFE INSURANCE CO 8403 COLESVILLE ROAD
13TH FLOOR
SILVER SPRING, MD 20910

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
	170382	ASSET MANAGEMENT FEES	7

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

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

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

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

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

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

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

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

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

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

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

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

Part II Investment and Annuity Contract Information

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

4 Current value of plan's interest under this contract in the general account at year end	4	
5 Current value of plan's interest under this contract in separate accounts at year end.....	5	31732808

6 Contracts With Allocated Funds:**a** State the basis of premium rates ▶**b** Premiums paid to carrier**6b****c** Premiums due but unpaid at the end of the year.....**6c****d** If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, enter amount.**6d**

Specify nature of costs ▶

e Type of contract: (1) ☐ individual policies (2) ☐ group deferred annuity(3) ☐ other (specify) ▶**f** If contract purchased, in whole or in part, to distribute benefits from a terminating plan, check here ☐**7** Contracts With Unallocated Funds (Do not include portions of these contracts maintained in separate accounts)**a** Type of contract: (1) ☐ deposit administration (2) ☐ immediate participation guarantee(3) ☐ guaranteed investment (4) ☐ other ▶**b** Balance at the end of the previous year**7b****c** Additions: (1) Contributions deposited during the year**7c(1)**

(2) Dividends and credits

7c(2)

(3) Interest credited during the year

7c(3)

(4) Transferred from separate account.....

7c(4)

(5) Other (specify below)

7c(5)

▶

(6) Total additions.....

7c(6)**d** Total of balance and additions (add lines **7b** and **7c(6)**)**7d****e** Deductions:

(1) Disbursed from fund to pay benefits or purchase annuities during year

7e(1)

(2) Administration charge made by carrier

7e(2)

(3) Transferred to separate account.....

7e(3)

(4) Other (specify below)

7e(4)

▶

(5) Total deductions.....

7e(5)**f** Balance at the end of the current year (subtract line **7e(5)** from line **7d**)**7f**

Part III Welfare Benefit Contract Information

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

8 Benefit and contract type (check all applicable boxes)

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

9 Experience-rated contracts:

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

10 Nonexperience-rated contracts:

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

Specify nature of costs.

Part IV Provision of Information

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

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

SCHEDULE MB (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6059 of the Internal Revenue Code (the Code). File as an attachment to Form 5500 or 5500-SF.	OMB No. 1210-0110 2023 This Form is Open to Public Inspection
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For calendar plan year 2023 or fiscal plan year beginning 01/01/2023 and ending 12/31/2023

- 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 N. ATLANTIC STATES CARP. PENSION FUND	B Three-digit plan number (PN) 001
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF BOT OF THE NORTH ATLANTIC STATES CARPENTERS PENSION FUND	D Employer Identification Number (EIN) 51-6040899

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

1a Enter the valuation date: Month 01 Day 01 Year 2023	
b Assets	
(1) Current value of assets	1b(1) 4576945263
(2) Actuarial value of assets for funding standard account.....	1b(2) 4804958184
c (1) Accrued liability for plan using immediate gain methods	1c(1) 5762540047
(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) 5497975536
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) 10139373182
(b) Expected increase in current liability due to benefits accruing during the plan year	1d(2)(b) 203196436
(c) Expected release from "RPA '94" current liability for the plan year	1d(2)(c) 383872948
(3) Expected plan disbursements for the plan year	1d(3) 395372948

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	09/30/2024
Signature of actuary KATHLEEN A. RILEY, FSA, MAAA, EA	Date 23-04134
Type or print name of actuary SEGAL	Most recent enrollment number 617-424-7300
Firm name 116 HUNTINGTON AVENUE SUITE 901, BOSTON, MA 02116-5744	Telephone number (including area code)
Address of the firm	

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

2 Operational information as of beginning of this plan year:

a Current value of assets (see instructions)	2a	4581867339
b "RPA '94" current liability/participant count breakdown:	(1) Number of participants	(2) Current liability
(1) For retired participants and beneficiaries receiving payment	21034	5108278269
(2) For terminated vested participants	8412	1374924966
(3) For active participants:		
(a) Non-vested benefits		259618113
(b) Vested benefits		3396551834
(c) Total active	15066	3656169947
(4) Total	44512	10139373182
c If the percentage resulting from dividing line 2a by line 2b(4), column (2), is less than 70%, enter such percentage	2c	45.19 %

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

(a) Date (MM/DD/YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM/DD/YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees
07/15/2023	279148816	0			
Totals ▶			3(b)	279148816	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	87.4 %
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, does line 1(c) reflect any benefit reductions for the first time (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		2.55 %
	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)	5MP+1	5MP+1
(2) Females	6c(2)	5FP+1	5FP+1
d Valuation liability interest rate	6d	7.25 %	7.25 %
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		7.1 %
h Estimated investment return on current value of assets for year ending on the valuation date	6h		-7.6 %
i Expense load included in normal cost reported in line 9b	6i		☐ N/A
(1) If expense load is described as a percentage of normal cost, enter the assumed percentage	6i(1)		%
(2) If expense load is a dollar amount that varies from year to year, enter the dollar amount included in line 9b	6i(2)		11500000
(3) If neither (1) nor (2) describes the expense load, check the box	6i(3)		☐

7 New amortization bases established in the current plan year:

(1) Type of base	(2) Initial balance	(3) Amortization Charge/Credit
1	-7453286	-775105
4	-11014283	-1145430

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	55443049

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)	1825057900	281859522
9c(2)		
9c(3)		

d Interest as applicable on lines 9a, 9b, and 9c**9d** 24454436**e** Total charges. Add lines 9a through 9d**9e** 361757007**Credits to funding standard account:****f** Prior year credit balance, if any**9f** 301126512**g** Employer contributions. Total from column (b) of line 3**9g** 279148816**h** Amortization credits as of valuation date

	Outstanding balance	
9h	566349525	96482956

i Interest as applicable to end of plan year on lines 9f, 9g, and 9h**9i** 38102569**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)	1653971261	
9j(2)	4452588474	
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** 714860853**m** Credit balance: If line 9l is greater than line 9e, enter the difference**9m** 353103846**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 current 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
		2023
		This Form is Open to Public Inspection.

For calendar plan year 2023 or fiscal plan year beginning 01/01/2023 and ending 12/31/2023

A Name of plan N. ATLANTIC STATES CARP. PENSION FUND	B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 BOT OF THE NORTH ATLANTIC STATES CARPENTERS PENSION FUND	D Employer Identification Number (EIN) 51-6040899

Part I

Service Provider Information (see instructions)

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

1

Information on Persons Receiving Only Eligible Indirect Compensation

- a

Check "Yes" or "No" to indicate whether you are excluding a person from the remainder of this Part because they received only eligible indirect compensation for which the plan received the required disclosures (see instructions for definitions and conditions).....

X

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

36 SOUTH INVEST MGRS (CAYMAN) LTD

PO BOX 309

UGLAND HOUSE, GRAND CAYMAN KY1 1104 KY

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

ABS GLOBAL INVESTMENTS

13-4205457

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

ACTIS ENERGY 4

98-1304256

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

ACTIS ENERGY 5

98-1529176

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

AFL-CIO HOUSING INVESTMENT TRUST

52-6220193

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

ALTARIS CAPITAL PARTNERS LLC

20-5988933

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

AMERICAN REALTY ADVISORS LLC

33-0123114

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

ARES ENERGY INVESTORS FUND V LP

35-2527651

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

ASB CAPITAL MANAGEMENT LLC

80-0618452

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

AZTEC FINANCIAL SERVICES (GUERNSEY)

PO BOX 656 EAST WING TRAFALGAR COURT
LES BANQUES, ST PETER PORT GY13PP GG

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

BASALT INFRASTRUCTURE PARTNERS II A

98-1338721

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

BASALT INFRASTRUCTURE PARTNERS III

98-1522136

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

BASALT INFRASTRUCTURE PARTNERS IV

PO BOX 656 EAST WING TRAFALGAR COURT
LES BANQUES, ST PETER PORT GY13PP GG

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

BLACKROCK FINANCIAL MANAGEMENT INC

13-3806691

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

BLACKSTONE INFRASTRUCTURE ADVISORS

345 PARK AVENUE
NEW YORK, NY 10154

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

BRIGADE CAPITAL MANAGEMENT LP

26-0240191

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

CAI MANAGER LP

39 FORREST STREET
SUITE 201
MILL VALLEY, CA 94941

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

CCP III ADVISORY LTD

28F CITIC TOWER 1 TIM MEI AVENUE
CENTRAL, HONG KONG SAR HK

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

CHARLESBANK CAPITAL PARTNERS LLC

04-3419769

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

CHEQUERS PARTENAIRES SA

5 RUE FRANCOIS 1ER
PARIS, FRANCE 75008 FR

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

CONSTITUTION CAPITAL EQUITY PARTNER

74-3246212

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

CRESCENT CAPITAL GROUP LP

12 GILL STREET
SUITE 2600
WOBURN, MA 01801

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

CZECH ASSET MANAGEMENT LP

45-3236373

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

DBAG FUND VI GP (GUERNSEY) LP

SECOND FLOOR LA PLAIDERIE CHAMBERS
LA PLAIDERIE, ST PETER PORT GY11WG GG

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

DBAG FUND VII GP S.A.R.L

8 RUE LOU HEMMER SENNINGERBERG
GRAND-DUCHE DE LUXEMBO, LUXEMBOURG 1748 LU

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

DIMENSIONAL FUND ADVISORS LP

30-0447847

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

DOVER IX ASSOCIATES LP

98-1251694

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

DOVER VIII ASSOCIATES LP

30-0692313

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

EIF UNITED STATES POWER IV LP

2000 AVENUE OF THE STARS
12TH FLOOR
LOS ANGELES, CA 94941

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

ENERGY VENTURES IV LP

98-0701954

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

ENTRUST GLOBAL PARTNERS OFFSHORE LP

90-0644478

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

ESP 2006 GENERAL PARTNER LP

1 GEORGE STREET
EDINBURGH, UNITED KINGDOM EH22LL GB

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

FIRST EAGLE INVESTMENT MGMT LLC

57-1156902

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

GAMUT CAPITAL MANAGEMENT LP

47-4084591

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

GEM REALTY MANAGERS V LP

80-0881501

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

GLOBAL INFRASTRUCTURE MGMT LLC

1345 AVENUE OF THE AMERICAS
30TH FLOOR
NEW YORK, NY 10105

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

GOLUB CAPITAL BDC 4 INC

88-1608711

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

GQG PARTNERS

450 EAST LAS OLAS BLVD
SUITE 750
FORT LAUDERDALE, FL 33301

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

GRAIN MANAGEMENT LLC

27-2066237

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

GREAT GRAY TRUST COMPANY LLC

92-1941236

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

GREENBRIAR EQUITY GROUP LP

13-4089194

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

GROSVENOR CAPITAL MANAGEMENT LP

36-3795985

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

GTIS PARTNERS LP

787 7TH AVENUE
50TH FLOOR
NEW YORK, NY 10019

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

HAMILTON LANE ADVISORS LLC

23-2962336

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

HAMILTON LANE GP VI LLC

03-0600956

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

HARBOURVEST 2013 DIRECT ASSOC LP

45-4069261

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

HARBOURVEST IX BUYOUT ASSOC LP

32-0292083

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

HARBOURVEST PARTNERS LP

74-3130888

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

HARBOURVEST VIII BUYOUT ASSOC LP

51-0578242

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

HARBOURVEST VIII MEZZANINE ASSOC LP

34-2063496

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

HIG MIDDLE MARKET LBO FUND II LP

46-4144600

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

IRIDIAN ASSET MANAGEMENT LLC

06-1439577

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

JMI MANAGEMENT LP

20-2772092

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

K1 INVESTMENT MANAGEMENT LLC

27-4741827

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

KEROGEN GENERAL PARTNER II LTD

ONE NEXUS WAY
CAMANA BAY, GRAND CAYMAN KY1 9005 KY

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

KPS CAPITAL PARTNERS LP

ONE VANDERBILT AVENUE
52ND FLOOR
NEW YORK, NY 10017

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

MBK MANAGEMENT INC

SUITE 1707-08 ONE EXCHANGE SQUARE 8 CONNAUGHT PLACE
CENTRAL, HONG KONG 999077 HK

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

MCMORGAN & COMPANY LLC

52-2334338

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

NB STRATEGIC CO-INVEST CAYMAN IV LP

98-1444689

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

NEWTOWER TRUST COMPANY

30-0872552

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

OAKLEY CAPITAL V S.A.R.1

8 RUE LOU HEMMER SENNINGERBERG
GRAND-DUCHE DE LUXEMBO, LUXEMBOURG 1748 LU

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

OAKTREE CAPITAL MANAGEMENT LP

26-0189082

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

ONCAP MANAGEMENT PARTNERS LP

161 BAY STREET SUITE 4900
TORONTO, ONTARIO M5J 2S1 CA

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

ONE RIVER ASSET MANAGEMENT LLC

46-2311563

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

ORION CAPITAL MANAGERS LLP

63 BROOK STREET
LONDON, UNITED KINGDOM W1K 4HS GB

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

PACIFIC INVESTMENT MGMT CO LLC

650 NEWPORT CENTER DRIVE
NEWPORT BEACH, CA 92660

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

PAG ASIA CAPITAL GP I LTD

103 SOUTH CHURCH STREET 2ND FLOOR
HARBOUR PLACE, GRAND CAYMAN KY1 1106 KY

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

PAG ASIA CAPITAL GP II LTD

98-1273928

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

PAG ASIA CAPITAL GP III LTD

98-1446205

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

PAINE SCHWARTZ PARTNERS LLC

475 FIFTH AVENUE
17TH FLOOR
NEW YORK, NY 10017

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

PAINE SCHWARTZ PTNRS FUND V MGMT

475 FIFTH AVENUE
17TH FLOOR
NEW YORK, NY 10017

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

PANTHEON VENTURES (US) LP

555 CALIFORNIA STREET
SUITE 3450
SAN FRANCISCO, CA 94104

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

PANTHEON VENTURES INC

555 CALIFORNIA STREET
SUITE 3450
SAN FRANCISCO, CA 94104

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

PATRIA-PRIVATE EQUITY GP VI LTD

98-1411655

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

PBPE GP IV LTD

98-1008704

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

PBPE GP V LTD

98-1179780

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

REF IV ASSOCIATES LP
630 5TH AVE
SUITE 400
NEW YORK, NY 10111

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

RELATED FUND MANAGEMENT LLC

26-4728181

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

RELIANCE TRUST COMPANY

58-1428634

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

RICHMOND CAPITAL MANAGEMENT INC

26-3436991

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

RIDGEWOOD ENERGY CORPORATION

76-0036505

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

RMCF III ASSOCIATES LLC
630 5TH AVE
SUITE 400
NEW YORK, NY 10111

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

SEI TRUST COMPANY

06-1271230

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

SEIDLER KUTSENDA MGMT COMPANY LLC

75-3143904

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

SHENKMAN CAPITAL MANAGEMENT INC
151 WEST 42ND STREET
29TH FLOOR
NEW YORK, NY 10036

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

SIGULER GUFF ADVISERS LLC

13-3855629

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

SOLAMERE CAPITAL AF III LP

82-1686590

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

SOLAMERE CAPITAL AF III-A LP

83-2557195

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

SOLAMERE CAPITAL AF IV-A LP

86-1271961

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

SOUTHERN CROSS GROUP MANAGEMENT LP

98-0518602

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

STELLEX MANAGEMENT II LP
900 THIRD AVENUE
25TH FLOOR
NEW YORK, NY 10022

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

STG PARTNERS LLC
1300 EL CAMINO REAL
SUITE 300
MENLO PARK, CA 94025

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

TA XII-B EU AIV LP

98-1296319

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

TA XII-B LP

30-0864929

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

TA XIII-B LP

98-1477051

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

TA XIV-B LP

98-1593568

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

THIRD ROCK VENTURES III LP

38-3898567

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

THIRD ROCK VENTURES IV LP

81-4370882

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

THIRD ROCK VENTURES V LP

84-1868726

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

THIRD ROCK VENTURES VI LP

88-2485899

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

TOWERBROOK INVESTORS IV (ONSHORE

98-1075105

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

TRILANTIC CAPITAL MANAGEMENT LP

26-4600829

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

ULLICO INVESTMENT ADVISORS INC

52-6435649

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

VISTA EQUITY PRITNERS FUND IV GP LLC

4 EMBARCADERO CENTER
20TH FLOOR
SAN FRANCISCO, CA 94111

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

VITRUVIAN PARTNERS LLP

105 WIGMORE STREET
LONDON, UNITED KINGDOM W1U 1QY GB

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

WESTPORT CAPITAL PARTNERS LLC

20-3834766

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

WHITE DEER MANAGEMENT LLC

700 LOUISIANA STREET
SUITE 4770
HOUSTON, TX 77002

(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)

MEKETA INVESTMENT GROUP INC.

04-2659023

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
27 50	NONE	1009581	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

VITECH SYSTEMS SUB LLC

13-3785492

(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	945629	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

ARTISAN PARTNERS LMTD PARTNERSHIP

30-0551775

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 51 52 68	NONE	892767	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☐ No ☒

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

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

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	783634	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

BNY MELLON INVESTMENT ADVISER INC.

13-5673135

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 51 52 68	NONE	759334	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☐ No ☒

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

LOOMIS SAYLES & COMPANY

04-3200030

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 51 52 68	NONE	713939	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☐ No ☒

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

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

THE SEGAL COMPANY (EASTERN STATES)

13-1835864

(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 16 50	NONE	671133	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

WASHINGTON CAPITAL MANAGEMENT INC

91-1042342

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 51	NONE	628660	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

HARDMAN JOHNSTON GLOBAL ADVISORS LL

13-3257590

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 51	NONE	446588	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)

LSV ASSET MANAGEMENT

23-2772200

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 51	NONE	361715	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

COVE STREET CAPITAL

27-5376591

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 51	NONE	350080	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

MIDIOR CONSULTING

04-3340176

(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	320040	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)

ACADIAN ASSET MANAGEMENT LLC

04-2929221

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 51	NONE	313976	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

STATE STREET BANK & TRUST CO

04-1867445

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
19 28 51 52 62 99	NONE	301457	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☐ No ☒

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

PRISA III

751 BROAD STREET
NEWARK, NJ 07102

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 51	NONE	257108	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)

RICE HALL JAMES & ASSOC LLC

43-1992528

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 51 52	NONE	256522	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☐ No ☒

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

WELLINGTON TRUST COMPANY NA

04-2755549

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 51	NONE	247526	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

NOVAK FRANCELLE LLC

61-1436956

(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	236201	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)

EMPLOYEE A

04-2305512

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	NONE	230770	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

EMPLOYEE B

04-2305512

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	NONE	228056	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

THE REVOLT GROUP LLC

45-3524964

(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	207125	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)

KRAKOW SOURIS & LANDRY LLC

04-3363718

(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	191471	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

EMPLOYEE C

04-2305512

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	NONE	191002	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

JP MORGAN CHASE BANK NATL ASSOC

13-4994650

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 51	NONE	172265	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)

EMPLOYEE D

04-2305512

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	NONE	167563	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

O'REILLY GROSSO GROSS & JONES PC

04-3318596

(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	166733	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

DODGE & COX INVESTMENT MANAGERS

94-1441976

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 51 52 68	NONE	166707	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☐ No ☒

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

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

BLACKROCK INSTL TRUST COMPANY NA

94-3112180

(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?
21 24 28 50 51 52 68	NONE	159166	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☐ No ☒

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

EMPLOYEE E

04-2305512

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	NONE	153975	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

ARCARA LENDA EUSANIO & STACEY CPAS

47-1793720

(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	149082	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)

VIRGINIA & AMBINDER LLP

13-4166736

(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	142935	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

EMPLOYEE F

04-2305512

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	NONE	142758	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

EMPLOYEE G

04-2305512

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	NONE	142358	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)

EMPLOYEE H

04-2305512

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	NONE	132337	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

EMPLOYEE I

04-2305512

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	NONE	132252	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

EMPLOYEE J

04-2305512

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	NONE	132044	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)

EMPLOYEE K

04-2305512

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	NONE	126412	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

BRIDGEWAY BENEFIT TECHNOLOGIES

52-1746473

(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	124098	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

EMPLOYEE L

04-2305512

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	NONE	122214	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)

EMPLOYEE M

04-2305512

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	NONE	120435	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

EMPLOYEE N

04-2305512

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	NONE	119622	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

EMPLOYEE O

04-2305512

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	NONE	118416	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)

EMPLOYEE P

04-2305512

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	NONE	113346	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

EMPLOYEE Q

04-2305512

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	NONE	109431	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

EMPLOYEE R

04-2305512

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	NONE	106608	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)

EMPLOYEE S

04-2305512

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	NONE	105354	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

EMPLOYEE T

04-2305512

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	NONE	104435	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

EMPLOYEE U

04-2305512

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	NONE	102461	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)

FIRST ACTUARIAL CONSULTING INC

26-3842522

(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 16 50	NONE	102400	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

EMPLOYEE V

04-2305512

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	NONE	101651	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

EMPLOYEE W

04-2305512

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	NONE	96489	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)

WITHUM SMITH & BROWN PC

22-2027092

(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	94300	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

ABRDN INC

51-0368279

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 51 52	NONE	93689	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☐ No ☒

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

EMPLOYEE X

04-2305512

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	NONE	90984	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)

EMPLOYEE Y

04-2305512

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	NONE	90164	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

EMPLOYEE Z

04-2305512

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	NONE	90116	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

EMPLOYEE AA

04-2305512

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	NONE	89457	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)

EMPLOYEE AB

04-2305512

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	NONE	87190	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

EMPLOYEE AC

04-2305512

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	NONE	87159	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

EMPLOYEE AD

04-2305512

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	NONE	80162	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)

EMPLOYEE AE

04-2305512

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	NONE	80145	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

EMPLOYEE AF

04-2305512

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	NONE	78762	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

EMPLOYEE AG

04-2305512

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	NONE	78654	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)

EMPLOYEE AH

04-2305512

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	NONE	77696	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

EMPLOYEE AI

04-2305512

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	NONE	77616	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

EMPLOYEE AJ

04-2305512

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	NONE	76006	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)

EMPLOYEE AK

04-2305512

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	NONE	76003	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

EMPLOYEE AL

04-2305512

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	NONE	73128	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

EMPLOYEE AM

04-2305512

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	NONE	72396	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)

EMPLOYEE AN

04-2305512

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	NONE	72374	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

EMPLOYEE AO

04-2305512

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	NONE	71293	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

EMPLOYEE AP

04-2305512

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	NONE	70117	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)

EMPLOYEE AQ

04-2305512

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	NONE	69444	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

LOOMIS SAYLES & COMPANY

04-3200030

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 51	NONE	68783	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

EMPLOYEE AR

04-2305512

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	NONE	68479	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)

EMPLOYEE AS

04-2305512

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	NONE	67610	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

EMPLOYEE AT

04-2305512

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	NONE	67530	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

EMPLOYEE AU

04-2305512

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	NONE	67432	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)

EMPLOYEE AV

04-2305512

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	NONE	67284	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

EMPLOYEE AW

04-2305512

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	NONE	65943	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

EMPLOYEE AX

04-2305512

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	NONE	63753	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)

EMPLOYEE AY

04-2305512

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	NONE	63355	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

EMPLOYEE AZ

04-2305512

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	NONE	63270	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

EMPLOYEE BA

04-2305512

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	NONE	62987	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)

EMPLOYEE BB

04-2305512

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	NONE	62204	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

EMPLOYEE BC

04-2305512

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	NONE	61975	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

EMPLOYEE BD

04-2305512

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	NONE	61086	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)

EMPLOYEE BE

04-2305512

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	NONE	59736	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

EMPLOYEE BF

04-2305512

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	NONE	59725	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

PERFECT PRINTING SOLUTIONS

41-4140223

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49 50	NONE	59486	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)

EMPLOYEE BG

04-2305512

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	NONE	59019	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

EMPLOYEE BH

04-2305512

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	NONE	57491	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

EMPLOYEE BI

04-2305512

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	NONE	57114	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)

EMPLOYEE BJ

04-2305512

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	NONE	56591	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

EMPLOYEE BK

04-2305512

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	NONE	56561	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

EMPLOYEE BL

04-2305512

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	NONE	56015	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)

RHUMBLINE ADVISERS LMTD PARTNERSHIP

04-3118582

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 51	NONE	55765	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

IRON MOUNTAIN

23-2588479

(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	55436	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

EMPLOYEE BM

04-2305512

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	NONE	55431	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)

EMPLOYEE BN

04-2305512

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	NONE	55113	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

EMPLOYEE BO

04-2305512

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	NONE	54967	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

EMPLOYEE BP

04-2305512

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	NONE	54415	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)

CHEVY CHASE TRUST COMPANY

52-2037618

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 51	NONE	54264	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

EMPLOYEE BQ

04-2305512

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	NONE	54196	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

EMPLOYEE BR

04-2305512

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	NONE	53561	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)

EMPLOYEE BS

04-2305512

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	NONE	53444	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

EMPLOYEE BT

04-2305512

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	NONE	53011	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

EMPLOYEE BU

04-2305512

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	NONE	52724	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)

EMPLOYEE BV

04-2305512

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	NONE	51751	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

OPUS INVESTMENT ADVISORS LLC

41-2063321

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 51	NONE	51358	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

EMPLOYEE BW

04-2305512

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	NONE	51124	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)

EMPLOYEE BX

04-2305512

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	NONE	50390	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

EMPLOYEE BY

04-2305512

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	NONE	49727	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

EMPLOYEE BZ

04-2305512

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	NONE	49451	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)

EMPLOYEE CA

04-2305512

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	NONE	49337	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

EMPLOYEE CB

04-2305512

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	NONE	48568	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

EMPLOYEE CC

04-2305512

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	NONE	48535	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)

EMPLOYEE CD

04-2305512

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	NONE	48144	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

EMPLOYEE CE

04-2305512

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	NONE	46488	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

EMPLOYEE CF

04-2305512

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	NONE	46160	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)

HYGRADE BUSINESS GROUP

22-2392031

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49 50	NONE	45618	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

EMPLOYEE CG

04-2305512

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	NONE	45178	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

EMPLOYEE CH

04-2305512

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	NONE	45116	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

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

NATIONAL SOFTWARE INC

46-0638016

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49 50	NONE	44878	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

THE JOURNEYMAN PRESS

46-5227450

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49 50	NONE	44877	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

EMPLOYEE CI

04-2305512

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	NONE	44183	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)

EMPLOYEE CJ

04-2305512

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	NONE	44038	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

EMPLOYEE CK

04-2305512

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	NONE	43313	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

EMPLOYEE CL

04-2305512

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	NONE	43210	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)

EMPLOYEE CM

04-2305512

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	NONE	42382	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

EMPLOYEE CN

04-2305512

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	NONE	41339	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

EMPLOYEE CO

04-2305512

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	NONE	41339	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)

EMPLOYEE CP

04-2305512

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	NONE	41093	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

EMPLOYEE CQ

04-2305512

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	NONE	39430	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

COMMONWEALTH CASH MANAGEMENT CORP

20-5649212

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49 50	NONE	38917	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)

EMPLOYEE CR

04-2305512

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	NONE	36928	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

EMPLOYEE CS

04-2305512

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	NONE	36311	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

JJ PIERSON

37-1801501

(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	36000	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)

EMPLOYEE CT

04-2305512

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	NONE	35956	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

EMPLOYEE CU

04-2305512

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	NONE	34825	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

EMPLOYEE CV

04-2305512

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	NONE	33205	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)

EMPLOYEE CW

04-2305512

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	NONE	32536	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

AMERICAN CLEANING COMPANY

04-1026920

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49 50	NONE	32274	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

EMPLOYEE CX

04-2305512

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	NONE	32227	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)

RBC GLOBAL ASSET MANAGEMENT

41-1460668

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 51	NONE	31820	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

EMPLOYEE CY

04-2305512

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	NONE	29728	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

JOHNSON CONTROLS SECURITY SOLUTIONS

58-1814102

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49 50	NONE	29650	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)

EMPLOYEE CZ

04-2305512

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	NONE	28783	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

PERFORMANCE ENVIRONMENTAL SERVICES

27-0492390

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49 50	NONE	20854	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

STRATUS BUILDING SOLUTIONS

27-0507134

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49 50	NONE	18888	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)

NEW ENGLAND SYSTEMS INC

06-1131719

(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	15283	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

PROXYVOTE PLUS HOLDINGS INC

20-0509976

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
27 50	NONE	13500	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

FRONTLINE COURIER SERVICE INC

04-3213826

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49 50	NONE	13040	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)

GLOBAL KNOWLEDGE TRAINING LLC

13-3860296

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49 50	NONE	12900	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

AMALGAMATED MEDICAL CARE MANAGEMENT

13-3860528

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49 50	NONE	12238	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

LAND SOLUTIONS

82-2325672

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49 50	NONE	11415	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)

LENDINGCLUB BANK

51-0605731

(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 64	NONE	9975	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

PWC MANAGEMENT CONSULTING CO LTD

98-0399829

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
27 50	NONE	8201	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

POTOMAC ASSET MANAGEMENT

52-1224946

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 51	NONE	7500	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)

LIFESTATUS360 LLC

94-3389460

(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	6397	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

STATE STREET GLOBAL ADVISORS TRUST

81-4017137

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
18 19 51 52	NONE	5454	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☐ No ☒

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

MILLER LANDSCAPING INC

04-2759853

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49 50	NONE	5379	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

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

SEGAL SELECT INSURANCE SCVS INC

46-0619194

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
22 53	NONE	0	Yes ☒ No ☐	Yes ☒ No ☐	33143	Yes ☐ No ☒

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

UNION LABOR LIFE INSURANCE COMPANY

13-1423090

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 51 52 72	NONE	0	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☐ No ☒

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

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

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
SEGAL SELECT INSURANCE SVCS INC	53	15832

(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.
CHUBB 13-1963496	INSURANCE BROKERAGE COMMISSIONS AND FEES

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
SEGAL SELECT INSURANCE SVCS INC	53	8232

(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.
EUCLID SPECIALTY 45-3957469	INSURANCE BROKERAGE COMMISSIONS AND FEES

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
SEGAL SELECT INSURANCE SVCS INC	53	3291

(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.
HARTFORD FIRE INSURANCE CO 06-0383750	INSURANCE BROKERAGE COMMISSIONS AND FEES

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
SEGAL SELECT INSURANCE SVCS INC	53	2617

(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.
RLI INSURANCE 37-0915434	INSURANCE BROKERAGE COMMISSIONS AND FEES

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
SEGAL SELECT INSURANCE SVCS INC	53	3171

(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.
TRAVELERS INSURANCE 06-0566090	INSURANCE BROKERAGE COMMISSIONS AND FEES

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE D (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration	DFE/Participating Plan Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110 2023 This Form is Open to Public Inspection.
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For calendar plan year 2023 or fiscal plan year beginning 01/01/2023 and ending 12/31/2023

A Name of plan <u>N. ATLANTIC STATES CARP. PENSION FUND</u>	B Three-digit plan number (PN) ▶	<u>001</u>
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 <u>BOT OF THE NORTH ATLANTIC STATES CARPENTERS PENSION FUND</u>	D Employer Identification Number (EIN) <u>51-6040899</u>	

Part I	Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs) (Complete as many entries as needed to report all interests in DFEs)
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a Name of MTIA, CCT, PSA, or 103-12 IE: 0-5 YEAR US TIPS FUND

b Name of sponsor of entity listed in (a): BLACKROCK INSTITUTIONAL TRUST COMPANY NA

c EIN-PN <u>46-3843139-001</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>51507351</u>
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a Name of MTIA, CCT, PSA, or 103-12 IE: 1-3 YR GOVT/CREDIT BOND INDEX FUND

b Name of sponsor of entity listed in (a): BLACKROCK INSTITUTIONAL TRUST COMPANY NA

c EIN-PN <u>27-5012611-001</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>121075691</u>
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a Name of MTIA, CCT, PSA, or 103-12 IE: AFL-CIO BUILDING INVESTMENT TRUST

b Name of sponsor of entity listed in (a): GREAT GRAY TRUST COMPANY, LLC

c EIN-PN <u>52-6328901-001</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>7739900</u>
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a Name of MTIA, CCT, PSA, or 103-12 IE: ASB ALLEGIANCE REAL ESTATE FUND

b Name of sponsor of entity listed in (a): CHEVY CHASE TRUST COMPANY

c EIN-PN <u>52-6257033-006</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>4871876</u>
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a Name of MTIA, CCT, PSA, or 103-12 IE: JPM EMBI GLBL DIV IDX FD C

b Name of sponsor of entity listed in (a): BLACKROCK INSTITUTIONAL TRUST COMPANY NA

c EIN-PN <u>83-2484172-001</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>54289961</u>
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a Name of MTIA, CCT, PSA, or 103-12 IE: MSCI EQUITY INDEX FUND - RUSSIA

b Name of sponsor of entity listed in (a): BLACKROCK INSTITUTIONAL TRUST COMPANY NA

c EIN-PN <u>86-1583137-001</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>183</u>
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a Name of MTIA, CCT, PSA, or 103-12 IE: RUSSELL 1000 GROWTH FUND

b Name of sponsor of entity listed in (a): BLACKROCK INSTITUTIONAL TRUST COMPANY NA

c EIN-PN <u>94-3302953-001</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>58039517</u>
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a Name of MTIA, CCT, PSA, or 103-12 IE: COMMINGLED PENSION TRUST FUND		
b Name of sponsor of entity listed in (a): JPMORGAN CHASE BANK NA		
c EIN-PN 13-6038770-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 15802678
a Name of MTIA, CCT, PSA, or 103-12 IE: CRESCENT CAPITAL TRUST II (LEVERED)		
b Name of sponsor of entity listed in (a): GLOBAL TRUST COMPANY		
c EIN-PN 32-6471303-005	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 18484051
a Name of MTIA, CCT, PSA, or 103-12 IE: EAFE EQUITY INDEX FUND		
b Name of sponsor of entity listed in (a): BLACKROCK INSTITUTIONAL TRUST COMPANY NA		
c EIN-PN 94-6596958-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 45267873
a Name of MTIA, CCT, PSA, or 103-12 IE: EMERGING MARKETS EQUITY FUND		
b Name of sponsor of entity listed in (a): ABERDEEN ASSET MANAGEMENT		
c EIN-PN 36-7180580-001	d Entity code E	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0
a Name of MTIA, CCT, PSA, or 103-12 IE: EQUITY INDEX FUND		
b Name of sponsor of entity listed in (a): BLACKROCK INSTITUTIONAL TRUST COMPANY NA		
c EIN-PN 94-6052285-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 39859662
a Name of MTIA, CCT, PSA, or 103-12 IE: GQG PTNRS EMERGING MKTS EQUITY CIT		
b Name of sponsor of entity listed in (a): RELIANCE TRUST COMPANY		
c EIN-PN 82-6258259-012	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 92132642
a Name of MTIA, CCT, PSA, or 103-12 IE: HARBOURVEST PTNRS IX LP		
b Name of sponsor of entity listed in (a): HARBOURVEST PARTNERS LLC		
c EIN-PN 80-0653172-001	d Entity code E	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 7505489
a Name of MTIA, CCT, PSA, or 103-12 IE: HARBOURVEST PTNRS VIII-BUYOUT FD LP		
b Name of sponsor of entity listed in (a): HARBOURVEST PARTNERS LLC		
c EIN-PN 34-2063501-001	d Entity code E	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 207010
a Name of MTIA, CCT, PSA, or 103-12 IE: HRBRVST VIII-CAYMAN MEZ & DIST DEBT		
b Name of sponsor of entity listed in (a): HARBOURVEST PARTNERS LLC		
c EIN-PN 98-0494212-001	d Entity code E	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 55884
a Name of MTIA, CCT, PSA, or 103-12 IE: HRBRVST VIII-MEZZ & DISTRESSED DEBT		
b Name of sponsor of entity listed in (a): HARBOURVEST PARTNERS LLC		
c EIN-PN 34-2063515-001	d Entity code E	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 40913

a Name of MTIA, CCT, PSA, or 103-12 IE: HARBOURVEST PTNRS VIII-VENTURE FUND		
b Name of sponsor of entity listed in (a): HARBOURVEST PARTNERS LLC		
c EIN-PN 34-2063502-001	d Entity code E	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 1639119
a Name of MTIA, CCT, PSA, or 103-12 IE: HARDMAN JOHNSTON INTL EQ GROUP TR		
b Name of sponsor of entity listed in (a): HARDMAN JOHNSTON GLOBAL ADVISORS LLC		
c EIN-PN 26-6493485-001	d Entity code E	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 75301688
a Name of MTIA, CCT, PSA, or 103-12 IE: HIPEP V-CAYMAN US DOLLAR PTNRSHP FD		
b Name of sponsor of entity listed in (a): HARBOURVEST PARTNERS LLC		
c EIN-PN 98-0468020-001	d Entity code E	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 14308
a Name of MTIA, CCT, PSA, or 103-12 IE: IRIDIAN COLLECTIVE INVESTMENT TRUST		
b Name of sponsor of entity listed in (a): SEI TRUST COMPANY		
c EIN-PN 46-3975331-067	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0
a Name of MTIA, CCT, PSA, or 103-12 IE: HIGH YIELD CONSERVATIVE TRUST		
b Name of sponsor of entity listed in (a): LOOMIS SAYLES TRUST COMPANY LLC		
c EIN-PN 84-6391546-006	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0
a Name of MTIA, CCT, PSA, or 103-12 IE: MASTER INCOME PLUS GROUP TRUST		
b Name of sponsor of entity listed in (a): MASTER INC PLUS GRP TRUST JP JEANNERET ASSOC INC		
c EIN-PN 22-6591835-001	d Entity code E	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 14920
a Name of MTIA, CCT, PSA, or 103-12 IE: MCMORGAN INFRASTRUCTURE FUND I LP		
b Name of sponsor of entity listed in (a): MCMORGAN INFRASTRUCTURE GP LLC		
c EIN-PN 30-0808269-001	d Entity code E	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 11770487
a Name of MTIA, CCT, PSA, or 103-12 IE: MSCI EMERGING MARKETS FREE FUND		
b Name of sponsor of entity listed in (a): BLACKROCK INSTITUTIONAL TRUST COMPANY NA		
c EIN-PN 33-1030441-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 25768004
a Name of MTIA, CCT, PSA, or 103-12 IE: NCS GROUP TRUST - GLOBAL FUND		
b Name of sponsor of entity listed in (a): BNY MELLON INVESTMENT ADVISER, INC		
c EIN-PN 76-6192146-003	d Entity code E	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 108507348
a Name of MTIA, CCT, PSA, or 103-12 IE: NEWTOWER TRUST COMPANY MEPT		
b Name of sponsor of entity listed in (a): NEWTOWER TRUST COMPANY		
c EIN-PN 52-6218800-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 12199577

a Name of MTIA, CCT, PSA, or 103-12 IE: PROLOAN BOND FUND LLC		
b Name of sponsor of entity listed in (a): PROLOAN BOND FUND LLC		
c EIN-PN 26-3436991-001	d Entity code E	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 17644017
a Name of MTIA, CCT, PSA, or 103-12 IE: RHUMBLINE QSI INDEX LLC		
b Name of sponsor of entity listed in (a): RHUMBLINE ADVISERS CORP		
c EIN-PN 26-0137355-001	d Entity code E	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 185645189
a Name of MTIA, CCT, PSA, or 103-12 IE: RUSSELL 2000 INDEX FUND		
b Name of sponsor of entity listed in (a): BLACKROCK INSTITUTIONAL TRUST COMPANY NA		
c EIN-PN 94-3273839-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 39060668
a Name of MTIA, CCT, PSA, or 103-12 IE: SENIOR FLOATING RATE FUND LLC		
b Name of sponsor of entity listed in (a): LOOMIS SAYLES AND COMPANY LP		
c EIN-PN 82-0542784-001	d Entity code E	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 107777664
a Name of MTIA, CCT, PSA, or 103-12 IE: SHORT-TERM INVESTMENT FUND		
b Name of sponsor of entity listed in (a): BLACKROCK INSTITUTIONAL TRUST COMPANY NA		
c EIN-PN 94-6450621-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 43727
a Name of MTIA, CCT, PSA, or 103-12 IE: S&P GLOB LGMIDCAP NAT RES IDX NL FD		
b Name of sponsor of entity listed in (a): STATE STREET GLOBAL ADVISORS TRUST COMPANY		
c EIN-PN 90-0337987-287	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 4237987
a Name of MTIA, CCT, PSA, or 103-12 IE: STOCK PERFORMANCE INDEX FUTURES FD		
b Name of sponsor of entity listed in (a): STATE STREET BANK AND TRUST COMPANY		
c EIN-PN 04-0025081-007	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0
a Name of MTIA, CCT, PSA, or 103-12 IE: ULLICO INFRAST TAXABLE FUND LP		
b Name of sponsor of entity listed in (a): ULLICO INVESTMENT ADVISORS INC		
c EIN-PN 45-5209095-001	d Entity code E	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 76743938
a Name of MTIA, CCT, PSA, or 103-12 IE: ULLICO SEPARATE ACCOUNT J		
b Name of sponsor of entity listed in (a): THE UNION LABOR LIFE INSURANCE COMPANY		
c EIN-PN 13-1423090-203	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 37271013
a Name of MTIA, CCT, PSA, or 103-12 IE: US DEBT INDEX FUND		
b Name of sponsor of entity listed in (a): BLACKROCK INSTITUTIONAL TRUST COMPANY NA		
c EIN-PN 94-6589507-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 52918622

a Name of MTIA, CCT, PSA, or 103-12 IE: **US TIPS FUND**

b Name of sponsor of entity listed in (a): **BLACKROCK INSTITUTIONAL TRUST COMPANY NA**

c EIN-PN 94-3410125-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 120127066
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a Name of MTIA, CCT, PSA, or 103-12 IE: **WTC-CTF EMERGING LOCAL DEBT**

b Name of sponsor of entity listed in (a): **WELLINGTON TRUST COMPANY NA**

c EIN-PN 27-2594633-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 59195893
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a Name of MTIA, CCT, PSA, or 103-12 IE:

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
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Part II Information on Participating Plans (to be completed by DFEs, other than DCGs)

(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)

a Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
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plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN

SCHEDULE H (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Financial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ► File as an attachment to Form 5500.	OMB No. 1210-0110
		2023
		This Form is Open to Public Inspection

For calendar plan year 2023 or fiscal plan year beginning 01/01/2023 and ending 12/31/2023		
A Name of plan N. ATLANTIC STATES CARP. PENSION FUND	B Three-digit plan number (PN) ►	001
C Plan sponsor's name as shown on line 2a of Form 5500 BOT OF THE NORTH ATLANTIC STATES CARPENTERS PENSION FUND	D Employer Identification Number (EIN) 51-6040899	

Part I	Asset and Liability Statement
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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	1199489	3474293
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	13337263	13521937
(2) Participant contributions	1b(2)		
(3) Other	1b(3)	5913429	45986937
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	222696481	269721343
(2) U.S. Government securities	1c(2)	118960542	176097052
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)	7147079	7099214
(B) All other	1c(3)(B)	87292026	120224357
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		4758058
(B) Common	1c(4)(B)	567990670	580403423
(5) Partnership/joint venture interests	1c(5)	1730295247	1903600161
(6) Real estate (other than employer real property)	1c(6)	165436608	162821709
(7) Loans (other than to participants)	1c(7)	13066598	11950533
(8) Participant loans	1c(8)		
(9) Value of interest in common/collective trusts	1c(9)	1003206217	822622929
(10) Value of interest in pooled separate accounts	1c(10)	35650836	37271013
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities	1c(12)	593881933	592867974
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	139279526	159031493
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)	5087850	868963
(15) Other	1c(15)	27300184	39899701

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	20766934	21128264
f Total assets (add all amounts in lines 1a through 1e)	1f	4758508912	4973349354
Liabilities			
g Benefit claims payable	1g		
h Operating payables	1h	61679492	60032519
i Acquisition indebtedness	1i	64286905	65714823
j Other liabilities	1j	50675176	59057214
k Total liabilities (add all amounts in lines 1g through 1j)	1k	176641573	184804556
Net Assets			
l Net assets (subtract line 1k from line 1f)	1l	4581867339	4788544798

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)	279148814	
(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)		279148814
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	43938	
(B) U.S. Government securities	2b(1)(B)	1702459	
(C) Corporate debt instruments	2b(1)(C)	2538850	
(D) Loans (other than to participants)	2b(1)(D)		
(E) Participant loans	2b(1)(E)		
(F) Other	2b(1)(F)	81101084	
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		85386331
(2) Dividends: (A) Preferred stock	2b(2)(A)		
(B) Common stock	2b(2)(B)	7343529	
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	9189964	
(D) Total dividends. Add lines 2b(2)(A) , (B), and (C)	2b(2)(D)		16533493
(3) Rents	2b(3)		447606
(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)	382100846	
(B) Aggregate carrying amount (see instructions)	2b(4)(B)	567573409	
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)		-185472563
(5) Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)	-10143972	
(B) Other	2b(5)(B)	209172872	
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts.....	2b(6)		102398604
(7) Net investment gain (loss) from pooled separate accounts.....	2b(7)		1819678
(8) Net investment gain (loss) from master trust investment accounts.....	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities.....	2b(9)		83356378
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		10282250
c Other income	2c		3716320
d Total income. Add all income amounts in column (b) and enter total	2d		596645811

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	366036757	
(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)		366036757
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions)	2g		
h Interest expense	2h		
i Administrative expenses:			
(1) Salaries and allowances	2i(1)	3451225	
(2) Contract administrator fees.....	2i(2)		
(3) Recordkeeping fees.....	2i(3)		
(4) IQPA audit fees.....	2i(4)	132000	
(5) Investment advisory and investment management fees	2i(5)	8607793	
(6) Bank or trust company trustee/custodial fees	2i(6)	301387	
(7) Actuarial fees	2i(7)	746267	
(8) Legal fees	2i(8)	334000	
(9) Valuation/appraisal fees	2i(9)		
(10) Other trustee fees and expenses	2i(10)		
(11) Other expenses	2i(11)	10358923	
(12) Total administrative expenses. Add lines 2i(1) through (11)	2i(12)		23931595
j Total expenses. Add all expense amounts in column (b) and enter total	2j		389968352

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		206677459
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** as part of Schedule H because:

(1) ☐ This form is filed for a CCT, PSA, DCG 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. DCGs do not complete lines 4e, 4f, 4k, 4l, and 5, and DCGs generally complete the rest of Part IV collectively for all plans in the DCG, except as otherwise provided (see instructions).

During the plan year:

	Yes	No	Amount
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.)		☒	
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.)		☒	
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.)		☒	
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.)		☒	
e Was this plan covered by a fidelity bond?	☒		10000000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		☒	
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?	☒		2252263540
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?		☒	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	☒		
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.)	☒		
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?		☒	
l Has the plan failed to provide any benefit when due under the plan?		☒	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)		☒	
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.			

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 526368.

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 2023 This Form is Open to Public Inspection.
For calendar plan year 2023 or fiscal plan year beginning 01/01/2023 and ending 12/31/2023		
A Name of plan N. ATLANTIC STATES CARP. PENSION FUND		B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 BOT OF THE NORTH ATLANTIC STATES CARPENTERS PENSION FUND		D Employer Identification Number (EIN) 51-6040899
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): 04-2305512		
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		3 135
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) 2023 v. 230707		

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 **NEW ENGLAND FINISH SYSTEMS**

b EIN **68-0641275**

c Dollar amount contributed by employer **6313896**

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 **CENTURY DRYWALL INC**

b EIN **05-0460679**

c Dollar amount contributed by employer **5517289**

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 **SWEENEY DRYWALL FINISHES**

b EIN **04-3161586**

c Dollar amount contributed by employer **4310736**

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 **T J MCCARTNEY INC**

b EIN **02-0330467**

c Dollar amount contributed by employer **4103075**

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 **RIGGS CONTRACTING INC**

b EIN **26-0358105**

c Dollar amount contributed by employer **4011407**

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 **H CARR & SONS LLC**

b EIN **05-0117010**

c Dollar amount contributed by employer **3868279**

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

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

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

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

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

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

a Name of contributing employer **MARGUERITE CONCRETE CONTRACTOR**

b EIN **04-3035873**

c Dollar amount contributed by employer **3757508**

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 **TURNER CONSTRUCTION COMPANY**

b EIN **13-1401980**

c Dollar amount contributed by employer **3633770**

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 **S & F CONCRETE COMPANY**

b EIN **04-2439090**

c Dollar amount contributed by employer **3309288**

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 **MANGANARO NORTHEAST LLC**

b EIN **84-1617513**

c Dollar amount contributed by employer **2980195**

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) and (b):	
a Enter the percentage of plan assets held as:	
Public Equity: <u>29.00</u> % Private Equity: <u>19.50</u> % Investment-Grade Debt and Interest Rate Hedging Assets: <u>12.20</u> %	
High-Yield Debt: <u>7.90</u> % Real Assets: <u>25.90</u> % Cash or Cash Equivalents: <u>1.60</u> % Other: <u>3.90</u> %	
b Provide the average duration of the Investment-Grade Debt and Interest Rate Hedging Assets:	
☒ 0-5 years ☐ 5-10 years ☐ 10-15 years ☐ 15 years or more	
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. _____	

Part VII IRS Compliance Questions

21a Does the plan satisfy the coverage and nondiscrimination tests of Code sections 410(b) and 401(a)(4) by combining this plan with any other plans under the permissive aggregation rules? ☒ Yes ☐ No	
21b If this is a Code section 401(k) plan, check all boxes that apply to indicate how the plan is intended to satisfy the nondiscrimination requirements for employee deferrals and employer matching contributions (as applicable) under Code sections 401(k)(3) and 401(m)(2).	
☐ Design-based safe harbor method	
☐ "Prior year" ADP test	
☐ "Current year" ADP test	
☒ N/A	
22 If the plan sponsor is an adopter of a pre-approved plan that received a favorable IRS Opinion Letter, enter the date of the Opinion Letter ____/____/____ (MM/DD/YYYY) and the Opinion Letter serial number _____.	



Schultheis & Panettieri LLP

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Independent Auditor's Report

Board of Trustees
North Atlantic States Carpenters Pension Fund

Opinion

We have audited the accompanying financial statements of the North Atlantic States Carpenters 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 December 31, 2023 and 2022, and the related statements of changes in net assets available for benefits for the years ended December 31, 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 December 31, 2023 and 2022, and the changes in net assets available for benefits for the years ended December 31, 2023 and 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 21 through 75 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 76 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.

A handwritten signature in cursive script, appearing to read "Schullhas & Parulli LLP".

Hauppauge, New York
October 2, 2024

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

2023

This Form is Open to Public
Inspection

For calendar plan year 2023 or fiscal plan year beginning

01/01/2023

and ending

12/31/2023

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

N. ATLANTIC STATES CARP. PENSION FUND

B Three-digit plan number (PN)

001

C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF

BOT OF THE NORTH ATLANTIC STATES CARPENTERS PENSION FUND

D Employer Identification Number (EIN)

51-6040899

E Type of plan:

(1) ☒ Multiemployer Defined Benefit

(2) ☐ Money Purchase (see instructions)

1a Enter the valuation date:

Month 01 Day 01 Year 2023

b Assets

(1) Current value of assets	1b(1)	4,576,945,263
(2) Actuarial value of assets for funding standard account	1b(2)	4,804,958,184
(1) Accrued liability for plan using immediate gain methods	1c(1)	5,762,540,047
(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)	5,497,975,536
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)	10,139,373,182
(b) Expected increase in current liability due to benefits accruing during the plan year	1d(2)(b)	203,196,436
(c) Expected release from "RPA '94" current liability for the plan year	1d(2)(c)	383,872,948
(3) Expected plan disbursements for the plan year	1d(3)	395,372,948

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

Kathleen A. Riley

KCR

09/30/2024

Signature of actuary

Kathleen A. Riley, FSA, MAAA, EA

Date

2304134

Type or print name of actuary

Segal

Most recent enrollment number

617-424-7300

Firm name

116 Huntington Avenue Suite 901
Boston MA 02116-5744

Address of the firm

Telephone number (including area code)

Item 3(A): Contributions received continuously throughout the year

- 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	2.55 %
	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)	5MP+1
(2) Females	6c(2)	5FP+1
d Valuation liability interest rate	6d	7.25 %
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	7.1 %
h Estimated investment return on current value of assets for year ending on the valuation date	6h	- 7.6 %
i Expense load included in normal cost reported in line 9b	6i	☐ N/A
(1) If expense load is described as a percentage of normal cost, enter the assumed percentage	6i(1)	%
(2) If expense load is a dollar amount that varies from year to year, enter the dollar amount included in line 9b.....	6i(2)	11,500,000
(3) If neither (1) nor (2) describes the expense load, check the box	6i(3)	☐

7 New amortization bases established in the current plan year:

(1) Type of base	(2) Initial balance	(3) Amortization Charge/Credit
1	- 7,453,286	- 775,105
4	- 11,014,283	- 1,145,430

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

55,443,049

c Amortization charges as of valuation date:

Outstanding balance

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

9c(1)

1,825,057,900

281,859,522

(2) Funding waivers

9c(2)

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

9c(3)

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

9d

24,454,436

e Total charges. Add lines 9a through 9d

9e

361,757,007

Credits to funding standard account:

f Prior year credit balance, if any

9f

301,126,512

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

9g

279,148,816

Outstanding balance

h Amortization credits as of valuation date

9h

566,349,525

96,482,956

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

9i

38,102,569

j Full funding limitation (FFL) and credits:

(1) ERISA FFL (accrued liability FFL)

9j(1)

1,653,971,261

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

9j(2)

4,452,588,474

(3) FFL credit

9j(3)

0

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

714,860,853

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

9m

353,103,846

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 current plan year

9o(1)

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

(a) Reconciliation outstanding balance as of valuation date

9o(2)(a)

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

9o(2)(b)

0

(3) Total as of valuation date

9o(3)

0

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

10

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



Yes



No

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

The participant data is for the year ended December 31, 2022

Age	Total	Pension Credits										Unknown
		Less than 1	1-4	5- 9	10 -14	15 - 19	20 - 24	25 - 29	30 - 34	35 - 39	40 & over	
Under 25	441	-	418	23	-	-	-	-	-	-	-	-
	\$187	-	\$176	\$209	-	-	-	-	-	-	-	-
25 - 29	1,163	-	756	385	22	-	-	-	-	-	-	-
	\$400	-	\$243	\$680	\$622	-	-	-	-	-	-	-
30 - 34	1,791	-	873	678	224	16	-	-	-	-	-	-
	\$612	-	\$283	\$772	\$1,321	-	-	-	-	-	-	-
35 - 39	2,045	-	751	660	383	231	20	-	-	-	-	-
	\$894	-	\$302	\$810	\$1,422	\$2,056	\$672	-	-	-	-	-
40 - 44	2,145	-	563	546	373	374	273	16	-	-	-	-
	\$1,273	-	\$309	\$850	\$1,470	\$2,097	\$2,614	-	-	-	-	-
45 - 49	1,932	-	375	376	286	351	387	142	14	1	-	-
	\$1,619	-	\$309	\$830	\$1,452	\$2,103	\$2,729	\$3,133	-	-	-	-
50 - 54	2,087	-	248	290	246	345	526	257	138	31	6	-
	\$2,054	-	\$306	\$849	\$1,458	\$2,042	\$2,679	\$3,286	\$3,704	\$2,070	-	-
55 - 59	2,137	-	173	207	226	334	536	305	206	126	24	-
	\$2,335	-	\$317	\$810	\$1,400	\$2,065	\$2,696	\$3,133	\$3,765	\$3,968	\$3,505	-
60 - 64	1,152	-	68	103	112	200	259	172	96	90	52	-
	\$2,451	-	\$337	\$783	\$1,385	\$2,001	\$2,697	\$3,038	\$3,663	\$4,134	\$4,235	-
65 - 69	167	-	15	24	23	21	32	19	15	9	9	-
	\$2,156	-	-	\$239	\$221	\$464	\$2,450	-	-	-	-	-
70 & over	6	-	1	1	-	1	2	-	1	-	-	-
	-	-	-	-	-	-	-	-	-	-	-	-
Total	15,066	-	4,241	3,293	1,895	1,873	2,035	911	470	257	91	-
	\$1,447	-	\$278	\$795	\$1,418	\$2,063	\$2,679	\$3,153	\$3,697	\$3,970	\$4,041	-

North Atlantic States Carpenters Pension Fund
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Section 3: Certificate of Actuarial Valuation

Exhibit I: Statement of Actuarial Assumptions, Methods and Models

(Schedule MB, Line 6)

Mortality Rates

Healthy: RP-2014 Employee and Healthy Annuitant Mortality Tables set forward one year and projected generationally with Scale MP-2021.

Disabled: RP-2014 Healthy Annuitant Mortality Table set forward six years and projected generationally with Scale MP-2021.

The underlying tables with the generational projection to the ages of participants as of the measurement date reasonably reflect the mortality experience of the Plan as of the measurement date. As part of the analysis, a comparison was made between the actual number of deaths and the projected number when available based on the prior years' assumption over the most recent five years (three years for legacy New York). These mortality tables were then adjusted to future years using the generational projection to reflect future mortality improvement between the measurement date and those years.

Annuitant Mortality Rates¹

Age	Rate (%)			
	Healthy		Disabled	
	Male	Female	Male	Female
55	0.61	0.39	0.83	0.56
60	0.83	0.56	1.19	0.88
65	1.19	0.88	1.84	1.42
70	1.84	1.42	2.96	2.31
75	2.96	2.31	4.98	3.88
80	4.98	3.88	8.67	6.78
85	8.67	6.78	15.13	11.97
90	15.13	11.97	23.65	19.59

¹ Mortality rates shown are for base table, after reflecting the set forward.

Section 3: Certificate of Actuarial Valuation

Termination Rates before Retirement

Age	Rate (%)	
	Mortality ¹	
	Male	Female
20	0.04	0.02
25	0.05	0.02
30	0.05	0.02
35	0.05	0.03
40	0.07	0.04
45	0.11	0.07
50	0.19	0.12
55	0.31	0.18
60	0.52	0.26

Age	Rate (%)			
	New England, Connecticut, and Rhode Island		Empire and Albany/Adirondack	
	Disability	Withdrawal	Disability	Withdrawal
20	0.08	9.94	0.06	17.94
25	0.11	9.67	0.09	17.22
30	0.14	9.30	0.11	16.21
35	0.18	8.71	0.15	14.86
40	0.28	7.75	0.22	13.10
45	0.45	6.35	0.36	10.84
50	0.76	4.22	0.61	7.92
55	1.26	0.00	1.01	4.40
60	2.04	0.00	1.63	1.20

The termination rates and disability rates were based on historical and current demographic data, adjusted to reflect estimated future experience and professional judgment. As part of the analysis, a comparison was made between the actual number of terminations and disability retirements and the projected number based on the prior years' assumption over the most recent five years (three years for legacy New York).

¹ Mortality rates shown are for base table.

Section 3: Certificate of Actuarial Valuation

Retirement Rates New England, Connecticut and Rhode Island:	Age	Rate Per Year	Previous Rate Per Year for New England ¹	Previous Rate Per Year for CT ²	Previous Rate Per Year for RI ³
	Under 55	20%	0%	0%	1%
	55 – 59	10	9	2	3
	60 – 61	20	18	2	5
	62	30	45	40	40
	63 – 64	30	45	25	20
	65	30	100	50	100
	66	50		50	
	67	50		100	
	68 – 69	50			
Empire and Albany/Adirondack:	70	100			
	Age	Rate Per Year			
	55	20%			
	56 – 61	10			
	62	30			
	63 – 64	10			
	65	100			
For the year in which the eligibility for Rule of 85 is met, the retirement rate is 20%.					
The retirement rates were based on historical and current demographic data, adjusted to reflect estimated future experience and professional judgment. As part of the analysis, a comparison was made between the actual number of retirements and the projected number based on the prior years' assumption over the most recent five years (three years for legacy New York).					

¹ Previously for New England, for the years in which an employee completes 32, 33 and 34 years of service, the retirement rate is increased by an additional 10%.

² Previously for Connecticut, an additional 5% are assumed to retire at ages 40 through 61 if eligibility for the Rule of 92 or the 30 year service pension are met.

³ Previously for Rhode Island, for participants under age 62, retirement rates are increased by 30% if the participant has 31 or more years of service. Rates are not adjusted for those over age 62. Rate under age 50 was 0%.

Section 3: Certificate of Actuarial Valuation

Description of Weighted Average Retirement Age	Age 60 (previously, age 61), determined as follows: The weighted average retirement age for each participant is calculated as the sum of the product of each potential current or future retirement age times the probability of surviving from current age to that age and then retiring at that age, assuming no other decrements. The overall weighted retirement age is the average of the individual retirement ages based on all the active participants included in the January 1, 2023 actuarial valuation.
Retirement Age for Inactive Vested Participants	<i>New England:</i> 60. Inactive vested participants who were formerly in the Northern New England Carpenters Pension Fund are assumed to retire at age 62. Other inactive vested participants with a Normal Retirement Age of 65 are assumed to retire at age 65. <i>Connecticut:</i> Vested terminated participants are assumed to retire at age 65, or age 62 if eligible for a Normal Retirement Age of 62 or unreduced benefits at age 62, or immediately if eligible for a 30 year service pension. <i>Rhode Island:</i> 62 <i>Empire and Albany/Adirondack:</i> Earliest unreduced retirement age. The retirement age for inactive vested participants was based on historical and current data, adjusted to reflect estimated future experience and professional judgment. As part of the analysis, a comparison was made between the actual number of retirements by age and the projected number based on the prior years' assumption over the most recent five years (three years for legacy New York).
Future Benefit Accruals	<i>New England, Connecticut and Rhode Island:</i> One pension credit per year. The accrual rate and bonus accrual rate in all future years are assumed to be the same as in the year prior to the valuation date, adjusted for known accrual rate increases, if any. <i>Empire and Albany/Adirondack:</i> 1,600 hours per year. Contributions assumed to be made at a rate equal to each participant's contribution rate at the beginning of the year, adjusted for known contribution rate increases. Where missing, contribution rate is assumed to be the average rate worked in the most recent year.
Unknown Data for Participants	Same as those exhibited by participants with similar known characteristics. If not specified, participants are assumed to be male. Empire and Albany/Adirondack retirees collecting pop-up benefit forms are assumed to have had reductions for benefit form based on the current definition of actuarial equivalence.
Definition of Active Participants	<i>New England, Connecticut, and Rhode Island:</i> Employees who worked at least 420 hours during the prior year and had accrued at least one pension credit. <i>Empire and Albany/Adirondack:</i> Participants who worked at least 500 hours during the prior calendar year.
Reciprocal Agreement	Present and future employees age 65 and older are assumed to retire immediately.
Percent Married	75% (Previously, Social Security awards during 1972 for New England participants and 100% for Connecticut participants)
Age of Spouse	Females are three years younger than their male spouses.

Section 3: Certificate of Actuarial Valuation

Benefit Election	All participants are assumed to elect automatic form based on the applicable marriage assumption. (Previously, 66 $\frac{2}{3}$% of Connecticut participants assumed to elect the automatic form of married participants and 33 $\frac{1}{3}$% of Connecticut participants assumed to elect the automatic form for single participants.) The benefit elections are based on historical and current demographic data, adjusted to reflect the plan design, estimated future experience and professional judgment.
Delayed Retirement Factors	Active participants are assumed to work enough hours each month to not qualify for delayed retirement adjustment. Inactive vested participants who are assumed to commence receipt of benefits after attaining normal retirement age qualify for delayed retirement increases.
Exclusion of Inactive Vested Participants	Inactive participants in the Connecticut, Empire and Albany/Adirondack plans over age 80 are excluded from the valuation.
Net Investment Return	7.25% The net investment return assumption is a long-term estimate derived from historical data, current and recent market expectations, and professional judgment. As part of the analysis, a building block approach was used that reflects inflation expectations and anticipated risk premiums for each of the portfolio's asset classes as provided by Segal Marco Advisors, as well as the Plan's target asset allocation.
Post-retirement Health Benefits	Liabilities funded by 401(h) account are excluded.
Administrative Expenses	\$11,500,000 for calendar year 2023 (previously, \$11,000,000 for calendar year 2022), increasing by 3% thereafter. The annual administrative expenses were based on budgeted and estimated expenses provided by the North Atlantic States Carpenters Fund Office.
Actuarial Value of Assets	The market value of assets less unrecognized returns in each of the last five years. Unrecognized return is equal to the difference between the actual market return and the projected return on the market value, and is recognized over a five-year period. The actuarial value is further adjusted, if necessary, to be within 15% of the market value.
Actuarial Cost Method	Entry Age Normal Actuarial Cost Method. Entry Age is defined as attained age less accumulated service for New England and Rhode Island participants and age at date of hire for Connecticut and Empire and Albany/Adirondack participants. Normal Cost and Actuarial Accrued Liability are calculated on an individual basis and are allocated by service with Normal Cost determined as if the current benefit accrual rate had always been in effect.
Benefits Valued	Unless otherwise indicated, includes all benefits summarized in <i>Exhibit J</i> .
Current Liability Assumptions	<i>Interest:</i> 2.55% (previously, 2.22%), within the permissible range prescribed under IRC Section 431(c)(6)(E) <i>Mortality:</i> Mortality prescribed under IRS Regulations 1.431(c)(6)-1 and 1.430(h)(3)-1(a)(2): RP-2014 employee and annuitant mortality tables, adjusted backward to the base year (2006) using scale MP-2014, projected forward generationally using scale MP-2021 (previously, the MP-2020 scale was used).

Section 3: Certificate of Actuarial Valuation

Estimated Rate of Investment Return	<i>On actuarial value of assets (Schedule MB, line 6g): 7.11%, for the Plan Year ending December 31, 2022</i> <i>On current (market) value of assets (Schedule MB, line 6h): -7.57%, for the Plan Year ending December 31, 2022</i>
FSA Contribution Timing (Schedule MB, line 3a)	Unless otherwise noted, contributions are paid periodically throughout the year pursuant to collective bargaining agreements. The interest credited in the FSA is therefore assumed to be equivalent to a July 15 contribution date.
Actuarial Models	Segal valuation results are based on proprietary actuarial modeling software. The actuarial valuation models generate a comprehensive set of liability and cost calculations that are prepared to meet regulatory, legislative and client requirements. Deterministic cost projections are based on a proprietary forecasting model. Our Actuarial Technology and Systems unit, comprised of both actuaries and programmers, is responsible for the initial development and maintenance of these models. The models have a modular structure that allows for a high degree of accuracy, flexibility and user control. The client team programs the assumptions and the plan provisions, validates the models, and reviews test lives and results, under the supervision of the responsible Enrolled Actuary.
Justification for Change in Actuarial Assumptions and Cost Methods (Schedule MB, line 11)	For purposes of determining current liability, the current liability interest rate was changed from 2.22% to 2.55% due to a change in the permissible range and recognizing that any rate within the permissible range satisfies the requirements of IRC Section 431(c)(6)(E) and the mortality tables and mortality improvement scales were changed in accordance with IRS Regulations 1.431(c)(6)-1 and 1.430(h)(3)-1. Based on past experience and future expectations, the following actuarial assumptions were changed as of January 1, 2023: • The retirement rates for New England, Connecticut, and Rhode Island participants were adjusted as described in the preceding pages. • The administrative expense assumption was increased from \$11,000,000 to \$11,500,000. • The percent married assumption for New England and Connecticut participants was changed from Social Security awards during 1972 and 100%, respectively, to 75%. • The assumed form of benefit election for Connecticut participants was changed from 66 ⅔% electing the automatic form for married participants and 33 ⅓% election the automatic form for single participants to an assumption that all participants elect the automatic form based on the applicable marriage assumption. The January 1, 2023 assumption changes are reflected in the December 31, 2022 unfunded vested liability for withdrawal liability purposes.

Section 2: Actuarial Valuation Results

Withdrawal liability assumptions

- Based on the procedure approved by the Trustees, the assumptions and methods are reasonable to determine the unfunded value of vested benefits for purposes of withdrawal liability.
- The unfunded liability for vested benefits is the lesser of:
 - (i) the unfunded liability for vested benefits based on the actuarial value of assets and the funding assumptions shown below:

Interest Rate	7.25%
Mortality	Same as used for plan funding as of January 1, 2023
Retirement Rates	Same as used for plan funding as of January 1, 2023

- (ii) the unfunded liability for vested benefits based on the market value of assets and the interest, administrative expenses, and funding assumptions shown below, with the present value of vested benefits calculated based on a blend of two liability calculations:
 - The first calculation applies to benefits that could be settled immediately because assets on hand are sufficient to cover their market value. Since withdrawal liability is a final settlement of an employer's obligation to the Plan, the discount rates used are based on estimated annuity purchase rates. ERISA Sec. 4044 interest rates promulgated by the PBGC for multiemployer plans terminating by mass withdrawal on the measurement date are used as a proxy for annuity purchase rates.
 - The second calculation applies to benefits that cannot be settled immediately because they are not currently funded. This calculation uses the interest rate determined by the plan actuary for minimum funding, based on the expected return on current and future assets.

Interest	For liabilities up to market value of assets, 3.90% for 20 years and 3.65% beyond (2.40% for 20 years and 2.11% beyond in the prior year valuation). For liabilities in excess of market value of assets, same as used for plan funding as of January 1, 2023.
Administrative Expenses	Calculated as prescribed by PBGC formula (29 CFR Part 4044, Appendix C); not applicable to those liabilities determined using funding interest rates.
Mortality	Same as used for plan funding as of January 1, 2023
Retirement Rates	Same as used for plan funding as of January 1, 2023

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

Plan Year	Active Participants	Terminated Vested Participants	Retired Participants and Beneficiaries	Total
2023	\$17,532,900	\$17,490,570	\$348,683,187	\$383,706,657
2024	34,411,059	21,589,183	341,770,072	397,770,314
2025	50,437,142	25,722,902	334,450,150	410,610,194
2026	64,765,957	29,992,939	326,554,440	421,313,336
2027	78,050,863	34,493,290	317,947,683	430,491,836
2028	89,955,892	38,376,993	309,238,109	437,570,994
2029	100,697,892	41,824,388	300,152,208	442,674,488
2030	110,394,308	45,243,099	290,802,052	446,439,459
2031	119,211,280	48,292,543	280,763,089	448,266,912
2032	127,202,600	51,248,135	270,262,071	448,712,806
2033	134,242,966	53,769,072	260,392,484	448,404,522
2034	140,515,306	55,875,118	250,612,547	447,002,971
2035	145,965,518	58,034,248	240,647,664	444,647,430
2036	150,828,506	59,615,014	230,515,003	440,958,523
2037	155,215,766	61,091,303	220,232,485	436,539,554
2038	159,140,197	62,937,449	209,818,319	431,895,965
2039	162,887,686	64,203,004	199,290,991	426,381,681
2040	166,280,028	65,368,061	188,670,807	420,318,896

This assumes the following:

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

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

Plan Year	Active Participants	Terminated Vested Participants	Retired Participants and Beneficiaries	Total
2041	\$169,241,379	\$65,882,864	\$177,980,517	\$413,104,760
2042	171,663,872	66,638,133	167,246,072	405,548,077
2043	173,509,665	67,034,028	156,497,334	397,041,027
2044	174,940,990	67,314,821	145,769,048	388,024,859
2045	175,751,106	67,220,208	135,101,605	378,072,919
2046	176,089,942	66,894,269	124,541,350	367,525,561
2047	176,078,131	66,273,905	114,140,457	356,492,493
2048	175,371,543	65,473,601	103,956,201	344,801,345
2049	174,119,492	64,358,496	94,049,737	332,527,725
2050	172,330,328	62,979,637	84,484,272	319,794,237
2051	169,886,201	61,427,607	75,322,889	306,636,697
2052	166,854,895	59,699,884	66,625,814	293,180,593
2053	163,380,378	57,776,789	58,447,732	279,604,899
2054	159,220,520	55,706,771	50,835,465	265,762,756
2055	154,546,903	53,429,037	43,825,609	251,801,549
2056	149,452,106	51,068,099	37,442,986	237,963,191
2057	143,938,137	48,540,619	31,699,348	224,178,104
2058	138,101,932	46,001,264	26,592,965	210,696,161

This assumes the following:

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

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

Plan Year	Active Participants	Terminated Vested Participants	Retired Participants and Beneficiaries	Total
2059	\$131,948,426	\$43,356,683	\$22,108,930	\$197,414,039
2060	125,533,790	40,703,172	18,220,495	184,457,457
2061	118,969,573	38,036,837	14,890,813	171,897,223
2062	112,347,952	35,408,516	12,075,217	159,831,685
2063	105,688,192	32,821,254	9,723,679	148,233,125
2064	99,094,433	30,303,220	7,783,234	137,180,887
2065	92,623,265	27,868,890	6,200,508	126,692,663
2066	86,312,602	25,530,796	4,923,603	116,767,001
2067	80,201,945	23,298,210	3,903,774	107,403,929
2068	74,315,323	21,177,824	3,096,544	98,589,691
2069	68,668,774	19,174,224	2,462,375	90,305,373
2070	63,272,484	17,289,724	1,967,016	82,529,224
2071	58,132,243	15,524,881	1,581,485	75,238,609
2072	53,247,976	13,878,906	1,281,781	68,408,663

This assumes the following:

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

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

Plan Year	Employer Contributions	Withdrawal Liability Payments	Total
2023	\$253,629,552	-	\$253,629,552
2024	\$253,629,552	-	\$253,629,552
2025	\$253,629,552	-	\$253,629,552
2026	\$253,629,552	-	\$253,629,552
2027	\$253,629,552	-	\$253,629,552
2028	\$253,629,552	-	\$253,629,552
2029	\$253,629,552	-	\$253,629,552
2030	\$253,629,552	-	\$253,629,552
2031	\$253,629,552	-	\$253,629,552
2032	\$253,629,552	-	\$253,629,552

Section 3: Certificate of Actuarial Valuation

Schedule MB - Lines 9c and 9h
Schedule of Funding Standard Account Bases

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

Type of Base	Date Established	Outstanding Balance	Years Remaining	Amortization Amount
North Atlantic States Carpenters (including legacy New England) Bases				
Plan amendment	1/1/1995	\$5,374,000	2	\$2,780,996
Change in assumptions	1/1/1996	2,037,890	3	727,357
Plan amendment	5/1/1996	111,188	3.33	36,152
Plan amendment	5/1/1997	168,079	4.33	43,458
Plan amendment / change in assumptions	1/1/1998	8,210,639	5	1,879,647
Plan amendment / change in assumptions	1/1/1999	27,568,548	6	5,434,478
Plan amendment / change in assumptions	5/1/1999	2,487,798	6.33	469,854
Change in assumptions	1/1/2000	2,460,945	7	429,486
Plan amendment	1/1/2000	19,647,163	7	3,428,840
Change in assumptions	5/1/2000	437,574	7.33	73,704
Change in assumptions	1/1/2001	3,898,205	8	614,604
Plan amendment	1/1/2002	10,558,024	9	1,527,077
Plan amendment	1/1/2003	87,455	10	11,744
Plan amendment	1/1/2005	2,602,860	12	309,636
Plan amendment	5/1/2005	10,387	12.33	1,215
Plan amendment	1/1/2006	2,870,973	13	324,847
Plan amendment/Change in assumptions	1/1/2007	10,636,054	14	1,151,026
Base due to Dec. 31, 2008 investment loss	1/1/2009	248,994,885	15	25,894,226
Change in assumptions	1/1/2010	1,226,819	2	634,868
Base due to Dec. 31, 2008 investment loss	1/1/2010	35,713,107	15	3,713,985
Change in assumptions	1/1/2011	7,177,988	3	2,561,945

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North Atlantic States Carpenters Pension Fund Actuarial Valuation as of January 1, 2023
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Section 3: Certificate of Actuarial Valuation

Schedule MB - Lines 9c and 9h
Schedule of Funding Standard Account Bases

Type of Base	Date Established	Outstanding Balance	Years Remaining	Amortization Amount
Base due to Dec. 31, 2008 investment loss	1/1/2011	36,306,373	15	3,775,682
Change in assumptions	1/1/2012	19,019,587	4	5,265,119
Experience loss	1/1/2012	23,985,629	4	6,639,850
Base due to Dec. 31, 2008 investment loss	1/1/2012	56,671,557	15	5,893,559
Experience loss	1/1/2013	40,221,951	5	9,207,938
Change in assumptions	1/1/2014	14,014,378	6	2,762,599
Experience loss	1/1/2016	25,277,603	8	3,985,349
Experience loss	1/1/2017	25,409,336	9	3,675,121
Change in assumptions	1/1/2017	45,161,703	9	6,532,037
Experience loss	1/1/2019	56,188,944	11	7,073,906
Experience loss	1/1/2020	14,944,293	12	1,777,774
Plan amendment	1/1/2020	88,790	12	10,562
Change in assumptions	1/1/2021	297,400,880	13	33,650,512
Connecticut Carpenters Bases				
Plan amendment	4/1/1993	2,447	0.25	2,447
Change in assumptions	4/1/1993	22,662	0.25	22,662
Plan amendment	4/1/1997	187,509	4.25	49,263
Plan amendment	4/1/1999	211,193	6.25	40,292
Change in assumptions	4/1/1999	1,284,234	6.25	245,013
Change in assumptions	4/1/2000	1,686,980	7.25	286,551
Change in assumptions	4/1/2001	4,448,066	8.25	685,455
Plan amendment	12/1/2001	563,848	8.92	82,078
Plan amendment	1/1/2002	6,668,897	9	964,567
Plan amendment	4/1/2003	9,099,685	10.25	1,201,447
Plan amendment	4/1/2005	5,045,839	12.25	592,446

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Schedule MB - Lines 9c and 9h
Schedule of Funding Standard Account Bases

Type of Base	Date Established	Outstanding Balance	Years Remaining	Amortization Amount
Change in assumptions	4/1/2005	8,977,165	12.25	1,054,033
Change in assumptions	4/1/2008	97,543	0.25	97,543
Plan amendment	4/1/2008	360,359	0.25	360,359
Experience loss	4/1/2009	9,065,890	1.25	7,315,605
Change in assumptions	4/1/2011	1,333,333	3.25	443,001
Plan amendment	4/1/2012	843,780	4.25	221,679
Experience loss	4/1/2014	1,036,069	6.25	197,666
Experience loss	4/1/2015	5,024,131	7.25	853,402
Change in assumptions	4/1/2015	14,648,206	7.25	2,488,152
Change in assumptions	4/1/2016	1,436,306	8.25	221,337
Experience loss	4/1/2016	14,775,887	8.25	2,276,992
Experience loss	4/1/2017	8,737,322	9.25	1,239,240
Change in funding method	1/1/2018	25,116,615	5	5,749,901
Experience loss	1/1/2018	9,544,842	10	1,281,788
Change in assumptions	1/1/2018	1,514,548	10	203,390
Rhode Island Carpenters Bases				
Change in assumption	1/1/1997	473,412	4	131,053
Plan amendment	1/1/1998	170,402	5	39,010
Change in assumptions	1/1/1999	1,083,515	6	213,589
Plan amendment	1/1/1999	2,833,815	6	558,619
Change in assumption	1/1/2001	306,305	8	48,293
Plan amendment	1/1/2001	1,041,660	8	164,231
Plan amendment	1/1/2002	3,198,814	9	462,666
Plan amendment	1/1/2004	911,152	11	114,709
Plan amendment	1/1/2006	1,728,071	13	195,529

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Schedule MB - Lines 9c and 9h
Schedule of Funding Standard Account Bases

Type of Base	Date Established	Outstanding Balance	Years Remaining	Amortization Amount
Change in assumptions	1/1/2007	806,781	14	87,309
Experience loss	1/1/2009	78,709	1	78,709
Change in assumptions	1/1/2009	376,385	1	376,385
Base due to Dec. 31, 2008 investment loss	1/1/2009	24,018,060	15	2,497,758
Change in Assumptions	1/1/2010	28,790	2	14,899
Base due to Dec. 31, 2008 investment loss	1/1/2011	11,450,327	15	1,190,777
Experience loss	1/1/2012	6,868,049	4	1,901,256
Experience loss	1/1/2014	2,467,631	6	486,434
Change in assumptions	1/1/2014	2,796,356	6	551,235
Change in assumptions	1/1/2015	1,315,507	7	229,583
Experience loss	1/1/2015	4,262,965	7	743,976
Change in assumptions	1/1/2016	527,934	8	83,236
Experience loss	1/1/2016	6,644,332	8	1,047,567
Experience loss	1/1/2017	3,925,523	9	567,774
Change in assumptions	1/1/2018	527,348	10	70,818
Experience loss	1/1/2018	4,763,292	10	639,668
New York Carpenters Bases				
Albany plan change 1980	1/1/1980	121,440	2	62,844
Albany assumption change 1990	1/1/1990	253,513	2	131,191
Albany plan change 1990	1/1/1990	213,464	2	110,466
Albany plan change 1991	1/1/1991	743,017	3	265,195
Albany plan change 1992	1/1/1992	447,911	4	123,993
Albany plan change 1993	1/1/1993	2,575,657	5	589,640
South Central assumption change	5/1/1993	5,501	0.33	5,501
South Central plan change	5/1/1993	10,885	0.33	10,885

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Schedule MB - Lines 9c and 9h
Schedule of Funding Standard Account Bases

Type of Base	Date Established	Outstanding Balance	Years Remaining	Amortization Amount
South Central plan change	5/1/1993	8,577	0.33	8,577
Albany plan change 1994	1/1/1994	961,802	6	189,596
Plan amendment	7/1/1994	349,853	1.5	237,292
Albany assumption change 1995	1/1/1995	158,290	7	27,625
Niagara plan amendment	1/1/1995	559,460	2	289,515
Plan amendment	1/1/1995	1,050,065	2	543,399
Upstate plan amendment	1/1/1995	39,921	2	20,659
Plan amendment	1/1/1996	272,311	3	97,192
Upstate assumption change	1/1/1996	199,787	3	71,307
Assumption change	7/1/1996	1,275,415	3.5	396,811
Plan amendment	7/1/1996	652,328	3.5	202,954
Albany plan change 1997	1/1/1997	2,165,947	9	313,275
Niagara plan amendment	1/1/1997	300,291	4	83,128
Plan amendment	7/1/1997	2,640,948	4.5	660,751
Albany plan change 1998	1/1/1998	3,651,102	10	490,311
Niagara assumption change	1/1/1998	557,119	5	127,540
Niagara plan amendment	1/1/1998	704,882	5	161,367
South Central plan change	1/1/1998	367,205	5	84,064
South Central plan change	1/1/1998	49,819	5	11,405
Upstate plan amendment	1/1/1998	385,937	5	88,352
South Central plan change	5/1/1998	301,495	5.33	65,454
Assumption change	7/1/1998	1,091,606	5.5	230,944
Plan amendment	7/1/1998	2,722,022	5.5	575,882
Albany assumption change 1999	1/1/1999	2,351,654	11	296,061
Albany plan change 1999	1/1/1999	2,188,444	11	275,514

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Schedule MB - Lines 9c and 9h
Schedule of Funding Standard Account Bases

Type of Base	Date Established	Outstanding Balance	Years Remaining	Amortization Amount
Niagara plan amendment	1/1/1999	880,263	6	173,523
South Central assumption change	1/1/1999	656,479	6	129,409
South Central plan change	1/1/1999	822,901	6	162,215
Upstate plan amendment	1/1/1999	436,536	6	86,053
South Central plan change	5/1/1999	1,520,286	6.33	287,126
Plan amendment	7/1/1999	9,401,136	6.5	1,738,638
Albany plan change 2000	1/1/2000	1,125,323	12	133,869
Niagara plan amendment	1/1/2000	134,302	7	23,439
Plan amendment	1/1/2000	16,612,069	7	2,899,153
South Central plan change	1/1/2000	1,839,386	7	321,011
South Central plan change	1/1/2000	661,228	7	115,398
Upstate plan amendment	1/1/2000	244,535	7	42,676
South Central assumption change	5/1/2000	620,743	7.33	104,557
Assumption change	7/1/2000	3,938,224	7.5	651,844
Plan amendment	7/1/2000	1,365,316	7.5	225,983
Albany plan change 2001	1/1/2001	966,161	13	109,320
South Central plan change	1/1/2001	1,001,783	8	157,944
South Central plan change	1/1/2001	40,852	8	6,441
Upstate assumption change	1/1/2001	36,061	8	5,685
Upstate plan amendment	7/1/2001	2,444,781	8.5	368,564
Albany assumption change 2002	1/1/2002	917,590	14	99,301
South Central assumption change	1/1/2002	280,038	9	40,504
South Central plan change	1/1/2002	572,426	9	82,794
Upstate plan amendment	1/1/2002	1,148,361	9	166,095
Plan amendment	7/1/2002	7,445,189	9.5	1,036,234

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Schedule MB - Lines 9c and 9h
Schedule of Funding Standard Account Bases

Type of Base	Date Established	Outstanding Balance	Years Remaining	Amortization Amount
Plan amendment	7/1/2003	3,025,721	10.5	392,994
South Central assumption change	1/1/2004	672,618	11	84,679
South Central assumption change	5/1/2004	569,681	11.33	70,335
South Central plan change	1/1/2005	214,337	12	25,498
Albany actuarial loss 2006	1/1/2006	996,147	3	355,542
Albany assumption change 2006	1/1/2006	11,105,429	18	1,048,038
Niagara plan amendment	1/1/2006	4,138,322	13	468,246
South Central plan change	1/1/2006	964,170	13	109,095
Albany Adirondack merger charges	5/1/2007	1,672,020	0.34	1,672,020
Upstate assumption change	7/1/2007	2,898,828	14.5	307,357
Albany actuarial loss 2008	1/1/2008	1,549,802	5	354,793
Actuarial loss	7/1/2008	1,041,352	0.5	1,041,352
Albany actuarial loss 2009	1/1/2009	695,874	6	137,175
Albany assumption change 2009	1/1/2009	181,680	6	35,814
Albany ENIL 2009	1/1/2009	19,600,610	15	2,038,366
South Central actuarial loss	1/1/2009	3,587,722	1	3,587,722
Actuarial loss	7/1/2009	8,265,276	1.5	5,606,020
ENIL 2009	7/1/2009	82,936,101	15.5	8,468,142
Actuarial loss	7/1/2010	7,866,726	2.5	3,312,735
Albany ENIL 2011	1/1/2011	9,413,209	15	978,927
Actuarial loss	7/1/2011	19,372,684	3.5	6,027,283
Albany actuarial loss 2012	1/1/2012	2,530,423	4	700,487
Albany assumption change 2012	1/1/2012	109,870	4	30,415
Albany ENIL 2012	1/1/2012	2,401,842	15	249,780
Albany plan change 2012	1/1/2012	1,118,719	4	309,691

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Schedule MB - Lines 9c and 9h
Schedule of Funding Standard Account Bases

Type of Base	Date Established	Outstanding Balance	Years Remaining	Amortization Amount
Actuarial loss	7/1/2012	20,432,055	4.5	5,111,988
Assumption change	7/1/2012	7,912,168	4.5	1,979,581
Albany ENIL 2013	1/1/2013	2,622,058	15	272,681
Jamestown merger base	1/1/2013	6,793,856	10.01	911,726
Albany ENIL 2014	1/1/2014	4,851,565	15	504,539
Actuarial loss	7/1/2014	17,936,994	6.5	3,317,253
Albany actuarial loss 2015	1/1/2015	4,030,005	7	703,320
Actuarial loss 2015	7/1/2015	22,010,936	7.5	3,643,192
Albany actuarial loss 2016	1/1/2016	5,857,221	8	923,468
Albany funding method change 2016	1/1/2016	4,372,534	3	1,560,631
Empire actuarial loss 2016	1/1/2016	11,466,906	8	1,807,909
Plan change 2016 - Empire portion	1/1/2016	7,707,285	8	1,215,155
Plan change 2016 - Albany portion	1/1/2016	737,552	8	116,285
Northeast actuarial loss	1/1/2017	57,104,075	9	8,259,342
Northeast actuarial loss	1/1/2018	25,626,054	10	3,441,353
Northeast actuarial loss	1/1/2019	92,867,740	11	11,691,582
Total		\$1,825,057,900		\$281,859,522

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Schedule MB - Lines 9c and 9h
Schedule of Funding Standard Account Bases

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

Type of Base	Date Established	Outstanding Balance	Years Remaining	Amortization Amount
North Atlantic States Carpenters (including legacy New England) Bases				
Merger with Northern New England Carpenters Pension Fund	1/1/2006	\$667,321	13	\$75,510
Experience gain	1/1/2009	8,929,550	1	8,929,550
Experience gain	1/1/2010	14,958,274	2	7,740,771
Experience gain	1/1/2011	10,364,314	3	3,699,199
Change in assumptions	1/1/2013	8,703,469	5	1,992,469
Experience gain	1/1/2014	12,151,224	6	2,395,322
Change in assumptions	1/1/2015	164,842	7	28,768
Experience gain	1/1/2015	7,055,473	7	1,231,327
Experience gain	1/1/2018	8,255,026	10	1,108,577
Change in assumptions	1/1/2018	5,742,563	10	771,176
Plan amendment	1/1/2019	9,819,085	11	1,236,174
Experience gain	1/1/2021	72,104,514	13	8,158,529
Change in funding method	1/1/2021	1,820,716	8	287,060
Plan amendments	1/1/2021	21,913,077	13	2,479,435
Experience gain	1/1/2022	147,349,618	14	15,946,075
Change in assumptions	1/1/2022	24,233,867	14	2,622,573
Plan amendments	1/1/2022	11,833,062	14	1,280,566
Experience gain	1/1/2023	7,453,286	15	775,105
Change in assumptions	1/1/2023	11,014,283	15	1,145,430
Connecticut Carpenters Bases				
Change in assumptions	4/1/1998	1,987	5.25	437
Experience gain	4/1/2008	138,430	0.25	138,430

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Schedule MB - Lines 9c and 9h
Schedule of Funding Standard Account Bases

Type of Base	Date Established	Outstanding Balance	Years Remaining	Amortization Amount
Experience gain	4/1/2010	2,228,030	2.25	1,033,658
Experience gain	4/1/2011	1,794,005	3.25	596,060
Experience gain	4/1/2012	541,876	4.25	142,362
Experience gain	4/1/2013	1,688,054	5.25	371,081
Change in assumptions	4/1/2013	2,393,274	5.25	526,109
Change in assumptions	4/1/2014	4,369,924	6.25	833,716
Change in asset method	1/1/2018	5,148,940	5	1,178,738
Rhode Island Carpenters Bases				
Change in asset method	1/1/2009	7,748,170	16	777,474
Experience gain	1/1/2010	777,975	2	402,595
Base due to Dec. 31, 2008 investment loss	1/1/2010	5,137,796	15	534,305
Change in assumptions	1/1/2011	608,734	3	217,267
Experience gain	1/1/2011	3,602,781	3	1,285,894
Experience gain	1/1/2013	762,206	5	174,490
Change in assumptions	1/1/2017	695,385	9	100,578
New York Carpenters Bases				
Assumption change	7/1/1983	38,412	0.5	38,412
Niagara assumption change	1/1/1994	18,565	1	18,565
Upstate assumption change	1/1/1994	6,568	1	6,568
Assumption change	1/1/1995	1,230,954	2	637,008
Albany assumption change 1996	1/1/1996	488,378	3	174,310
Upstate plan amendment	1/1/1996	86,456	3	30,858
Assumption change	7/1/1997	1,524,588	4.5	381,444
South Central assumption change	5/1/1998	70,486	5.33	15,302
Assumption change	7/1/1999	3,103,961	6.5	574,044

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Schedule MB - Lines 9c and 9h
Schedule of Funding Standard Account Bases

Type of Base	Date Established	Outstanding Balance	Years Remaining	Amortization Amount
South Central assumption change	1/1/2001	594,405	8	93,716
South Central assumption change	5/1/2001	607,938	8.33	93,020
Niagara assumption change	1/1/2002	1,050,790	9	151,983
Assumption change	7/1/2002	1,519,698	9.5	211,514
Upstate assumption change	7/1/2002	1,399,392	9.5	194,770
Niagara assumption change	1/1/2003	25,031	10	3,361
South Central assumption change	1/1/2003	803,831	10	107,947
Albany assumption change 2004	1/1/2004	2,200,455	11	277,026
South Central plan change	1/1/2004	829,462	11	104,425
Upstate assumption change	1/1/2004	521,845	11	65,698
Upstate plan amendment	7/1/2004	858,044	11.5	104,912
Niagara plan amendment	1/1/2005	267,806	12	31,858
Niagara plan amendment	1/1/2007	2,395,343	14	259,222
Assumption change	7/1/2008	230,810	0.5	230,810
Plan amendment	7/1/2008	117,630	0.5	117,630
Albany funding relief 2009	1/1/2009	6,949,013	16	697,284
South Central assumption change	1/1/2009	967,072	1	967,072
Plan amendment	7/1/2009	3,827,880	1.5	2,596,304
Relief method change	7/1/2009	52,608,273	16.5	5,192,372
Albany actuarial gain 2010	1/1/2010	361,573	2	187,111
Albany ENIL 2010	1/1/2010	5,110,066	15	531,421
Albany actuarial gain 2011	1/1/2011	2,413,720	3	861,498
Albany hours assumption change	1/1/2011	767,515	3	273,939
Assumption change	7/1/2011	14,587,281	3.5	4,538,435
Plan amendment	7/1/2011	2,067,856	3.5	643,357

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Schedule MB - Lines 9c and 9h
Schedule of Funding Standard Account Bases

Type of Base	Date Established	Outstanding Balance	Years Remaining	Amortization Amount
Albany actuarial gain 2013	1/1/2013	2,101,866	5	481,176
Actuarial gain	7/1/2013	4,322,587	5.5	914,503
Albany actuarial gain 2014	1/1/2014	1,282,931	6	252,899
Assumption change 2015	7/1/2015	14,503,646	7.5	2,400,605
Albany assumption change 2016	1/1/2016	3,334,500	8	525,728
Empire assumption change 2016	1/1/2016	5,414,716	8	853,702
Northeast actuarial gain	1/1/2020	3,567,051	12	424,337
Total		\$566,349,525		\$96,482,956

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Exhibit J: Summary of Plan Provisions

(Schedule MB, Line 6)

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

The Rhode Island Carpenters Pension Plan and the Connecticut Carpenters Pension Plan merged into the New England Carpenters Pension Plan (now the North Atlantic States Carpenters Pension Plan) on January 1, 2018. Some plan provisions were changed for benefits earned on or after January 1, 2019 and further changes were made for benefits earned on or after January 1, 2021, including the actuarial equivalence basis for the reductions for standard and optional forms of payment.

The assets and liabilities of the Empire and Albany/Adirondack participants in the Northeast Carpenters Pension Plan were transferred to the North Atlantic States Carpenters Pension Plan on December 31, 2020. The plan provisions in effect on December 31, 2020 are unchanged.

The plan provisions in this exhibit are shown separately for the participants in the former New England, Rhode Island and Connecticut Plans and for the Empire and Albany/Adirondack participants.

Plan Year	January 1 through December 31
Pension Credit Year	January 1 through December 31
Plan Status	Ongoing plan

Section 3: Certificate of Actuarial Valuation

New England Carpenters Pension Fund

Regular Pension	• <i>Age Requirement:</i> 62 (65 for those hired on or after January 1, 2021) • <i>Service Requirement:</i> 10 pension credits • <i>Amount:</i> For retirements after January 1, 2008, \$11.70 for each pension credit earned prior to June 1, 1962 plus \$108 per year of pension credit after June 1, 1962 and prior to December 31, 2005, and \$127 thereafter. No maximum on years of service. Service in excess of 30 years must be future service. Effective January 1, 2019, employees who earn 1,850 hours or more in a year will receive a bonus accrual of \$5. For Local 723 participants, the accrual rate is \$64. Effective January 1, 2019, employees who earn 1,850 hours or more in a year will receive a bonus accrual of \$3. For former participants of the Northern New England Carpenter Pension Fund and Carpenters working in Covered Employment in Northern New England (Northern New England Carpenters) retiring after January 1, 2008, the accrual rate is \$20 for years of credited service prior to May 1, 1987, \$70 for years of credited service after May 1, 1987 and prior to January 1, 2023, and \$75.80 for years of credited service after December 31, 2022. There is no bonus accrual rate. For Millwrights working in Covered Employment in Northern New England, retiring after April 1, 2015, the accrual rate is \$20 for years of credited service prior to May 1, 1987, \$70 for years of credited service after May 1, 1987 and prior to March 31, 2015, \$80 for years of credited service after April 1, 2015 and prior to December 31, 2019, \$90 for years of credited service after December 31, 2019 and prior to December 31, 2020, \$100 for years of credited service after December 31, 2020 and prior to December 31, 2022, and \$110 for years of credited service after December 31, 2022. There is no bonus accrual rate.
Service Pension	• <i>Age Requirement:</i> None • <i>Service Requirement:</i> 30 pension credits • <i>Amount:</i> Regular pension accrued
Early Retirement	• <i>Age Requirement:</i> 55 • <i>Service Requirement:</i> 10 pension credits • <i>Amount:</i> Regular pension accrued reduced by 1% for each year of age less than 62 for benefits earned before January 1, 2019 and by 6% for each year of age less than 62 for benefits earned on or after January 1, 2019.
Disability	• <i>Age Requirement:</i> None • <i>Service Requirement:</i> 15 pension credits, or 10 pension credits of which at least 9 were by actual work in covered employment during the contribution period or 10 years of vesting service. • <i>Amount:</i> Regular pension accrued. Participant must be eligible for Social Security Disability Benefits for benefits earned after December 31, 2020.

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Partial Pension	• <i>Requirement:</i> Combined pension credit from this and related plans makes the participant eligible for a pension from all such related plans. • <i>Amount:</i> Pursuant to Section 8.03 of the Pension Plan Rules and Regulations.
Vesting	• <i>Age Requirement:</i> None • <i>Service Requirement:</i> 5 years of vesting service • <i>Amount:</i> Regular pension accrued • <i>Normal Retirement Age:</i> 62 or, if later, the fifth anniversary of participation.
Spouse's Pre-Retirement Death Benefit	For benefits accrued through December 31, 2020: • <i>Requirement:</i> a) 3 pension credits earned during the contribution period and earned at least one-tenth pension credit in 36-month period immediately preceding his death, or b) Age 55 or eligible for a Service Pension and dies prior to retirement when he is eligible by virtue of his age and service for a pension. • <i>Amount:</i> 75% of the benefit employee would have received had he retired the day before he died and qualified for the Participant-Spouse benefit. The maximum early retirement reduction is 7%. or • <i>Requirement:</i> 5 years of vesting service and not eligible for the above spouse's benefit. • <i>Amount:</i> 50% of the benefit the employee would have received had he retired the day before he died and elected the 50% joint-and-survivor annuity. The maximum early retirement reduction is 7%. If the employee has less than 10 years of vesting service, the benefit is payable when the employee would have been age 62. For benefits accrued after December 31, 2020: • <i>Requirement:</i> 5 years of vesting service • <i>Amount:</i> 75% Participant-Spouse benefit if one-tenth pension credit is worked in either of two Plan Years preceding death. If the work test is not met, 50% Participant-Spouse benefit. The maximum early retirement reduction is 42%. There is no early retirement reduction for participants with at least 15 pension credits if the work test is met.

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Pre-Retirement Death Benefit (if not eligible for or elects out of spouse's benefit)

For benefits accrued through December 31, 2020:

- *Age Requirement:* None
- *Service Requirement:* 3 pension credits earned during the contribution period and earned at least one-tenth pension credit in 36-month period immediately preceding his death.
- *Amount:* Monthly benefit to which employee would have been entitled had he retired the day before he died and elected a 120-month certain guaranteed benefit. Not reduced for early payment.

For benefits accrued after December 31, 2020:

- *Age Requirement:* None
- *Service Requirement:* 5 years of vesting service
- *Amount:* 10-year certain pension if one-tenth pension credit is worked in either of two Plan Years preceding death. If the work test is not met, 5-year certain pension. The maximum early retirement reduction is 42%. There is no early retirement reduction for participants with at least 15 pension credits if the work test is met.

Automatic Benefit Forms

- *Not Married:* The accrued pension is paid as a 5-Year Certain and Life Benefit.
- *Married:* Lifetime monthly annuity to the retiree with 75% Participant-Spouse Pension continuing to the retiree's spouse following the retiree's death for benefits accrued through December 31, 2020 and with 50% Participant-Spouse Pension continuing to the spouse for benefits accrued after December 31, 2020. The accrued benefit is adjusted to provide for this benefit. There is also a subsidized pop-up for the 24 months following retirement.

Optional Forms of Benefits

- *Certain and Life:* Nonmarried retirees may elect the Ten-Year Certain and Life Benefit and married retirees may elect the Ten- or Five-Year Certain and Life Benefit. The accrued benefit is adjusted (upward or downward) to provide for this benefit.
- *Joint and Survivor Forms:* For benefits through December 31, 2020, retirees may elect a joint and survivor annuity with either a 50%, 75%, or 100% joint and survivor benefit continued to a named beneficiary (who need not be the spouse of the retiree). The benefit under any such election will be adjusted to provide for this benefit.
- *Participant-Spouse:* Retirees may elect a Participant-Spouse annuity with either a 50% or 100% benefit, with or without pop-up, based on simplified factors for benefits accrued through December 31, 2020 and a 75% or 100% benefit without pop-up based on actuarial equivalence for benefits accrued after December 31, 2020. There is also a subsidized pop-up for the 24 months following retirement for the options that do not include a full pop-up.

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Participation	The earliest July 1 or January 1 following completion of a 12-month period during which at least 140 hours were worked.
Pension Credit	One-tenth of a pension credit is granted for each 140 hours worked with a maximum of one full year of credit for 1,400 hours or more worked during a plan year.
Vesting Service	One-tenth of a year of service is granted for each 140 hours worked with a maximum of one full year of service for 840 hours or more worked in a Plan year. Vesting service is credited for future service only.

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Connecticut Carpenters Pension Fund

Regular Pension

- **Age Requirement:** 62 (65 for those hired after April 1, 2007)
- **Service Requirement:** 5th anniversary of plan participation
- **Amount:** \$8.00 times service prior to April 1, 1958, plus \$11.00 times past service between April 1, 1958 and March 31, 1981, plus \$20.00 times future service or special future service granted between April 1, 1958 and March 31, 1973, plus \$50.00 times pension credit earned between April 1, 1973 and March 31, 1987, plus the multi-rate benefit for pension credit earned after March 31, 1987, which is computed as follows:

Multi-Rate Benefit

Period	Multiplier	% of Contributions	Cap ¹	\$10 Additional Accrual
4/1/1987 – 3/31/1995	50	100.0%	N/A	No
4/1/1995 – 6/30/1999	50	100.0%	N/A	Yes
7/1/1999 – 3/31/2000	41	100.0%	\$90	Yes
4/1/2000 – 3/31/2001	35	100.0%	\$90	Yes
4/1/2001 – 8/31/2002	30	100.0%	\$90	Yes
9/1/2002 – 4/30/2003	30	86.0%	\$90	Yes
5/1/2003 – 6/30/2004	30	80.0%	\$90	Yes
7/1/2004 – 6/30/2005	30	65.0%	\$90	Yes
7/1/2005 – 6/30/2007	30	58.0%	\$90	Yes
7/1/2007 – 3/31/2008	30	56.1%	\$90	Yes
4/1/2008 – 6/30/2008	30	56.1%	\$100	N/A
7/1/2008 – 6/30/2009	30	53.8%	\$100	N/A
7/1/2009 – 6/30/2010	30	48.0%	\$100	N/A
7/1/2010 – 3/31/2011	30	43.3%	\$100	N/A
4/1/2011 – 6/30/2013	30	42.0%	\$100	N/A
7/1/2013 – 6/30/2016	30	41.2%	\$100	N/A
7/1/2016 – 6/30/2017	30	39.8%	\$100	N/A
7/1/2017 – 12/31/2019	30	37.9%	\$100	N/A
1/1/2020 – 12/31/2022	30	36.1%	\$100	N/A

For benefits earned on or after January 1, 2019, employees who earn 1,850 or more hours in a year will receive a bonus accrual of \$20.

The benefit earned on and after January 1, 2021 for all employees excluding Shop employees is \$100 per pension credit or \$60 per pension credit for Connecticut Fund Office employees. The benefit earned on and

¹ The Fund Office cap increased from \$50 to \$60 after April 1, 2008. The \$10 additional accrual applies to members who retire after April 1, 2008 and meet certain work tests.

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	after January 1, 2022 for Shop employees ranges from \$11.40 to \$48.00 based on the Shop employee's contribution rates.
Early Retirement	• <i>Age Requirement:</i> 55 • <i>Service Requirement:</i> 10 pension credits for benefits accrued on or after January 1, 2019 and 15 pension credits for benefits accrued before January 1, 2019 • <i>Amount:</i> Regular pension accrued reduced by 6% for each year of age less than 62. Unreduced if 30 pension credits. For benefits accrued through December 31, 2020, unreduced if age plus service totals at least 92 or 30 years of vesting service.
Disability	• <i>Age Requirement:</i> None • <i>Service Requirement:</i> 10 pension credits for benefits earned through December 31, 2020. For benefits accrued after December 31, 2020, 10 pension credits or 10 vesting credits. • <i>Amount:</i> Regular pension accrued. Participant must be eligible for Social Security Disability Benefits.
Vesting	• <i>Age Requirement:</i> None • <i>Service Requirement:</i> 5 years of vesting service • <i>Amount:</i> Regular or early pension accrued.
Partial Pension	• <i>Requirement:</i> Combined service with this and related plans qualifies participant for a pension. • <i>Amount:</i> Regular or early pension accrued based on service in this plan.
Spouse's Pre-Retirement Death Benefit	For benefits accrued through December 31, 2020: • <i>Age Requirement:</i> None • <i>Service Requirement:</i> 5 years of vesting service • <i>Amount:</i> 100% of the benefit employee would have received had he or she retired the day before he or she died and elected the 100% Alternative Husband-and-Wife Pension. In the case of a participant with 15 pension credits who earned at least 240 hours in either of the two Plan Years preceding the date of death, there is no reduction for early commencement of benefits. The benefit is not reduced for commencement before age 55. For benefits accrued after December 31, 2020: • <i>Age Requirement:</i> None • <i>Service Requirement:</i> 5 years of vesting service • <i>Amount:</i> 75% Participant-Spouse benefit if one-tenth pension credit is worked in either of two Plan Years preceding death. If the work test is not met, 50% Participant-Spouse benefit. The maximum early retirement reduction is 42%. There is no early retirement reduction for participants with at least 15 pension credits if the work test is met.

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Pre-Retirement Death Benefit (if not eligible for, or elects out of, the Spouse's Benefit)	For benefits accrued through December 31, 2020: • <i>Age Requirement:</i> None • <i>Service Requirement:</i> 5 years of vesting service • <i>Amount:</i> 100% of the benefit the employee would have received had he or she retired the date before he or she died and elected the Ten Year Certain Pension. The benefit is reduced for commencement prior to age 55. In the case of a participant with 15 pension credits who worked at least 240 hours in either of the two Plan Years preceding the date of death, there is no reduction for early commencement of benefits. For benefits accrued after December 31, 2020: • <i>Age Requirement:</i> None • <i>Service Requirement:</i> 5 years of vesting service • <i>Amount:</i> 10-year certain pension if one-tenth pension credit is worked in either of two Plan Years preceding death. If the work test is not met, 5-year certain pension. The maximum early retirement reduction is 42%. There is no early retirement reduction for participants with at least 15 pension credits if the work test is met.
Automatic Benefit Forms	• <i>Not Married:</i> Accrued pension paid as a Ten-Year Certain and Life Pension for benefits accrued through December 31, 2020, and as a Five-Year Certain and Life Pension for benefits accrued after December 31, 2020. • <i>Married:</i> Lifetime monthly annuity to the retiree with 50% of such annuity continuing to the retiree's spouse following the retiree's death. The accrued benefit is adjusted such that the value is the actuarial equivalent of the Ten-Year Certain and Life Pension for benefits accrued through December 31, 2020 and the actuarial equivalent of a Five-Year Certain and Life Pension for benefits accrued after December 31, 2020. There is also a subsidized pop-up for the 24 months following retirement for benefits accrued after December 31, 2020.
Optional Forms of Benefits	• <i>Married:</i> For benefits earned through December 31, 2020, married retirees may elect a husband and wife annuity with either 75% or 100% continued to the spouse of the retiree, or a Ten-Year Certain and Life Pension. The benefit under any such election is adjusted such that the value is the actuarial equivalent of the Ten-Year Certain and Life Pension. For benefits earned after December 31, 2020, married retirees may elect a husband and wife annuity with either 75% or 100% continued to the spouse of the retiree, or a Ten-Year or Five-Year Certain and Life Pension. The benefit under any such election is adjusted such that the value is the actuarial equivalent of the Five-Year Certain and Life Pension. There is also a subsidized pop-up for the 24 months following retirement for benefits accrued after December 31, 2020. • <i>Not Married:</i> For benefits earned after December 31, 2020, single retirees may elect a Ten-Year Certain and Life Pension.
Participation	The earliest July 1 or January 1 following completion of a 12-month period during which at least 140 hours were worked.

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Pension Credit	One-tenth of a pension credit is granted for each 140 hours worked with a maximum of one full year of credit for 1,400 hours or more worked during a plan year.
Vesting Service	One-tenth of a year of service is granted for each 140 hours worked with a maximum of one full year of service for 840 hours or more worked in a Plan year.

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Rhode Island Carpenters Pension Fund

Regular Pension	Construction Employees • <i>Age Requirement:</i> 62 (65 for those who hired on or after January 1, 2021) • <i>Service Requirement:</i> Five years of credited service • <i>Amount:</i> Years of past service (maximum 30 years) times \$2, plus service prior to January 1, 1973 times \$70, plus future service after January 1, 1973 times \$100. Providence Housing Authority employees accrue 71% of the benefit rate of Construction Employees. For benefits earned on or after January 1, 2019, employees who earn 1,850 or more hours in a year will receive a bonus accrual of \$20. Shop Employees • <i>Age Requirement:</i> 62 • <i>Service Requirement:</i> Five years of credited service • <i>Amount:</i> Years of past service (maximum 30 years) times \$2 plus future service prior to January 1, 1993 times \$43, plus \$21.50 times years of future service after January 1, 1993. Effective May 1, 2000, shop employees are no longer accruing benefits from this Plan.
Service Pension	• <i>Service Requirement:</i> 30 years of vesting credit for benefits accrued through December 31, 2020 and 30 pension credits for benefits accrued after December 31, 2020. • <i>Amount:</i> Normal pension accrued
Early Retirement	• <i>Age Requirement:</i> 55 • <i>Service Requirement:</i> 10 years of credited service for benefits accrued on or after January 1, 2019 and 5 pension credits for benefits accrued before January 1, 2019. • <i>Amount:</i> Normal pension accrued, reduced by 6% for each year of age less than 62.
Disability	• <i>Age Requirement:</i> None • <i>Service Requirement:</i> 10 years of credited service for benefits earned through December 31, 2020. For benefits accrued after December 31, 2020, 10 years of credited service or 10 vesting credits. • <i>Amount:</i> Normal pension accrued. Participant must be eligible for Social Security Disability Benefits.
Vesting	• <i>Age Requirement:</i> None • <i>Service Requirement:</i> Five years of vesting service. • <i>Amount:</i> Normal pension accrued, payable at age 62
Partial Pension	• <i>Requirement:</i> Combined service is at least 5 years including two for which contributions have been made.

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Spouse's Pre-Retirement Death Benefit	For benefits accrued through December 31, 2020: • <i>Age Requirement:</i> None • <i>Service Requirement:</i> Five years of vesting service • <i>Amount:</i> 50% of the benefit the employee would have received had he or she retired the day before he or she died and elected the 50% joint and survivor option. For active participants with 10 years of vesting credit, the amount is 75% of the benefit the employee would have received had he or she retired the day before he or she died and elected the 75% joint and survivor option. Calculated as if the employee were at least age 62 (actual age if greater) and the spouse were the age attained when the employee would have been age 62. For benefits accrued after December 31, 2020: • <i>Age Requirement:</i> None • <i>Requirement:</i> 5 years of vesting service • <i>Amount:</i> 75% Participant-Spouse benefit if one-tenth pension credit is worked in either of two Plan Years preceding death. If the work test is not met, 50% Participant-Spouse benefit. The maximum early retirement reduction is 42%. There is no early retirement reduction for participants with at least 15 pension credits if the work test is met.
Pre-Retirement Lump-sum Death Benefit (applicable only if the employee is not eligible for a different death benefit)	• <i>Age Requirement:</i> None • <i>Service Requirement:</i> 1 year of future service, and at least one-tenth of a pension credit in the 24 months preceding death • <i>Amount:</i> \$300 per year of future service to a maximum of \$6,000 based on service through December 31, 2020.
Pre-Retirement Death Benefit (applicable if the employee is not eligible for or elects out of the spouse's pension)	For benefits accrued through December 31, 2020: • <i>Age Requirement:</i> None • <i>Service Requirement:</i> 5 years of vesting service • <i>Amount:</i> Normal pension accrued, reduced as 10-year certain option For benefits accrued after December 31, 2020: • <i>Age Requirement:</i> None • <i>Service Requirement:</i> 5 years of vesting service • <i>Amount:</i> 10-year certain pension if one-tenth pension credit is worked in either of two Plan Years preceding death. If the work test is not met, 5-year certain pension. The maximum early retirement reduction is 42%. There is no early retirement reduction for participants with at least 15 pension credits if the work test is met.
Post-Retirement Death Benefit	• <i>Lump – sum Benefit:</i> \$300 per year of future service to a maximum of \$6,000 less benefits paid. Minimum benefit payable is \$3,000. There is no lump-sum payable for retirements on or after January 1, 2021.

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Post-Retirement Health Benefits	Retired shop employees between the ages of 62 and 65 who had not incurred a one-year break in service are eligible for retiree health benefits. No liability is included in this valuation for post-retirement health benefits and the assets for these benefits are excluded from the market value of assets and the actuarial value of assets.
Automatic Benefit Forms	• <i>Not Married:</i> The accrued pension is paid as a lifetime monthly annuity for benefits accrued through December 31, 2020 and as a Five-Year Certain and Life Pension for benefits accrued after December 31, 2020. • <i>Married:</i> Lifetime monthly annuity to the retiree with 50% of such annuity continuing to the retiree's spouse following the retiree's death. The accrued benefit is adjusted to provide for this benefit. There is also a subsidized pop-up for the 24 months following retirement for benefits accrued after December 31, 2020.
Optional Forms of Benefits	For benefits accrued through December 31, 2020: • <i>Ten-Year Certain and Life:</i> The retiree may elect the Ten-Year Certain and Life Benefit. The accrued pension is adjusted such that the value is the actuarial equivalent of the life annuity. • <i>Joint and Survivor Forms:</i> Retirees may elect a joint and survivor annuity with either a 50%, 66 2/3%, 75%, or 100% survivor benefit continued to a named beneficiary (who need not be the spouse of the retiree). The benefit under any such election will be adjusted so that it will be actuarially equivalent to the single life annuity. For benefits accrued after December 31, 2020: • Married retirees may elect a joint and survivor annuity with either 75% or 100% continued to the spouse of the retiree, or a Ten-Year or Five-Year Certain and Life Pension. The benefit under any such election is adjusted such that the value is the actuarial equivalent of the Five-Year Certain and Life Pension. There is also a subsidized pop-up for the 24 months following retirement. • Single retirees may elect a Ten-Year Certain and Life Pension. The benefit is adjusted such that the value is the actuarial equivalent of the Five-Year Certain and Life Pension.
Participation	The earliest July 1 or January 1 following completion of a 12-month period during which at least 140 hours were worked.
Credited Service	One-tenth of a pension credit is granted for each 140 hours worked with a maximum of one full year of credit for 1,400 hours or more worked during a plan year.
Vesting Credit	One-tenth of a year of service is granted for each 140 hours worked with a maximum of one full year of service for 840 hours or more worked in a Plan year.
Banking of Hours	Construction employees accumulate hours in excess of the highest minimum number of hours required for the highest benefit level in any such year. Effective January 1, 2019, the hour bank is frozen.

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Northeast Carpenters Pension Plan (Empire and Albany/Adirondack Participants)

Accrued Benefits	Except where otherwise noted, separate rules apply to benefits accrued prior to January 1, 2016 under the following plans for participants who began participation under the Northeast Carpenters Pension Plan due to the merger of such plans into the Northeast Carpenters Pension Plan: • Empire (Empire State Carpenters Pension Plan), where separate rules also apply to benefits accrued prior to January 1, 2012¹, as detailed below • Albany/Adirondack (United Brotherhood of Carpenters and Joiners of America Albany/Adirondack Pension Fund), where separate rules also apply to those who were Adirondack Participants as of January 1, 2012 Separate rules also apply to benefits accrued prior to January 1, 2012¹ under the following plans for carpenters who began participation under the Empire plan due to the merger of such plans into the Suffolk County plan to form the Empire plan: • Long Island (The Suffolk County Carpenters Pension Plan) • Westchester (The Westchester County New York Carpenters Pension Fund) • Hudson Valley (The Hudson Valley District Council of Carpenters Pension Plan) • Rockland (The Carpenters Local 964 Pension Fund) • Rochester (Rochester Carpenters' Pension Fund) • Niagara (The Niagara-Genesee & Vicinity Carpenters Local 280 Pension Fund) • Upstate (Upstate New York Carpenters Pension Fund) • South Central (South Central New York District Council of Carpenters Pension Fund) • Jamestown (Carpenters Local #66 of Olean and Vicinity Pension Plan)
Regular Pension	For benefits accrued in the Empire plan on or after January 1, 2012 or in the Northeast plan on or after January 1, 2016, and for benefits accrued in the Albany/Adirondack plan: • <i>Age Requirement:</i> 65 • <i>Service Requirement:</i> 5 years of participation credit • <i>Amount:</i> – 73% of contributions will be used to determine the monthly benefit for accruals earned after June 30, 2022, effectively reducing the accrual from 0.85% to 0.6205%. – 0.85% of the contributions required to be made to the Plan for accruals earned after December 31, 2020. – 1.00% of the contributions required to be made to the Plan for accruals earned between January 1, 2012 and before November 30, 2020. – For Albany and Adirondack participants, benefits are based on hourly contributions in excess of the first \$3.60 per hour through June 30, 2022.

¹ Prior to January 1, 2013 for Jamestown Participants

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- Different formulas apply to Albany and Adirondack participants for accruals earned prior to December 31, 2018.

For benefits accrued in the Empire plan prior to January 1, 2012:

- *Age Requirement:*
 - For Long Island, Westchester, Hudson Valley, and Rockland participants: 62
 - For Rochester participants: 60
 - For Niagara participants: 65
 - For Upstate participants: 62
 - For South Central participants: 65 (60 with 10 years of pension credit)
 - For Jamestown participants: 65
- *Service Requirement:*
 - For Long Island, Westchester, Hudson Valley, and Rockland participants: 10 pension credits
 - For Rochester participants: 5 years of participation credit
 - For Niagara participants: 5 years of participation credit
 - For Upstate participants: 10 eligibility credits
 - For South Central participants: 5 years of participation credit or 5 years of vesting service
 - For Jamestown participants: 5 years of credited service
- *Amount:* Formulas vary by legacy plan.

Service Pension or Unreduced Early Pension

For benefits accrued in the Empire plan on or after January 1, 2012 or in the Northeast plan on or after January 1, 2016:

- *Age and Service Requirement:* Active and sum of attained age and years of vesting service is at least 85.
- *Age Requirement:* 55 for accruals earned on or after January 1, 2016.
- *Amount:* Regular pension accrued

For benefits accrued in the Albany/Adirondack plan prior to January 1, 2016:

- *Age and Service Requirement:*
 - For Albany participants: 45 years of pension service at any age; or 35 years of pension service at age 55
 - For Adirondack participants: Not eligible.
- *Amount:*
 - For Albany participants: Regular pension accrued
 - For Adirondack participants: N/A

For benefits accrued in the Empire plan prior to January 1, 2012:

- *Age Requirement:*
 - For Long Island, Westchester, Hudson Valley, and Rockland participants: None

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- For Rochester participants: 55
- For Niagara participants: sum of age and pension service equals 102
- For Upstate participants: 60
- For South Central participants: 58
- For Jamestown participants: sum of age and years of continuous service equals 85
- *Service Requirement:*
 - For Long Island, Westchester, Hudson Valley, and Rockland participants: 40 pension credits and 40,000 Hours of Service
 - For Rochester participants: 5 Service Years
 - For Niagara participants: sum of age and pension service equals 102
 - For Upstate participants: 10 eligibility credits
 - For South Central participants: 20 years of pension credit
 - For Jamestown participants: sum of age and years of continuous service equals 85
- *Amount:* Regular pension accrued

Early Retirement

For benefits accrued in the Empire plan on or after January 1, 2012 or in the Northeast plan on or after January 1, 2016:

- *Age Requirement:* 55
- *Service Requirement:* 10 years of vesting service
- *Amount:* Regular pension accrued, reduced by 4.0% per year for each year of age less than age 62 for benefits accrued through December 1, 2020, and 6.0% per year (previously, 4.0%) for each year of age less than 62 for benefits accrued thereafter.

For benefits accrued in the Albany/Adirondack plan prior to January 1, 2016:

- *Age Requirement:* 55
- *Service Requirement:*
 - For Albany participants: 10 years of pension service
 - For Adirondack participants: 10 years of pension service or 10 years of vesting service
- *Amount:* Regular pension accrued, reduced by the following amounts:
 - For Albany participants: 1.5% per year for each year of age less than age 65 (less than age 62 with at least 25 years of pension service or vesting service)
 - For Adirondack participants: 1.5% per year for each year of age less than age 62

For benefits accrued in the Empire plan prior to January 1, 2012:

- *Age Requirement:*
 - For Long Island, Westchester, Hudson Valley, and Rockland participants: 55

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- For Rochester participants: 55
- For Niagara participants: 57
- For Upstate participants: 55
- For South Central participants: 55
- For Jamestown participants: 55
- **Service Requirement:**
 - For Long Island, Westchester, Hudson Valley, and Rockland participants: 10 pension credits
 - For Rochester participants: 5 service years
 - For Niagara participants: 15 years pension service
 - For Upstate participants: 10 eligibility credits
 - For South Central participants: 10 years of future credited service
 - For Jamestown participants: 5 years of credited service
- **Amount:** Regular pension accrued, reduced by the following amounts:
 - For Long Island, Westchester, Hudson Valley, and Rockland participants: 3.0% per year for each year of age less than age 62
 - For Rochester participants: 2.4% per year for each year of age less than age 60
 - For Niagara participants: 6.0% per year for each year of age less than age 65
 - For Upstate participants: 3.0% per year for each year of age less than age 60
 - For South Central participants: 3.0% per year for each year of age less than age 60
 - For Jamestown participants: 3.0% per year for each year of age less than age 65

Disability

Eligibility for all benefits accrued:

- **Age Requirement:** None
- **Service Requirement:** 5 year of vesting service if work test is met
- **Work test:** At least 2,000 hours of service over the five consecutive calendar years ending with the one during with Social Security deems the participant to have become disabled.
- If work test is not met, eligibility is based on the rules in effect on December 31, 2015

Amount of benefit varies by legacy Fund:

- **For benefits accrued in the Empire plan on or after January 1, 2012 or in the Northeast plan on or after January 1, 2016):** For participants with 10 years of vesting service, regular pension accrued. For participants with fewer than 10 years of vesting service, regular pension accrued, reduced 4.0% per year for each year of age less than age 60 for benefits accrued between January 1, 2012 and December 31, 2015, 4.0% per year for each year of age less than age 62 for benefit accrued between January 1, 2016 and November 30, 2020, and 6.0% per year for each year of age less than age 62 for benefits accrued on or after December 1, 2020. The maximum reduction is 28.0%.

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	• <i>For benefits accrued in the Albany/Adirondack plan prior to January 1, 2016:</i> Regular pension accrued • <i>For benefits accrued in the Empire plan before January 1, 2012:</i> – For Long Island, Westchester, Hudson Valley, and Rockland participants: For participants with 10 pension credits, regular pension accrued. For participants with fewer than 10 years of pension credits, regular pension accrued, reduced 3.0% per year for each year of age less than age 62. The maximum reduction is 21.0%. – For Rochester participants: For participants with 10 service years, regular pension accrued. For participants with fewer than 10 years of service years, regular pension accrued, reduced 3.0% per year for each year of age less than age 60. The maximum reduction is 15.0%. – For Niagara participants: For participants with 10 years of vesting service, regular pension accrued. For participants with fewer than 10 years of vesting service, regular pension accrued, reduced 6.0% per years of each year of age less than age 65. The maximum reduction is 60.0%. – For Upstate participants: Regular pension accrued, reduced 3.0% per year for each year of age less than age 60 and greater than 55, reduced by an additional 1.0%. – For South Central participants: Regular pension accrued, reduced 3.0% per year for each year of age less than age 60. The maximum reduction is 15.0%. – For Jamestown participants: Regular pension accrued.
Vesting	• <i>Age Requirement:</i> None • <i>Service Requirement:</i> 5 years of vesting service for accruals earned in the Empire plan on or after January 1, 2012 and for accruals earned in the Albany/Adirondack plan. For accruals earned in the Empire plan before January 1, 2012: – For Rochester participants, 5 service years – For Upstate participants, 5 years of eligibility service – For Jamestown participants, 5 years of credited service and 5,000 hours of service – For all other participants: 5 years of vesting service • <i>Amount:</i> Regular or early pension accrued based on plan in effect when last active.
Pro Rata Pension	• <i>Age Requirement:</i> Same as for Regular or Early Retirement Pension. • <i>Service Requirement:</i> None • <i>Amount:</i> Calculated in the same manner as Regular, Early, Disability or Vested Pension.

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Spouse's Pre-Retirement Death Benefit	For benefits accrued on or after January 1, 2016: • <i>Age Requirement:</i> None • <i>Service Requirement:</i> 5 years of vesting service • <i>Amount:</i> 50% of the benefit the employee would have received had he retired the day before he died and elected the 50% Joint and Survivor annuity. The maximum reduction is 28%. For benefits accrued in the Albany/Adirondack plan prior to January 1, 2016: • <i>Age Requirement:</i> None • <i>Service Requirement:</i> 5 years of vesting service • <i>Amount:</i> 100% of the benefit the employee would have received had he retired on the later of his earliest retirement date the day before he died and elected the 100% Joint and Survivor annuity. The benefit commences on the date that the employee would have attained his earliest retirement age. For benefits accrued in the Empire plan on or after January 1, 2012 and prior to January 1, 2016: • <i>Age Requirement:</i> None • <i>Service Requirement:</i> 5 years of vesting service • <i>Amount:</i> 100% of the benefit the employee would have received had he retired on the later of his earliest retirement date the day before he died and elected the 100% Joint and Survivor annuity. The benefit commences on the date that the employee would have attained his earliest retirement age. For benefits accrued in the Empire plan prior to January 1, 2012: • <i>Age Requirement:</i> Varies by legacy plan. • <i>Service Requirement:</i> Varies by legacy plan. • <i>Amount:</i> Varies by legacy plan.
Pre-Retirement 60-Month Lump Sum Death Benefit (if not eligible for or elects out of spouse's benefit)	• <i>Age Requirement:</i> None • <i>Service Requirement:</i> Active and 5 years of vesting service • <i>Amount:</i> Regular pension accrued, reduced 4.0% per year for each year of age less than age 62. The maximum reduction is 28%. • The Pre-Retirement 60-Month Death Benefit supersedes and is in lieu of any other pre-retirement death benefits under the Plan or any Merged Plan for a Participant who does not have a spouse on his date of death and dies on or after January 1, 2016.
Post-Retirement Lump Sum Death Benefit	\$2,500, for a Participant who is credited with at least one Hour of Service in Covered Employment on or after January 1, 2016.

Section 3: Certificate of Actuarial Valuation

Automatic Benefit Forms

For benefits accrued on or after January 1, 2016:

- *Not Married:* The accrued pension is paid as a Life Annuity with 60 Month Guarantee Benefit.
- *Married:* Lifetime monthly annuity to the retiree with 50% Joint and Survivor Pension continuing to the spouse following retiree's death, payable with a pop-up. The accrued benefit is adjusted to provide for this benefit.

For benefits accrued in the Albany/Adirondack plan prior to January 1, 2016:

- *Not Married:* The accrued pension is paid as a Life Annuity.
- *Married:* Lifetime monthly annuity to the retiree with 100% Joint and Survivor Pension continuing to the spouse following retiree's death. The accrued benefit is adjusted to provide for this benefit.

For benefits accrued in the Empire plan on or after January 1, 2012 and prior to January 1, 2016:

- *Not Married:* The accrued pension is paid as a Single Life Annuity.
- *Married:* Lifetime monthly annuity to the retiree with 100% Joint and Survivor Pension continuing to the spouse following retiree's death, payable with a pop-up. The accrued benefit is adjusted to provide for this benefit.

For benefits accrued in the Empire plan prior to January 1, 2012:

- *Not Married:* The accrued pension is paid:
 - For Long Island, Westchester, Hudson Valley, Rockland, South Central, and Jamestown participants, as a Life Annuity with 60 Month Guarantee Benefit.
 - For Rochester and Upstate participants, as a Single Life Annuity.
 - For Niagara participants, as a Life Annuity with 36 Month Guarantee Benefit.
- *Married:* The accrued pension is paid:
 - For Jamestown participants, as a 50% Joint and Survivor Pension with 60 Month Guarantee Benefit.
 - For all other participants, as a 100% Joint and Survivor Pension.

For benefits accruals:

- *Married, if active and retire after age 65:* Lifetime monthly annuity to the retiree with 100% Joint and Survivor Pension continuing to the spouse following retiree's death. The accrued benefit is not reduced.

Section 3: Certificate of Actuarial Valuation

Optional Forms of Benefits	For benefits accrued on or after January 1, 2016: • <i>Not Married:</i> The retiree may elect the Life Annuity with 120 Month Guarantee Benefit. The accrued benefit is adjusted to be the actuarial equivalent of the Automatic Benefit Form. • <i>Married:</i> Retirees may elect a Joint and Survivor annuity with either a 75% or 100% benefit, with pop-up, or a Life Annuity with 60 or 120 Month Guarantee Benefit. The accrued benefit is adjusted to provide for this benefit. For benefits accrued in the Albany/Adirondack plan prior to January 1, 2016: • <i>Joint and Survivor Forms:</i> Married retirees may elect a 100% Joint and Survivor annuity with pop-up, or a 50% Joint and Survivor annuity. For benefits accrued in the Empire plan on or after January 1, 2012 and prior to January 1, 2016: • <i>Life Annuity with 120 Month Guarantee:</i> The retiree may elect the Life Annuity with 120 Month Guarantee Benefit. The accrued benefit is adjusted to be the actuarial equivalent of the Automatic Benefit Form • <i>Life Annuity with 60 Month Guarantee:</i> The retiree may elect the Life Annuity with 60 Month Guarantee Benefit. The accrued benefit is adjusted to be the actuarial equivalent of the Automatic Benefit Form • <i>Joint and Survivor Forms:</i> Retirees may elect a Joint and Survivor annuity with either a 50% or 75% benefit, with pop-up. The accrued benefit is adjusted to provide for this benefit. For benefits accrued in the Empire plan prior to January 1, 2012: In addition to the Automatic Benefit Forms: • <i>Life Annuity with 120 Month Guarantee:</i> The retiree may elect the Life Annuity with 120 Month Guarantee Benefit. The accrued benefit is adjusted to be the actuarial equivalent of the Automatic Benefit Form • <i>Life Annuity with 60 Month Guarantee:</i> The retiree may elect the Life Annuity with 60 Month Guarantee Benefit. The accrued benefit is adjusted to be the actuarial equivalent of the Automatic Benefit Form • <i>Joint and Survivor Forms:</i> Retirees may elect a Joint and Survivor annuity with either a 50%, 75%, or 100% benefit, with pop-up. The accrued benefit is adjusted to provide for this benefit.
Participation	The first of the month following completion of a 12-month period during which at least 1,000 hours were worked.
Vesting Service	For calendar years beginning after December 31, 2015, one-tenth of a year of service is granted for each 100 hours worked with a maximum of one full year of credit for 1,000 or more worked during a calendar year. For calendar years beginning before January 1, 2016, service is granted on the same basis by which service was credited under the rules in effect on December 31, 2015.

Section 3: Certificate of Actuarial Valuation

Pension Credits, Pension Service, Service Years, and Eligibility Service

Granted on the same basis by which service was credited under the rules in effect on December 31, 2015:

- For Albany and Adirondack participants: pension service determined by dividing pension hours by 1,200, with no limit to the pension service credited per year.
- For Long Island, Westchester, Hudson Valley, and Rockland participants: 0.025 pension credits are granted for each 25 hours worked in a calendar year, limited to 2 pension credits per year.
- For Rochester participants: One service year is granted for each plan year in which 1,000 hours are worked.
- For Niagara participants: 0.001 of pension service is granted for each hour worked, with no limit to the Pension Service credited per year.
- For Upstate participants: Eligibility credits determined by dividing total hours worked by 1,000 and rounding to the nearest 1/10th, limited to one eligibility credit per year.
- For South Central participants: Future credited service is granted in accordance with the schedule in effect on December 31, 2015 with fewer than 1,000 hours worked, and granted at a rate of 0.001 times hours worked if at least 1,000 hours were worked.
- For Jamestown participants: One year of credited service for years in which one hour is worked. For purposes of eligibility for an Unreduced Pension, 500 hours must be worked for a year of credited service to be recognized.

Contribution Rate

This valuation reflects contribution rates of:

	January 2, 2023 and later	March 1, 2022	Prior to March 1, 2022
Boston & Eastern Locals	\$11.47	\$11.47	\$11.32
Western MA Area Carpenters Local Union #336	11.25	11.25	11.10
Western MA Zone 3 Floorcoverers	11.25	11.25	11.10
Residential Local Union #723	4.47	4.47	4.47
Floorcoverers Local Union #2168	11.47	11.47	11.32
MA and RI Millwrights Local Union #1121	11.47	11.32	11.32
Northern New England Millwrights Local Union #1121	10.06	9.88	9.88
CT Millwrights Local #1121	10.85 ¹	10.11	10.11
Northern New England Carpenters Local Union #349 and #352	8.88	8.88	8.73
Piledrivers Local Union #56	11.62 ²	11.32	11.32
Connecticut Carpenters Local Union #326	10.85 ³	10.40	10.11
Rhode Island Carpenters Local Union #330	13.07	13.07	13.07

¹ \$10.40 effective May 2, 2022 and \$10.85 effective June 1, 2023.

² Effective August 1, 2022.

³ Effective May 1, 2023.

Section 3: Certificate of Actuarial Valuation

		Effective:		
	New York area commercial rates:	July 1, 2023	July 1, 2022	Prior to July 1, 2022
	Rochester and Jamestown ¹	\$8.75	\$8.25	\$7.00
	Upstate and South Central ²	8.50	8.00	7.00
	Upstate and South Central ³	8.70	8.20	7.00
	Niagara ⁴	9.35	8.75	7.25
	Hudson Valley ⁵	9.50	8.85	7.60
	Erie/Buffalo ⁶	10.70	10.10	8.50
	Albany/Adirondack ⁷	11.00	10.75	9.50
	Long Island, Westchester, and Rockland ⁸	11.50	11.15	9.90
Shop rates are lower.				
The average contribution rate, based on the valuation data, is \$9.34 for 2023 and \$9.56 for 2024 and later years.				
Changes in Plan Provisions	There were no plan changes with this valuation.			

¹ Allegany, Cattaraugus (Townships of Persia and Perrysburg - Local 289/276), Chautauqua, Livingston, Monroe, Ontario, & Wayne Counties

² Herkimer, Madison, Oneida, Onondaga, Broome, Tioga, Cayuga, Seneca, & Yates Counties

³ Jefferson, Lewis, St. Lawrence, Oswego, Chenango, Delaware, Otsego, Cortland, Schuyler, Tompkins, & Steuben County

⁴ Genesee, Niagara, Orleans & Wyoming (Townships of Castile, Gainesville, Genesee Falls, Perry, Pike and Warsaw - Local 85/276) Counties

⁵ Columbia, Dutchess, Orange, Sullivan & Ulster Counties

⁶ Erie & Grand Island Counties

⁷ Albany, Fulton, Greene, Montgomery, Rensselaer, Schenectady, Schoharie, Saratoga, Clinton, Essex, Franklin, Hamilton, Warren & Washington Counties

⁸ Putnam, Rockland, Westchester, Nassau & Suffolk Counties

Section 3: Certificate of Actuarial Valuation

Estimated Rate of Investment Return	<i>On actuarial value of assets (Schedule MB, line 6g): 7.11%, for the Plan Year ending December 31, 2022</i> <i>On current (market) value of assets (Schedule MB, line 6h): -7.57%, for the Plan Year ending December 31, 2022</i>
FSA Contribution Timing (Schedule MB, line 3a)	Unless otherwise noted, contributions are paid periodically throughout the year pursuant to collective bargaining agreements. The interest credited in the FSA is therefore assumed to be equivalent to a July 15 contribution date.
Actuarial Models	Segal valuation results are based on proprietary actuarial modeling software. The actuarial valuation models generate a comprehensive set of liability and cost calculations that are prepared to meet regulatory, legislative and client requirements. Deterministic cost projections are based on a proprietary forecasting model. Our Actuarial Technology and Systems unit, comprised of both actuaries and programmers, is responsible for the initial development and maintenance of these models. The models have a modular structure that allows for a high degree of accuracy, flexibility and user control. The client team programs the assumptions and the plan provisions, validates the models, and reviews test lives and results, under the supervision of the responsible Enrolled Actuary.
Justification for Change in Actuarial Assumptions and Cost Methods (Schedule MB, line 11)	For purposes of determining current liability, the current liability interest rate was changed from 2.22% to 2.55% due to a change in the permissible range and recognizing that any rate within the permissible range satisfies the requirements of IRC Section 431(c)(6)(E) and the mortality tables and mortality improvement scales were changed in accordance with IRS Regulations 1.431(c)(6)-1 and 1.430(h)(3)-1. Based on past experience and future expectations, the following actuarial assumptions were changed as of January 1, 2023: • The retirement rates for New England, Connecticut, and Rhode Island participants were adjusted as described in the preceding pages. • The administrative expense assumption was increased from \$11,000,000 to \$11,500,000. • The percent married assumption for New England and Connecticut participants was changed from Social Security awards during 1972 and 100%, respectively, to 75%. • The assumed form of benefit election for Connecticut participants was changed from 66 ⅔% electing the automatic form for married participants and 33 ⅓% election the automatic form for single participants to an assumption that all participants elect the automatic form based on the applicable marriage assumption. The January 1, 2023 assumption changes are reflected in the December 31, 2022 unfunded vested liability for withdrawal liability purposes.

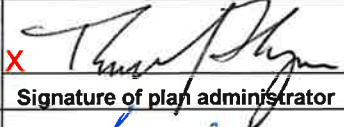
Form 5500 Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Annual Return/Report of Employee Benefit Plan This form is required to be filed for employee benefit plans under sections 104 and 4065 of the 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 2023 This Form is Open to Public Inspection
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Part I Annual Report Identification Information			
For calendar plan year 2023 or fiscal plan year beginning		01/01/2023	and ending 12/31/2023
A This return/report is for:	☒ a multiemployer plan	☐ a multiple-employer plan (Filers checking this box must provide 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 N. ATLANTIC STATES CARP. PENSION FUND		1b Three-digit plan number (PN) ▶	001
		1c Effective date of plan	02/06/1962
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 OF THE NORTH ATLANTIC STATES CARPENTERS PENSION FUND 350 FORDHAM ROAD WILMINGTON MA 01887		2b Employer Identification Number (EIN) 51-6040899	2c Plan Sponsor's telephone number (978) 694-1000
		2d Business code (see instructions) 236200	

Caution: A penalty for the late or incomplete filing of this return/report will be assessed unless reasonable cause is established.

Under penalties of perjury and other penalties set forth in the instructions, I declare that I have examined this return/report, including accompanying schedules, statements and attachments, as well as the electronic version of this return/report, and to the best of my knowledge and belief, it is true, correct, and complete.

SIGN HERE	☒ 	☒ 10/10/2024	☒ Thomas J. Flynn
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	☒ 	☒ 10/10/2024	☒ Thomas S. Gunning
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

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

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	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">5</td> <td style="width: 90%; text-align: right;">46,134</td> </tr> </table>	5	46,134																				
5	46,134																						
6 Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines 6a(1) , 6a(2) , 6b , 6c , and 6d). a(1) Total number of active participants at the beginning of the plan year a(2) Total number of active participants at the end of the plan year b Retired or separated participants receiving benefits c Other retired or separated participants entitled to future benefits d Subtotal. Add lines 6a(2) , 6b , and 6c e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits f Total. Add lines 6d and 6e g(1) Number of participants with account balances as of the beginning of the plan year (only defined contribution plans complete this item) g(2) Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item) h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2" style="background-color: #cccccc; height: 20px;"></td> </tr> <tr> <td style="width: 10%;">6a(1)</td> <td style="width: 90%; text-align: right;">17,166</td> </tr> <tr> <td>6a(2)</td> <td style="text-align: right;">16,946</td> </tr> <tr> <td>6b</td> <td style="text-align: right;">16,874</td> </tr> <tr> <td>6c</td> <td style="text-align: right;">7,806</td> </tr> <tr> <td>6d</td> <td style="text-align: right;">41,626</td> </tr> <tr> <td>6e</td> <td style="text-align: right;">4,401</td> </tr> <tr> <td>6f</td> <td style="text-align: right;">46,027</td> </tr> <tr> <td>6g(1)</td> <td></td> </tr> <tr> <td>6g(2)</td> <td></td> </tr> <tr> <td>6h</td> <td></td> </tr> </table>			6a(1)	17,166	6a(2)	16,946	6b	16,874	6c	7,806	6d	41,626	6e	4,401	6f	46,027	6g(1)		6g(2)		6h	
6a(1)	17,166																						
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6e	4,401																						
6f	46,027																						
6g(1)																							
6g(2)																							
6h																							
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">7</td> <td style="width: 90%; text-align: right;">1,120</td> </tr> </table>	7	1,120																				
7	1,120																						

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
- (4) ☐ **DCG** (Individual Plan Information) – Number Attached _____
- (5) ☐ **MEP** (Multiple-Employer Retirement Plan Information)

b General Schedules

- (1) ☒ **H** (Financial Information)
- (2) ☐ **I** (Financial Information – Small Plan)
- (3) ☒ **A** (Insurance Information) – Number Attached 4
- (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 2023 Form M-1 annual report. If the plan was not required to file the 2023 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 _____

NORTH ATLANTIC STATES CARPENTERS PENSION FUND
FINANCIAL STATEMENTS
YEARS ENDED DECEMBER 31, 2023 AND 2022

NORTH ATLANTIC STATES CARPENTERS PENSION FUND

YEARS ENDED DECEMBER 31, 2023 AND 2022

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Anthony Sgroi
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William Austin
Kimberly Miller
Michael Fox
Viorel Kuzma
Justin Katulka
Allison Newton, SHRM-SCP

Independent Auditor's Report

Board of Trustees
North Atlantic States Carpenters Pension Fund

Opinion

We have audited the accompanying financial statements of the North Atlantic States Carpenters 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 December 31, 2023 and 2022, and the related statements of changes in net assets available for benefits for the years ended December 31, 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 December 31, 2023 and 2022, and the changes in net assets available for benefits for the years ended December 31, 2023 and 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 21 through 75 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 76 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.

A handwritten signature in cursive script, appearing to read "Schullhas & Parulli LLP".

Hauppauge, New York
October 2, 2024

NORTH ATLANTIC STATES CARPENTERS PENSION FUND
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
DECEMBER 31, 2023 AND 2022

	<u>2023</u>	<u>2022</u>
Assets		
Investments at fair value		
Interest bearing cash	\$ 233,700,244	\$ 204,974,452
U.S. government securities	54,773,295	45,903,832
Corporate debt instruments	44,936,309	45,940,204
Corporate stock	642,715,048	469,154,500
Partnership/joint venture interests	2,112,434,495	1,978,164,619
Real estate	87,727,203	89,485,630
Loans (other than participant loans)	11,950,533	8,601,925
Common/collective trust funds	822,622,929	1,003,206,217
Pooled separate accounts	37,271,013	35,650,836
103-12 investment entities	592,867,974	593,881,933
Registered investment companies	150,937,705	134,823,768
Unallocated contracts	868,963	5,087,850
Total investments	<u>4,792,805,711</u>	<u>4,614,875,766</u>
Receivables		
Employers' contributions	13,521,937	13,337,263
Accrued interest/dividends	1,580,790	1,272,222
Net trades pending settlement	31,172,186	590,919
Other receivables	1,793,935	1,484,782
Cash	3,474,293	1,294,669
Collateral held under securities lending agreement	12,438,968	8,942,655
Property and equipment - net	3,625,792	4,617,430
Other assets	<u>315,972</u>	<u>318,306</u>
Total assets	<u>4,860,729,584</u>	<u>4,646,734,012</u>
Liabilities		
Accounts payable	3,437,258	3,205,869
Related organizations	52,100,823	54,798,112
Net trades pending settlement	3,605,207	2,029,692
Payable under securities lending agreement	12,438,968	8,942,655
Other liabilities	17,299	16,880
Deferred compensation payable	<u>585,231</u>	<u>650,366</u>
Total liabilities	<u>72,184,786</u>	<u>69,643,574</u>
Net assets available for benefits	<u>\$ 4,788,544,798</u>	<u>\$ 4,577,090,438</u>

NORTH ATLANTIC STATES CARPENTERS PENSION FUND

STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS

YEARS ENDED DECEMBER 31, 2023 AND 2022

	<u>2023</u>	<u>2022</u>
Additions to net assets attributed to:		
Investment income (loss)		
Net appreciation (depreciation) in fair value of investments	\$ 212,451,488	\$ (454,437,021)
Interest/dividends	105,658,484	86,682,213
Rent - net of related expenses	<u>447,606</u>	<u>438,049</u>
Total investment income (loss)	318,557,578	(367,316,759)
Less investment expenses	<u>(8,909,180)</u>	<u>(8,139,954)</u>
Net investment income (loss)	309,648,398	(375,456,713)
Contributions		
Employers'	279,148,814	272,279,855
Other income	<u>3,716,320</u>	<u>3,421,763</u>
Total additions	<u>592,513,532</u>	<u>(99,755,095)</u>
Deductions from net assets attributed to:		
Benefits paid directly to participants or beneficiaries	366,036,757	353,568,751
Administrative expenses	<u>15,022,415</u>	<u>13,926,163</u>
Total deductions	<u>381,059,172</u>	<u>367,494,914</u>
Net increase (decrease)	211,454,360	(467,250,009)
Net assets available for benefits		
Beginning of year	<u>4,577,090,438</u>	<u>5,044,340,447</u>
End of year	<u>\$ 4,788,544,798</u>	<u>\$ 4,577,090,438</u>

NORTH ATLANTIC STATES CARPENTERS PENSION FUND

NOTES TO FINANCIAL STATEMENTS

YEARS ENDED DECEMBER 31, 2023 AND 2022

Note 1 - Description of Plan and Significant Accounting Policies

The following description of the North Atlantic States Carpenters 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 February 6, 1962 and is a defined benefit pension plan established under an Agreement and Declaration of Trust pursuant to collective bargaining agreements between the North Atlantic States Regional Council of Carpenters (the "Council") and various employers and employer associations in the construction industry the states of Massachusetts, Connecticut, Maine, Vermont, New Hampshire, Rhode Island and New York. 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 retirement and death benefits to eligible participants.

Participation

A participant is a pensioner, beneficiary or individual on whose behalf contributions are currently required to be made to the Plan by an employer subject to a collective bargaining agreement.

Connecticut, Massachusetts, Maine, Vermont, New Hampshire and Rhode Island participants are eligible to participate in the Plan beginning either January 1 or July 1 following completion of at least 140 hours of service in covered employment within 12 consecutive months.

New York participants are eligible to participate in the Plan following the completion of 1,000 hours worked in covered employment within a 12 consecutive month period, known as the Eligibility Computation Period. Participation in the Plan will begin on the first day of the month that follows the end of the Eligibility Computation Period.

NORTH ATLANTIC STATES CARPENTERS PENSION FUND

NOTES TO FINANCIAL STATEMENTS

YEARS ENDED DECEMBER 31, 2023 AND 2022

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

Benefits

Participants with five or more years vesting service are entitled to monthly pension benefits.

Massachusetts, Maine, Vermont and New Hampshire ("NE Legacy"), Connecticut and Rhode Island participants are eligible for regular pension at normal retirement age of 62 or 65, depending on the date the participant first joined the Plan along with other factors as stipulated in the Plan documents. For NE Legacy and Rhode Island participants eligible prior to January 1, 2021, normal retirement age is 62. The Plan permits early retirement 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 fractional credits beginning with 1/10 increments to a maximum of 1 credit per year.

New York participants who have earned five or more years of vesting service are eligible for regular pension at age 65 for benefits accrued after January 1, 2016. For benefits accrued prior to January 1, 2016, normal retirement age and the age at which other forms of retirement are permitted vary according to the respective plan documents. The Plan permits early retirement 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 and vary based on the location of the participant.

Monthly pension benefits are based on the number of pension credits earned and the rate that was in effect when the credits were earned or on a percentage of employer contributions required to be made on behalf of the participant.

Pre-retirement and post-retirement death benefits are also available.

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.

Basis of accounting

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

NORTH ATLANTIC STATES CARPENTERS PENSION FUND

NOTES TO FINANCIAL STATEMENTS

YEARS ENDED DECEMBER 31, 2023 AND 2022

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

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.

Administrative expense allocation

The administrative offices are occupied by the Plan, the North Atlantic States Carpenters Vacation Fund, the North Atlantic States Carpenters Guaranteed Annuity Fund, and the North Atlantic States Carpenters Health Benefits Fund. 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 organization or payable to related organization generally include balances for shared expenses.

Reimbursements received from related organizations for the years ended December 31, 2023 and 2022 were \$7,655,842 and \$7,104,738, respectively.

Reimbursements paid to related organizations for the years ended December 31, 2023 and 2022 were \$0 and \$2,893, respectively.

The Plan, through the North Atlantic States Carpenters Central Collection Agency (the "CCA"), a subsidiary of the Plan, collects employer contributions on behalf of the Plan. The costs of operating the CCA are allocated pro-rata to all of the Funds and affiliated organizations utilizing its services based on the contributions collected. For the years ended December 31, 2023 and 2022, the costs allocated to the Plan for this service were \$1,351,387 and \$1,290,848, respectively.

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.

Reciprocal agreements

The Plan is a party to reciprocal agreements with other pension funds of the United Brotherhood of Carpenters and Joiners of America.

NORTH ATLANTIC STATES CARPENTERS PENSION FUND

NOTES TO FINANCIAL STATEMENTS

YEARS ENDED DECEMBER 31, 2023 AND 2022

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.

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.

Loans (other than participant loans): Value based on the valuation methods of the underlying securities described above.

NORTH ATLANTIC STATES CARPENTERS PENSION FUND

NOTES TO FINANCIAL STATEMENTS

YEARS ENDED DECEMBER 31, 2023 AND 2022

Note 2 - Fair value measurements (cont'd)

Unallocated contracts: Valued and measured at fair value based on market rates and the insurance company's allocation of expenses.

Investments measured at net asset value: Corporate stock (non-publicly traded), partnerships/joint venture interests, real estate, common/collective trust funds, pooled separate accounts, registered investment companies (non-publicly traded) and 103-12 investment entity values are estimated by the management of the investment entities.

Certain non-publicly traded corporate stock is valued by an independent appraiser.

Certain real estate is valued at the latest independent appraisal.

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.

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

NORTH ATLANTIC STATES CARPENTERS PENSION FUND

NOTES TO FINANCIAL STATEMENTS

YEARS ENDED DECEMBER 31, 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 December 31, 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	\$ 233,700,244	\$ 233,700,244	\$ -	\$ -
U.S. government securities	54,773,295	9,925,317	44,847,978	-
Corporate debt instruments	44,936,309	-	44,936,309	-
Corporate stock	419,733,063	416,470,909	-	3,262,154
Real estate	7,880,000	-	-	7,880,000
Loans (other than participant loans)	11,950,533	11,262,366	688,167	-
Registered investment companies	95,743,968	95,743,968	-	-
Unallocated contracts	<u>868,963</u>	<u>-</u>	<u>-</u>	<u>868,963</u>
 Total assets in the fair value hierarchy	 869,586,375	 \$ <u>767,102,804</u>	 \$ <u>90,472,454</u>	 \$ <u>12,011,117</u>
 Investments measured at net asset value	 <u>3,923,219,336</u>			
 Investments at fair value	 \$ <u>4,792,805,711</u>			

NORTH ATLANTIC STATES CARPENTERS PENSION FUND

NOTES TO FINANCIAL STATEMENTS

YEARS ENDED DECEMBER 31, 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 December 31, 2022, with fair value measurements on a recurring basis:

	2022	Level 1	Level 2	Level 3
Investments at fair value				
Interest bearing cash	\$ 204,974,452	\$ 204,974,452	\$ -	\$ -
U.S. government securities	45,903,832	6,899,899	39,003,933	-
Corporate debt instruments	45,940,204	-	45,940,204	-
Corporate stock	346,316,538	343,608,490	-	2,708,048
Real estate	1,073,100	-	-	1,073,100
Loans (other than participant loans)	8,601,925	7,329,116	1,272,809	-
Registered investment companies	82,341,550	82,341,550	-	-
Unallocated contracts	<u>5,087,850</u>	<u>-</u>	<u>-</u>	<u>5,087,850</u>
 Total assets in the fair value hierarchy	 740,239,451	 \$ <u>645,153,507</u>	 \$ <u>86,216,946</u>	 \$ <u>8,868,998</u>
 Investments measured at net asset value	 <u>3,874,636,315</u>			
 Investments at fair value	 \$ <u>4,614,875,766</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.

Note 4 - Non-publicly traded corporate stock

The Plan has several non-publicly traded corporate stock investments. The fair value of the investments are determined by independent appraisal and by management of each investment and are generally based on the estimated fair value of the underlying assets of each investment. The Plan records the investments at estimated fair value based on its capital shares, as reported on the annual audited financial statements. The investments generally require the Plan to enter into agreements to contribute a minimum amount of capital. There were no individually significant investments in non-publicly traded corporate stock held by the Plan as of December 31, 2023 and 2022.

NORTH ATLANTIC STATES CARPENTERS PENSION FUND

NOTES TO FINANCIAL STATEMENTS

YEARS ENDED DECEMBER 31, 2023 AND 2022

Note 5 - Partnerships/joint venture interests

The Plan is a limited partner or investor in several private placement investment partnerships and investment companies. The fair value of the investments were determined by the management of the investment entity and are generally based on the estimated fair value of the underlying assets of the investment entity. The Plan records the investments at estimated fair value based on its capital shares, as reported on the annual K-1 Forms or available audited financial statements. The entities generally require the Plan to enter into agreements to contribute a minimum amount of capital. In addition, partnership investments may be subject to withdrawal restrictions. Individually significant investments in partnerships held by the Plan are as follows:

IFM Global Infrastructure (US) LP is a Cayman Islands limited partnership. The partnership is a feeder fund in a "master-feeder" structure. The partnership invests substantially all of its assets in IFM Global Infrastructure Fund (the "Master Fund"), a Cayman Islands unit trust. IFM Investors (US) Advisor, LLC, a Delaware limited liability company, is the investment advisor of the partnership. The Master Fund's investment objective is to acquire and maintain a diversified portfolio of global infrastructure investments. A limited partner may withdraw all or a portion of their account balance, as of the end of each quarter, upon at least 90 days' prior written notice to the partnership, subject to a minimum withdrawal of \$1 million. The estimated fair value of the Plan's investment as of December 31, 2023 and 2022 was \$111,717,498 and \$103,228,450, respectively.

Note 6 - Real estate

The Plan is invested in the North Atlantic States Carpenters Pension and Guaranteed Annuity Fund Real Estate Investment Program (the "Program"). The Program was established for the purpose of investing in income-producing properties in the United States by the North Atlantic States Carpenters Guaranteed Annuity Fund and the Plan. Washington Capital Management, Inc. serves as the investment advisor (the "Advisor"), and has full discretion over investment acquisition and disposition decisions, as well as operating and financing matters. The net asset value of the Program is based on estimates of fair value made by the Advisor as determined by independent appraisals. The estimated fair value of the Plan's investment as of December 31, 2023 and 2022 was \$79,847,203 and \$88,412,530, respectively.

Note 7 - Common/collective trust funds

The Plan is invested in several common/collective trust funds. The fair value of the investments are determined by the management of each investment and are generally based on the estimated fair value of the underlying assets of each investment. The investments generally require the Plan to enter into agreements to contribute a minimum amount of capital. In addition, common/collective trust fund investments may be subject to withdrawal restrictions. Individually significant investments in common/collective trust funds held by the Plan are as follows:

The Plan invests in collective investment funds ("CCTs") maintained by BlackRock Institutional Trust Company, N.A. ("BTC"), which serves as trustee for the following significant CCTs: U.S. Treasury Inflation Protected Securities Fund, U.S. Debt Index Fund, and 1-3 Year Government/Credit Bond Index Fund. The value of units upon contribution to or redemption from each CCT is based on the CCT's unit value determined on that day. Units can be redeemed on any day that BTC is open for business.

NORTH ATLANTIC STATES CARPENTERS PENSION FUND

NOTES TO FINANCIAL STATEMENTS

YEARS ENDED DECEMBER 31, 2023 AND 2022

Note 7 - Common/collective trust funds (cont'd)

The estimated fair value of the Plan's investment in the U.S. Treasury Inflation Protected Securities Fund as of December 31, 2023 and 2022 was \$120,127,066 and \$230,445,290, respectively.

The estimated fair value of the Plan's investment in the U.S. Debt Index Fund as of December 31, 2023 and 2022 was \$52,918,622 and \$98,816,705, respectively.

The estimated fair value of the Plan's investment in the 1-3 Year Government/Credit Bond Index Fund as of December 31, 2023 was \$121,075,691.

Note 8 - 103-12 Investment entities

The Plan is invested in several 103-12 investment entities. The fair value of the investments are determined by the management of each investment and are generally based on the estimated fair value of the underlying assets of each investment. The investments generally require the Plan to enter into agreements to contribute a minimum amount of capital. In addition, 103-12 investment entity investments may be subject to withdrawal restrictions. There were no individually significant investments in 103-12 investment entities held by the Plan as of December 31, 2023 and 2022.

Note 9 - 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 10 - 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.

NORTH ATLANTIC STATES CARPENTERS PENSION FUND

NOTES TO FINANCIAL STATEMENTS

YEARS ENDED DECEMBER 31, 2023 AND 2022

Note 11 - Securities lending

The Plan has an agreement with its custodial bank authorizing the bank to lend securities held in the Plan's account to third parties. The bank must obtain collateral from the borrower in the form of cash, letters of credit issued by an entity other than the borrower, or acceptable securities. Both the collateral and the securities loaned are marked-to-market on a daily basis so that all loaned securities are fully collateralized at all times. The collateral held is reported as both an asset and a liability in the financial statements.

Although the Plan's securities lending activities are collateralized as described above, they involve both market and credit risk. In this context, market risk refers to the possibility that the borrowers of securities will be unable to collateralize the loan upon a sudden material change in the fair value of the loaned securities or the collateral. Credit risk refers to the possibility that counterparties involved in the securities lending program may fail to perform in accordance with the terms of their contracts.

Income earned for the years ended December 31, 2023 and 2022 was \$566,292 and \$318,412, respectively.

The fair value of securities loaned by the Plan was \$11,950,533 and \$8,601,925 at December 31, 2023 and 2022, respectively. The fair value of the collateral held by the Plan was \$12,438,968 and \$8,942,655 at December 31, 2023 and 2022, respectively. Securities loaned are presented as loans (other than participant loans).

Note 12 - Investment commitments

As of December 31, 2023 the Plan has several commitments outstanding with various investment managers that total \$824,399,000. Capital commitments are funded based on the capital calls issued by the investment manager.

Subsequent to the year ended December 31, 2023, the Plan signed a participation agreement with Invesco Trust Company. The participation agreement entails a \$120,000,000 commitment to contribute to the UBC Russell 3000 Index Trust Fund.

Note 13 - Employers' contributions

In accordance with collective bargaining agreements and participation agreements, employers are required to make contributions to the Plan on behalf of employees performing covered work.

NORTH ATLANTIC STATES CARPENTERS PENSION FUND

NOTES TO FINANCIAL STATEMENTS

YEARS ENDED DECEMBER 31, 2023 AND 2022

Note 14 - Rental income

The Plan owns and operates a property located in Wilmington, MA. The Plan leases office and warehouse space to the North Atlantic States Carpenters Guaranteed Annuity Fund (the "Guaranteed Annuity Fund") and the North Atlantic States Carpenters Health Benefits Fund (the "Health Fund"), related organizations. The terms of the leases are January 1, 2021 through December 31, 2023 at an annual rate of \$143,757 for the Guaranteed Annuity Fund and \$157,518 for the Health Fund. The Plan also leases office and warehouse space to the North Atlantic States Regional Council of Carpenters Local 339, a related organization, with a term of July 1, 2018 through December 31, 2023 at an annual rate of \$36,860. The leases were renewed with a term of January 1, 2024 through December 31, 2026, at an annual rate of \$181,920 for the Guaranteed Annuity Fund, \$192,602 for the Health Fund, and \$75,160 for North Atlantic States Regional Council of Carpenters Local 339. Escalation costs may be incurred for any increase in real estate taxes or operating costs beyond the base years, as stipulated in the lease. The leases are cancellable by either party on 90 days notice. As such, no right-of-use asset is recognized.

The Plan owns and operates a property located in Hamden, CT. The Plan leases office and parking spaces to the Health Fund and the North Atlantic States Carpenters Annuity Fund, related organizations, and Kiddie Kabz, an unrelated third party. The terms of the leases are January 1, 2021 through December 31, 2023 at an annual rate of \$44,783 for the Health Fund and \$32,802 for the North Atlantic States Carpenters Annuity Fund. The leases were renewed with a term of January 1, 2024 through December 31, 2026, at an annual rate of \$49,941 for the Health Fund and \$54,009 for the North Atlantic States Carpenters Annuity Fund. The term of the lease for Kiddie Kabz is April 1, 2021 through March 31, 2024 at an initial rental rate of \$23,724, subject to annual increases. The lease was extended for three months, terminating on June 30, 2024 at a monthly rate of \$2,042.

Net rental income for the years ended December 31, 2023 and 2022 was \$447,606 and \$438,049, respectively.

Note 15 - Other commitments

Effective April 24, 2000, the Connecticut Carpenters Pension Fund established a deferred compensation plan for the plan's former Fund Director, who retired on June 30, 2022, for the purpose of providing compensation benefits to such employees. This commitment was transferred to the Plan as part of the merger on January 1, 2018. The deferred compensation plan is an unfunded arrangement held in an investment account. As of December 31, 2023 and 2022, the estimated fair value of the deferred compensation plan's assets totaled \$585,231 and \$650,366, respectively.

NORTH ATLANTIC STATES CARPENTERS PENSION FUND

NOTES TO FINANCIAL STATEMENTS

YEARS ENDED DECEMBER 31, 2023 AND 2022

Note 16 - Accumulated plan benefits

The latest available calculations of the actuarial present value of accumulated plan benefits were made by consulting actuaries as of January 1, 2023 and 2022. Details of accumulated plan benefit information as of such dates are as follows:

	January 1, 2023	January 1, 2022
Actuarial present value of accumulated plan benefits:		
Vested benefits:		
Participants currently receiving benefit payments	\$ 3,318,575,057	\$ 3,184,864,101
Other Vested benefits	<u>2,072,464,251</u>	<u>2,119,286,434</u>
Total vested benefits	5,391,039,308	5,304,150,535
Nonvested benefits	<u>106,936,228</u>	<u>110,608,855</u>
Total actuarial present value of accumulated plan benefits	<u><u>\$ 5,497,975,536</u></u>	<u><u>\$ 5,414,759,390</u></u>

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

	January 1, 2023	January 1, 2022
Actuarial present value of accumulated plan benefits - Beginning of year	<u><u>\$ 5,414,759,390</u></u>	<u><u>\$ 5,317,806,367</u></u>
Increase (decrease) during the year attributable to:		
Benefits accumulated	62,600,843	86,295,378
Interest due to the decrease in the discount period	379,752,430	373,279,608
Benefits paid	(353,589,689)	(338,244,245)
Change of assumptions	<u>(5,547,438)</u>	<u>(24,377,718)</u>
Net increase (decrease) in actuarial present value of accumulated plan benefits	<u>83,216,146</u>	<u>96,953,023</u>
Actuarial present value of accumulated plan benefits - End of year	<u><u>\$ 5,497,975,536</u></u>	<u><u>\$ 5,414,759,390</u></u>

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

NORTH ATLANTIC STATES CARPENTERS PENSION FUND

NOTES TO FINANCIAL STATEMENTS

YEARS ENDED DECEMBER 31, 2023 AND 2022

Note 16 - Accumulated plan benefits (cont'd)

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

Actuarial Cost Method	Entry Age Normal
Net Investment Return	7.25%
Mortality Rates	Healthy: RP-2014 Employee and Healthy Annuitant Mortality Tables set forward one year and projected generationally with Scale MP-2021 Disabled: RP-2014 Healthy Annuitant Mortality Table set forward six years and projected generationally with Scale MP-2021
Actuarial Value of Assets	The market value of assets less unrecognized returns in each of the last five years. Unrecognized return is equal to the difference between the actual market return and the projected return on the market value, and is recognized over a five-year period. The actuarial value is further adjusted, if necessary, to be within 15% of the market value.
Weighted average retirement age	2023 - 60 2022 - 61
Annual administrative expenses	2023 - \$11,500,000 2022 - \$11,000,000

As of January 1, 2023 the actuary has certified that the Plan 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.

NORTH ATLANTIC STATES CARPENTERS PENSION FUND

NOTES TO FINANCIAL STATEMENTS

YEARS ENDED DECEMBER 31, 2023 AND 2022

Note 17 - Reconciliation of financial statements to Form 5500

For financial statement purposes in prior year, the Plan's net assets available for benefits reflected land, building and related improvements at book value. This differs from the reporting requirements of the Department of Labor which requires that the Plan's net assets available for benefits be shown at fair value. The Plan reclassified land, building and related improvements to investments in Real Estate at fair value.

The following is a reconciliation of the net assets available for benefits reported on the financial statements to the net assets available for benefits reported on Form 5500:

	<u>2023</u>	<u>2022</u>
Net assets available for benefits per the financial statements	\$ 4,788,544,798	\$ 4,577,090,438
Adjustment from book to fair value for property used for operational purposes	<u>-</u>	<u>4,776,901</u>
Net assets available for benefits as reported on Form 5500	<u>\$ 4,788,544,798</u>	<u>\$ 4,581,867,339</u>

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.

The net increase (decrease) in net assets available for benefits is also affected by the difference in reporting requirements related to property used for operational purposes.

NORTH ATLANTIC STATES CARPENTERS PENSION FUND

NOTES TO FINANCIAL STATEMENTS

YEARS ENDED DECEMBER 31, 2023 AND 2022

Note 17 - Reconciliation of financial statements to Form 5500 (cont'd)

The following is a reconciliation of the reclassifications:

	<u>Per Financial Statements</u>	<u>Reclassification</u>	<u>Per Form 5500</u>
Investment income	\$ 309,648,398	\$ 8,909,180	\$ 318,557,578
Contributions	279,148,814	-	279,148,814
Unrealized depreciation - Real Estate	-	(4,776,901)	(4,776,901)
Other income	<u>3,716,320</u>	<u>-</u>	<u>3,716,320</u>
 Total additions	 <u>592,513,532</u>	 <u>4,132,279</u>	 <u>596,645,811</u>
 Benefits paid directly to participants or beneficiaries	 366,036,757	 -	 366,036,757
Administrative expenses	<u>15,022,415</u>	<u>8,909,180</u>	<u>23,931,595</u>
 Total deductions	 <u>381,059,172</u>	 <u>8,909,180</u>	 <u>389,968,352</u>
 Net increase	 <u>\$ 211,454,360</u>	 <u>\$ (4,776,901)</u>	 <u>\$ 206,677,459</u>

In addition to the above reclassifications, the Plan's investments have been reclassified for Form 5500 purposes in accordance with the Department of Labor's plan asset regulations. See the Schedule Reconciling the Statement of Net Assets Available for Benefits to Form 5500 on page 76.

Note 18 - Tax status

The Plan has received a determination letter from the IRS dated December 16, 2015, 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.

NORTH ATLANTIC STATES CARPENTERS PENSION FUND

SCHEDULE OF INTEREST BEARING CASH

DECEMBER 31, 2023

EIN 51-6040899, 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
	LENDINGCLUB	VARIABLE	ON DEMAND	\$ 132,843,768	\$ 132,843,768
	STATE STREET GOVERNMENT SHORT TERM				
*	INVESTMENT FUND	VARIABLE	ON DEMAND	90,907,503	90,907,503
*	STATE STREET CASH	VARIABLE	ON DEMAND	9,948,973	9,948,973
	ARA CORE PROPERTY FUND - INTEREST BEARING CASH			856,150	856,150
	BRIGADE HIGH YIELD FUND LP - INTEREST BEARING CASH			1,339,740	1,339,740
	ENTRUST CAPITAL DIVERSIFIED FUND LTD CLASS X SERIES 09/30/2017 - INTEREST BEARING CASH			4,786	4,786
	ENTRUST CAPITAL DIVERSIFIED FUND LTD CLASS X SERIES 12/31/2017 - INTEREST BEARING CASH			4,942	4,942
	ENTRUSTPERMAL SPECIAL OPPORTUNITIES EVERGREEN FUND LTD - INTEREST BEARING CASH			1,689,311	1,689,311
	ENTRUST SPECIAL OPPORTUNITIES FUND III LTD CLASS A - INTEREST BEARING CASH			277,648	277,648
	EUROPEAN STRATEGIC PARTNERS 2006 B LP - INTEREST BEARING CASH			83,739	83,739
	FIRST EAGLE GLOBAL VALUE FUND LP - INTEREST BEARING CASH			2,700	2,700
	GROSVENOR OPPORTUNISTIC CREDIT FUND III LTD - INTEREST BEARING CASH			11,046	11,046
	GROSVENOR OPPORTUNISTIC CREDIT FUND IV LTD - INTEREST BEARING CASH			41,564	41,564
	HAMILTON LANE PRIVATE EQUITY OFFSHORE FUND VIII LP - INTEREST BEARING CASH			74,891	74,891
	HAMILTON LANE STRATEGIC OPPORTUNITIES FUND IV LP - INTEREST BEARING CASH			6,391	6,391
	IRONSIDES DIRECT INVESTMENT FUND IV LP - INTEREST BEARING CASH			4,268	4,268
	IRONSIDES PARTNERSHIP FUND IV LP - INTEREST BEARING CASH			9,026	9,026
	IRONSIDES PARTNERSHIP FUND V LP - INTEREST BEARING CASH			5,640	5,640
	KOHINOOR SERIES (CAYMAN) FUND - INTEREST BEARING CASH			11,779,883	11,779,883
	NORTH ATLANTIC STATES CARPENTERS PENSION FUND REAL ESTATE INVESTMENT PROGRAM - INTEREST BEARING CASH			4,458,048	4,458,048
	ONE RIVER RISK RESPONDERS SP - INTEREST BEARING CASH			14,141,686	14,141,686
	PANTHEON EUROPE FUND V B LP - INTEREST BEARING CASH			102,761	102,761
	PANTHEON GLOBAL SECONDARY FUND III B LP - INTEREST BEARING CASH			83,993	83,993
	SIGULER GUFF DISTRESSED REAL ESTATE OPPORTUNITIES FUND II LP - INTEREST BEARING CASH			59,388	59,388
	SOLAMERE CAPITAL AF III A LP - INTEREST BEARING CASH			37,489	37,489
	SOLAMERE CAPITAL AF IV A LP - INTEREST BEARING CASH			36,943	36,943
	WCP SPECIAL CORE PLUS FUND II LP - INTEREST BEARING CASH			612,834	612,834
	WCP SPECIAL CORE PLUS FUND LP - INTEREST BEARING CASH			296,232	296,232
				\$ 269,721,343	\$ 269,721,343

NORTH ATLANTIC STATES CARPENTERS PENSION FUND

SCHEDULE OF INTEREST BEARING CASH

DECEMBER 31, 2023

EIN 51-6040899, 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

* PARTY-IN-INTEREST

HOLDINGS OF CERTAIN INVESTMENTS WERE DETERMINED TO BE PLAN ASSETS FOR FORM 5500 PURPOSES AND ARE SEPARATELY IDENTIFIED HERE BASED ON THE ALLOCATION OF UNDERLYING ASSETS PROVIDED BY THE INVESTMENT MANAGER, AS OF THE DATE OF THEIR LATEST AUDITED FINANCIAL STATEMENTS.

NORTH ATLANTIC STATES CARPENTERS PENSION FUND

SCHEDULE OF U.S. GOVERNMENT SECURITIES

DECEMBER 31, 2023

EIN 51-6040899, 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	COST	CURRENT VALUE
			MATURITY VALUE		
FNMA POOL AE0467	5.50%	03/01/2024	\$ 1	\$ 2	\$ 1
SMALL BUSINESS ADMINISTRATION	5.09%	10/01/2025	6,787	6,787	6,689
FED HM LN PC POOL C90979	6.50%	06/01/2026	20,829	21,346	21,367
US TREASURY N/B	0.88%	06/30/2026	135,000	135,688	124,839
SMALL BUSINESS ADMINISTRATION	5.70%	08/01/2026	12,947	12,947	12,866
SMALL BUSINESS ADMINISTRATION	5.71%	06/01/2027	15,412	15,412	15,445
US TREASURY N/B	3.50%	01/31/2028	875,000	868,335	861,193
FNMA POOL AL7205	3.50%	12/01/2029	24,957	26,299	24,334
US TREASURY N/B	3.50%	01/31/2030	510,000	493,465	498,785
US TREASURY N/B	3.50%	04/30/2030	415,000	399,151	405,613
FED HM LN PC POOL G18555	3.50%	05/01/2030	44,651	46,744	43,589
US TREASURY N/B	3.75%	06/30/2030	3,478,000	3,420,588	3,446,768
US TREASURY N/B	4.00%	07/31/2030	1,947,000	1,932,678	1,957,650
FNMA POOL AB1763	4.00%	11/01/2030	31,950	34,027	31,330
FNMA POOL AL5861	4.50%	01/01/2031	23,662	25,769	23,458
FNMA POOL AL4549	4.50%	01/01/2032	24,209	26,044	24,038
FREDDIE MAC	6.50%	06/15/2032	29,113	29,591	30,163
FED HM LN PC POOL G30689	4.50%	07/01/2032	16,433	17,943	16,348
FHLMC STRUCTURED PASS THROUGH	4.64%	07/25/2032	27,547	28,614	26,812
FANNIE MAE	5.50%	10/25/2032	35,896	39,402	36,189
FNMA POOL 555424	5.50%	05/01/2033	47,366	50,556	48,715
US TREASURY N/B	3.38%	05/15/2033	1,015,000	975,550	974,085
FHLMC STRUCTURED PASS THROUGH	4.41%	07/25/2033	33,496	35,613	32,006
FED HM LN PC POOL G30670	4.50%	12/01/2033	48,643	53,302	48,503
FNMA POOL 735765	5.97%	08/01/2034	7,948	7,693	7,944
FNMA POOL MA1983	4.00%	08/01/2034	62,749	67,505	61,418
FNMA POOL MA2079	4.00%	11/01/2034	56,983	61,212	55,773
FED HM LN PC POOL G01749	5.50%	01/01/2035	20,024	21,764	20,650
FNMA POOL 821925	5.15%	06/01/2035	5,082	4,958	5,036
FNMA POOL MA2366	4.00%	08/01/2035	51,627	55,628	50,445
FED HM LN PC POOL C91853	3.50%	10/01/2035	53,593	55,787	51,455
FNMA POOL MA2455	4.00%	11/01/2035	55,290	59,419	54,017
FED HM LN PC POOL 1Q0069	5.22%	05/01/2036	2,457	2,424	2,469
FNMA POOL 745600	5.26%	06/01/2036	3,101	3,054	3,079
FNMA POOL 888367	7.00%	03/01/2037	38,194	43,278	39,965
FNMA POOL MA2923	3.50%	03/01/2037	62,902	64,524	60,011
FNMA POOL MA2962	3.50%	04/01/2037	69,726	72,297	66,520
FNMA POOL 888702	6.50%	08/01/2037	6,410	6,869	6,785
FED HM LN PC POOL G03600	7.00%	11/01/2037	14,422	15,668	15,387
FNMA POOL 257135	5.50%	03/01/2038	1,906	2,011	1,937
FED HM LN PC POOL 1Q1400	6.20%	07/01/2038	28,111	30,650	28,964
FNMA POOL AD0198	5.50%	09/01/2038	27,384	30,161	28,201
FED HM LN PC POOL G07338	6.00%	10/01/2038	14,956	16,386	15,436
FED HM LN PC POOL H09197	6.50%	10/01/2038	6,535	6,937	6,690
FED HM LN PC POOL 1Q1145	5.07%	05/01/2039	20,220	21,556	20,224
FNMA POOL AD0130	6.50%	08/01/2039	2,208	2,406	2,305
FED HM LN PC POOL A94663	4.50%	10/01/2040	49,043	52,392	48,685
FED HM LN PC POOL G06447	4.50%	05/01/2041	46,327	49,845	46,333
FANNIEMAE GRANTOR TRUST	7.50%	07/25/2041	46,719	48,194	47,371
FED HM LN PC POOL Q03086	4.50%	09/01/2041	21,704	23,017	21,683
FNMA POOL AL5441	4.50%	09/01/2041	34,862	37,918	34,473
FANNIE MAE	7.00%	10/25/2041	12,064	12,499	12,242
FNMA POOL AJ4102	6.07%	11/01/2041	19,876	20,668	20,383
FED HM LN PC POOL QK1220	2.00%	12/01/2041	785,001	666,669	670,768
FNMA POOL AO8469	4.58%	05/01/2042	7,039	7,257	7,022

NORTH ATLANTIC STATES CARPENTERS PENSION FUND

SCHEDULE OF U.S. GOVERNMENT SECURITIES

DECEMBER 31, 2023

EIN 51-6040899, 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	COST	CURRENT VALUE
FED HM LN PC POOL G07843	4.50%	06/01/2042	41,479	44,947	41,114
FNMA POOL AO4105	5.85%	06/01/2042	10,106	10,455	10,021
FANNIE MAE	6.50%	06/25/2042	48,392	50,472	49,773
FED HM LN PC POOL G60764	4.50%	10/01/2042	37,791	41,521	37,796
FHLMC STRUCTURED PASS THROUGH	6.50%	03/25/2043	88,677	90,815	89,837
FED HM LN PC POOL 849748	5.07%	10/01/2043	23,322	24,178	23,757
FED HM LN PC POOL G07596	4.50%	11/01/2043	54,844	58,692	54,784
US TREASURY N/B	4.75%	11/15/2043	490,000	530,329	525,603
FNMA POOL AL5697	5.83%	12/01/2043	14,560	15,055	14,578
FREDDIE MAC	4.50%	12/15/2043	179,256	198,358	177,175
FED HM LN PC POOL G08568	4.50%	01/01/2044	24,645	26,659	24,497
REPUBLIC OF COLOMBIA	5.63%	02/26/2044	200,000	146,200	167,902
FED HM LN PC POOL G07686	4.50%	03/01/2044	28,911	31,169	28,736
FNMA POOL BM1135	4.50%	07/01/2044	71,088	76,820	70,741
FNMA POOL AT7040	5.83%	09/01/2044	1,836	1,887	1,871
FED HM LN PC POOL 849625	5.47%	01/01/2045	21,415	22,248	21,762
FED HM LN PC POOL 2B3805	4.05%	02/01/2045	24,494	25,485	24,904
FED HM LN PC POOL G60034	4.50%	02/01/2045	19,238	20,880	18,950
FED HM LN PC POOL 849713	4.56%	05/01/2045	12,817	13,011	12,984
FNMA POOL AL8815	5.65%	05/01/2045	37,782	39,308	38,487
REPUBLIC OF COLOMBIA	5.00%	06/15/2045	200,000	120,976	154,998
FNMA POOL AX5655	7.40%	01/01/2046	12,488	12,911	12,399
FED HM LN PC POOL 840286	6.34%	05/01/2046	23,319	24,175	23,618
FNMA POOL AL9198	6.97%	07/01/2046	30,676	31,107	31,407
FNMA POOL AL8919	6.84%	07/01/2046	7,814	8,018	7,996
FED HM LN PC POOL 840380	6.02%	08/01/2046	37,426	38,793	38,469
FNMA POOL AL9011	7.27%	09/01/2046	4,250	4,363	4,363
FNMA POOL AS8835	4.50%	02/01/2047	112,865	121,366	111,744
FED HM LN PC POOL G61080	4.50%	03/01/2047	76,733	82,464	75,322
FED HM LN PC POOL Q48869	4.50%	06/01/2047	81,098	87,048	80,282
FNMA POOL BH5350	3.00%	07/01/2047	29,687	30,463	29,789
FED HM LN PC POOL G08786	4.50%	10/01/2047	52,105	55,630	51,580
FNMA POOL BJ9262	4.50%	06/01/2048	54,628	56,896	53,866
FNMA POOL BM4005	3.37%	06/01/2048	50,180	50,523	49,327
FNMA POOL BM4873	3.08%	10/01/2048	135,749	138,671	132,582
FNMA POOL BM5704	5.00%	12/01/2048	28,240	29,738	28,465
FNMA POOL AL0778	6.50%	01/01/2049	6,735	7,468	7,075
FANNIE MAE	7.00%	03/25/2049	14,810	15,550	15,844
FREDDIE MAC	2.50%	04/25/2050	1,134,119	985,266	976,575
FED HM LN PC POOL RA2958	2.00%	07/01/2050	690,205	708,755	573,982
FNMA POOL CA6271	2.50%	07/01/2050	410,964	428,751	352,693
FNMA POOL CA6329	2.50%	07/01/2050	640,887	675,084	552,925
FNMA POOL CA6401	2.50%	07/01/2050	351,050	367,409	301,275
FED HM LN PC POOL RA3454	2.00%	09/01/2050	167,377	174,497	138,476
FNMA POOL CA6902	2.00%	09/01/2050	1,041,064	1,080,429	861,408
FED HM LN PC POOL RA3690	2.00%	10/01/2050	1,960,977	2,040,489	1,632,121
FNMA POOL CA7241	2.50%	10/01/2050	3,738,129	3,961,832	3,222,641
FNMA POOL FM4714	2.50%	10/01/2050	1,199,787	1,270,649	1,035,116
FED HM LN PC POOL SD7530	2.50%	11/01/2050	442,419	469,846	381,542
FNMA POOL BM6916	2.17%	12/01/2050	680,135	645,544	602,518
FNMA POOL CA8099	2.00%	12/01/2050	634,870	662,125	528,142
FNMA POOL FM7599	3.50%	01/01/2051	2,441,125	2,401,743	2,264,265
FED HM LN PC POOL SD7536	2.50%	02/01/2051	1,657,823	1,723,618	1,431,762
FNMA POOL CA8847	2.00%	02/01/2051	4,364,830	4,548,971	3,630,186
FNMA POOL BR7227	2.00%	04/01/2051	438,814	442,243	364,694

NORTH ATLANTIC STATES CARPENTERS PENSION FUND

SCHEDULE OF U.S. GOVERNMENT SECURITIES

DECEMBER 31, 2023

EIN 51-6040899, 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	COST	CURRENT VALUE
FED HM LN PC POOL RA7063	3.50%	04/01/2052	1,272,613	1,107,322	1,166,884
FNMA POOL BU8931	3.50%	04/01/2052	334,407	298,902	306,628
FNMA POOL CB3332	3.50%	04/01/2052	2,812,124	2,741,382	2,600,202
FED HM LN PC POOL SD8214	3.50%	05/01/2052	348,872	300,193	320,093
FNMA POOL BM6921	2.26%	05/01/2052	1,009,824	942,292	889,554
FNMA POOL BV9893	3.50%	05/01/2052	2,074,613	1,939,439	1,909,599
FNMA POOL FS1865	3.50%	05/01/2052	999,943	978,069	922,118
FNMA POOL MA4600	3.50%	05/01/2052	665,496	607,681	610,639
FNMA POOL CB3841	3.50%	06/01/2052	1,188,359	1,136,554	1,100,076
FNMA POOL FS2089	3.50%	06/01/2052	1,908,422	1,825,227	1,766,645
FNMA POOL MA4625	3.50%	06/01/2052	231,663	193,439	212,567
FED HM LN PC POOL 841463	2.16%	07/01/2052	1,036,814	959,660	897,611
FED HM LN PC POOL RA7654	3.50%	07/01/2052	2,936,906	2,837,670	2,718,694
US TREASURY N/B	3.00%	08/15/2052	167,000	145,263	136,568
FED HM LN PC POOL SD1581	2.50%	09/01/2052	3,021,783	2,574,654	2,571,628
FED HM LN PC POOL SD8243	3.50%	09/01/2052	739,669	654,260	678,320
FED HM LN PC POOL SD2253	3.50%	12/01/2052	1,256,680	1,092,558	1,152,325
TSY INFL IX N/B	1.50%	02/15/2053	664,509	580,689	601,719
US TREASURY N/B	4.75%	11/15/2053	350,000	383,906	392,494
GOVERNMENT NATIONAL MORTGAGE A	5.58%	02/20/2068	287,268	287,057	282,586
GOVERNMENT NATIONAL MORTGAGE A	6.14%	10/20/2069	504,304	505,622	500,819
GOVERNMENT NATIONAL MORTGAGE A	6.16%	12/20/2071	411,560	419,660	398,642
GOVERNMENT NATIONAL MORTGAGE A	6.01%	04/20/2072	540,928	543,996	524,377
GOVERNMENT NATIONAL MORTGAGE A	6.31%	05/20/2072	229,270	230,989	228,878
GOVERNMENT NATIONAL MORTGAGE A	6.19%	01/20/2073	474,773	472,425	464,453
FIRST EAGLE GLOBAL VALUE FUND LP - U.S. GOV'T SECURITIES			-	846,060	1,004,030
KOHINOOR SERIES (CAYMAN) FUND - U.S. GOV'T SECURITIES			-	65,168,865	63,662,901
ONE RIVER RISK RESPONDERS SP - U.S. GOV'T SECURITIES			-	59,913,956	56,656,826
			<u>\$ 60,305,193</u>	<u>\$ 184,926,189</u>	<u>\$ 176,097,052</u>

HOLDINGS OF CERTAIN INVESTMENTS WERE DETERMINED TO BE PLAN ASSETS FOR FORM 5500 PURPOSES AND ARE SEPARATELY IDENTIFIED HERE BASED ON THE ALLOCATION OF UNDERLYING ASSETS PROVIDED BY THE INVESTMENT MANAGER, AS OF THE DATE OF THEIR LATEST AUDITED FINANCIAL STATEMENTS.

NORTH ATLANTIC STATES CARPENTERS PENSION FUND

SCHEDULE OF CORPORATE DEBT INSTRUMENTS - PREFERRED

DECEMBER 31, 2023

EIN 51-6040899, 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
BNSF RAILWAY CO 2015 1 P	3.44%	06/16/2028	\$ 68,029	\$ 66,572	\$ 65,031
UNP RR CO 2005 PASS TRST	5.08%	01/02/2029	84,975	93,897	85,379
BANK OF NY MELLON CORP	5.83%	10/25/2033	200,000	200,000	212,032
CALIFORNIA ST	7.50%	04/01/2034	200,000	199,974	242,702
SMB PRIVATE EDUCATION LOAN TRU	2.88%	09/15/2034	22,196	22,128	21,558
CALIFORNIA ST	7.30%	10/01/2039	150,000	249,620	181,349
NEW JERSEY ST TURNPIKE AUTH TU	7.41%	01/01/2040	50,000	75,015	62,299
UNITED PARCEL SERVICE	5.20%	04/01/2040	100,000	111,579	103,898
SLM STUDENT LOAN TRUST	5.77%	07/25/2040	861,031	831,433	836,711
CALIFORNIA ST	7.60%	11/01/2040	120,000	154,339	152,789
NEW JERSEY ST TURNPIKE AUTH TU	7.10%	01/01/2041	150,000	173,634	181,334
SLM STUDENT LOAN TRUST	6.20%	01/25/2045	226,010	227,705	222,770
EXXON MOBIL CORPORATION	4.33%	03/19/2050	200,000	213,906	181,946
SMB PRIVATE EDUCATION LOAN TRU	1.07%	01/15/2053	227,798	227,782	199,350
UNIV OF CALIFORNIA CA RGTS MED	4.56%	05/15/2053	150,000	150,000	139,956
SMB PRIVATE EDUCATION LOAN TRU	4.99%	10/16/2056	472,223	472,160	467,566
NAVIENT STUDENT LOAN TRUST	6.50%	12/27/2066	93,352	93,856	92,924
NAVIENT STUDENT LOAN TRUST	6.20%	03/25/2067	811,677	811,677	797,591
NAVIENT STUDENT LOAN TRUST	6.28%	07/25/2068	994,235	981,807	979,783
NAVIENT STUDENT LOAN TRUST	6.35%	08/26/2069	687,275	687,275	678,521
NAVIENT STUDENT LOAN TRUST	6.05%	12/26/2069	1,214,499	1,214,499	1,193,725
			\$ <u>7,083,300</u>	\$ <u>7,258,858</u>	\$ <u>7,099,214</u>

NORTH ATLANTIC STATES CARPENTERS PENSION FUND

SCHEDULE OF CORPORATE DEBT INSTRUMENTS - OTHER

DECEMBER 31, 2023

EIN 51-6040899, 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 CORPORATE DEBT INSTRUMENTS - OTHER			(d)	(e)
	INTEREST RATE	MATURITY DATE	PAR OR MATURITY VALUE	COST	CURRENT VALUE
TELECOM ITALIA SPA	5.30%	05/30/2024	\$ 625,000	\$ 679,156	\$ 622,094
SOUTHERN CO	4.48%	08/01/2024	200,000	200,908	198,340
CITIGROUP INC	4.00%	08/05/2024	150,000	150,671	148,347
OCCIDENTAL PETROLEUM COR	2.90%	08/15/2024	150,000	135,840	147,458
BANK OF AMERICA CORP	4.20%	08/26/2024	100,000	99,927	99,062
MICROCHIP TECHNOLOGY INC	0.98%	09/01/2024	275,000	275,000	266,450
NEXTERA ENERGY CAPITAL	4.26%	09/01/2024	150,000	150,381	148,574
LLOYDS BANKING GROUP PLC	4.50%	11/04/2024	250,000	250,028	246,990
COX COMMUNICATIONS INC	3.85%	02/01/2025	175,000	172,837	172,036
NEXTERA ENERGY CAPITAL	6.05%	03/01/2025	75,000	75,188	75,668
DELL INT LLC / EMC CORP	5.85%	07/15/2025	25,000	24,966	25,245
IMPERIAL BRANDS FIN PLC	4.25%	07/21/2025	350,000	361,760	343,732
FORD MOTOR CREDIT CO LLC	4.13%	08/04/2025	575,000	612,969	558,871
AMERICAN ELECTRIC POWER	5.70%	08/15/2025	145,000	144,350	145,953
CAPITAL ONE FINANCIAL CO	4.20%	10/29/2025	175,000	186,867	171,563
ZOETIS INC	4.50%	11/13/2025	125,000	124,711	124,280
CIGNA GROUP/THE	4.13%	11/15/2025	50,000	49,959	49,367
LLOYDS BANKING GROUP PLC	4.58%	12/10/2025	200,000	204,276	195,728
BANK OF AMERICA CORP	4.45%	03/03/2026	50,000	49,701	49,450
LLOYDS BANKING GROUP PLC	4.65%	03/24/2026	200,000	209,734	196,100
DOMINION ENERGY INC	1.45%	04/15/2026	275,000	274,879	254,903
WELLS FARGO + COMPANY	4.10%	06/03/2026	75,000	75,284	73,351
DILLARDS INC	7.75%	07/15/2026	200,000	197,000	207,892
CAPITAL ONE FINANCIAL CO	3.75%	07/28/2026	175,000	181,944	167,591
VMWARE LLC	1.40%	08/15/2026	150,000	149,745	137,202
BNP PARIBAS	4.63%	03/13/2027	1,150,000	1,277,867	1,126,195
CIGNA GROUP/THE	7.88%	05/15/2027	89,000	116,055	97,023
FORD MOTOR CREDIT CO LLC	4.95%	05/28/2027	200,000	199,974	195,110
MCDONALD S CORP	3.50%	07/01/2027	25,000	24,879	24,283
DELL INT LLC / EMC CORP	6.10%	07/15/2027	100,000	104,125	103,939
NEXTERA ENERGY CAPITAL	4.63%	07/15/2027	225,000	224,912	224,593
WELLS FARGO + COMPANY	4.30%	07/22/2027	175,000	174,993	171,281
IMPERIAL BRANDS FIN PLC	6.13%	07/27/2027	250,000	247,390	256,708
SOUTHERN CO	5.11%	08/01/2027	275,000	276,246	278,707
COX COMMUNICATIONS INC	3.50%	08/15/2027	625,000	639,378	594,731
BANK OF AMERICA CORP	4.18%	11/25/2027	325,000	356,926	315,848
JPMORGAN CHASE + CO	3.63%	12/01/2027	300,000	335,958	287,877
GOLDMAN SACHS GROUP INC	3.62%	03/15/2028	675,000	675,000	647,420
NORDSTROM INC	6.95%	03/15/2028	225,000	259,223	228,375
BAT CAPITAL CORP	2.26%	03/25/2028	50,000	50,000	44,740
CVS HEALTH CORP	4.30%	03/25/2028	29,000	28,965	28,508
BARCLAYS PLC	4.84%	05/09/2028	200,000	231,476	195,288
CAPITAL ONE FINANCIAL CO	4.93%	05/10/2028	175,000	175,000	171,988
FORD MOTOR CREDIT CO LLC	6.80%	05/12/2028	775,000	772,724	809,449
SOUTHERN CO	4.85%	06/15/2028	150,000	149,307	151,104
BARCLAYS PLC	5.50%	08/09/2028	250,000	250,000	251,158
NATWEST GROUP PLC	5.52%	09/30/2028	350,000	350,000	351,859
BANK OF AMERICA CORP	6.20%	11/10/2028	225,000	225,000	234,707
BOSTON PROPERTIES LP	4.50%	12/01/2028	100,000	86,489	95,241
BAYER US FINANCE II LLC	4.38%	12/15/2028	775,000	826,563	736,436
CHARLES SCHWAB CORP	5.64%	05/19/2029	100,000	100,000	102,581
CAPITAL ONE FINANCIAL CO	6.31%	06/08/2029	75,000	75,000	76,943
HCA INC	4.13%	06/15/2029	75,000	74,623	71,709
IMPERIAL BRANDS FIN PLC	3.88%	07/26/2029	950,000	1,030,024	886,293
DOW CHEMICAL CO/THE	7.38%	11/01/2029	103,000	111,863	116,298

NORTH ATLANTIC STATES CARPENTERS PENSION FUND

SCHEDULE OF CORPORATE DEBT INSTRUMENTS - OTHER

DECEMBER 31, 2023

EIN 51-6040899, 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 - OTHER			(d)	(e)
ISSUER	INTEREST RATE	MATURITY DATE	PAR OR MATURITY VALUE	COST	CURRENT VALUE
PHILIP MORRIS INTL INC	5.63%	11/17/2029	50,000	49,957	52,431
PROSUS NV	3.68%	01/21/2030	525,000	545,248	459,512
BOSTON PROPERTIES LP	2.90%	03/15/2030	450,000	462,389	385,277
T MOBILE USA INC	3.88%	04/15/2030	735,000	762,560	697,001
BARCLAYS PLC	5.09%	06/20/2030	200,000	174,170	193,634
BAT CAPITAL CORP	6.34%	08/02/2030	125,000	125,000	131,238
JPMORGAN CHASE + CO	8.75%	09/01/2030	225,000	230,221	269,946
JPMORGAN CHASE + CO	2.74%	10/15/2030	155,000	166,115	137,814
WELLS FARGO + COMPANY	2.88%	10/30/2030	80,000	85,878	71,117
BOSTON PROPERTIES LP	3.25%	01/30/2031	225,000	216,064	193,046
WELLS FARGO + COMPANY	2.57%	02/11/2031	475,000	496,674	410,457
BANK OF AMERICA CORP	2.50%	02/13/2031	425,000	443,713	364,956
RTX CORP	6.00%	03/15/2031	75,000	74,950	79,897
BAT CAPITAL CORP	2.73%	03/25/2031	125,000	124,471	104,828
CITIGROUP INC	4.41%	03/31/2031	375,000	406,492	358,669
T MOBILE USA INC	3.50%	04/15/2031	125,000	127,969	114,274
JPMORGAN CHASE + CO	2.52%	04/22/2031	505,000	519,970	436,694
JPMORGAN CHASE + CO	2.96%	05/13/2031	400,000	381,518	351,508
AT+T INC	2.75%	06/01/2031	150,000	149,759	131,502
CEMEX SAB DE CV	3.88%	07/11/2031	350,000	351,313	313,030
PROSUS NV	3.06%	07/13/2031	200,000	149,463	161,544
HSBC HOLDINGS PLC	2.36%	08/18/2031	200,000	198,458	165,634
CAPITAL ONE FINANCIAL CO	7.62%	10/30/2031	75,000	75,000	82,417
PROSUS NV	4.19%	01/19/2032	200,000	163,750	172,514
PETROLEOS MEXICANOS	6.70%	02/16/2032	725,000	718,297	601,591
BAT CAPITAL CORP	4.74%	03/16/2032	600,000	586,209	575,586
CCO HLDGS LLC/CAP CORP	4.50%	05/01/2032	425,000	369,556	363,996
RELX CAPITAL INC	4.75%	05/20/2032	100,000	99,121	100,786
CITIGROUP INC	6.63%	06/15/2032	85,000	115,760	92,502
BANK OF AMERICA CORP	2.57%	10/20/2032	125,000	102,090	103,634
PHILIP MORRIS INTL INC	5.75%	11/17/2032	60,000	59,946	62,968
GE HEALTHCARE TECH INC	5.91%	11/22/2032	225,000	225,000	240,003
PHILIP MORRIS INTL INC	5.38%	02/15/2033	150,000	149,690	153,855
WELLS FARGO + COMPANY	3.35%	03/02/2033	125,000	108,063	109,178
CITIGROUP INC	3.79%	03/17/2033	275,000	275,000	247,321
HSBC HOLDINGS PLC	4.76%	03/29/2033	750,000	757,994	698,580
CAPITAL ONE FINANCIAL CO	5.27%	05/10/2033	200,000	200,269	196,246
CCO HLDGS LLC/CAP CORP	4.50%	06/01/2033	200,000	198,500	169,228
ILLINOIS ST	5.10%	06/01/2033	525,000	526,061	519,456
WELLS FARGO + COMPANY	4.90%	07/25/2033	100,000	93,783	97,417
BAT CAPITAL CORP	6.42%	08/02/2033	200,000	198,012	209,258
JPMORGAN CHASE + CO	5.72%	09/14/2033	200,000	200,097	206,940
HSBC HOLDINGS PLC	8.11%	11/03/2033	375,000	375,000	433,346
LLOYDS BANKING GROUP PLC	7.95%	11/15/2033	350,000	381,897	400,085
UBS GROUP AG	5.96%	01/12/2034	500,000	500,000	517,065
BOSTON PROPERTIES LP	6.50%	01/15/2034	31,000	30,906	32,697
NATWEST GROUP PLC	6.02%	03/02/2034	200,000	200,000	209,994
RTX CORP	6.10%	03/15/2034	100,000	99,812	108,524
UNICREDIT SPA	7.30%	04/02/2034	425,000	424,197	436,938
CHARLES SCHWAB CORP	5.85%	05/19/2034	50,000	50,000	51,613
CITIGROUP INC	6.17%	05/25/2034	100,000	100,000	103,478
CAPITAL ONE FINANCIAL CO	6.38%	06/08/2034	100,000	100,000	102,920
BARCLAYS PLC	7.12%	06/27/2034	425,000	425,000	452,931
CHARLES SCHWAB CORP	6.14%	08/24/2034	100,000	100,000	105,408
PETROLEOS MEXICANOS	6.63%	06/15/2035	100,000	64,250	76,695

NORTH ATLANTIC STATES CARPENTERS PENSION FUND

SCHEDULE OF CORPORATE DEBT INSTRUMENTS - OTHER

DECEMBER 31, 2023

EIN 51-6040899, 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 CORPORATE DEBT INSTRUMENTS - OTHER			(d)	(e)
	INTEREST RATE	MATURITY DATE	PAR OR MATURITY VALUE	COST	CURRENT VALUE
UNICREDIT SPA	5.46%	06/30/2035	500,000	532,612	470,240
NATWEST GROUP PLC	3.03%	11/28/2035	200,000	155,422	165,896
HSBC HOLDINGS PLC	6.50%	05/02/2036	675,000	869,743	716,249
BANK OF AMERICA CORP	3.85%	03/08/2037	200,000	176,730	175,602
ENEL FINANCE INTL NV	6.80%	09/15/2037	175,000	186,195	190,808
HSBC HOLDINGS PLC	6.50%	09/15/2037	150,000	182,234	162,359
WALT DISNEY COMPANY/THE	6.65%	11/15/2037	100,000	139,368	117,452
TELECOM ITALIA CAPITAL	7.72%	06/04/2038	255,000	264,763	259,677
DOW CHEMICAL CO/THE	9.40%	05/15/2039	44,000	78,437	61,195
TIME WARNER CABLE LLC	6.75%	06/15/2039	125,000	130,556	123,979
ENEL FINANCE INTL NV	6.00%	10/07/2039	250,000	268,773	254,055
CVS HEALTH CORP	4.13%	04/01/2040	75,000	73,736	64,401
BAT CAPITAL CORP	3.73%	09/25/2040	25,000	25,000	18,378
PETROLEOS MEXICANOS	6.38%	01/23/2045	125,000	125,794	81,448
KINDER MORGAN INC	5.55%	06/01/2045	450,000	448,160	432,837
CHARTER COMM OPT LLC/CAP	6.48%	10/23/2045	800,000	896,147	786,088
CHARTER COMM OPT LLC/CAP	5.38%	05/01/2047	50,000	49,984	42,491
PETROLEOS MEXICANOS	6.75%	09/21/2047	125,000	108,174	81,771
KINDER MORGAN INC	5.20%	03/01/2048	175,000	195,666	159,721
AT+T INC	4.50%	03/09/2048	43,000	48,903	37,509
CVS HEALTH CORP	5.05%	03/25/2048	190,000	215,619	177,709
CHARTER COMM OPT LLC/CAP	5.75%	04/01/2048	700,000	896,056	621,236
PETROBRAS GLOBAL FINANCE	6.90%	03/19/2049	250,000	259,550	248,028
HCA INC	5.25%	06/15/2049	100,000	106,985	92,957
BAT CAPITAL CORP	4.76%	09/06/2049	125,000	133,850	99,074
PETROLEOS MEXICANOS	7.69%	01/23/2050	1,900,000	1,512,244	1,351,204
PETROBRAS GLOBAL FINANCE	6.75%	06/03/2050	250,000	301,720	244,720
PROSUS NV	4.03%	08/03/2050	500,000	278,750	328,045
BAT CAPITAL CORP	3.98%	09/25/2050	125,000	124,911	87,973
DOW CHEMICAL CO/THE	3.60%	11/15/2050	75,000	77,915	57,931
SOUTHERN CO	4.00%	01/15/2051	450,000	436,375	427,878
SOUTHERN CO	3.75%	09/15/2051	400,000	398,906	364,200
PROSUS NV	4.99%	01/19/2052	600,000	503,563	450,972
BAT CAPITAL CORP	5.65%	03/16/2052	75,000	72,377	67,698
CHARTER COMM OPT LLC/CAP	5.25%	04/01/2053	125,000	112,060	104,693
DOMINION ENERGY INC	5.75%	10/01/2054	425,000	417,313	417,418
AT+T INC	3.55%	09/15/2055	529,000	452,013	380,340
AT+T INC	3.80%	12/01/2057	275,000	221,411	204,419
VODAFONE GROUP PLC	7.00%	04/04/2079	375,000	408,500	386,626
ARA CORE PROPERTY FUND - CORPORATE DEBT INSTRUMENTS - OTHER			-	790,437	850,308
BRIGADE HIGH YIELD FUND LP - CORPORATE DEBT INSTRUMENTS - OTHER			-	77,914,355	81,536,954
			<u>\$ 40,328,000</u>	<u>\$ 119,394,960</u>	<u>\$ 120,224,357</u>

HOLDINGS OF CERTAIN INVESTMENTS WERE DETERMINED TO BE PLAN ASSETS FOR FORM 5500 PURPOSES AND ARE SEPARATELY IDENTIFIED HERE BASED ON THE ALLOCATION OF UNDERLYING ASSETS PROVIDED BY THE INVESTMENT MANAGER, AS OF THE DATE OF THEIR LATEST AUDITED FINANCIAL STATEMENTS.

NORTH ATLANTIC STATES CARPENTERS PENSION FUND

SCHEDULE OF CORPORATE STOCK - PREFERRED

DECEMBER 31, 2023

EIN 51-6040899, PLAN NO. 001

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

(a) NOT APPLICABLE

(b)	(c) - DESCRIPTION PREFERRED STOCK	(d)	(e)
ISSUER	NO. OF SHARES	COST	CURRENT VALUE
ARA CORE PROPERTY FUND - CORPORATE STOCK - PREFERRED	-	\$ 599,210	\$ 644,596
BRIGADE HIGH YIELD FUND LP - CORPORATE STOCK - PREFERRED	-	703,764	736,485
FIRST EAGLE GLOBAL VALUE FUND LP - CORPORATE STOCK - PREFERRED	-	745,785	885,033
SOLAMERE CAPITAL AF III A LP - CORPORATE STOCK - PREFERRED	-	722,390	1,319,610
SOLAMERE CAPIAL AF IV A LP - CORPORATE STOCK - PREFERRED	-	<u>1,052,342</u>	<u>1,172,334</u>
		<u>\$ 3,823,491</u>	<u>\$ 4,758,058</u>

HOLDINGS OF CERTAIN INVESTMENTS WERE DETERMINED TO BE PLAN ASSETS FOR FORM 5500 PURPOSES AND ARE SEPARATELY IDENTIFIED HERE BASED ON THE ALLOCATION OF UNDERLYING ASSETS PROVIDED BY THE INVESTMENT MANAGER, AS OF THE DATE OF THEIR LATEST AUDITED FINANCIAL STATEMENTS.

NORTH ATLANTIC STATES CARPENTERS PENSION FUND

SCHEDULE OF CORPORATE STOCK - COMMON

DECEMBER 31, 2023

EIN 51-6040899, 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
A.G. BARR PLC	5,877	\$ 30,763	\$ 38,434
A2A SPA	83,223	147,245	170,902
A8 NEW MEDIA GROUP LTD	282,000	14,458	5,562
AARON S CO INC/THE	900	17,862	9,792
AB SA	922	12,650	17,585
ABBVIE INC	2,200	233,136	340,934
ABM INVESTAMA TBK PT	71,300	10,756	15,745
ABN AMRO BANK NV CVA	825	14,050	12,385
ABOU KIR FERTIL + CHEMICALS	22,021	30,471	59,352
ABSA BANK LTD PREFERENCE	510	32,463	20,888
ABU DHABI ISLAMIC BANK/EGYPT	31,156	25,594	39,332
ACADEMY SPORTS + OUTDOORS IN	6,200	273,630	409,200
ACADIA PHARMACEUTICALS INC	22,255	423,304	696,804
ACCELLERON INDUSTRIES AG	3,694	104,510	115,255
ACCESSO TECHNOLOGY GROUP PLC	4,848	54,463	35,722
ACCOR SA	758	26,581	28,971
ACER INC	147,000	148,295	257,689
ACERINOX SA	4,130	45,756	48,610
ACI WORLDWIDE INC	47,830	1,535,204	1,463,598
ACROW LTD	21,085	10,808	14,891
ACS ACTIVIDADES CONS Y SERV	18,844	754,114	835,972
ACTER GROUP CORP LTD	8,000	45,169	46,268
ACUITY BRANDS INC	2,100	246,950	430,143
AD SOL NISSIN CORP	1,100	11,801	12,156
ADARO ENERGY INDONESIA TBK P	116,800	14,379	18,054
ADBRI LTD	22,204	56,717	45,453
ADDIKO BANK AG	1,307	13,248	19,274
ADECCO GROUP AG REG	14,811	691,159	726,252
ADENTRA INC	1,621	32,270	39,302
ADIRA DINAMIKA MULTI FINANCE	51,000	29,242	36,270
ADVANCED INFORMATION TE NVDR	162,500	23,974	17,996
ADVANCED PROCESS SYSTEMS COR	1,964	52,280	34,007
AECOM	6,992	283,376	646,271
AEGEAN AIRLINES	9,720	124,431	121,760
AFLAC INC	10,700	450,263	882,750
AG ANADOLU GRUBU HOLDING AS	10,115	83,022	68,806
AGCO CORP	5,945	585,951	721,782
AGF MANAGEMENT LTD CLASS B	5,500	37,309	32,159
AGILE GROUP HOLDINGS LTD	200	284	22
AGREE REALTY CORP	6,594	445,642	415,092
AGUNG PODOMORO LAND TBK PT	2,477,400	21,306	20,756
AICHI FINANCIAL GROUP INC	3,400	54,167	55,565
AICHI TOKEI DENKI CO LTD	1,100	11,829	18,297
AIR NEW ZEALAND LTD	89,544	43,301	36,001
AJIS CO LTD	1,200	21,149	19,475
AKR CORPORINDO TBK PT	214,800	10,867	20,577
AL BARAKA BANK EGYPT E.S.C	94,383	14,311	35,128
ALAM SUTERA REALTY TBK PT	2,282,300	25,332	24,310
ALASKA AIR GROUP INC	6,800	297,643	265,676
ALBAAD MASSUOT YITZHAK LTD	1	8	2
ALBERTSONS COS INC CLASS A	19,100	403,874	439,300
ALIBABA GROUP HOLDING LTD	132,276	2,648,179	1,280,656
ALIGHT INC CLASS A	75,990	766,458	648,195
ALK ABELLO A/S	1,110	11,952	16,646
ALKEMY SPA	2,687	51,361	27,278
ALKERMES PLC	643	17,948	17,837

NORTH ATLANTIC STATES CARPENTERS PENSION FUND

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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
ALKERMES PLC	9,332	246,577	258,870
ALLIANCE BANK MALAYSIA BHD	29,200	22,342	21,543
ALLIANZ MALAYSIA BHD	5,900	13,960	23,677
ALLIED TECNOLOGIA SA	4,400	6,185	6,793
ALLISON TRANSMISSION HOLDING	5,500	224,479	319,825
ALLTOP TECHNOLOGY CO LTD	6,000	35,973	37,536
ALLY FINANCIAL INC	6,800	210,090	237,456
ALLY LEASEHOLD REAL FOREIGN	66,500	14,968	12,566
ALMIRALL SA	2,240	20,151	20,847
ALPHABET INC CL A	17,152	910,351	2,395,963
ALPS LOGISTICS CO LTD	2,000	16,791	23,564
ALSEA SAB DE CV	3,444	11,959	13,048
ALSO HOLDING AG REG	110	27,677	32,805
ALTAMIR	532	15,476	13,987
ALTUM LTD	7,542	174,252	241,103
ALTIUS MINERALS CORPORATION	5,592	99,753	78,201
ALTRIA GROUP INC	13,100	575,742	528,454
ALVOPETRO ENERGY LTD	2,200	15,942	11,012
ALZCHEM GROUP AG	569	11,390	16,342
AMADA CO LTD	1,400	14,006	14,598
AMADEUS FIRE AG	176	25,045	23,913
AMARIN CORP PLC ADR	55,643	38,924	48,409
AMAZE CO LTD	1,600	14,515	13,052
AMDOCS LTD	5,194	333,046	456,501
AMERICAN AIRLINES GROUP INC	3,100	48,887	42,594
AMERICAN ASSETS TRUST INC	5,600	146,636	126,056
AMERICAN AXLE + MFG HOLDINGS	6,500	54,210	57,265
AMERICAN EXPRESS CO	10,722	942,705	2,008,659
AMERICAN FINANCIAL GROUP INC	5,000	396,906	594,450
AMERICAN INTERNATIONAL GROUP	15,500	820,004	1,050,125
AMERICAN SOFTWARE INC CL A	132,064	1,477,215	1,492,323
AMERICAN VANGUARD CORP	73,953	797,483	811,264
AMERIPRISE FINANCIAL INC	2,500	441,240	949,575
AMGEN INC	2,600	605,267	748,852
AMICA SA	983	20,019	20,749
AMICUS THERAPEUTICS INC	30,487	459,463	432,611
AMIR MARKETING AND INVEST	1,069	14,221	5,854
AMKOR TECHNOLOGY INC	12,500	158,813	415,875
AMPOL LTD	1,282	25,853	31,623
ANADOLU HAYAT EMEKLILIK	17,811	30,536	22,977
ANALOGUE HOLDINGS LTD	68,000	13,072	8,883
ANNALY CAPITAL MANAGEMENT IN	6,500	201,505	125,905
ANSARADA GROUP LIMITED	8,090	13,025	9,495
ANTARCHILE SA	2,699	21,434	21,789
AP THAILAND PCL NVDR	1,273,000	345,478	421,443
APA CORP	7,900	320,777	283,452
APAC RESOURCES LTD	180,000	30,246	22,130
APACER TECHNOLOGY INC	7,000	11,742	14,118
API GROUP CORP	23,371	487,187	808,637
APPLIED MATERIALS INC	4,900	349,426	794,143
ARATA CORP	3,200	51,521	70,592
ARCBEST CORP	3,100	108,547	372,651
ARCHER DANIELS MIDLAND CO	4,100	335,584	296,102
ARCOSA INC	9,003	252,689	744,008
AREALINK CO LTD	1,500	16,554	28,621
ARES CAPITAL CORP	8,300	119,313	166,249

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(a) NOT APPLICABLE

(b) ISSUER	(c) - DESCRIPTION COMMON STOCK		(d)	(e)
	NO. OF SHARES	COST	CURRENT VALUE	
ARGENTEX GROUP PLC	5,334	7,841	6,120	
ARGENX SE ADR	6,936	1,296,307	2,638,662	
ARGO GRAPHICS INC	8,200	143,890	213,172	
ARISE AB	6,744	34,631	30,415	
ARISTA NETWORKS INC	6,433	436,454	1,515,036	
ARLO TECHNOLOGIES INC	91,214	549,669	868,357	
ARMSTRONG WORLD INDUSTRIES	7,708	665,092	757,851	
AROA BIOSURGERY LTD	17,370	12,830	9,838	
ARROW ELECTRONICS INC	4,800	430,174	586,800	
ARTHUR J GALLAGHER + CO	5,746	1,127,254	1,292,160	
ARWANA CITRAMULIA TBK PT	418,500	25,821	18,075	
ASAHI NET INC	3,400	15,576	14,856	
ASCENDIS PHARMA A/S ADR	20,464	2,593,816	2,577,441	
ASCENDIS PHARMA A/S ADR	5,425	596,266	683,279	
ASCOM HOLDING AG REG	29	372	283	
ASIA CEMENT CHINA HOLDINGS	136,225	150,404	42,567	
ASIA HOLDINGS CO LTD	795	64,571	115,432	
ASIA PILE HOLDINGS CORP	4,200	14,902	20,943	
ASIA TECH IMAGE INC	14,000	29,305	30,381	
ASKA PHARMACEUTICAL HOLDINGS	1,100	18,615	13,920	
ASMPT LTD	15,500	192,087	147,883	
ASPIAL LIFESTYLE LTD	148,000	18,899	13,913	
ASPO OYJ	1,666	12,278	11,005	
ASROCK INC	8,805	79,630	73,732	
ASSECO SOUTH EASTERN EUROPE	1,440	17,291	17,981	
ASSYSTEM	899	37,704	49,157	
ASTRA AGRO LESTARI TBK PT	25,800	11,570	11,771	
ASTRA OTOPARTS TBK PT	94,700	15,257	14,515	
ASURANSI TUGU PRATAMA INDONE	233,300	20,880	15,455	
AT+T INC	61,600	1,285,963	1,033,648	
ATALAYA MINING PLC	5,611	20,423	25,822	
ATCO LTD CLASS I	15,335	561,714	449,723	
ATHABASCA OIL CORP	5,200	14,964	16,445	
ATKORE INC	1,935	242,387	309,600	
ATKORE INC	5,300	130,036	848,000	
ATLANTIC UNION BANKSHARES CO	11,900	450,755	434,826	
ATLASSIAN CORP CL A	14,779	1,512,875	3,515,333	
ATRESMEDIA CORP DE MEDIOS DE	2,926	12,109	11,617	
ATRIA OYJ	999	10,971	11,543	
AUDINATE GROUP LTD	3,138	27,072	34,645	
AUDIOCODES LTD	1,166	12,108	14,074	
AURAS TECHNOLOGY CO LTD	4,000	45,426	45,943	
AUTOHOME INC ADR	12,560	386,094	352,434	
AUTONATION INC	2,800	169,610	420,504	
AUTOSPORTS GROUP LTD	12,405	18,605	19,807	
AVANT GROUP CORP	2,500	23,871	25,216	
AVANTOR INC	32,999	699,445	753,367	
AVNET INC	7,600	322,024	383,040	
AXIOMTEK CO LTD	10,993	24,765	31,521	
AXIS CAPITAL HOLDINGS LTD	2,400	120,936	132,888	
AXOS FINANCIAL INC	14,708	505,521	803,057	
AXWAY SOFTWARE SA	656	15,042	19,131	
AZIMUT HOLDING SPA	3,504	85,005	91,503	
AZUREWAVE TECHNOLOGIES INC	12,000	11,293	18,807	
B COMMUNICATIONS LTD	17,954	80,438	70,302	
BAE SYSTEMS PLC	114,539	785,429	1,621,489	

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(b)	(c) - DESCRIPTION COMMON STOCK	(d)	(e)
ISSUER	NO. OF SHARES	COST	CURRENT VALUE
BALFOUR BEATTY PLC	7,119	28,968	30,057
BANCO BPM SPA	5,896	33,862	31,139
BANCO COMERCIAL PORTUGUES R	78,367	24,254	23,754
BANCO DE SABADELL SA	83,324	122,015	102,445
BANGCHAK CORP PCL NVDR	151,800	130,143	193,461
BANK OCBC NISP TBK PT	719,500	37,708	55,141
BANK OF AMERICA CORP	20,700	567,192	696,969
BANK OF NEW YORK MELLON CORP	44,404	1,553,114	2,311,228
BANK OF NEW YORK MELLON CORP	18,000	693,193	936,900
BANK OZK	10,876	465,155	541,951
BANKUNITED INC	9,500	345,556	308,085
BANPU PUBLIC CO LTD NVDR	56,700	14,256	11,296
BASE RESOURCES LTD	70,959	15,378	7,505
BASILEA PHARMACEUTICA REG	912	37,084	38,251
BATH + BODY WORKS INC	16,288	717,450	702,990
BATHURST RESOURCES LTD	17,718	14,877	11,606
BATU KAWAN BHD	2,800	13,115	12,553
BAUDROIE INC	900	16,127	22,759
BECHTLE AG	535	25,169	26,825
BEKAERT NV	286	13,515	14,697
BEKASI FAJAR INDUSTRIAL ESTA	4,970,000	55,543	44,222
BELIMO HOLDING AG REG	187	92,582	103,048
BELLRING BRANDS INC	12,373	279,168	685,835
BELSHIPS ASA	11,119	16,238	20,123
BELVOIR GROUP PLC	6,846	27,040	22,604
BENTLEY SYSTEMS INC CLASS B	23,885	942,680	1,246,319
BERGMAN + BEVING AKTIEBOLAG	967	15,774	17,617
BERKELEY GROUP HOLDINGS/THE	4,264	251,464	254,828
BERKSHIRE HATHAWAY INC CL B	5,877	1,121,321	2,096,091
BERMAZ AUTO BHD	164,100	71,285	84,282
BERRY GLOBAL GROUP INC	7,760	400,074	522,946
BERTRANDT AG	364	19,901	20,668
BEST BUY CO INC	2,900	276,268	227,012
BEST WORLD INTERNATIONAL LTD	35,011	45,717	45,652
BEYOND INC	5,006	252,335	138,616
BHIRAJ OFFICE LEASEHOLD FOR	82,900	11,478	12,144
BIOCRIST PHARMACEUTICALS INC	25,075	196,708	150,199
BIOGAIA AB B SHS	10,759	109,140	108,040
BIPROGY INC	5,000	158,793	156,582
BIRD CONSTRUCTION INC	833	6,588	9,097
BJ S WHOLESALE CLUB HOLDINGS	10,270	728,689	684,598
BJORN BORG AB	3,718	17,253	16,454
BLACK DIAMOND GROUP LTD	2,700	8,703	16,729
BLOOMSBURY PUBLISHING PLC	3,190	6,853	19,113
BML INC	900	27,927	19,152
BNK FINANCIAL GROUP INC	16,838	94,014	93,348
BORAL LTD	21,647	53,532	79,615
BORGWARNER INC	4,400	153,186	157,740
BOUSTEAD SINGAPORE LTD	18,100	11,442	11,800
BP PLASTICS HOLDING BHD	52,250	21,644	13,532
BRC ASIA LTD	26,200	29,795	35,553
BREEDON GROUP PLC	25,573	112,035	118,014
BRICKWORKS LTD	846	11,101	16,140
BRISTOL MYERS SQUIBB CO	18,800	1,219,563	964,628
BRITISH AMERICAN TOBACCO BHD	6,000	11,756	12,131
BUKIT ASAM TBK PT	1,927,275	371,306	305,420

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(b) ISSUER	(c) - DESCRIPTION COMMON STOCK	(d)	(e)
	NO. OF SHARES	COST	CURRENT VALUE
BUMITAMA AGRI LTD	29,200	12,000	13,392
BUNGE GLOBAL SA	2,260	233,768	228,147
BURKHALTER HOLDING AG	123	8,519	13,547
BUSINESS ENGINEERING CORP	1,200	11,173	35,069
BUZZI SPA	1,578	48,068	48,006
BW OFFSHORE LTD	3,997	10,697	8,824
BYC CO LTD	45	15,541	14,902
BYTES TECHNOLOGY GROUP PLC	2,264	14,522	17,663
C.I. HOLDINGS BERHAD	13,900	13,257	8,682
CABBEEN FASHION LTD	147,811	51,426	18,172
CALIFORNIA RESOURCES CORP	10,400	474,161	568,672
CAMBIUM NETWORKS CORP	5,458	122,750	32,748
CAMURUS AB	427	8,956	22,795
CANFOR CORP	5,000	101,643	67,685
CANFOR PULP PRODUCTS INC	13,200	62,112	18,019
CAPCOM CO LTD	600	7,997	19,390
CAPITAL LTD	16,064	18,473	18,431
CAPITAL ONE FINANCIAL CORP	5,700	676,473	747,384
CAPRI HOLDINGS LTD	3,800	161,224	190,912
CARD FACTORY PLC	45,989	52,845	63,200
CARDINAL HEALTH INC	1,600	85,696	161,280
CARGOTEC OYJ B SHARE	1,527	77,447	88,894
CARINDALE PROPERTY TRUST	3,707	12,902	10,118
CASCADES INC	9,014	67,365	87,023
CASTRO MODEL LTD	807	27,508	8,720
CATELLA AB	5,286	11,515	16,994
CB INDUSTRIAL PRODUCT HLDG	83,000	26,745	24,205
CBO TERRITORIA	4,055	17,026	16,394
CELESTICA INC	7,800	101,560	229,575
CELL BIOTECH CO LTD	1,080	11,438	9,409
CENTENE CORP	6,100	414,481	452,681
CENTURY CASINOS INC	29,726	241,485	145,063
CES ENERGY SOLUTIONS CORP	11,100	17,371	29,042
CEVA INC	12,768	578,053	289,961
CEWE STIFTUNG + CO KGAA	649	67,341	72,552
CFE	107	912	902
CHAMPION MICROELECTRONIC COR	10,000	23,788	23,884
CHAMPIONX CORP	16,489	356,363	481,644
CHANGAN MINSHENG APLL LOGI H	32,000	21,735	8,237
CHAOWEI POWER HOLDINGS LTD	85,000	31,165	15,675
CHARACTER GROUP PLC	7,129	50,717	26,264
CHART INDUSTRIES INC	2,285	143,365	311,514
CHEMED CORP	1,219	643,049	712,810
CHEMOURS CO/THE	2,500	61,975	78,850
CHEN HSONG HOLDINGS	56,000	19,683	10,184
CHENG UEI PRECISION INDUSTRY	42,000	59,876	66,099
CHESAPEAKE ENERGY CORP	3,500	346,480	269,290
CHESNARA PLC	1,192	4,662	3,974
CHEVALIER INTERNATIONAL HOLD	6,000	9,663	3,942
CHIA CHANG CO LTD	20,000	20,568	28,348
CHICONY ELECTRONICS CO LTD	40,000	119,498	228,084
CHIEN KUO CONSTRUCTION CO	26,000	11,154	14,614
CHILLED + FROZEN LOGISTICS H	1,300	12,136	13,343
CHINA BLUECHEMICAL LTD H	80,000	17,043	20,183
CHINA DONGXIANG GROUP CO	1,224,000	135,154	44,674
CHINA FOODS LTD	58,000	21,754	21,838

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	NO. OF SHARES	COST	CURRENT VALUE
CHINA HANKING HOLDINGS LTD	107,000	25,800	10,962
CHINA MERCHANTS CHINA DIRECT	40,000	62,583	39,393
CHINA OIL AND GAS GROUP LTD	340,000	18,531	10,537
CHINA RENEWABLE ENERGY INVES	179,138	8,073	2,615
CHINA STARCH HOLDINGS LTD	730,000	22,941	12,714
CHINA SUNSINE CHEMICAL HLDGS	42,400	7,532	12,697
CHINA TAIPING INSURANCE HOLD	170,800	195,959	146,990
CHINO CORP	1,500	18,248	23,259
CHIPOTLE MEXICAN GRILL INC	1,433	1,174,999	3,277,214
CHIYODA INTEGRE CO LTD	900	15,589	17,862
CHUBU NIPPON BROADCASTING CO	1,000	5,840	4,525
CHURCHILL CHINA PLC	1,654	24,420	30,574
CHURCHILL DOWNS INC	6,286	321,465	848,170
CIA DE DISTRIBUCION INTEGRAL	733	17,986	19,822
CIA SANEAMENTO DO PARANA PRF	19,500	18,215	23,644
CIA SANEAMENTO MINAS GERAIS	3,800	13,017	16,021
CIE FINANCIERE RICHEMO A REG	8,686	614,184	1,194,564
CIMPRESS PLC	2,859	379,310	228,863
CIPUTRA DEVELOPMENT TBK PT	165,400	11,068	12,569
CISCO SYSTEMS INC	19,800	837,184	1,000,296
CITIGROUP CAPITAL XIII	15,044	404,731	429,356
CITIGROUP INC	24,983	1,336,621	1,285,126
CITIGROUP INC	19,600	1,174,650	1,008,224
CITIZEN WATCH CO LTD	1,900	12,352	11,334
CITIZENS FINANCIAL GROUP	20,173	582,883	668,533
CIVMEC LTD	28,300	15,026	16,734
CLARKSON PLC	1,210	47,725	48,820
CLAS OHLSON AB B SHS	1,991	20,776	31,215
CLASQUIN	380	27,832	51,841
CLEAN HARBORS INC	2,626	430,511	458,263
CLEARVIEW WEALTH LTD	1,792	1,039	709
CLIMB GLOBAL SOLUTIONS INC	39,735	1,236,056	2,178,670
CLINICA BAVIERA SA	807	15,521	20,503
CLINUVEL PHARMACEUTICALS LTD	2,148	42,265	23,451
CLIPAN FINANCE INDONESIA PT	1,050,800	31,448	33,441
CLIQ DIGITAL AG	964	29,274	21,170
CLS HOLDINGS PLC	29,461	33,232	38,308
CML MICROSYSTEMS PLC	639	6,149	3,047
CNO FINANCIAL GROUP INC	7,600	138,282	212,040
CNX RESOURCES CORP	66,000	914,052	1,320,000
COCA COLA CONSOLIDATED INC	997	297,435	925,615
COCA COLA HBC AG DI	1,359	32,421	39,933
COGECO INC	2	77	87
COGNOR SA	41,258	41,088	87,505
COLLEGIUM PHARMACEUTICAL INC	11,689	267,531	359,787
COLLIERS INTL GR SUBORD VOT	541	51,517	68,448
COLRUYT GROUP N.V	778	34,385	35,064
COMARCH SA	102	4,867	5,395
COMBINED MOTOR HOLDINGS LTD	3,046	6,382	4,497
COMCAST CORP CLASS A	36,800	1,495,969	1,613,680
COMET HOLDING AG REG	55	18,106	17,330
COMPAGNIE DES ALPES	2,349	38,276	36,639
COMPAGNIE FINANCIERE TRAD BR	167	15,364	23,414
COMPAL ELECTRONICS	532,000	461,300	690,774
COMPASS GROUP PLC	81,136	1,148,529	2,219,654
COMPASS MINERALS INTERNATION	52,354	2,393,028	1,325,603

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	NO. OF SHARES	COST	CURRENT VALUE
COMPUTACENTER PLC	123	1,384	4,378
COMPUTER ENGINEER + CONSULT	400	8,775	4,446
COMPUTER MODELLING GROUP LTD	5,800	27,012	44,558
CONAGRA BRANDS INC	13,500	482,143	386,910
CONCENTRIC AB	960	13,275	17,108
CONCENTRIX CORP	4,862	373,321	477,497
CONDUIT HOLDINGS LTD	4,097	25,209	24,495
CONSENSUS CLOUD SOLUTION	4,992	152,267	130,840
CONSENSUS CLOUD SOLUTION	133	4,826	3,486
CONSORCIO ARA S.A.B. SER	144,093	17,257	31,227
CONSTELLUM SE	741	14,008	14,790
COPRO HOLDINGS CO LTD	1,400	7,649	15,144
CORE + MAIN INC CLASS A	8,387	312,150	338,919
CORE CORP	900	11,037	11,210
CORETRONIC CORP	18,000	40,808	41,935
CORP AMERICA AIRPORTS SA	12,354	163,852	198,405
CORUS ENTERTAINMENT INC B SH	138,100	143,241	76,311
COSTAIN GROUP PLC	17,396	11,795	14,060
COSTAR GROUP INC	14,747	1,121,554	1,288,740
COUSINS PROPERTIES INC	5,200	152,282	126,620
CRANE NXT CO	9,965	412,164	566,710
CRCC HIGH TECH EQUIPMENT C H	146,000	32,506	12,153
CREEPY JAR SA	68	13,304	10,341
CRITEO SA SPON ADR	2,091	49,937	52,944
CSG SYSTEMS INTL INC	4,000	166,620	212,840
CTI ENGINEERING CO LTD	800	7,994	29,848
CTT CORREIOS DE PORTUGAL	31,695	117,011	122,191
CUMMINS INC	2,480	519,173	594,134
CVS HEALTH CORP	14,400	943,900	1,137,024
CYBERLINK CORP	16,000	51,104	51,091
D AMICO INTERNATIONAL SHIPPI	6,794	31,633	42,403
D/S NORDEN	2,725	40,009	129,621
DAE HYUN CO LTD	13,692	32,951	21,369
DAEWON SAN UP CO LTD	14,174	89,799	64,272
DAI ICHI CUTTER KOGYO KK	3,800	33,369	35,580
DAIHATSU DIESEL MFG CO LTD	1,700	7,556	11,878
DAIHEN CORP	1,600	53,760	73,202
DAIMLER TRUCK HOLDING AG	15,255	422,421	573,286
DAISHIN SECURITIES CO LTD	597	8,782	6,629
DAITRON CO LTD	1,700	24,344	33,776
DANIELI + CO RSP	738	13,622	17,691
DANONE	40,393	2,666,910	2,618,309
DARFON ELECTRONICS CORP	21,000	33,006	37,086
DARKTRACE PLC	7,705	36,436	36,018
DATADOG INC CLASS A	9,891	697,880	1,200,570
DATASONIC GROUP BHD	219,200	21,720	20,274
DAVITA INC	3,202	303,896	335,442
DAYANG ENTERPRISE HLDGS BHD	56,500	22,199	19,674
DAYFORCE INC	20,842	1,393,329	1,398,915
DB FINANCIAL INVESTMENT CO L	4,986	15,350	14,905
DECEUNINCK NV	5,086	17,966	12,782
DECKERS OUTDOOR CORP	1,033	546,793	690,488
DELEUM BERHAD	31,700	8,507	6,588
DELL TECHNOLOGIES C	9,000	436,983	688,500
DELTA AIR LINES INC	8,800	345,216	354,024
DELTA DUNIA MAKMUR TBK PT	730,900	19,064	16,710

NORTH ATLANTIC STATES CARPENTERS PENSION FUND

SCHEDULE OF CORPORATE STOCK - COMMON

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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
DENSAN SYSTEM HOLDINGS CO LT	800	14,929	15,707
DENTSPLY SIRONA INC	24,639	998,931	876,902
DERICHEBOURG	768	7,547	4,310
DETERRA ROYALTIES LTD	32,074	103,965	115,338
DEUTZ AG	3,186	14,078	16,893
DEVELIA SA	12,516	13,326	14,450
DEVON ENERGY CORP	12,400	125,054	561,720
DEXCOM INC	21,471	1,489,752	2,664,336
DFDS A/S	473	18,332	15,630
DGB FINANCIAL GROUP INC	2,132	13,255	14,054
DHT HOLDINGS INC	9,207	87,685	90,321
DIAMOND BUILDING PDTS NVDR	108,152	24,100	25,824
DICK S SPORTING GOODS INC	4,700	273,774	690,665
DIGITAL CHINA HOLDINGS LTD	45,000	12,379	13,370
DIGITAL HOLDINGS INC	3,400	32,360	30,194
DIGITAL TURBINE INC	47,148	1,140,624	323,435
DINE BRANDS GLOBAL INC	4,700	361,236	233,355
DING SHENG XIN FINANCE CO LT	8,269	4,418	-
DIODES INC	4,200	354,190	338,184
DISCOVER FINANCIAL SERVICES	3,200	289,696	359,680
DLH HOLDINGS CORP	164,839	1,719,503	2,596,214
DMG MORI CO LTD	1,000	15,931	19,155
DNO ASA	84,966	124,406	84,249
DOF GROUP ASA	1,543	7,359	8,616
DOM DEVELOPMENT SA	627	24,228	23,822
DOMINO S PIZZA INC	1,981	768,874	816,628
DON MUANG TOLLWAY PCL NVDR	112,500	36,333	44,496
DONGKUK STEEL MILL CO LTD	825	4,221	5,624
DONNELLEY FINANCIAL SOLUTION	26,661	761,453	1,662,847
DORMAKABA HOLDING AG	105	51,708	56,639
DOSHISHA CO LTD	3,000	46,912	44,347
DOTDIGITAL GROUP PLC	20,653	25,662	26,039
DOUTOR NICHIRE HOLDINGS CO	800	12,642	12,365
DOXIMITY INC CLASS A	24,073	748,902	675,007
DRAEGERWERK AG	269	19,333	13,283
DROPSUITE LTD	81,099	13,031	15,771
DS SMITH PLC	12,079	44,144	47,319
DUCOMMUN INC	28,100	1,326,197	1,462,886
DUERR AG	1,220	24,911	28,813
DURATEC LTD	29,684	22,673	32,104
DXC TECHNOLOGY CO	519	13,364	11,870
E CREDIBLE CO LTD	3,438	47,669	37,106
EAGLE EYE SOLUTIONS GROUP PL	2,953	19,240	18,446
EAGLE MATERIALS INC	3,480	361,800	705,883
EASTERN CO SAE	120,855	84,353	109,698
EASTMAN CHEMICAL CO	4,770	390,950	428,441
EBASE CO LTD	4,700	26,136	26,070
EBAY INC	10,700	455,029	466,734
ECIT AS B	13,900	10,426	10,676
ECO WORLD DEVELOPMENT GROUP	156,500	21,282	35,762
ECORA RESOURCES PLC	21,592	32,265	27,636
ECOVYST INC	282,300	3,287,035	2,758,071
EIFFAGE	1,844	214,475	197,627
EINHELL GERMANY AG VORZUG	75	11,482	13,670
EIZO CORP	400	15,837	14,002
ELEMATEC CORP	2,600	29,336	32,329

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(a) NOT APPLICABLE

(b) ISSUER	(c) - DESCRIPTION COMMON STOCK	(d)	(e)
	NO. OF SHARES	COST	CURRENT VALUE
ELEVANCE HEALTH INC	5,127	1,620,498	2,417,688
ELIS SA	1,609	29,293	33,575
EMAK SPA	7,765	11,438	9,418
EMECO HOLDINGS LTD	11	5	5
EMPEROR WATCH + JEWELLERY	910,000	25,510	19,345
EN JAPAN INC	6,100	104,105	117,907
ENDO LIGHTING CORP	4,800	40,743	40,891
ENERGIZER HOLDINGS INC	5,300	212,954	167,904
ENERPLUS CORP	9,700	155,072	149,406
ENNOCONN CORP	3,000	24,955	26,197
ENOVIS CORP	26,228	1,454,040	1,469,293
ENQUEST PLC	58,529	11,473	11,252
ENSIGN ENERGY SERVICES INC	105,375	213,024	173,414
ENTRUST INC	2,600	14,902	14,606
EPWIN GROUP PLC	11,852	18,048	12,314
EQ OYJ	576	6,200	9,913
EQUIFAX INC	3,190	719,192	788,855
EQUITAL LTD	-	8	10
ETSY INC	8,067	739,421	653,830
EUROEYES INTERNATIONAL EYE C	20,000	17,524	13,344
EURONET WORLDWIDE INC	12,706	1,446,970	1,289,532
EURONET WORLDWIDE INC	5,655	502,993	573,926
EUROZ HARTLEYS GROUP LTD	15,225	15,114	9,142
EUSU HOLDINGS CO LTD	11,533	56,708	51,849
EVENTBRITE INC CLASS A	48,057	398,588	401,757
EVEREST GROUP LTD	1,000	234,090	353,580
EVERLIGHT ELECTRONICS CO LTD	19,000	30,699	30,954
EVN AG	1,256	32,947	39,473
EVOLUS INC	21,748	183,278	229,006
EW SCRIPPS CO/THE A	486,209	4,114,139	3,884,810
EXACT SCIENCES CORP	23,262	1,696,266	1,720,923
EXCO TECHNOLOGIES LTD	5,600	32,611	33,466
EXILLON ENERGY PLC	2,097	3,273	-
EXPEDIA GROUP INC	7,715	867,625	1,171,060
EXPEDIA GROUP INC	3,462	508,817	525,497
EXXARO RESOURCES LTD	3,345	42,100	37,402
EXXON MOBIL CORP	15,500	1,375,986	1,549,690
FAISAL ISLAMIC BANK OF EGYPT	22,094	12,533	22,876
FAISAL ISLAMIC BK EGYPT US	12,859	13,107	12,730
FAITH INC	7,800	86,482	26,391
FALCO HOLDINGS CO LTD	2,100	25,709	31,102
FAMOUS BRANDS LTD	3,699	11,696	11,717
FAN COMMUNICATIONS INC	6,200	25,975	17,415
FDM GROUP HOLDINGS PLC	2,880	29,943	16,833
FEDERAL AGRIC MTG CORP CL C	2,757	224,097	527,194
FEDERAL AGRIC MTG CORP CL C	2,729	453,677	521,839
FEDEX CORP	3,700	852,978	935,989
FERGUSON PLC	2,498	326,505	482,289
FERREXPO PLC	9,607	16,871	11,053
FIBI HOLDINGS	1,702	44,203	74,444
FIBRA SHOP PORTAFOLIOS INMOB	13,803	7,360	4,996
FIELMANN GROUP AG	951	50,430	51,097
FIFTH THIRD BANCORP	6,800	187,476	234,532
FINETEK CO LTD	4,928	11,464	14,901
FINNING INTERNATIONAL INC	1,100	27,977	31,967
FIRST AMERICAN FINANCIAL	7,008	389,168	451,596

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(a) NOT APPLICABLE

(b) ISSUER	(c) - DESCRIPTION COMMON STOCK	(d)	(e)
	NO. OF SHARES	COST	CURRENT VALUE
FIRST BUSEY CORP	9,700	168,344	240,754
FIRST HORIZON CORP	30,300	375,217	429,048
FIRST RESOURCES LTD	22,100	24,317	23,958
FIRSTGROUP PLC	5,988	11,303	13,359
FISCHER (GEORG) REG	8,322	593,816	604,140
FIVE BELOW	5,962	1,021,101	1,270,860
FLEX LTD	14,800	351,883	450,808
FLEXIUM INTERCONNECT INC	10,000	30,620	28,771
FLSMIDTH + CO A/S	637	25,272	27,110
FM MATTSSON MORA GROUP AB	2,484	16,892	13,556
FOCALTECH SYSTEMS CO LTD	27,000	110,530	98,972
FOOT LOCKER INC	5,900	230,693	183,785
FORBO HOLDING AG REG	28	42,082	35,064
FORD MOTOR CO	48,400	588,680	589,996
FORESIGHT GROUP HOLDINGS LTD	1,563	8,674	8,588
FORTIVE CORP	22,305	1,475,830	1,642,317
FOUNDING CONSTRUCTION + DEV	23,000	15,924	18,136
FOX CORP CLASS A	14,400	484,837	427,248
FOXCONN TECHNOLOGY CO LTD	12,000	21,664	20,762
FRACTAL GAMING GROUP AB	3,527	12,174	12,214
FRANKLIN COVEY CO	11,181	390,415	486,709
FREENET AG	578	15,939	16,179
FRONTIER DEVELOPMENTS PLC	5,376	16,309	8,992
FTGROUP CO LTD	1,900	15,459	15,997
FUCHS SE PREF	482	19,301	21,457
FUJI CORP	1,500	17,737	17,534
FUJI FURUKAWA ENGINEERING +	1,200	19,717	40,814
FUJI MEDIA HOLDINGS INC	1,700	16,974	18,914
FUJII SANGYO CORP	500	6,234	8,473
FUJIKURA KASEI CO LTD	3,300	15,247	10,018
FUJIMORI KOGYO CO LTD	2,000	47,517	53,625
FUKUDA DENSHI CO LTD	200	5,784	10,455
FUKUI COMPUTER HOLDINGS INC	1,400	29,716	25,025
FUKUSHIMA GALILEI CO LTD	700	22,974	24,230
FULLCAST HOLDINGS CO LTD	1,600	30,196	20,803
FURUNO ELECTRIC CO LTD	3,200	29,948	42,083
FURYU CORP	2,600	25,646	25,709
FUSO PHARMACEUTICAL INDUST	1,200	28,983	16,096
FUTABA INDUSTRIAL CO LTD	4,500	19,382	25,855
GABIA INC	5,533	55,392	71,874
GAJAH TUNGGAL TBK PT	211,200	10,258	14,197
GAKUJO CO LTD	1,400	17,645	17,944
GALAPAGOS NV SPON ADR	329	12,412	13,374
GALLIFORD TRY HOLDINGS PLC	31,862	78,342	91,390
GAMANIA DIGITAL ENTERTAINMEN	6,000	13,879	14,467
GAMBLING.COM GROUP LTD	11,699	154,071	114,065
GAMES WORKSHOP GROUP PLC	151	20,861	18,999
GAS MALAYSIA BHD	18,500	12,760	12,924
GATTACA PLC	11,783	42,423	21,931
GAVAZZI CARLO HOLDING AG RG	126	30,438	47,906
GB CORP	60,089	12,809	15,778
GDH GUANGNAN HOLDINGS LTD	61,171	8,397	4,465
GECOSS CORP	2,200	14,247	16,526
GEM DIAMONDS LTD	12,725	19,632	2,153
GEMDALE PROPERTIES AND INVES	264,000	30,659	9,467
GENERAL INTERFACE SOLUTION	14,000	62,344	30,107

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(a) NOT APPLICABLE

(b) ISSUER	(c) - DESCRIPTION COMMON STOCK	(d)	(e)
	NO. OF SHARES	COST	CURRENT VALUE
GENERAL MOTORS CO	20,600	754,090	739,952
GENERAL PLASTIC INDUSTRIAL	12,000	12,759	13,529
GENERALPLUS TECHNOLOGY INC	37,000	63,033	66,187
GENESIS TECHNOLOGY INC	7,198	13,907	15,339
GENPACT LTD	10,233	410,214	355,187
GENTING PLANTATIONS BHD	18,200	39,256	22,498
GENUS PLC	604	14,750	16,709
GESCO SE NA O.N	1,401	35,430	28,786
GETAC HOLDINGS CORP	42,000	103,082	151,904
GEUMHWA PSC CO LTD	778	21,625	15,767
GHOST STUDIO CO LTD/NEW	1,520	11,941	13,325
GIGACLOUD TECHNOLOGY INC A	4,620	58,343	84,523
GILEAD SCIENCES INC	9,800	644,423	793,898
GINEBRA SAN MIGUEL INC	10,550	13,202	32,141
GLOBAL BRANDS MANUFACTURE	41,000	90,912	86,167
GLOBAL FERRONICKEL HOLDINGS	382,000	16,599	14,211
GLOBAL GREEN CHEMICALS NVDR	85,800	36,909	22,624
GLOBAL PAYMENTS INC	11,074	1,087,761	1,406,398
GLOBAL SHIP LEASE INC CL A	2,181	41,170	43,227
GLORY LTD	2,600	50,821	49,647
GODO STEEL LTD	1,200	37,369	39,240
GOLD ROAD RESOURCES LTD	12,638	10,713	16,945
GOLDMAN SACHS GROUP INC	2,000	461,361	771,540
GOLDPAC GROUP LTD	127,000	33,975	24,722
GOLDTEK TECHNOLOGY CO LTD	9,933	55,685	20,099
GOLUB CAPITAL BDC 4 INC	19,800,000	19,800,000	20,939,321
GOOD WILL INSTRUMENT CO LTD	30,000	30,280	37,096
GOODBABY INTERNATIONAL HOLDI	534,000	89,254	49,238
GOODYEAR TIRE + RUBBER CO	7,455	113,391	106,756
GR ENGINEERING SERVICES LTD	8,132	10,462	12,318
GRAINCORP LTD A	16,173	81,731	80,450
GRAM CAR CARRIERS ASA	1,268	23,256	25,970
GRANDY HOUSE CORP	6,000	23,956	26,131
GRANGE RESOURCES LTD	404,743	86,285	128,422
GRAVITY CO LTD SPONSORED ADR	544	34,383	37,841
GREAT ELM GROUP INC	240,040	500,586	465,678
GREAT LAKES DREDGE + DOCK CO	169,000	1,188,349	1,297,920
GREGGS PLC	4,599	191,667	152,550
GROUPE BRUXELLES LAMBERT NV	8,541	671,465	671,948
GROUPE GUILLIN	482	10,967	16,452
GROUPE SFPI	7,375	21,205	15,919
GRUPA PRACUJ SA	969	12,930	15,278
GRUPO GICSA SA DE CV	175	86	24
GS HOLDINGS	2,434	84,979	77,297
GUDANG GARAM TBK PT	52,685	78,620	69,547
GULF KEYSTONE PETROLEUM LTD	698	1,459	1,149
GUN EI CHEMICAL INDUSTRY CO	600	12,429	13,215
GUNGHO ONLINE ENTERTAINMENT	6,800	115,584	113,422
GXO LOGISTICS INC	3,510	118,680	214,672
HAAD THIP PCL NVDR	26,400	10,541	12,762
HAFNIA LTD	2,527	15,234	17,468
HALLADOR ENERGY CO	88,315	427,342	780,705
HALOZYME THERAPEUTICS INC	14,475	721,585	534,996
HANDSOME CO LTD	329	11,302	4,884
HANESBRANDS INC	9,500	162,179	42,370
HANNSTAR BOARD CORP	7,000	10,832	12,613

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(a) NOT APPLICABLE

(b)	(c) - DESCRIPTION COMMON STOCK	(d)	(e)
ISSUER	NO. OF SHARES	COST	CURRENT VALUE
HANSAE YES24 HOLDINGS CO LTD	5,133	18,270	19,529
HANWA CO LTD	400	12,278	14,172
HARGREAVES SERVICES PLC	88	538	466
HARLEY DAVIDSON INC	7,300	222,852	268,932
HARTFORD FINANCIAL SVCS GRP	7,800	445,282	626,964
HARUM ENERGY TBK PT	96,100	11,367	8,332
HARVATEK CORP	20,000	16,384	17,171
HCA HEALTHCARE INC	2,900	421,628	784,972
HECTO FINANCIAL CO LTD	718	14,074	14,885
HECTO INNOVATION CO LTD	2,277	25,885	25,936
HEIDELBERG MATERIALS AG	28,150	1,942,978	2,516,902
HEINEKEN MALAYSIA BHD	5,800	29,210	30,471
HEINEKEN NV	12,362	1,269,788	1,255,504
HELIA GROUP LTD	50,699	112,841	150,486
HELLO GROUP INC SPN ADR	7,244	63,666	50,346
HENAN JINMA ENERGY CO LTD H	24,000	12,474	4,242
HERA SPA	3,847	12,012	12,630
HERC HOLDINGS INC	3,317	269,755	493,868
HEWLETT PACKARD ENTERPRISE	8,000	94,800	135,840
HEXINDO ADIPERKASA TBK PT	144,800	40,181	50,549
HF SINCLAIR CORP	9,400	327,147	522,358
HIKMA PHARMACEUTICALS PLC	27,464	770,762	626,349
HILL + SMITH PLC	1,618	32,987	39,355
HIM INTERNATIONAL MUSIC INC	4,000	12,324	13,881
HIMACS LTD	1,080	7,441	10,993
HISAMITSU PHARMACEUTICAL CO	400	16,199	12,232
HITEJINRO HOLDINGS CO LTD	2,796	22,698	18,931
HITO COMMUNICATIONS HOLDINGS	1,200	18,861	10,401
HOCHTIEF AG	214	15,808	23,710
HOEGH AUTOLINERS ASA	2,349	6,702	21,337
HOKKAIDO ELECTRIC POWER CO	5,600	24,226	24,810
HOKURIKU ELECTRICAL CONST	1,900	12,685	13,774
HOKURIKU GAS CO LTD	500	12,749	12,262
HOLLYWOOD BOWL GROUP PLC	4,494	11,890	17,531
HOLOGIC INC	3,291	133,274	235,142
HOME BANCSHARES INC	23,602	497,864	597,839
HOMELAND INTERACTIVE TECHNOL	48,000	11,907	13,647
HONEYS HOLDINGS CO LTD	2,000	22,781	24,769
HONG LEONG FINANCE LTD	10,658	21,243	20,199
HONG LEONG FINANCIAL GROUP	4,000	16,571	14,311
HONG LEONG INDUSTRIES BHD	13,400	18,962	26,858
HORIBA LTD	1,000	60,901	78,238
HORIZON OIL LTD	105,913	12,094	11,202
HOST HOTELS + RESORTS INC	19,800	347,603	385,506
HOTUNG INVESTMENT HOLDINGS	28,366	35,249	33,116
HP INC	19,100	416,555	574,719
HS AD	2,735	23,387	13,230
HSING TA CEMENT CO LTD	93,100	49,527	55,362
HUBBELL INC	3,320	872,430	1,092,048
HUBSPOT INC	4,235	900,646	2,458,587
HUDACO INDUSTRIES LTD	7,596	62,696	66,720
HUGEL INC	174	20,321	20,184
HUGO BOSS AG ORD	1,263	86,678	94,118
HUMANA AB	537	3,265	1,500
HUNT (JB) TRANSPRT SVCS INC	3,210	251,248	641,165
HUNTER GROUP ASA	3,874	18,332	816

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ISSUER	NO. OF SHARES	COST	CURRENT VALUE
HUNTINGTON INGALLS INDUSTRIE	1,000	170,480	259,640
HUNTSMAN CORP	3,800	95,532	95,494
HURON CONSULTING GROUP INC	115	-	11,822
HURXLEY CORP	14,200	74,426	88,435
HUSCOMPAGNIET A/S	1,473	12,712	10,150
HWASUNG INDUSTRIAL CO LTD	601	7,047	5,063
HYUNDAI CORP	834	11,586	12,226
IAC INC	76,700	3,819,459	4,017,546
ICOM INC	800	18,467	20,428
ICON PLC	2,520	192,462	713,336
ID HOLDINGS CORP	1,600	12,126	19,123
IGG INC	453,119	498,678	188,013
ILKKA OYJ	2,550	15,685	9,014
ILUKA RESOURCES LTD	49,280	316,585	221,933
IMAGE RESOURCES NL	150,271	25,611	6,460
IMAX CORP	12,830	233,041	192,707
IMDEX LTD	23,455	28,643	30,169
IMI PLC	2,174	43,530	46,671
INCHCAPE PLC	2,866	27,876	26,141
INCITEC PIVOT LTD	18,129	34,715	35,132
INCYTE CORP	5,300	299,277	332,787
INDAH KIAT PULP + PAPER TBK	23,400	15,514	12,652
INDIKA ENERGY TBK PT	559,890	80,707	52,182
INDIVIOR PLC	8,133	122,775	122,860
INDO TAMBANGRAYA MEGAH TBK P	2,215	2,252	3,690
INDOCEMENT TUNGGAL PRAKARSA	19,200	11,496	11,722
INDOFOOD SUKSES MAKMUR TBK P	78,000	35,952	32,675
INDRA SISTEMAS SA	976	15,158	15,094
INDUSTRIAL LOGISTICS PROPERT	6,100	135,207	28,670
INFICON HOLDING AG REG	53	63,773	75,944
INFOMEDIA LTD	11,653	13,120	11,450
INFORMATION SERVICES CORP	900	15,518	15,139
INFOTEL	499	9,773	29,215
INFUSYSTEM HOLDINGS INC	102,489	782,897	1,080,234
INGERSOLL RAND INC	31,980	1,201,862	2,473,333
INGERSOLL RAND INC	9,776	302,834	756,076
INGEVITY CORP	10,581	842,757	499,635
INGEVITY CORP	4,580	310,555	216,268
INGHAMS GROUP LTD	7,145	16,092	19,307
INGREDION INC	700	55,069	75,971
INKEVERSE GROUP LTD	189,952	25,354	20,191
INMODE LTD	12,072	412,963	268,481
INMODE LTD	7,968	312,374	177,208
INNOTEK LTD	97,400	64,357	32,489
INSMED INC	6,049	169,213	187,459
INTEL CORP	12,900	699,659	648,225
INTERMEDIATE CAPITAL GROUP	1,521	27,278	32,584
INTERNATIONAL GAMES SYSTEM C	12,000	220,410	283,084
INTERNATIONAL HOUSEWARES RET	72,000	20,386	14,937
INTERNATIONAL PERSONAL FINAN	2,985	4,073	4,528
INTERNATIONAL SEAWAYS INC	8,845	146,430	402,271
INTERNET INITIATIVE JAPAN	11,800	74,085	241,390
INTERPARFUMS SA	1,220	76,998	67,923
INTL BUSINESS MACHINES CORP	2,100	262,724	343,455
INTRED SPA	759	16,159	9,223
INVISIO AB	2,070	40,008	40,176

NORTH ATLANTIC STATES CARPENTERS PENSION FUND

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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
INWIDO AB	2,998	28,674	40,220
IOVANCE BIOTHERAPEUTICS INC	45,195	722,484	367,435
IPSEN	2,087	210,596	248,753
IRCE SPA	4,869	18,258	10,596
IREN SPA	4,191	12,526	9,134
IRHYTHM TECHNOLOGIES INC	9,997	1,046,933	1,070,079
ITT INC	5,968	494,463	712,102
ITURAN LOCATION AND CONTROL	911	23,346	24,816
ITURAN LOCATION AND CONTROL	3,098	88,144	84,390
IVECO GROUP NV	960	7,906	8,639
IVU TRAFFIC TECHNOLOGIES AG	1,141	24,969	17,570
JABIL INC	9,158	1,065,720	1,166,729
JABIL INC	3,900	323,403	496,860
JAC RECRUITMENT CO LTD	6,800	26,369	31,352
JAPAN PETROLEUM EXPLORATION	900	31,453	33,452
JAPAN PROPERTY MANAGEMENT CE	1,500	12,228	11,906
JAPAN TRANCITY CORP	8,300	37,897	36,148
JAPFA COMFEED INDONES TBK PT	152,100	11,925	11,657
JAYA REAL PROPERTY PT	373,700	11,626	16,990
JAZZ PHARMACEUTICALS PLC	3,194	440,079	392,862
JAZZ PHARMACEUTICALS PLC	3,600	547,802	442,800
JBCC HOLDINGS INC	3,000	40,108	78,947
JENSEN GROUP NV	374	13,483	13,716
JESS LINK PRODUCTS CO LTD	6,000	10,356	16,442
JET2 PLC	6,105	89,964	97,205
JETWAY INFORMATION CO LTD	10,000	13,694	13,766
JFE SYSTEMS INC	2,400	28,564	62,307
JFROG LTD	23,429	453,020	810,878
JH EDUCATIONAL TECHNOLOGY IN	54,000	18,427	4,910
JINHUI SHIPPING + TRANSPORTA	24,521	37,692	13,859
JK HOLDINGS CO LTD	13,600	93,421	100,037
JLS CO LTD	1,515	9,765	8,234
JMS CO LTD	6,300	25,409	22,478
JOHNSON + JOHNSON	4,850	786,766	760,189
JOHNSON ELECTRIC HOLDINGS	116,000	177,743	184,208
JOYY INC ADR	14,954	438,033	593,674
JPMORGAN CHASE + CO	3,700	452,883	629,370
JULIUS BAER GROUP LTD	357	23,680	19,999
JUTAL OFFSHORE OIL SERVICES	330,000	39,868	24,512
JYSKE BANK REG	371	25,211	26,609
KA SHUI INTL HLDG LTD	116,000	17,560	5,719
KADANT INC	3,811	150,925	1,068,261
KAKEN PHARMACEUTICAL CO LTD	400	11,790	9,519
KAMADA LTD	2,752	17,018	16,859
KAMEI CORP	6,000	43,682	72,776
KANEFUSA CORP	1,300	12,889	6,565
KANGNAM JEVISCO CO LTD	1,032	20,615	16,627
KARDEX HOLDING AG REG	89	18,397	23,052
KARUNA THERAPEUTICS INC	1,613	273,394	510,531
KAWADA TECHNOLOGIES INC	800	27,000	37,055
KAWAI MUSICAL INSTRUMENTS MF	400	17,608	10,101
KBR INC	22,700	645,670	1,257,807
KC CO LTD	1,536	25,026	21,956
KC TECH CO LTD	539	7,363	11,216
KEIHANSHIN BUILDING CO LTD	2,000	17,219	20,173
KELLER GROUP PLC	1,919	20,390	21,528

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(a) NOT APPLICABLE

(b) ISSUER	(c) - DESCRIPTION COMMON STOCK		(d)	(e)
	NO. OF SHARES	COST	CURRENT VALUE	
KERUR HOLDINGS LTD	1,148	22,541	20,244	
KEYCORP	16,000	226,760	230,400	
KEYSIGHT TECHNOLOGIES IN	4,776	703,162	759,814	
KEYSTONE LAW GROUP PLC	1,607	8,282	10,448	
KIMLY LTD	58,900	15,560	14,289	
KIMURA CHEMICAL PLANTS CO	3,600	17,655	19,101	
KIMURA UNITY CO LTD	3,200	16,595	30,393	
KINEPOLIS	241	11,847	11,900	
KINETIC DEVELOPMENT GROUP LT	166,000	12,185	11,692	
KING CO LTD	2,000	8,391	9,746	
KING S TOWN BANK	10,000	12,661	13,017	
KING YUAN ELECTRONICS CO LTD	8,000	12,677	22,131	
KINGBOARD HOLDINGS LTD	117,000	381,806	279,893	
KINGSOFT CORP LTD	22,800	80,492	70,369	
KINIKA PHARMACEUTICALS A	15,351	265,782	269,257	
KINROSS GOLD CORP	5,000	22,930	30,411	
KIP REIT	58,300	11,779	11,356	
KISCO CORP	1,270	11,173	6,489	
KITANO CONSTRUCTION CORP	2,200	46,313	49,468	
KLINGELNBERG AG	21	470	409	
KOENIG + BAUER AG	4,640	103,689	62,019	
KOGENERACJA	1,172	12,002	19,314	
KOIKE SANSEI KOGYO CO LTD	1,100	25,786	33,005	
KOKUYO CO LTD	800	12,291	13,017	
KONINKLIJKE BAM GROEP NV	5,980	16,692	15,973	
KONINKLIJKE PHILIPS NV	75,171	2,517,535	1,750,849	
KOOTH PLC	8,541	44,258	32,338	
KOREA ASSET IN TRUST CO LTD	10,547	32,345	25,878	
KOREAN REINSURANCE CO	424	1,984	2,354	
KORN FERRY	7,470	352,913	443,345	
KOSMOS ENERGY LTD	74,638	460,124	500,821	
KRAFT HEINZ CO/THE	22,960	768,280	849,061	
KROGER CO	17,800	568,266	813,638	
KRUK SA	338	38,370	41,001	
KRUNG THAI BANK NVDR	58,000	19,742	31,266	
KSB SE + CO KGAA VORZUG	13	5,570	8,358	
KSL HOLDINGS BHD	39,100	14,497	9,445	
KTCS CORP	4,798	11,423	13,412	
KUDELSKI SA BR	2,971	12,926	4,271	
KUKBO DESIGN CO LTD	769	11,673	8,521	
KUMPULAN FIMA BHD	74,650	33,865	30,055	
KURIMOTO LTD	1,300	20,362	28,309	
KURIYAMA HOLDINGS CORP	7,900	50,135	50,489	
KYERYONG CONST INDUST CO LTD	410	8,848	4,600	
KYODO PRINTING CO LTD	500	11,997	11,456	
KYOWA LEATHER CLOTH CO LTD	1,800	12,468	9,167	
KYUSHU LEASING SERVICE CO	2,800	17,991	20,159	
LA FRANCAISE DES JEUX SAEM	1,722	69,015	62,469	
LA Z BOY INC	4,600	157,389	169,832	
LABORATORIOS FARMACEUTICOS R	290	19,931	19,285	
LADPRAO GENERAL HOSPITAL NVDR	71,500	12,294	10,474	
LAM RESEARCH CORP	1,254	591,060	982,208	
LANDIS GYR GROUP AG	144	12,921	13,003	
LANNER ELECTRONICS INC	17,300	38,387	63,415	
LANTHEUS HOLDINGS INC	8,132	649,935	504,184	
LANTHEUS HOLDINGS INC	2,600	144,677	161,200	

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(a) NOT APPLICABLE

(b)	(c) - DESCRIPTION COMMON STOCK	(d)	(e)
ISSUER	NO. OF SHARES	COST	CURRENT VALUE
LASSONDE INDS INC CLASS A	100	9,717	10,636
LATTICE SEMICONDUCTOR CORP	43,131	1,594,061	2,975,608
LAURENT PERRIER	246	28,142	32,881
LBS BINA GROUP BHD	241,500	28,444	30,220
LCI INDUSTRIES	4,248	564,962	534,016
LE SAUNDA HOLDINGS LTD	52,000	9,192	2,664
LEAR CORP	1,200	190,836	169,452
LEE S PHARMACEUTICAL HLDGS	46,000	18,966	9,013
LEFT FIELD PRINTING GROUP LT	1,500	117	77
LEIDOS HOLDINGS INC	5,262	470,558	569,559
LENNAR CORP A	4,027	327,303	600,184
LENOVO GROUP LTD	176,000	113,092	246,130
LEON S FURNITURE LTD	900	11,663	12,395
LEONARDO DRS INC	22,498	272,243	450,860
LEONARDO SPA	6,896	73,320	113,770
LIBERTY MEDIA CORP LIB NEW C	9,210	661,655	581,427
LIBERTY MEDIA CORP LIBER NEW	24,290	653,713	699,066
LIBERTY TRIPADVISOR HDG A	1,364,329	1,995,271	1,159,680
LIDA HOLDINGS LTD	22,000	21,485	22,652
LIFECORE BIOMEDICAL INC	187,314	1,825,633	1,159,474
LIGAND PHARMACEUTICALS	6,801	533,056	485,727
LINCOLN NATIONAL CORP	2,100	105,651	56,637
LINDAB INTERNATIONAL AB	845	14,535	16,694
LINGKARAN TRANS KOTA HLDGS	40,300	43,473	44
LIONS GATE ENTERTAINMENT B	170,000	1,719,342	1,732,300
LIPPO CIKARANG PT	321,300	28,657	16,694
LIPPO LTD	4,056	2,275	603
LITTELFUSE INC	2,225	446,136	595,321
LIU CHONG HING INVESTMENT	18,000	28,652	12,448
LIVE NATION ENTERTAINMENT IN	13,881	1,083,716	1,299,262
LKQ CORP	4,700	143,515	224,613
LLOYDS BANKING GROUP PLC	1,513,379	1,084,731	920,448
LOCK+LOCK CO LTD	4,174	20,225	20,126
LOCKHEED MARTIN CORP	1,400	551,333	634,536
LOGITECH INTERNATIONAL REG	10,535	764,631	998,362
LOGO YAZILIM SANAYI VE TICAR	9,668	28,508	24,208
LONKING HOLDINGS LTD	80,000	23,216	12,499
LOPEZ HOLDINGS CORP	360,900	53,320	28,383
LUBELSKI WEGIEL BOGDANKA SA	3,681	26,483	31,846
LUCARA DIAMOND CORP	18,610	9,727	5,434
LUCERO ENERGY CORP	90,000	43,583	37,540
LULULEMON ATHLETICA INC	1,869	667,080	955,601
LUMAX INTERNATIONAL CORP LTD	8,100	19,119	23,542
LUNG KEE BERMUDA HLDG LTD	84,000	27,044	15,598
LYCOPODIUM LTD	4,548	25,652	36,309
LYONDELLBASELL INDU CL A	4,300	334,916	408,844
M + T BANK CORP	3,923	498,874	537,765
M + T BANK CORP	3,170	413,051	434,544
MACAUTO INDUSTRIAL CO LTD	5,000	16,029	12,333
MACROBLOCK INC	4,000	16,014	14,402
MACY S INC	12,300	265,367	247,476
MADER GROUP LTD	81	343	379
MAEIL HOLDINGS CO LTD	4,440	47,819	28,097
MAEZAWA INDUSTRIES INC	1,900	12,493	13,221
MAEZAWA KASEI INDUSTRIES CO	100	1,030	1,082
MAGNI TECH INDUSTRIES BHD	25,066	10,230	10,201

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

(a) NOT APPLICABLE

(b)	(c) -	(d)	(e)
	DESCRIPTION COMMON STOCK		
ISSUER	NO. OF SHARES	COST	CURRENT VALUE
MAJOR DRILLING GROUP INTL	10,200	74,019	71,244
MAKEMYTRIP LTD	9,341	339,431	438,840
MAKIYA CO LTD	800	9,763	5,788
MALINDO FEEDMILL TBK PT	5,800	385	194
MAN GROUP PLC/JERSEY	12,696	35,402	37,646
MANDALA MULTIFINANCE TBK PT	127,000	5,046	24,085
MANPOWERGROUP INC	1,000	90,180	79,470
MAP AKTIF ADIPERKASA PT	896,700	48,285	47,756
MARATHON PETROLEUM CORP	3,900	289,920	578,604
MARIMEKKO OYJ	1,525	18,876	22,422
MARK DYNAMICS INDONESIA PT	613,400	19,313	24,302
MARKETAXESS HOLDINGS INC	1,639	504,950	479,981
MARKS + SPENCER GROUP PLC	52,517	142,815	182,368
MARRIOTT VACATIONS WORLD	2,300	357,735	195,247
MARSH + MCLENNAN COS	7,702	344,884	1,459,298
MARTINREA INTERNATIONAL INC	4,567	36,170	49,667
MARUZEN CO LTD	1,957	15,830	38,451
MASI AGRICOLA SPA	4,092	18,968	22,601
MASISA SA	515,595	9,773	10,480
MASONITE INTERNATIONAL CORP	13,184	1,130,720	1,116,157
MATAS A/S	643	7,047	10,996
MATRIX CONCEPTS HOLDINGS BHD	69,300	21,058	24,885
MATSUI CONSTRUCTION CO LTD	8,491	53,990	50,471
MAXIMUS INC	7,337	540,979	615,281
MAYORA INDAH PT	77,600	13,033	12,549
MBM RESOURCES BERHAD	16,200	12,568	14,948
MC GROUP PCL NVDR	39,000	10,416	15,082
MCKESSON CORP	1,400	190,606	648,172
MCMILLAN SHAKESPEARE LTD	13,947	126,862	151,887
MDA LTD	1,594	13,247	13,926
ME GROUP INTERNATIONAL PLC	9,052	12,210	14,424
MEDCO ENERGI INTERNASIONAL T	118,700	10,216	8,904
MEDIA NUSANTARA CITRA TBK PT	591,200	18,588	14,821
MEDIPAL HOLDINGS CORP	6,300	104,587	102,133
MEDISTIM ASA	864	39,092	18,206
MEDPACE HOLDINGS INC	4,080	575,080	1,250,642
MEG ENERGY CORP	27,200	460,439	488,263
MEIER TOBLER GROUP AG	1,994	59,091	87,540
MEIJI ELECTRIC INDUSTRIES CO	1,200	11,785	11,908
MEIKO NETWORK JAPAN CO LTD	5,500	24,629	29,884
MEIRAGTX HOLDINGS PLC	8,289	83,802	58,189
MEITEC GROUP HOLDINGS INC	7,200	118,660	144,378
MELCOR DEVELOPMENTS LTD	4,400	43,612	37,573
MELEXIS NV	230	18,139	23,184
MELISRON	17	1,449	1,322
MENSCH UND MASCHINE SOFTWARE	2,117	65,459	128,620
MERCK + CO. INC.	20,100	1,514,021	2,191,302
META PLATFORMS INC CLASS A	6,681	1,178,214	2,364,807
META PLATFORMS INC CLASS A	1,800	266,421	637,128
METALL ZUG AG SHS B REG	8	12,366	14,495
METALURGICA GERDAU SA PREF	75,100	164,837	167,899
METHANEX CORP	30	1,621	1,426
METLIFE INC	8,400	419,714	555,492
MFE MEDIAFOREUROPE NV CL A	21	159	55
MGAME CORP	3,006	19,969	14,471
MI CHANG OIL INDUSTRIAL CO	449	34,611	24,997

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ISSUER	NO. OF SHARES	COST	CURRENT VALUE
MICHAEL HILL INTERNATIONAL L	8,612	8,311	5,318
MICHELMERSH BRICK HOLDINGS P	7,580	14,444	9,083
MICRO STAR INTERNATIONAL CO	17,000	81,127	112,999
MIGROS TICARET A.S	6,309	74,145	71,562
MIKRON HOLDING AG REG NEW	2,239	20,684	40,702
MIMAKI ENGINEERING CO LTD	2,800	13,547	18,371
MIMASU SEMICONDUCTOR INDUST	1,400	24,791	31,778
MINISO GROUP HOLDING LTD ADR	6,698	117,908	136,639
MINMETALS LAND LTD	226,000	38,300	8,683
MIROKU JYOHU SERVICE CO LTD	1,600	16,121	19,929
MITIE GROUP PLC	18,049	22,625	22,848
MITO SECURITIES CO LTD	1,100	4,667	3,285
MITRABAHTERA SEGARA SEJATI T	184,200	13,557	14,476
MITRABARA ADIPERDANA TBK PT	49,881	12,158	13,769
MITSUBISHI PENCIL CO LTD	1,400	16,580	20,715
MITSUBISHI RESEARCH INSTITUT	800	32,163	26,273
MITSUBISHI SHOKUJIN CO LTD	1,600	39,747	54,589
MIXI INC	800	29,908	13,398
MIZUNO CORP	1,800	60,929	50,177
MK RESTAURANTS GROUP NVDR	99,600	160,131	115,992
MKH BHD	47,556	16,683	14,800
MMA OFFSHORE LTD	35,166	12,832	44,872
MOCHIDA PHARMACEUTICAL CO	400	17,709	9,278
MOLSON COORS BEVERAGE CO B	14,100	603,604	863,061
MOMENTUM METROPOLITAN HOLDIN	11,553	11,699	13,829
MONOLITHIC POWER SYSTEMS INC	3,194	1,403,844	2,014,711
MOOG INC CLASS A	3,955	441,898	572,605
MORESCO CORP	1,200	12,757	11,006
MORGAN SINDALL GROUP PLC	614	6,289	17,337
MORGAN STANLEY	4,300	251,771	400,975
MORITO CO LTD	3,900	33,202	35,548
MORY INDUSTRIES INC	700	19,996	20,780
MOSAIC CO/THE	10,100	383,547	360,873
MOTA ENGIL SGPS SA	19,009	36,472	83,153
MOTORCAR PARTS OF AMERICA IN	177,278	1,308,777	1,655,777
MPC CONTAINER SHIPS AS	137,215	419,576	180,036
MPI CORP	2,000	7,685	14,174
MSCI INC	1,599	491,201	904,474
MUDA HOLDINGS BERHAD	41,300	27,618	12,718
MULLEN GROUP LTD	1,200	10,387	12,777
MULTICAMPUS CO LTD	616	15,532	16,310
NAFCO CO LTD	3,500	59,461	46,226
NAKANO CORP	7,600	33,546	25,391
NANOSONICS LTD	214	696	643
NANYO CORP	800	12,402	12,115
NAPHTHA ISRAEL PETROLEUM CRP	4,835	22,348	24,921
NAPIER PORT HOLDINGS LTD	10,806	22,340	17,173
NATIONAL BANK OF GREECE	75,099	111,887	521,807
NATIONAL FUEL GAS CO	5,900	245,992	296,003
NATURHOUSE HEALTH SAU	7,763	17,821	13,892
NAVIENT CORP	11,800	112,159	219,716
NAVIGATOR CO SA/THE	6,877	27,514	26,953
NCC AB B SHS	2,088	23,494	26,023
NCR ATLEOS CORP	4,984	104,187	121,061
NCR ATLEOS CORP	1,200	34,895	29,148
NCR VOYIX CORP	9,968	165,031	168,559

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ISSUER	NO. OF SHARES	COST	CURRENT VALUE
NCR VOYIX CORP	2,400	55,273	40,584
NEDAP N.V.	819	35,934	57,901
NEEDS WELL INC	4,000	20,461	22,131
NEMETSCHEK SE	8,007	688,460	694,150
NEO PERFORMANCE MATERIALS IN	4,282	44,338	24,778
NEOGEN CORP	9,775	150,340	196,575
NEOJAPAN INC	1,900	13,492	13,747
NEOPHARM CO LTD	846	11,819	16,980
NETAPP INC	3,400	156,009	299,744
NETBAY PCL NVDR	42,800	27,615	31,098
NETDRAGON WEBSOFT HOLDINGS L	65,500	169,229	103,846
NEUROCRINE BIOSCIENCES INC	4,220	321,900	556,027
NEW ENERGY SOLAR LTD UNLISTED	23,544	14,954	1,012
NEW HOPE CORP LTD	36,884	135,706	129,866
NEW WORK SE	1,012	123,083	88,091
NEWBORN TOWN INC	5,600	1,146	1,391
NEWMARKET CORP	2,500	779,764	1,364,575
NEWMARKET CORP	770	344,926	420,289
NEXSTAR MEDIA GROUP INC	3,239	379,567	507,713
NEXSTAR MEDIA GROUP INC	2,100	385,766	329,175
NICCA CHEMICAL CO LTD	1,900	12,345	12,871
NICE INFORMATION + TELECOM	3,480	72,764	58,230
NICHIBAN CO LTD	1,000	11,684	12,293
NICHIREKI CO LTD	16,145	118,948	276,680
NICHIRIN CO LTD	1,300	25,454	30,153
NIHON FLUSH CO LTD	2,000	11,870	12,881
NIHON KAGAKU SANGYO CO LTD	1,400	12,050	14,062
NIHON KOHDEN CORP	700	17,497	22,160
NIHON TRIM CO LTD	1,200	18,724	25,706
NILFISK HOLDING A/S	5,172	104,977	90,590
NILORNGRUPPEN AB B SHS	2,634	26,459	15,682
NINETY ONE PLC	8,477	18,594	19,830
NINTENDO CO LTD	12,700	721,812	662,926
NIOX GROUP PLC	12,412	10,280	10,601
NIPPON DRY CHEMICAL CO LTD	2,200	35,531	43,632
NIPPON SHINYAKU CO LTD	800	32,477	28,350
NIPPON TELEVISION HOLDINGS	3,400	32,656	37,128
NIPPON THOMPSON CO LTD	11,900	47,168	47,607
NIRAKU GC HOLDINGS INC	55,813	7,349	1,930
NISHIKAWA RUBBER CO LTD	1,500	14,950	18,545
NISHOKU TECHNOLOGY INC	13,000	38,991	44,053
NISSHIN FUDOSAN CO LTD	17,600	70,036	62,545
NISSO HOLDINGS CO LTD	6,300	33,043	35,526
NITTO KOHKI CO LTD	2,100	29,008	27,810
NJS CO LTD	700	10,616	13,520
NORCROS PLC	12,610	32,811	30,864
NORDIC AMERICAN TANKERS LTD	23,370	98,047	98,154
NOROO HOLDINGS CO LTD	6,128	78,084	54,528
NORTHERN OIL AND GAS INC	14,779	480,139	547,858
NOVAC CO LTD	600	11,677	13,066
NOVARTIS AG REG	25,075	2,033,509	2,528,504
NRG ENERGY INC	12,900	479,207	666,930
NRW HOLDINGS LTD	14,289	23,627	29,055
NTG NORDIC TRANSPORT GROUP A	656	40,291	28,579
NU HOLDINGS LTD/CAYMAN ISL A	62,238	443,699	518,443
NUFARM LTD	25,811	88,879	91,935

NORTH ATLANTIC STATES CARPENTERS PENSION FUND

SCHEDULE OF CORPORATE STOCK - COMMON

DECEMBER 31, 2023

EIN 51-6040899, 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
NUVISTA ENERGY LTD	1,597	2,993	13,371
NVR INC	90	539,448	630,041
NWF GROUP PLC	5,080	12,524	14,409
NZME LTD	46,360	31,698	31,634
OCEANAGOLD CORP	49,301	77,062	94,968
OCHI HOLDINGS CO LTD	3,500	36,487	36,147
ODFJELL TECHNOLOGY LTD	2,317	10,603	12,662
ODP CORP/THE	130	3,809	7,319
OFFICE PROPERTIES INCOME TRU	2,900	65,888	21,228
OHBA CO LTD	2,600	15,795	16,930
OIE SANGYO CO LTD	1,200	15,165	14,862
OKEA ASA	42,695	149,763	111,828
OKI ELECTRIC INDUSTRY CO LTD	3,600	22,706	23,263
OKUMA CORP	400	19,958	17,236
OLD REPUBLIC INTL CORP	10,300	161,041	302,820
OLVI OYJ A SHARES	257	13,208	7,963
OM HOLDINGS LTD	29,031	20,121	8,815
OMEGA HEALTHCARE INVESTORS	9,800	329,136	300,468
OMNIAB INC	63,502	335,118	391,807
ON SEMICONDUCTOR	20,045	1,248,034	1,674,359
OPENJOBMETIS SPA AGENZIA PER	1,535	20,048	27,130
OPTINOSE INC	15,486	175,031	19,977
OPTION CARE HEALTH INC	21,461	654,151	723,021
ORANGE POLSKA SA	83,854	135,435	173,583
ORASCOM CONSTRUCTION PLC	3,464	21,395	20,354
ORGANON + CO	1,360	47,061	19,611
ORICA LTD	80,749	822,742	878,279
ORIENTAL WATCH HOLDINGS	46,000	8,617	24,742
ORIOLA CORP B	6,613	17,609	7,948
ORION HOLDINGS CORP	3,414	40,007	38,702
ORORA LTD	9,189	24,617	16,302
ORSERO SPA	1,897	23,674	35,540
OSHKOSH CORP	5,000	435,286	542,050
OUTFRONT MEDIA INC	139,800	1,272,685	1,951,608
OWENS CORNING	4,600	336,949	681,858
PACIFIC ANDES RESOURCES DEVE	49,000	7,110	-
PACIFIC BASIN SHIPPING LTD	470,000	270,086	154,689
PACIFIC ONLINE	52,000	11,410	3,197
PACIRA BIOSCIENCES INC	28,912	1,240,981	975,491
PACKAGING CORP OF AMERICA	2,735	322,932	445,559
PALFINGER AG	953	29,637	26,529
PAN HONG PROPERTY GROUP LTD	30,500	2,155	1,884
PANDORA A/S	7,420	706,215	1,026,080
PANTECH GROUP HOLDINGS BHD	229,800	34,527	45,010
PARAGON BANKING GROUP PLC	5,277	35,442	46,922
PARAMOUNT CORP BHD	141,900	24,293	28,720
PARAMOUNT GLOBAL CLASS B	9,200	302,938	136,068
PARKER CORP	5,000	26,340	27,238
PARKLAND CORP	2,900	94,522	93,932
PASCO CORP	1,900	22,412	23,774
PAX GLOBAL TECHNOLOGY LTD	421,000	197,926	326,187
PAYPAL HOLDINGS INC	8,000	530,213	491,280
PAYPOINT PLC	2,694	19,219	17,858
PCA CORP	1,900	13,766	15,162
PCC EXOL SA	10,049	9,084	7,424
PEC LTD	65,300	31,712	25,494

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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
PEGASUS CO LTD	10,700	51,058	33,926
PELAYARAN NASIONAL EKALYA PU	1,001,400	19,201	18,601
PELIKAN INTERNATIONAL CORP	188,900	31,889	11,511
PER AARSLEFF HOLDING A/S	624	25,750	29,821
PERENNIAL ENERGY HOLDINGS LT	255,000	37,214	27,758
PERENTI LTD	41,684	25,131	29,581
PERSEUS MINING LTD	28,416	36,794	35,871
PERUSAHAAN GAS NEGARA TBK PT	1,959,100	225,582	143,780
PFIZER INC	33,800	1,249,084	973,102
PGT INNOVATIONS INC	18,275	322,667	743,793
PHARMA FOODS INTERNATIONAL	2,400	20,480	17,058
PHARMA MAR SA	321	13,467	14,567
PHARMARESEARCH CO LTD	278	22,857	23,636
PHAROS ENERGY PLC	93,922	34,955	25,503
PHILIP MORRIS CR AS	17	12,133	11,881
PHILLIPS 66	4,900	463,437	652,386
PHINIA INC	880	21,208	26,655
PHISON ELECTRONICS CORP	10,000	151,202	169,434
PHX ENERGY SERVICES CORP	9,200	20,199	56,514
PICO FAR EAST HOLDINGS LTD	178,000	22,639	35,105
PIRAEUS FINANCIAL HOLDINGS S	3,277	11,805	11,584
PIRAEUS PORT AUTHORITY SA	1,538	30,663	39,416
PIXART IMAGING INC	3,000	10,931	15,054
PIZZA PIZZA ROYALTY CORP	2,000	20,885	22,327
PLAN B MEDIA PCL NVDR	60,300	13,499	15,635
PLAYMATES HOLDINGS LTD	354,000	40,904	25,388
POLAR CAPITAL HOLDINGS PLC	2,763	19,931	16,414
POLARIS INC	1,600	159,832	151,632
POLARIS RENEWABLE ENERGY INC	2,500	23,798	25,083
PONSSE OYJ	497	16,969	12,408
POOL CORP	1,939	692,060	773,099
POOL CORP	1,248	302,520	497,590
POONGSAN HOLDINGS CORP	2,905	65,672	83,345
PORR AG	1,628	20,585	22,839
POST HOLDINGS INC	7,979	642,661	702,631
POU CHEN	336,000	376,571	338,294
PRECISE CORP PCL NVDR	201,700	18,148	17,728
PRECISION DRILLING CORP	200	14,128	10,915
PRECISION TSUGAMI CHINA CORP	8,000	11,294	9,579
PREMIER INC CLASS A	7,355	248,141	164,458
PRESTIGE CONSUMER HEALTHCARE	19,497	717,697	1,193,606
PRIMA ANDALAN MANDIRI TBK PT	124,972	38,746	45,859
PRIMAX ELECTRONICS LTD	218,000	433,933	480,885
PRIMORIS SERVICES CORP	9,500	188,243	315,495
PRO MEDICUS LTD	4,166	167,380	272,413
PROACT IT GROUP AB	14,979	85,625	139,715
PROBI AB	109	5,146	2,196
PROFOTO HOLDING AB	1,317	14,376	9,671
PROGRESSIVE CORP	11,173	561,327	1,779,635
PRONEXUS INC	1,500	9,828	14,013
PROSPERITY BANCSHARES INC	7,891	480,520	534,457
PROTO CORP	3,600	25,994	34,524
PRUKSA HOLDING PCL NVDR	63,700	26,147	22,582
PT STEEL PIPE INDUSTRY OF IN	1,031,100	19,345	19,555
PULTEGROUP INC	7,608	337,429	785,298
PULTEGROUP INC	7,000	350,994	722,540

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(a) NOT APPLICABLE

(b)	(c) - DESCRIPTION COMMON STOCK	(d)	(e)
ISSUER	NO. OF SHARES	COST	CURRENT VALUE
PUMA BIOTECHNOLOGY INC	6,358	265,130	27,530
PURADELTA LESTARI TBK PT	2,513,700	27,861	26,611
PUIULO OYJ	1,912	13,946	18,850
Q TECHNOLOGY GROUP CO LTD	69,000	41,538	39,234
QILU EXPRESSWAY CO LTD	44,000	13,144	10,932
QINETIQ GROUP PLC	4,144	18,796	16,324
QUADIENT SA	898	18,649	19,066
QUALCOMM INC	4,980	687,937	720,257
QUALYS INC	1,442	153,724	283,036
QUANTA SERVICES INC	6,606	1,207,386	1,425,575
QUEST DIAGNOSTICS INC	1,600	190,672	220,608
QUIDELORTHO CORP	3,953	311,876	291,336
RADCOM LTD	1,253	12,382	10,099
RADIAN GROUP INC	12,600	230,834	359,730
RADIANT OPTO ELECTRONICS COR	16,000	53,884	69,337
RADWARE LTD	3,263	118,603	54,427
RADWARE LTD	21,661	557,497	361,305
RAIFFEISEN BANK INTERNATIONA	279	3,548	5,754
RAJTHANEE HOSPITAL PCL NVDR	21,900	21,484	17,484
RAKON LTD	24,987	19,533	19,459
RANA GRUBER ASA	2,329	11,900	18,323
RANDON PARTICIPACOES SA PREF	37,700	86,212	99,341
RANDSTAD NV	12,556	717,042	786,706
RASA CORPORATION	2,700	28,715	28,900
RATCHAPHRUEK HOSPITAL NVDR	90,800	19,815	17,025
RATIONAL AG	114	80,877	88,088
RAVEN PROPERTY GROUP LTD	11,476	4,664	559
RAYDIUM SEMICONDUCTOR CORP	34,505	259,742	450,278
RAYSEARCH LABORATORIES AB	4,493	42,484	40,258
RB GLOBAL INC	6,484	472,792	433,715
RCS MEDIAGROUP SPA	15,578	14,072	12,751
REACH SUBSEA ASA	48,460	19,115	21,473
REALTEK SEMICONDUCTOR CORP	48,000	485,664	737,427
RECKITT BENCKISER GROUP PLC	16,308	1,162,915	1,126,787
REGIONAL CONTAINER LINE NVDR	13,200	11,722	9,359
REGIONS FINANCIAL CORP	22,700	404,171	439,926
REINSURANCE GROUP OF AMERICA	3,442	296,247	556,847
REINSURANCE GROUP OF AMERICA	1,700	179,682	275,026
REJLERS AB	1,123	11,701	13,650
RELIANCE STEEL + ALUMINUM	2,042	134,361	571,107
RELIANCE STEEL + ALUMINUM	1,500	167,648	419,520
RENAULT SA	824	33,759	33,592
RENTA 4 BANCO SA	2,136	19,265	24,067
REPLIGEN CORP	8,191	1,278,744	1,472,742
RESEARCH SOLUTIONS INC	536,535	1,291,924	1,394,991
RESOURCE ALAM INDONESIA TBK	264,490	10,664	6,322
REVANCE THERAPEUTICS INC	5,360	84,931	47,114
REXEL SA	23,542	437,753	644,161
REXFORD INDUSTRIAL REALTY IN	8,417	502,656	472,194
RGB INTERNATIONAL BHD	407,800	30,670	23,962
RICHTER GEDEON NYRT	520	13,389	13,150
RICOH CO LTD	2,300	18,884	17,668
RIDLEY CORP LTD	9,284	11,483	17,421
RIKEN TECHNOS CORP	5,700	23,341	34,205
RION CO LTD	1,100	17,639	19,030
RISO KAGAKU CORP	1,300	22,744	24,482

NORTH ATLANTIC STATES CARPENTERS PENSION FUND

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(b) ISSUER	(c) - DESCRIPTION COMMON STOCK		(d)	(e)
	NO. OF SHARES	COST	CURRENT VALUE	
RITHM CAPITAL CORP	13,300	110,457	142,044	
ROBLOX CORP CLASS A	23,605	830,401	1,079,221	
ROCKWELL AUTOMATION INC	1,499	421,267	465,410	
ROCKWOOL A/S B SHS	2,537	630,480	742,865	
ROIVANT SCIENCES LTD	23,442	247,200	263,254	
ROLAND DG CORP	2,900	62,973	74,979	
ROMANDE ENERGIE HOLDING REG	675	37,121	44,110	
ROOTS CORP	8,200	23,628	15,547	
RUSSEL METALS INC	19,700	457,099	672,752	
RVRC HOLDING AB	3,995	15,039	23,884	
RXO INC	9,695	190,067	225,506	
RYAN SPECIALTY HOLDINGS INC	13,472	515,656	579,565	
RYDER SYSTEM INC	3,800	310,814	437,228	
S+C ENGINE GROUP LTD	10,085	13,398	164	
SAAB AB B	204	7,156	12,299	
SABRA HEALTH CARE REIT INC	9,100	132,451	129,857	
SAERON AUTOMOTIVE CORP	9,808	57,191	31,224	
SAF HOLLAND SE	1,133	14,891	19,024	
SAHA UNION CORP PCL NVDR	16,400	14,832	15,496	
SAIA INC	4,002	1,203,824	1,753,756	
SAKAI HEAVY INDUSTRIES LTD	500	17,519	21,244	
SALIM IVOMAS PRATAMA TBK PT	499,900	17,091	12,208	
SALLY BEAUTY HOLDINGS INC	11,300	107,746	150,064	
SALZGITTER AG	4,166	111,932	128,855	
SAM JUNG PULP CO LTD	220	8,956	4,262	
SAM YOUNG ELECTRONICS CO LTD	2,981	33,683	19,836	
SAMSUNG ELECTRONICS CO LTD	48,218	1,723,332	2,938,981	
SAMSUNG PUBLISHING CO LTD	1,115	12,747	17,272	
SAMUDERA INDONESIA TBK PT	946,000	30,869	19,661	
SAMUDERA SHIPPING LINE LTD	158,400	100,275	79,254	
SANDNES SPAREBANK	2,222	16,598	19,998	
SANIX INC	10,200	26,407	22,790	
SANKO METAL INDUSTRIAL CO	700	21,162	22,468	
SANKYO CO LTD	1,700	75,748	99,157	
SANLORENZO SPA/AMEGLIA	1,323	41,931	61,893	
SANTEN PHARMACEUTICAL CO LTD	2,900	27,181	28,901	
SANYO DENKI CO LTD	500	24,902	22,237	
SANYO SHOKAI LTD	2,200	35,759	37,015	
SAPIENS INTERNATIONAL CORP	394	11,995	11,402	
SAPPI LIMITED	5,409	13,195	13,073	
SARAMIN CO LTD	1,412	18,199	19,175	
SARAS SPA	173,480	266,486	309,682	
SARAWAK OIL PALMS BERHAD	31,700	19,428	17,868	
SATO HOLDINGS CORP	1,800	24,973	27,017	
SATO SHOJI CORP	5,900	47,316	60,975	
SAXA HOLDINGS INC	700	14,994	12,825	
SB TECHNOLOGY CORP	2,500	41,890	42,116	
SCHAEFFLER AG PREF	2,673	20,463	16,521	
SCHULZ SA PREF	39,800	47,123	57,763	
SCHWAB (CHARLES) CORP	20,196	1,089,888	1,389,485	
SCIENCE APPLICATIONS INTE	3,000	319,161	372,960	
SCREEN HOLDINGS CO LTD	600	22,849	50,773	
SCS GROUP PLC	4,380	13,378	14,741	
SEAH HOLDINGS CORP	154	13,964	12,914	
SECTRA AB B SHS	7,160	34,081	128,069	
SECURE ENERGY SERVICES INC	2,700	15,774	19,309	

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(b) ISSUER	(c) - DESCRIPTION COMMON STOCK		(d)	(e)
	NO. OF SHARES	COST	CURRENT VALUE	
SECUREWORKS CORP A	171,343	1,721,378	1,264,511	
SEED CO LTD/TOKYO	2,800	11,833	16,226	
SEIKA CORP	1,000	14,564	20,939	
SEIKAGAKU CORP	16,700	176,978	90,145	
SEKISUI JUSHI CORP	3,300	52,650	58,191	
SEKISUI KASEI CO LTD	5,700	18,370	19,650	
SELAMAT SEMPURNA PT	93,500	13,327	12,115	
SELECT MEDICAL HOLDINGS CORP	3,356	82,864	78,866	
SENSORTEK TECHNOLOGY CORP	3,000	43,741	42,375	
SERVICE PROPERTIES TRUST	6,000	68,940	51,240	
SEVERFIELD PLC	23,029	25,625	18,671	
SGC E TEC E+C CO LTD	358	12,236	5,359	
SHELL PILIPINAS CORP	47,800	17,747	9,443	
SHELL PLC	53,909	1,305,389	1,767,216	
SHENG YU STEEL CO LTD	13,000	11,716	12,390	
SHIH HER TECHNOLOGIES INC	11,000	22,082	30,322	
SHIKOKU ELECTRIC POWER CO	3,200	22,440	23,005	
SHIN YOUNG WACOAL INC	580	7,303	4,251	
SHINAGAWA REFRACTORIES CO	2,000	10,719	24,386	
SHINE JUSTICE LTD	11,463	8,663	5,397	
SHINMAYWA INDUSTRIES LTD	3,700	28,023	30,864	
SHINNIHON CORP	2,800	24,022	22,562	
SHINY BRANDS GROUP CO LTD	6,902	35,180	64,206	
SHINYOUNG SECURITIES CO LTD	285	14,324	13,167	
SHOCKWAVE MEDICAL INC	6,158	1,349,786	1,173,468	
SHOPIFY INC CLASS A	20,286	765,453	1,580,279	
SHOUGANG FUSHAN RESOURCES GR	362,000	88,047	133,515	
SHUTTERSTOCK INC	9,404	522,422	454,025	
SIEGFRIED HOLDING AG REG	57	19,714	58,209	
SIERRA RUTILE HOLDINGS LTD	11	4	1	
SIFY TECHNOLOGIES SPON ADR	9,854	18,418	18,427	
SIGMA HEALTHCARE LTD	212,636	94,567	145,818	
SIGMA HEALTHCARE LTD	114,938	-	23,921	
SIMPLO TECHNOLOGY CO LTD	2,000	19,707	27,370	
SIMS LTD	37,251	318,982	395,507	
SINDOH CO LTD	2,169	56,058	55,071	
SING INVESTMENTS + FINANCE	9,300	6,243	7,050	
SINKO INDUSTRIES LTD	1,400	27,107	26,514	
SINOPEC ENGINEERING GROUP H	29,500	16,964	15,112	
SINOSTAR PEC HOLDINGS LTD	41,700	13,296	4,299	
SITIME CORP	1,303	112,336	159,070	
SIX FLAGS ENTERTAINMENT CORP	79,299	2,135,794	1,988,819	
SKECHERS USA INC CL A	10,602	362,872	660,929	
SKJERN BANK	1,322	19,422	28,112	
SKY NETWORK TELEVISION LTD	65,472	84,836	114,412	
SKY PERFECT JSAT HOLDINGS	3,500	16,150	17,329	
SKYLINE CHAMPION CORP	7,784	243,171	578,040	
SKYWORKS SOLUTIONS INC	3,600	387,420	404,712	
SKYWORTH GROUP LTD	444,000	128,746	169,445	
SLEEP NUMBER CORP	4,842	451,807	71,807	
SMARTGROUP CORP LTD	2,133	12,207	12,692	
SMITHS NEWS PLC	32,670	20,606	22,240	
SMK CORP	1,900	33,195	34,528	
SNAP ON INC	660	112,952	190,634	
SNT DYNAMICS CO LTD	4,712	19,799	52,685	
SOCIETE POUR L INFORMATIQUE	239	12,268	18,428	

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(b) ISSUER	(c) - DESCRIPTION COMMON STOCK		(d)	(e)
	NO. OF SHARES	COST	CURRENT VALUE	
SODA NIKKA CO LTD	8,800	38,489	66,914	
SODEXO SA	7,420	666,679	816,536	
SOFT WORLD INTL CORP	1,000	4,124	4,904	
SOFTCREATE HOLDINGS CORP	3,400	38,869	41,481	
SOKEN CHEMICAL + ENGINEERING	1,894	27,543	32,458	
SOLAR A/S B SHS	226	13,626	15,573	
SOLARWINDS CORP	4,103	74,425	51,246	
SOMBOON ADV TECH NVDR	179,100	116,942	94,974	
SONAE	83,400	97,215	83,330	
SONIX TECHNOLOGY CO LTD	9,000	13,853	16,833	
SOUTHERN CROSS ELECTRICAL	28,612	14,186	16,302	
SOUTHWEST AIRLINES CO	23,963	1,121,451	692,051	
SP SETIA BHD	64,700	10,317	11,264	
SPAR NORD BANK A/S	986	14,847	15,575	
SPAREBANK 1 NORD NORGE	686	3,193	6,971	
SPAREBANKEN MORE CAP CERT	2,011	14,179	16,633	
SPAREBANKEN OST	218	1,497	1,078	
SPAREKASSEN SJAELLAND FYN AS	754	20,880	22,324	
SPECTRUM BRANDS HOLDINGS INC	1,965	156,483	156,748	
SPIE SA	3,497	88,399	109,322	
SPIGEN KOREA CO LTD	1,433	38,084	36,718	
SPK CORP	1,200	16,051	15,721	
SPORTON INTERNATIONAL INC	15,850	123,021	124,464	
SPOTIFY TECHNOLOGY SA	8,927	1,429,094	1,677,473	
SPROUTS FARMERS MARKET INC	11,000	292,672	529,210	
STALEXPORT AUTOSTRADY SA	10,446	12,956	8,448	
STANDEX INTERNATIONAL CORP	5,889	416,208	932,700	
STAR MICRONICS CO LTD	1,900	26,949	23,167	
STAR PETROLEUM REFINING PCL	525,300	122,953	126,968	
STARRAGTORNOS GROUP AG	178	12,589	10,490	
STARTS CORP INC	600	15,727	12,474	
STATE STREET CORP	6,000	376,902	464,760	
STEALTHGAS INC	13,250	69,263	85,595	
STEEL DYNAMICS INC	3,500	129,045	413,350	
STELCO HOLDINGS INC	14,666	202,097	558,233	
STELLA JONES INC	4,200	160,065	245,642	
STHREE PLC	572	2,385	3,048	
STIFEL FINANCIAL CORP	5,600	331,966	387,240	
STOLT NIELSEN LTD	791	24,647	24,262	
STONEX GROUP INC	16,650	557,919	1,229,270	
STRABAG SE BR	1,779	62,484	81,358	
STRIDE INC	26,272	625,791	1,559,769	
STROEER SE + CO KGAA	208	12,221	12,350	
SUBSEA 7 SA	2,116	28,556	30,878	
SUEDZUCKER AG	5,268	82,701	82,576	
SUGIMOTO + CO LTD	1,100	14,039	17,423	
SUMBER TANI AGUNG RESOURCES	356,800	19,866	21,088	
SUMITOMO PHARMA CO LTD	15,300	137,761	50,573	
SUNNEXTA GROUP INC	4,200	38,413	28,213	
SUPALAI PCL NVDR	25,900	16,228	14,114	
SUPER MICRO COMPUTER INC	1,636	166,042	465,049	
SUPERNUS PHARMACEUTICALS INC	11,647	394,109	337,064	
SURIA CAPITAL HOLDINGS BHD	97,900	30,093	41,120	
SUZUKEN CO LTD	3,300	99,857	109,290	
SWATCH GROUP AG/THE BR	332	91,954	90,174	
SWISSQUOTE GROUP HOLDING REG	544	121,082	132,243	

NORTH ATLANTIC STATES CARPENTERS PENSION FUND

SCHEDULE OF CORPORATE STOCK - COMMON

DECEMBER 31, 2023

EIN 51-6040899, 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	
SYARIKAT TAKAFUL MALAYSIA KE	67,700	49,201	54,514	
SYLVAMO CORP	6,600	311,591	324,126	
SYLVANIA PLATINUM LTD	13,072	8,244	12,665	
SYNERGIE SA	704	26,194	27,374	
SYNOPSIS INC	4,192	895,903	2,158,503	
SYNOVUS FINANCIAL CORP	8,500	206,933	320,025	
SYSTEM RESEARCH CO LTD	700	12,011	14,359	
SYSTEM SUPPORT INC	1,200	15,556	16,402	
SYSTEMS ENGINEERING CONSULTA	800	23,820	29,054	
SYSTEX CORP	8,000	26,879	29,195	
TA ANN HOLDINGS BERHAD	23,300	20,581	18,559	
TAALERI OYJ	5,732	67,533	56,923	
TAEKWANG INDUSTRIAL CO LTD	23	13,397	10,894	
TAISOL ELECTRONICS CO LTD	11,000	17,927	24,086	
TAIWAN PCB TECHVEST CO LTD	35,000	47,985	49,380	
TAKANO CO LTD	2,700	19,110	18,003	
TAKARA + CO LTD	1,200	18,939	23,161	
TAKARA BIO INC	1,000	11,627	8,881	
TAKASAGO INTERNATIONAL CORP	800	19,014	19,804	
TAKE TWO INTERACTIVE SOFTWARE	5,050	618,373	812,798	
TAKEUCHI MFG CO LTD	1,800	57,733	54,710	
TAMRON CO LTD	2,600	49,386	98,113	
TANSEISHA CO LTD	5,300	33,530	32,820	
TAYLOR WIMPEY PLC	14,712	24,469	27,579	
TBS ENERGI UTAMA TBK PT	346,100	13,901	6,833	
TD SYNEX CORP	8,716	662,478	937,929	
TD SYNEX CORP	1,000	76,070	107,610	
TECAN GROUP AG REG	365	110,156	148,923	
TECHNIP ENERGIES NV	3,897	84,896	91,090	
TECHNO MEDICA CO LTD	7,000	108,122	109,831	
TECHNOLOGY ONE LTD	9,033	87,760	94,736	
TECHTARGET	4,197	270,755	146,307	
TEGNA INC	13,600	193,907	208,080	
TEIKOKU ELECTRIC MFG CO LTD	2,000	23,577	41,807	
TEIKOKU TSUSHIN KOGYO CO LTD	2,300	29,785	33,037	
TELCOWARE CO LTD	1,835	23,098	14,220	
TELEDYNE TECHNOLOGIES INC	1,995	375,343	890,349	
TELEPHONE AND DATA SYSTEMS	12,529	161,835	229,907	
TELESTE OYJ	2,368	18,167	7,063	
TELEVISION FRANCAISE (T.F.1)	48	355	378	
TELSYS LTD	431	28,087	28,223	
TEMENOS AG REG	9,766	771,421	907,618	
TEMPO SCAN PACIFIC TBK PT	131,200	14,911	15,636	
TENET HEALTHCARE CORP	11,449	697,933	865,201	
TERASAKI ELECTRIC CO LTD	2,083	20,824	26,285	
TERRACOM LTD	11	6	3	
TEXTRON INC	8,690	554,254	698,850	
TEXWINCA HOLDINGS LTD	260,000	53,182	31,965	
TGS ASA	889	13,098	11,572	
THAI OIL PCL NVDR	75,226	112,237	118,462	
THAI STANLEY ELECTRIC PUB CO	4,200	21,459	22,826	
THAI WAH PCL NVDR	99,500	16,482	11,602	
THANTAWAN INDUSTRY PU NVDR	8,300	10,107	7,234	
THE CIGNA GROUP	3,000	616,899	898,350	
THOR INDUSTRIES INC	2,000	188,858	236,500	
THRACE PLASTICS HOLDING AND	3,138	10,342	14,524	

NORTH ATLANTIC STATES CARPENTERS PENSION FUND

SCHEDULE OF CORPORATE STOCK - COMMON

DECEMBER 31, 2023

EIN 51-6040899, 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
THREE A RESOURCES BHD	64,900	16,553	11,794
THUNGELA RESOURCES LTD	25,294	256,692	205,851
THYSSENKRUPP AG	25,953	197,411	180,959
TIDEWATER INC	13,910	655,974	1,003,050
TIGERS POLYMER CORP	7,200	45,613	44,176
TIME WATCH INVESTMENTS LTD	90,000	12,074	5,360
TIMKEN CO	3,500	227,093	280,525
TIONG WOON CORP HLDG LTD	12,000	12,279	4,185
TIPTREE INC	93,431	1,210,258	1,771,452
TITAN CEMENT INTERNATIONAL T	1,156	19,114	27,136
TKO GROUP HOLDINGS INC	14,252	776,932	1,162,678
TOBA INC	700	15,900	16,882
TOBII AB	212	227	124
TOBISHIMA CORP	5,700	51,590	52,965
TOFU RESTAURANT CO LTD	2,000	12,008	17,660
TOHO SYSTEM SCIENCE CO LTD	2,300	19,248	20,328
TOKYO SEIMITSU CO LTD	300	12,032	18,452
TOKYO TEKKO CO LTD	2,000	26,574	58,519
TOLI CORP	26,500	62,179	59,962
TOMSON GROUP LTD	50,000	13,201	10,501
TOMTOM NV	219	1,652	1,545
TONAMI HOLDINGS CO LTD	500	13,719	16,013
TONGDA GROUP HOLDINGS LTD	1,060,000	60,620	13,982
TOP ENGINEERING CO LTD	1,886	15,260	8,069
TOPPS TILES PLC	15,620	15,988	9,956
TOPY INDUSTRIES LTD	1,400	22,044	25,372
TOREX GOLD RESOURCES INC	20,178	157,800	223,724
TORII PHARMACEUTICAL CO LTD	1,400	35,265	35,303
TORM PLC A	430	12,667	13,011
TOTAL ENERGY SERVICES INC	14,229	54,946	81,580
TOTALENERGIES SE	13,512	736,174	919,444
TOTO LTD	1,700	46,747	44,773
TOWA BANK LTD/THE	1,300	9,177	5,588
TOYO ENGINEERING CORP	8,900	39,899	49,683
TOYO MACHINERY + METAL CO	1,300	7,065	6,326
TRACTOR SUPPLY COMPANY	2,229	295,936	479,302
TRADEWEB MARKETS INC CLASS A	16,695	959,408	1,517,242
TRANS POWER MARINE TBK PT	394,000	16,736	18,041
TRANSUNION	5,843	371,722	401,473
TRATON SE	4,367	91,386	102,848
TRAVEL LEISURE CO	12,738	445,291	497,928
TREX COMPANY INC	19,593	1,500,721	1,622,104
TRICAN WELL SERVICE LTD	10,800	36,168	33,745
TRIPLE FLAG PRECIOUS MET	102,927	1,334,861	1,369,958
TRIVAGO NV ADR	7,635	56,519	18,629
TROAX GROUP AB	1,081	19,588	26,559
TSANN KUEN ENTERPRISE CO LTD	18,606	25,759	23,674
TSC AUTO ID TECHNOLOGY CO LT	4,399	32,093	34,615
TST GROUP HOLDING LTD	800	3,380	3,310
TSUTSUMI JEWELRY CO LTD	800	11,498	12,972
TUNAS BARU LAMPUNG TBK PT	458,700	20,356	20,705
TURKIYE SIGORTA AS	16,168	18,573	22,204
TV ASAHI HOLDINGS CORP	1,100	12,687	12,539
TV TOKYO HOLDINGS CORP	600	8,009	12,746
TWIST BIOSCIENCE CORP	11,448	382,527	421,973
TXC CORP	4,000	12,890	12,851

NORTH ATLANTIC STATES CARPENTERS PENSION FUND

SCHEDULE OF CORPORATE STOCK - COMMON

DECEMBER 31, 2023

EIN 51-6040899, 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
TYK CORP	6,900	17,511	20,899
TYLER TECHNOLOGIES INC	4,129	1,461,979	1,726,417
U BLOX HOLDING AG	438	46,595	51,989
UBS GROUP AG REG	92,548	1,425,144	2,869,961
UCHI TECHNOLOGIES BHD	23,100	15,535	18,651
UFP INDUSTRIES INC	5,792	337,630	727,186
UFP TECHNOLOGIES INC	1,616	259,126	278,017
UGI CORP	8,300	302,353	204,180
ULLICO INC	93,098	2,327,450	3,262,154
ULS GROUP INC	400	12,093	12,271
UNIMOT SA	934	21,388	29,453
UNION AUCTION PCL NVDR	45,100	12,250	15,063
UNION TOOL CO	500	11,563	11,846
UNIPAR CARBOCLORO SA ORD	3,150	55,603	45,646
UNIPOL GRUPPO SPA	2,110	11,807	12,032
UNIPRES CORP	5,800	48,760	39,207
UNIRITA INC	1,100	17,671	14,879
UNITED AIRLINES HOLDINGS INC	9,400	398,476	387,844
UNITED RENTALS INC	600	109,451	344,052
UNITED THERAPEUTICS CORP	2,976	700,609	654,393
UNITED THERAPEUTICS CORP	1,400	145,635	307,846
UNITI GROUP INC	25,000	311,977	144,500
UNIVANICH PALM OIL PCL NVDR	75,800	18,022	18,210
UNIVERSAL HEALTH SERVICES B	1,800	201,141	274,392
UNTRADE.CECEP COSTIN	150,000	22,108	-
US CELLULAR CORP	12,664	368,422	526,063
USERJOY TECHNOLOGY CO LTD	26,656	81,689	67,746
USU SOFTWARE AG	933	28,583	17,366
UTAH MEDICAL PRODUCTS INC	2,749	247,401	231,521
VAIL RESORTS INC	2,180	528,781	465,365
VAISALA OYJ A SHS	309	14,559	13,551
VALARIS LTD	7,432	393,045	509,612
VALERO ENERGY CORP	3,400	165,877	442,000
VALLOUREC SA	932	12,303	14,439
VAN DE VELDE NV	2,373	94,176	88,470
VAN LANSCHOT KEMPEN NV	4,111	114,129	127,835
VEDAN INTERNATIONAL HOLDINGS	332,000	42,117	20,621
VEEVA SYSTEMS INC CLASS A	12,624	1,641,653	2,430,372
VENTEC INTERNATIONAL GROUP C	14,000	39,878	41,146
VENTIA SERVICES GROUP PTY LT	15,966	27,350	34,208
VERISK ANALYTICS INC	4,195	812,705	1,002,018
VERIZON COMMUNICATIONS INC	28,500	1,678,485	1,074,450
VETOQUINOL SA	67	2,613	7,579
VETROPACK HOLDING REGISTERED	479	20,032	22,253
VIASAT INC	22,638	719,523	632,732
VIATRIS INC	11,165	179,219	120,917
VIEMED HEALTHCARE INC	2,396	20,787	18,809
VIEMED HEALTHCARE INC	184,062	1,352,761	1,444,887
VIENNA INSURANCE GROUP AG	1,102	30,442	32,259
VILLEROY + BOCH AG PREF	1,404	24,887	27,762
VINCENT MEDICAL HOLDINGS LTD	67,113	19,577	3,309
VISANG EDUCATION INC	1,680	14,033	7,070
VISHAY INTERTECHNOLOGY INC	6,300	130,473	151,011
VISTA ENERGY SAB DE CV	993	31,095	29,303
VISTRA CORP	19,191	434,607	739,237
VISTRA CORP	30,600	624,100	1,178,712

NORTH ATLANTIC STATES CARPENTERS PENSION FUND

SCHEDULE OF CORPORATE STOCK - COMMON

DECEMBER 31, 2023

EIN 51-6040899, 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
VITAL KSK HOLDINGS INC	2,700	11,921	19,994
VITESSE ENERGY INC	52,712	1,212,044	1,153,866
VITESSE ENERGY INC	812	5,942	17,775
VONTIER CORP	19,924	594,348	688,374
VOXEL SA	1,378	17,134	27,544
VOYA FINANCIAL INC	2,200	129,382	160,512
VRG SA	19,005	11,885	16,433
VZ HOLDING AG	276	28,141	32,202
WAGNERS HOLDING CO LTD	396	614	270
WAH HONG INDUSTRIAL CORP	12,000	12,117	13,626
WAJAX CORP	5,200	79,382	119,372
WALGREENS BOOTS ALLIANCE INC	5,700	227,316	148,827
WALLENIUS WILHELMSSEN ASA	1,826	6,376	16,002
WEATHERFORD INTERNATIONAL PL	6,117	556,980	598,426
WEBJET LTD	12	58	60
WEIBO CORP SPON ADR	14,896	238,027	163,111
WELLCALL HOLDINGS BHD	83,900	20,950	30,492
WELLS FARGO + CO	25,700	1,076,056	1,264,954
WESCO INTERNATIONAL INC	5,104	862,057	887,484
WEST PHARMACEUTICAL SERVICES	8,041	1,879,042	2,831,397
WESTAIM CORP/THE	4,500	11,882	12,832
WESTERN FOREST PRODUCTS INC	66,600	94,954	35,861
WESTROCK CO	1,600	69,648	66,432
WEX INC	3,904	239,040	759,523
WHIRLPOOL CORP	3,500	659,689	426,195
WHITE MOUNTAINS INSURANCE GP	1,500	1,364,779	2,257,515
WHITECAP RESOURCES INC	1,700	14,677	11,436
WHITEHAVEN COAL LTD	56,135	92,846	284,980
WIENERBERGER AG	2,847	78,015	95,040
WILH WILHELMSSEN HOLDING A	620	12,993	22,253
WILL GROUP INC	4,600	52,569	37,719
WILLDAN GROUP INC	9,192	375,362	197,628
WINGSTOP INC	2,675	438,978	686,352
WINMATE INC	9,000	37,113	35,923
WIX.COM LTD	6,431	508,328	791,142
WIX.COM LTD	3,500	453,665	430,570
WNS HOLDINGS LTD ADR	10,163	777,830	642,302
WNS HOLDINGS LTD ADR	22,679	1,367,382	1,433,313
WORLD HOLDINGS CO LTD	3,800	67,669	73,531
WORLD KINECT CORP	8,500	225,361	193,630
WR BERKLEY CORP	10,771	664,818	761,722
WT MICROELECTRONICS CO LTD	12,000	44,014	43,988
X LEGEND ENTERTAINMENT CO LT	12,000	33,290	23,929
XEROX HOLDINGS CORP	9,400	199,863	172,302
XINHUA WINSHARE PUBLISHING H	44,000	37,970	39,162
XIWANG SPECIAL STEEL CO LTD	589,000	127,704	754
XPO INC	9,695	307,392	849,185
XPS PENSIONS GROUP PLC	20,828	50,308	61,865
XYLEM INC	4,206	468,892	480,998
YALLA GROUP LTD	86	441	527
YAMADA CONSULTING GROUP CO L	1,400	15,229	16,991
YAMAICHI ELECTRONICS CO LTD	3,800	51,983	52,183
YANGZIJANG FINANCIAL HOLDIN	184,200	99,499	45,383
YANGZIJANG SHIPBUILDING	398,900	453,627	450,581
YELLOW PAGES LTD/CANADA	1,175	5,041	10,043
YOSSIX HOLDINGS CO LTD	900	14,968	17,351

NORTH ATLANTIC STATES CARPENTERS PENSION FUND

SCHEDULE OF CORPORATE STOCK - COMMON

DECEMBER 31, 2023

EIN 51-6040899, 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
YOUNGOV PLC	5,325	31,213	80,102
YOUNG POONG CORPORATION	141	78,820	56,492
YOUNGONE CORP	716	22,407	25,351
YOUNGONE HOLDINGS CO LTD	1,116	47,912	67,589
YPSOMED HOLDING AG REG	125	37,415	45,001
YTL POWER INTERNATIONAL BHD	108,300	28,047	59,866
YURTEC CORP	4,000	24,475	31,891
YUSHIN PRECISION EQUIPMENT	4,800	38,405	22,710
ZAOH COMPANY LTD	700	11,936	12,080
ZEDA LIMITED	9,650	6,785	6,728
ZENGAME TECHNOLOGY HOLDING	118,000	12,178	85,532
ZENITAKA CORP	500	12,433	14,186
ZHONGTAI FUTURES CO LTD	270,000	45,987	20,401
ZIFF DAVIS INC	13,823	983,260	928,767
ZIMPLATS HOLDINGS LTD	706	7,543	10,492
ZIONS BANCORP NA	7,000	221,120	307,089
ZSCALER INC	4,385	522,097	971,541
ZYXEL GROUP CORP	16,000	19,725	26,462
ARA CORE PROPERTY FUND - CORPORATE STOCK - COMMON	-	80,222,206	86,363,391
BRIGADE HIGH YIELD FUND LP - CORPORATE STOCK - COMMON	-	1,060,017	1,171,593
ENTRUST CAPITAL DIVERSIFIED FUND LTD CLASS X SERIES 09/30/2017 - CORPORATE STOCK - COMMON	-	958,574	55,339
ENTRUST CAPITAL DIVERSIFIED FUND LTD CLASS X SERIES 12/31/2017 - CORPORATE STOCK - COMMON	-	960,849	57,136
ENTRUST SPECIAL OPPORTUNITIES FUND III LTD CLASS A - CORPORATE STOCK - COMMON	-	884,378	737,912
ENTRUSTPERMAL SPECIAL OPPORTUNITIES EVERGREEN FUND LTD - CORPORATE STOCK - COMMON	-	2,576,605	2,507,558
FIRST EAGLE GLOBAL VALUE FUND LP - CORPORATE STOCK - COMMON	-	40,315,374	47,843,278
GROSVENOR OPPORTUNISTIC CREDIT FUND III LTD - CORPORATE STOCK - COMMON	-	243,387	331,251
GROSVENOR OPPORTUNISTIC CREDIT FUND IV LTD - CORPORATE STOCK - COMMON	-	291,421	341,331
HAMILTON LANE PE OFF FUND VIII - CORPORATE STOCK - COMMON	-	71,277	107,842
SIGULER GUFF DISTRESSED RE OPPS FUND II - CORPORATE STOCK - COMMON	-	214,158	214,411
		<u>\$ 489,557,794</u>	<u>\$ 580,403,423</u>

HOLDINGS OF CERTAIN INVESTMENTS WERE DETERMINED TO BE PLAN ASSETS FOR FORM 5500 PURPOSES AND ARE SEPARATELY IDENTIFIED HERE BASED ON THE ALLOCATION OF UNDERLYING ASSETS PROVIDED BY THE INVESTMENT MANAGER, AS OF THE DATE OF THEIR LATEST AUDITED FINANCIAL STATEMENTS.

NORTH ATLANTIC STATES CARPENTERS PENSION FUND

SCHEDULE OF PARTNERSHIPS/JOINT VENTURE INTERESTS

DECEMBER 31, 2023

EIN 51-6040899, PLAN NO. 001

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

(a) NOT APPLICABLE	(b)	(c) - DESCRIPTION PARTNERSHIPS	(d)	(e)
	ISSUER		COST	CURRENT VALUE
	ABS EMERGING MARKETS STRATEGIC PORTFOLIO LP OPTION			
	IB - UNRESTRICTED		\$ 45,000,000	\$ 52,786,227
	ACCOMPLICE FORTUITY POOL LP		3,300,000	6,305,491
	ACCOMPLICE FUND I LP		1,767,529	8,328,318
	ACCOMPLICE FUND II (PE) LP		-	9,224,126
	ACCOMPLICE FUND III LP		4,700,000	6,246,169
	ACCOMPLICE FUND IV LP		7,488,000	7,507,603
	ACTIS EMERGING MARKETS 3 LP		140,082	11,503
	ACTIS ENERGY 4 LP		-	1,298,752
	ACTIS ENERGY 5 LP		11,444,195	9,755,115
	AEW PARTNERS VI LP		-	131,120
	ALINDA INFRASTRUCTURE FUND II LP		-	33,460
	ALTARIS CONSTELLATION PARTNERS IV LP		366,175	1,665,997
	ALTARIS HEALTH PARTNERS IV LP		149,933	4,517,470
	ARA FUND II LP		23,740,813	29,506,684
	ARA FUND III LP		3,665,021	3,145,691
	ARES ENERGY INVESTORS FUND V LP		1,775,345	8,749,283
	ATLAS VENTURE FUND IX LP		-	6,180,693
	ATLAS VENTURE FUND VIII LP		-	4,090,904
	ATLAS VENTURE FUND X LP		-	2,899,734
	ATLAS VENTURE FUND XI LP		2,187,004	6,310,817
	ATLAS VENTURE FUND XII LP		5,540,400	7,093,493
	ATLAS VENTURE FUND XIII LP		2,095,501	3,301,131
	ATLAS VENTURE OPPORTUNITY FUND I LP		3,001,472	3,933,230
	ATLAS VENTURE OPPORTUNITY FUND II LP		1,437,623	3,000,447
	AUDAX MEZZANINE PARTNERS III LP		-	84,818
	AUDAX PRIVATE EQUITY FUND IV LP		-	3,241,362
	AUGUST EQUITY PARTNERS V A LP		8,219,683	11,394,473
	BASALT INFRASTRUCTURE PARTNERS II A LP		4,496,924	11,689,100
	BASALT INFRASTRUCTURE PARTNERS III A LP		32,335,431	37,772,271
	BASALT INFRASTRUCTURE PARTNERS IV A LP		4,537,466	4,368,597
	BCP INFRASTRUCTURE FUND LP		7,700,373	8,350,467
	BLACKSTONE INFRASTRUCTURE PARTNERS LP		34,497,341	46,070,138
	BLACKSTONE INFRASTRUCTURE PARTNERS V FEEDER LP		33,255,608	56,012,642
	CAPITAL INTERNATIONAL PRIVATE EQUITY FUND V LP		101,317	3,224
	CB OP AGGREGATOR I II & II-B III VI LP		1,216,146	1,314,634
	CHARLESBANK EQUITY FUND IX LP		1,806,964	5,249,689
	CHARLESBANK EQUITY FUND VII LP		-	8,192
	CHARLESBANK EQUITY FUND VIII LP		221,341	2,578,991
	CHARLESBANK EQUITY FUND X LP		4,367,856	5,364,132
	CHEQUERS CAPITAL XVI LP		-	247,507
	CHEQUERS CAPITAL XVII LP		1,122,459	3,725,276
	CITIC CAPITAL CHINA PARTNERS 3 LP		1,218,152	2,321,871
	CLEARWATER CAPITAL PARTNERS FUND III LP		71,739	169,426
	CLIMATE ADAPTIVE INFRASTRUCTURE FUND LP		18,610,683	22,023,742
	CORTEN REAL ESTATE FUND II LP		6,031,088	7,249,898
	CUSTOM CO-INVESTMENT FUND 2022 LP		9,919,026	10,143,642
	DBAG FUND VI (GUERNSEY) LP		138,353	497,872
	DBAG FUND VII B SCSP		3,586,059	5,019,668
	EIF US POWER FUND IV LP		2,873,492	3,528,965
	ENCAP ENERGY CAPITAL FUND IX LP		-	1,832,490
	ENCAP ENERGY CAPITAL FUND VIII LP		1,667,904	1,769,069
	ENCAP ENERGY CAPITAL FUND X LP		48,949	5,818,875
	ENCAP ENERGY CAPITAL FUND XI LP		7,204,660	16,606,948
	ENERGY VENTURES IV LP		930,016	308,219
	FELICIS VENTURES IX LP		1,000,000	920,797
	FIRST RESERVE FUND XI LP		718,401	706

NORTH ATLANTIC STATES CARPENTERS PENSION FUND

SCHEDULE OF PARTNERSHIPS/JOINT VENTURE INTERESTS

DECEMBER 31, 2023

EIN 51-6040899, PLAN NO. 001

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

(a) NOT APPLICABLE	(b)	(c) - DESCRIPTION PARTNERSHIPS	(d) COST	(e) CURRENT VALUE
	ISSUER			
	FOUNDATION CAPITAL LEADERSHIP FUND III LP		3,233,194	3,171,743
	FOUNDATION CAPITAL X LP		5,212,900	5,352,264
	FS EQUITY PARTNERS VIII LP		9,274,450	14,573,969
	GAMUT INVESTMENT FUND I LP		3,882,080	6,296,816
	GEM REALTY FUND V LP		2,122,561	3,547,729
	GREEN CITIES III LP		6,908,662	2,624,476
	GREEN CITIES IV LP		14,046,184	9,696,682
	GREEN CITIES V LP		390,989	8,832
	GILDE BUY OUT FUND IV LP		-	62,510
	GLOBAL INFRASTRUCTURE PART IV-A/B LP		25,275,927	27,499,999
	GLOBAL INFRASTRUCTURE PARTNERS - B LP		-	29,168
	GLOBAL INFRASTRUCTURE PARTNERS II-B FEEDER FUND LP		-	4,517,715
	GLOBAL INFRASTRUCTURE PARTNERS III-A/B LP		7,176,641	14,635,792
	GLOBAL INFRASTRUCTURE PARTNERS V-A/B LP		3,485,934	3,481,846
	GLOBAL RENEWABLE POWER INFRASTRUCTURE FUND III (B) LP		27,332,340	31,601,652
	GRAIN COMMUNICATIONS OPPORTUNITY FUND II LP		20,332,473	32,495,946
	GRAIN COMMUNICATIONS OPPORTUNITY FUND III LP		26,772,181	23,562,653
	GRAIN COMMUNICATIONS OPPORTUNITY FUND IV LP		493,356	(98,090)
	GREENBRIAR EQUITY FUND VI LP		1,451,874	1,363,344
	GTIS BRAZIL REAL ESTATE FUND II LP		9,124,374	3,894,636
	GTIS REAL ESTATE OPPORTUNITIES FUND I LP		-	151,645
	HARBOURVEST DOVER ST IX CYMN		29,197	6,059,585
	HARBOURVEST DOVER ST VIII CYMN		-	513,640
	HARBOURVEST PARTNERS 2013 FD LP		-	1,805,483
	HARBOURVEST PARTNERS VIII CAYMAN BUYOUT FUND L P		-	157,791
	HARBOURVEST PARTNERS VIII CAYMAN VENTURE FUND LP		-	2,787,705
	HIDDEN HARBOR CAPITAL PARTNERS II LP		4,171,388	7,637,579
	HIG MIDDLE MARKET LBO FUND II LP		-	2,038,279
	HITECVISION VI LP		-	1,217,631
	HITECVISION VII LP		98,044	3,260,649
	HONY CAPITAL FUND V LP		626,712	335,151
	IFM GLOBAL INFRASTRUCTURE (US) LP		83,727,169	111,717,498
	INSIGHT VENTURE PARTNERS IX LP		-	13,162,182
	INSTITUTIONAL VENTURE PARTNERS XIII LP		-	154,597
	INTERCONTINENTAL BUILD REAL ESTATE INVESTMENT FUND LLC		1,869	1,672,100
	IRONSIDES CO-INVESTMENT FUND VI LP		50,824,321	64,672,686
	IRONSIDES DIRECT INVESTMENT FUND V LP		29,241,059	62,117,448
	JLL PARTNERS VI LP		6,030	33,953
	JMI EQUITY FUND VII LP		-	82,518
	JMI EQUITY FUND X LP		8,544,600	10,396,225
	JMI EQUITY FUND XI-A LP		2,020,000	2,124,794
	K4 PRIVATE INVESTORS LP		5,301,488	9,401,220
	K5 PRIVATE INVESTORS LP		4,165,326	4,789,529
	KEROGEN ENERGY FUND II LP		4,033,341	8,218,040
	KEROGEN PANDION COINVESTMENT FUND LP		4,782,806	8,621,736
	KHOSLA VENTURES III LP		-	98,336
	KHOSLA VENTURES IV LP		-	2,355,888
	KHOSLA VENTURES SEED B LP		-	793,509
	KHOSLA VENTURES SEED C LP		1,350,219	7,460,583
	KHOSLA VENTURES SEED LP		237,630	393,948
	KHOSLA VENTURES V LP		3,623,237	9,987,673
	KHOSLA VENTURES VI LP		2,707,500	6,192,543
	KPS SPECIAL SITUATIONS FUND IV LP		-	1,114,314
	KPS SPECIAL SITUATIONS FUND V LP		4,224,422	7,997,021
	LINDEN CAPITAL PARTNERS III LP		37,234	4,637,588

NORTH ATLANTIC STATES CARPENTERS PENSION FUND

SCHEDULE OF PARTNERSHIPS/JOINT VENTURE INTERESTS

DECEMBER 31, 2023

EIN 51-6040899, PLAN NO. 001

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

(a) NOT APPLICABLE	(b)	(c) - DESCRIPTION PARTNERSHIPS	(d) COST	(e) CURRENT VALUE
	ISSUER			
	LINDEN CAPITAL PARTNERS IV LP		3,337,724	7,755,224
	LINDEN CAPITAL PARTNERS V LP		7,607,079	8,502,849
	MACQUARIE CROP PARTNERS FEEDER LIMITED PARTNERSHIP		-	326,477
	MBK PARTNERS FUND III LP		700	1,741,550
	MBK PARTNERS FUND IV LP		1,578,136	3,191,785
	MESA WEST REAL ESTATE INCOME FUND IV LP		5,088,944	5,219,514
	MSOUTH EQUITY PARTNERS II LP		-	9,834
	MSOUTH EQUITY PARTNERS III LP		233,042	1,164,516
	NB STRATEGIC CO-INVESTMENT CAYMAN PARTNERS IV LP		10,130,216	13,356,311
	NORMANDY REAL ESTATE FUND III LP		2,081,941	(71,078)
	NORMANDY REAL ESTATE FUND IV LP		13,149,577	4,352,749
	NORTHSTAR MEZZANINE PARTNERS V LP		-	2,451
	OAKLEY CAPITAL FUND V		1,651,070	1,786,923
	OAKTREE OPPORTUNITIES FUND VIIIB LP		-	195,397
	OAKTREE OPPORTUNITIES FUND XB LP		4,050,000	6,225,426
	OAKTREE REAL ESTATE DEBT FUND II LP		11,015,127	6,290,056
	OCM OPPORTUNITIES FUND VII B		-	539
	OCM OPPORTUNITIES FUND VIII		-	3,257
	ONCAP II LP		-	656,086
	ONCAP IV LP		1,443,309	2,667,669
	ONCAP US III LP		-	146,455
	ONEX PARTNERS II LP		6,291	4,866
	ORION EUROPEAN REAL ESTATE FUND III LP		1,710,888	515,050
	OVP VENTURE PARTNERS VII LP		102,215	2,798,142
	PACIFIC ROAD RESOURCES FUND II LP		3,663,174	1,571,523
	PAG ASIA I FEEDER FUND LP		-	226,809
	PAG ASIA II LP		2,128,630	6,344,522
	PAG ASIA III LP		5,483,492	6,945,302
	PAINE SCHWARTZ FOOD CHAIN FUND V LP		15,312,597	26,530,365
	PAINE SCHWARTZ FOOD CHAIN FUND VI LP		8,069,704	7,881,056
	PATRIA PRIVATE EQUITY FUND VI LP		5,633,818	8,791,612
	PATRIA BRAZILIAN PRIVATE EQUITY FUND IV LP		1,001,377	1,082,463
	PATRIA BRAZILIAN PRIVATE EQUITY FUND V LP		4,015,405	8,698,954
	PIMCO DISCO ONSHORE FUND III LP		-	535,422
	PIONEER SQUARE VENTURES II		2,565,000	2,616,352
	POINT 406 VENTURES IV LP		7,928,700	10,271,311
	PRISA III LP		28,683,315	38,169,926
	RELATED REAL ESTATE FUND III LP		15,879,855	18,901,692
	RFM NEC MA LLC		2,271,630	2,729,005
	RIDGEMONT EQUITY PARTNERS I LP		-	423,242
	RIDGEMONT EQUITY PARTNERS II LP		130,525	2,412,233
	RIDGEMONT EQUITY PARTNERS III LP		3,744,269	9,965,866
	RIDGEMONT EQUITY PARTNERS IV LP		5,725,957	5,959,537
	RIDGEWOOD ENERGY OIL AND GAS FUND II LP		4,291,102	4,337,387
	RIDGEWOOD ENERGY OIL AND GAS FUND III LP		4,270,903	9,856,966
	RIDGEWOOD ENERGY OIL AND GAS FUND IV LP		10,293,650	15,903,064
	RIVER VI PARALLEL LP		-	8,943
	RIVERSIDE CAPITAL APPRECIATION FUND V LP		69,403	66,450
	RIVERSIDE EUROPE FUND IV LP		1,994	115,775
	RIVERSIDE FUND V LP		1,680,169	3,132,895
	RIVERSIDE MICRO CAP FUND I LP		-	163,519
	RIVERSIDE MICRO CAP FUND III LP		-	2,828,628
	RUBENSTEIN PROPERTIES FUND IV LP		6,584,669	1,845,858
	SCALE VENTURE PARTNERS VI LP		2,970,260	5,317,787
	SCALE VENTURE PARTNERS VII LP		3,285,974	3,023,857
	SEIDLER EQUITY PARTNERS VIII LP		150,000	(33,589)
	SENTINEL CAPITAL PARTNERS V LP		-	1,041,901

NORTH ATLANTIC STATES CARPENTERS PENSION FUND

SCHEDULE OF PARTNERSHIPS/JOINT VENTURE INTERESTS

DECEMBER 31, 2023

EIN 51-6040899, PLAN NO. 001

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

(a) NOT APPLICABLE	(b)	(c) - DESCRIPTION PARTNERSHIPS	(d)	(e)
	ISSUER		COST	CURRENT VALUE
	SENTINEL CAPITAL PARTNERS VI LP		2,687,342	5,155,034
	SENTINEL CAPITAL PARTNERS VII LP		690,385	532,037
	SILVER LAKE PARTNERS III LP		-	92,421
	SJC ONSHORE DIRECT LENDING FUND III LP		10,761,553	19,259,987
	SK CAPITAL PARTNERS V LP		7,207,489	9,127,039
	SOLAMERE CAPITAL AF III LP LP		14,273,802	26,040,988
	SOUTHERN CROSS LATIN AM FUND IV LP		3,385,075	1,995,585
	SOUTHERN CROSS LATIN AM FUND V LP		3,623,183	2,101,421
	STAR AMERICA INFRASTRUCTURE FUND LP		-	6,457,450
	STELLEX CAPITAL PARTNERS II		2,858,095	3,304,927
	STERLING GROUP PARTNERS IV LP		-	6,586,776
	STERLING GROUP PARTNERS V LP		5,899,902	7,375,155
	STG VI LP		4,630,059	5,052,337
	STG VII LP		-	(173,696)
	TA REALTY CORE PROPERTY FUND LP		24,581,071	39,224,202
	TA REALTY FUND XI LP		-	676,007
	TA REALTY VALUE-ADD FUND XIII LP		7,500,000	5,713,079
	TA XII B		-	3,745,137
	TA XIII		4,161,000	9,528,296
	TA XIV LP		9,052,000	8,825,242
	THE FOURTH CINVEN FUND		-	1,335
	THIRD ROCK VENTURES II LP		-	2,289
	THIRD ROCK VENTURES III LP		-	139,482
	THIRD ROCK VENTURES IV LP		1,197,553	2,872,893
	THIRD ROCK VENTURES V LP		4,654,984	5,477,041
	THIRD ROCK VENTURES VI LP		3,200,000	3,057,528
	TOWERBROOK INVESTORS III LP		-	3,374
	TOWERBROOK INVESTORS IV LP		21,053	2,637,150
	TRILANTIC CAPITAL PARTNERS V LP		-	1,423,659
	TRILANTIC CAPITAL PARTNERS VI LP		4,196,149	6,353,362
	UBS TRUMBULL PROPERTY FUND LP		29,802,164	29,335,476
	US REAL ESTATE INVESTMENT FUND LP		61,850,430	61,390,243
	VALHALLA PARTNERS II LP		21,994	53,706
	VECTOR CAPITAL V LP		2,395,698	5,439,430
	VERITAS CAPITAL FUND IV LP		-	18,678
	VERITAS CAPITAL FUND V LP		205,121	8,725,115
	VERITAS CAPITAL FUND VI LP		-	5,709,067
	VISTA EQUITY PARTNERS IV LP		5,933	1,152,817
	VISTA EQUITY PARTNERS V LP		-	7,130,690
	VISTA FOUNDATION FUND III LP		80,006	4,019,716
	VITRUVIAN INVESTMENT PARTNERSHIP II LP		-	2,760,064
	VITRUVIAN INVESTMENT PARTNERSHIP III LP		2,791,879	10,945,843
	VITRUVIAN INVESTMENT PARTNERSHIP IV LP		9,388,996	11,486,479
	VITRUVIAN INVESTMENT PARTNERSHIP V LP		759,331	549,987
	VITRUVIAN PARTNERS LP		-	808,073
	WAUD CAPITAL PARTNERS III LP		15,466	252,398
	WAUD CAPITAL PARTNERS IV LP		1,042,313	5,925,524
	WAUD CAPITAL PARTNERS V LP		10,220,061	16,104,808
	WHITE DEER ENERGY I LP		-	25,680
	WHITE DEER ENERGY II LP		5,441,381	4,557,783
	WHITE DEER ENERGY III LP		15,780,080	19,813,871
	YUCAIPA AMERICAN ALLIANCE FUND II		9,000,912	8,828,108
	YUCAIPA CORPORATE INITIATIVE FUND II LP		97,721	11,406
	ARA CORE PROPERTY FUND LP - PARTNERSHIPS		8,451,581	9,091,736
	ENTRUST SPECIAL OPPORTUNITIES FUND III LTD CLASS A - PARTNERSHIPS		5,184,858	4,280,189

NORTH ATLANTIC STATES CARPENTERS PENSION FUND
SCHEDULE OF PARTNERSHIPS/JOINT VENTURE INTERESTS

DECEMBER 31, 2023

EIN 51-6040899, PLAN NO. 001

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

(a) NOT APPLICABLE	(b)	(c) - DESCRIPTION PARTNERSHIPS	(d)	(e)
	ISSUER		COST	CURRENT VALUE
	ENTRUSTPERMAL SPECIAL OPPORTUNITIES EVERGREEN FUND LTD - PARTNERSHIPS		20,196,836	19,610,335
	EUROPEAN STRATEGIC PARTNERS 2006 B LP - PARTNERSHIPS		-	34,764
	GROSVENOR OPPORTUNISTIC CREDIT FUND III LTD - PARTNERSHIPS		97,455	131,109
	GROSVENOR OPPORTUNISTIC CREDIT FUND IV LTD - PARTNERSHIPS		493,982	585,703
	HAMILTON LANE PRIVATE EQUITY OFFSHORE FUND VIII LP - PARTNERSHIPS		3,099,056	4,727,274
	HAMILTON LANE STRATEGIC OPPORTUNITIES OFFSHORE FUND IV LP - PARTNERSHIPS		5,756,453	4,649,580
	IRONSIDES DIRECT INVESTMENT FUND IV LP - PARTNERSHIPS		-	7,331,922
	IRONSIDES PARTNERSHIP FUND IV LP - PARTNERSHIPS		-	43,931,127
	IRONSIDES PARTNERSHIP FUND V LP - PARTNERSHIPS		30,735,755	46,690,899
	PANTHEON EUROPE FUND V B LP - PARTNERSHIPS		-	523,966
	PANTHEON GLOBAL SECONDARY FUND III B LP - PARTNERSHIPS		-	4,792
	SIGULER GUFF DISTRESSED REAL ESTATE OPPORTUNITIES FUND II - PARTNERSHIPS		4,249,211	4,254,308
	SOLAMERE CAPITAL AF III A LP - PARTNERSHIPS		29,290,972	53,537,658
	SOLAMERE CAPITAL AF IV A LP - PARTNERSHIPS		<u>25,024,150</u>	<u>27,881,711</u>
			<u>\$ 1,287,048,557</u>	<u>\$ 1,903,600,161</u>

HOLDINGS OF CERTAIN INVESTMENTS WERE DETERMINED TO BE PLAN ASSETS FOR FORM 5500 PURPOSES AND ARE SEPARATELY IDENTIFIED HERE BASED ON THE ALLOCATION OF UNDERLYING ASSETS PROVIDED BY THE INVESTMENT MANAGER, AS OF THE DATE OF THEIR LATEST AUDITED FINANCIAL STATEMENTS.

NORTH ATLANTIC STATES CARPENTERS PENSION FUND

SCHEDULE OF REAL ESTATE

DECEMBER 31, 2023

EIN 51-6040899, PLAN NO. 001

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

(a) NOT APPLICABLE

(b)	(c) - DESCRIPTION REAL ESTATE	(d)	(e)
ISSUER	NO. OF SHARES	COST	CURRENT VALUE
NORTH ATLANTIC STATES CARPENTERS PENSION FUND REAL			
ESTATE INVESTMENT PROGRAM - REAL ESTATE	-	\$ 130,678,842	\$ 127,885,050
OFFICE BUILDING - WILMINGTON, MA	-	8,058,152	7,200,000
OFFICE BUILDING - HAMDEN, CT	-	1,439,574	680,000
WCP SPECIAL CORE PLUS FUND LP - REAL ESTATE	-	3,670,909	5,246,727
WCP SPECIAL CORE PLUS FUND II LP - REAL ESTATE	-	<u>12,737,567</u>	<u>21,809,932</u>
		<u>\$ 156,585,044</u>	<u>\$ 162,821,709</u>

HOLDINGS OF CERTAIN INVESTMENTS WERE DETERMINED TO BE PLAN ASSETS FOR FORM 5500 PURPOSES AND ARE SEPARATELY IDENTIFIED HERE BASED ON THE ALLOCATION OF UNDERLYING ASSETS PROVIDED BY THE INVESTMENT MANAGER, AS OF THE DATE OF THEIR LATEST AUDITED FINANCIAL STATEMENTS.

NORTH ATLANTIC STATES CARPENTERS PENSION FUND

SCHEDULE OF NON-PARTICIPANT LOANS

DECEMBER 31, 2023

EIN 51-6040899, PLAN NO. 001

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

(a) NOT APPLICABLE	(b)	(c) - DESCRIPTION NON-PARTICIPANT LOANS		(d)	(e)	
	ISSUER	INTEREST RATE	MATURITY DATE	PAR OR MATURITY / NO. OF SHARES	COST	CURRENT VALUE
	ELANCO ANIMAL HEALTH INC	6.65%	08/28/2028	350,000	\$ 375,405	\$ 362,660
	CHARLES SCHWAB CORP	6.20%	11/17/2029	175,000	175,000	183,514
	CHARTER COMM OPT LLC/CAP	4.40%	04/01/2033	75,000	74,726	69,216
	BOSTON PROPERTIES LP	6.50%	01/15/2034	69,000	68,791	72,777
	US TREASURY N/B	4.13%	08/15/2053	4,011,000	3,676,761	4,054,239
	AGILE GROUP HOLDINGS LTD			3,800	5,393	414
	ASCOM HOLDING AG REG			1,419	18,212	13,859
	BIOCRYST PHARMACEUTICALS INC			28,400	222,791	170,116
	BLUE OWL CAPITAL CORP			22,700	312,914	335,052
	BORAL LTD			32,000	79,134	117,692
	BOUSTEAD SINGAPORE LTD			2,000	1,264	1,304
	CAMTEK LTD			960	54,587	66,605
	CELLEBRITE DI LTD			6,297	40,091	54,532
	CELSIUS HOLDINGS INC			12,667	695,692	690,605
	CIVITAS RESOURCES INC			1,800	111,656	123,084
	CLEARVIEW WEALTH LTD			54,000	31,297	21,371
	CLINUVEL PHARMACEUTICALS LTD			5,232	102,946	57,121
	COLLIERS INTL GR SUBORD VOT			3,409	324,626	431,307
	EMECO HOLDINGS LTD			46,173	21,994	21,109
	ESTABLISHMENT LABS HOLDINGS			18,518	879,513	479,431
	FRONTLINE PLC			690	12,197	13,835
	FUJII SANGYO CORP			1,000	12,469	16,946
	GULF KEYSTONE PETROLEUM LTD			34,156	71,372	56,213
	HARGREAVES SERVICES PLC			4,274	26,109	22,611
	INMODE LTD			1,532	60,060	34,072
	KLINGELNBERG AG			994	22,225	19,369
	KOHL'S CORP			7,100	350,760	203,628
	MADER GROUP LTD			3,944	16,716	18,435
	MAEZAWA KASEI INDUSTRIES CO			1,000	10,304	10,817
	MAKEMYTRIP LTD			5,372	195,206	252,377
	MFE MEDIAFOREUROPE NV CL A			1,003	7,618	2,613
	MICHAEL HILL INTERNATIONAL L			35,370	34,133	21,842
	NANOSONICS LTD			10,442	33,977	31,350
	NEWBORN TOWN INC			106,400	21,782	26,435
	PERION NETWORK LTD			17,379	368,234	536,490
	PRO MEDICUS LTD			703	28,245	45,969
	QUIDELORTHO CORP			247	19,487	18,204
	REPAIRE THERAPEUTICS INC			6,576	21,328	48,005
	REVANCE THERAPEUTICS INC			15,001	237,695	131,859
	SIERRA RUTILE HOLDINGS LTD			28,575	9,963	1,872
	TELEVISION FRANCAISE (T.F.1)			2,347	17,336	18,498
	TERRACOM LTD			27,005	14,882	7,739
	THUNGELA RESOURCES LTD			3,789	38,452	30,836
	TOBII AB			10,371	11,124	6,061
	TOMTOM NV			10,712	80,802	75,554
	TORM PLC A			2,143	63,128	64,846
	UPBOUND GROUP INC			2,160	82,706	73,375
	VERONA PHARMA PLC			11,978	171,821	238,123
	VIASAT INC			88,348	2,808,039	2,469,327
	VIEMED HEALTHCARE INC			97	842	761
	WAGNERS HOLDING CO LTD			19,362	30,008	13,212
	WEBJET LTD			12,539	60,969	62,801
	YALLA GROUP LTD			8,230	42,227	50,450

NORTH ATLANTIC STATES CARPENTERS PENSION FUND

SCHEDULE OF NON-PARTICIPANT LOANS

DECEMBER 31, 2023

EIN 51-6040899, PLAN NO. 001

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

(a) NOT APPLICABLE

(b)	(c) - DESCRIPTION NON-PARTICIPANT LOANS			(d)	(e)
ISSUER	INTEREST RATE	MATURITY DATE	PAR OR MATURITY / NO. OF SHARES	COST	CURRENT VALUE
				\$ <u>12,255,009</u>	\$ <u>11,950,533</u>

NORTH ATLANTIC STATES CARPENTERS PENSION FUND

SCHEDULE OF COMMON/COLLECTIVE TRUST FUNDS

DECEMBER 31, 2023

EIN 51-6040899, PLAN NO. 001

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

(a)	(b)	(c) - DESCRIPTION COMMON/ COLLECTIVE TRUST FUNDS	(d)	(e)
	ISSUER	NO. OF SHARES	COST	CURRENT VALUE
	AFL CIO BUILDING INVESTMENT TRUST	1,421	\$ 10,039,787	\$ 7,739,900
	ASB ALLEGIANCE REAL ESTATE FUND	3,926,957	3,926,957	4,871,876
	BLACKROCK 0-5 YR U.S. TREASURY INFLATION PROTECTED SECURITIES FUND	9,837,394	118,000,000	51,507,351
	BLACKROCK 1-3 YR GOVERNMENT/CREDIT BOND INDEX FUND	4,373,583	50,000,000	121,075,691
	BLACKROCK EAFE EQUITY INDEX FUND	129,322	37,974,571	45,267,873
	BLACKROCK EQUITY INDEX FUND A	20,983	36,790,822	39,859,662
	BLACKROCK JPM EMBI GLBL DIV INDEX FUND C	5,804,387	59,000,000	54,289,961
	BLACKROCK MSCI EMERGING MARKETS FREE FUND	469,868	27,720,542	25,768,004
	BLACKROCK MSCI EQUITY INDEX FUND RUSSIA	26,299	-	183
	BLACKROCK RUSSELL 1000 GROWTH FUND	785,479	45,000,000	58,039,517
	BLACKROCK RUSSELL 2000 INDEX FUND A	523,577	26,716,788	39,060,668
	BLACKROCK SHORT TERM INVESTMENT FUND	43,727	43,726	43,727
	BLACKROCK U.S. DEBT INDEX FUND	707,631	57,143,491	52,918,622
	BLACKROCK U.S. TREASURY INFLATION PROTECTED SECURITIES FUND	4,704,559	115,224,181	120,127,066
	CRESCENT CAPITAL TRUST II LEVERED	13,746,128	13,746,128	18,484,051
	GQG PARTNERS EMERGING MARKETS EQUITY CIT	6,267,527	72,419,080	92,132,642
	JP MORGAN CHASE BANK STRATEGIC PROPERTY FUND	1,404,670	9,515,236	15,802,678
	NEW TOWER TRUST COMPANY MULTI EMPLOYER PROPERTY TRUST	934	5,379,306	12,199,577
*	STATE ST S&P GLOBAL NATURAL RESOURCES INDEX NL FUND	246,309	2,681,379	4,237,987
	WELLINGTON EMERGING MARKET DEBT	11,340,209	95,648,847	59,195,893
			<u>\$ 786,970,841</u>	<u>\$ 822,622,929</u>

* PARTY-IN-INTEREST

NORTH ATLANTIC STATES CARPENTERS PENSION FUND

SCHEDULE OF POOLED SEPARATE ACCOUNTS

DECEMBER 31, 2023

EIN 51-6040899, PLAN NO. 001

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

(a) NOT APPLICABLE

(b)	(c) - DESCRIPTION POOLED SEPARATE ACCOUNTS	(d)	(e)
ISSUER	UNITS	COST	CURRENT VALUE
ULLICO SEPARATE ACCOUNT J	2,092,640	\$ 31,681,159	\$ 37,271,013
		\$ 31,681,159	\$ 37,271,013

NORTH ATLANTIC STATES CARPENTERS PENSION FUND

SCHEDULE OF 103-12 INVESTMENT ENTITIES

DECEMBER 31, 2023

EIN 51-6040899, PLAN NO. 001

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

(a) NOT APPLICABLE

(b)	(c) - DESCRIPTION 103-12 INVESTMENT ENTITIES	(d)	(e)
ISSUER	NO. OF SHARES	COST	CURRENT VALUE
HARBOURVEST PARTNERS IX LP	-	\$ -	\$ 7,505,489
HARBOURVEST PARTNERS VIII BUYOUT FUND LP	-	-	207,010
HARBOURVEST PARTNERS VIII CAYMAN MEZZANINE & DISTRESSED DEBT FUND LP	-	-	55,884
HARBOURVEST PARTNERS VIII MEZZANINE & DISTRESSED DEBT FUND	-	-	40,913
HARBOURVEST PARTNERS VIII VENTURE FUND LP	-	-	1,639,119
HARDMAN JOHNSTON INTERNATIONAL EQUITY GROUP TRUST	2,025,268	90,336,399	75,301,688
HIPEP V CAYMAN US DOLLAR PARTNERSHIP FUND LP	-	-	14,308
INCOME PLUS INVESTMENT FUND	23,341	63,526	14,920
MCMORGAN INFRASTRUCTURE FUND I LP	8,884,311	8,884,311	11,770,487
NCS GROUP TRUST - GLOBAL FUND	1,702,414	44,481,042	108,507,348
PROLOAN BOND FUND LLC	10,357	19,084,103	17,644,017
RHUMBLINE QSI INDEX LLC	4,582,475	64,323,436	185,645,189
SENIOR FLOATING RATE FUND LLC	76,882,616	76,882,616	107,777,664
ULLICO INFRASTRUCTURE FUND LP	35,115,374	64,993,018	76,743,938
		<u>\$ 369,048,451</u>	<u>\$ 592,867,974</u>

NORTH ATLANTIC STATES CARPENTERS PENSION FUND

SCHEDULE OF REGISTERED INVESTMENT COMPANIES

DECEMBER 31, 2023

EIN 51-6040899, 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
AFL-CIO HOUSING INVESTMENT TRUST	56,685	\$ 64,411,574	\$ 55,193,737
COLUMBIA MID CAP INDEX FUND-INSTITUTIONAL CLASS	586	6,973	8,041
COLUMBIA SMALL CAP INDEX FUND-INSTITUTIONAL CLASS	917	16,216	21,575
DFA EMERGING MARKETS VALUE PORTFOLIO	3,233,422	99,872,843	95,159,598
FIMM GOVERNMENT PORTFOLIO-INSTITUTIONAL CLASS	178,448	178,448	178,448
GLOBAL X & ARTIFICIAL INTELLIGENCE ETF	785	19,252	22,372
ISHARES CORE US AGGREGATE BOND ETF	615	62,401	61,039
ISHARES RUSSELL MID CAP ETF	175	8,776	13,603
ISHARES S&P 100 ETF	100	12,622	22,339
ISHARES US HIGH YIELD CORPORATE BOND ETF	570	21,349	20,720
LORD ABBETT SHORT DURATION INCOME FUND	20,692	86,952	79,872
SPDR BLOOMBERG HIGH YIELD BOND ETF	295	26,988	27,945
VANGUARD 500 INDEX FUND	100	27,066	43,680
VANGUARD FTSE DEVELOPED MARKETS ETF	440	19,421	21,076
VANGUARD REAL ESTATE ETF	240	18,383	21,206
VANGUARD TOTAL INTL BOND ETF	860	45,621	42,454
FIRST EAGLE GLOBAL VALUE FUND LP - REGISTERED INVESTMENT COMPANIES	-	<u>6,820,342</u>	<u>8,093,788</u>
		<u>\$ 171,655,227</u>	<u>\$ 159,031,493</u>

HOLDINGS OF CERTAIN INVESTMENTS WERE DETERMINED TO BE PLAN ASSETS FOR FORM 5500 PURPOSES AND ARE SEPARATELY IDENTIFIED HERE BASED ON THE ALLOCATION OF UNDERLYING ASSETS PROVIDED BY THE INVESTMENT MANAGER, AS OF THE DATE OF THEIR LATEST AUDITED FINANCIAL STATEMENTS.

NORTH ATLANTIC STATES CARPENTERS PENSION FUND

SCHEDULE OF UNALLOCATED CONTRACTS

DECEMBER 31, 2023

EIN 51-6040899, PLAN NO. 001

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

(a) NOT APPLICABLE

(b)	(c) - DESCRIPTION UNALLOCATED CONTRACTS	(d)	(e)
ISSUER		COST	CURRENT VALUE
AXA EQUITABLE LIFE INSURANCE COMPANY		\$ 401,024	\$ 401,024
AETNA LIFE INSURANCE COMPANY		<u>1,213,476</u>	<u>467,939</u>
		<u>\$ 1,614,500</u>	<u>\$ 868,963</u>

NORTH ATLANTIC STATES CARPENTERS PENSION FUND

SCHEDULE OF OTHER INVESTMENTS

DECEMBER 31, 2023

EIN 51-6040899, PLAN NO. 001

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

(a) NOT APPLICABLE

(b)	(c) - DESCRIPTION OTHER INVESTMENTS	(d)	(e)
ISSUER		COST	CURRENT VALUE
BRIGADE HIGH YIELD FUND LP - OTHER INVESTMENTS		\$ 282,273	\$ 295,397
FIRST EAGLE GLOBAL VALUE FUND LP - OTHER INVESTMENTS		8,589,160	10,192,866
KOHINOOR SERIES (CAYMAN) FUND - OTHER INVESTMENTS		21,364,936	20,946,803
ONE RIVER RISK RESPONDERS SP - OTHER INVESTMENTS		<u>8,951,256</u>	<u>8,464,635</u>
		<u>\$ 39,187,625</u>	<u>\$ 39,899,701</u>

HOLDINGS OF CERTAIN INVESTMENTS WERE DETERMINED TO BE PLAN ASSETS FOR FORM 5500 PURPOSES AND ARE SEPARATELY IDENTIFIED HERE BASED ON THE ALLOCATION OF UNDERLYING ASSETS PROVIDED BY THE INVESTMENT MANAGER, AS OF THE DATE OF THEIR LATEST AUDITED FINANCIAL STATEMENTS.

NORTH ATLANTIC STATES CARPENTERS PENSION FUND

SCHEDULE OF REPORTABLE TRANSACTIONS

YEAR ENDED DECEMBER 31, 2023

EIN 51-6040899, PLAN NO. 001

FORM 5500, SCHEDULE H, PAGE 4, PART IV, ITEM 4J - SCHEDULE OF REPORTABLE TRANSACTIONS DURING THE YEAR

(a) IDENTITY OF PARTY INVOLVED	(b) DESCRIPTION OF ASSET	(c) PURCHASE PRICE	(d) SELLING PRICE	(e) LEASE RENTAL	(f) EXPENSE INCURRED WITH TRANSACTION	(g) COST OF ASSET	(h) CURRENT VALUE OF ASSET ON TRANSACTION DATE	(i) NET GAIN OR (LOSS)
*	GSTIF 25 BPS	\$ 521,500,207	\$ -	\$ -	\$ -	\$ -	\$ 521,500,207	\$ -
*	GSTIF 25 BPS	-	476,865,523	-	-	476,865,523	476,865,523	-
N/A	BLACKROCK EQUITY INDEX FUND A	208,331,311	-	-	-	-	208,331,311	-
N/A	BLACKROCK EQUITY INDEX FUND A	-	234,256,985	-	-	227,848,008	234,256,985	6,408,977

* PARTY-IN-INTEREST

NORTH ATLANTIC STATES CARPENTERS PENSION FUND

SCHEDULE RECONCILING THE STATEMENT OF NET ASSETS AVAILABLE FOR BENEFITS TO FORM 5500

DECEMBER 31, 2023

	<u>Per Financial Statements</u>	<u>Reclassification</u>	<u>Per Form 5500</u>
Assets			
Investments			
Interest bearing cash	\$ 233,700,244	\$ 36,021,099	\$ 269,721,343
U.S. government securities	54,773,295	121,323,757	176,097,052
Corporate debt instruments	44,936,309	82,387,262	127,323,571
Corporate stock	642,715,048	(57,553,567)	585,161,481
Partnership/joint venture interests	2,112,434,495	(208,834,334)	1,903,600,161
Real estate	87,727,203	75,094,506	162,821,709
Loans (other than participant loans)	11,950,533	-	11,950,533
Common/collective trust funds	822,622,929	-	822,622,929
Pooled separate accounts	37,271,013	-	37,271,013
103-12 investment entities	592,867,974	-	592,867,974
Registered investment companies	150,937,705	8,093,788	159,031,493
Unallocated contracts	868,963	-	868,963
Other investments	-	39,899,701	39,899,701
Receivables			
Employers' contributions	13,521,937	-	13,521,937
Accrued interest/dividends	1,580,790	-	1,580,790
Net trades pending settlement	31,172,186	-	31,172,186
Other receivables	1,793,935	11,440,026	13,233,961
Cash	3,474,293	-	3,474,293
Collateral held under securities lending agreement	12,438,968	-	12,438,968
Property and equipment - net	3,625,792	-	3,625,792
Other assets	<u>315,972</u>	<u>4,747,532</u>	<u>5,063,504</u>
Total assets	<u>4,860,729,584</u>	<u>112,619,770</u>	<u>4,973,349,354</u>
Liabilities			
Operating payables	55,538,081	4,494,438	60,032,519
Acquisition indebtedness	-	65,714,823	65,714,823
Other liabilities	<u>16,646,705</u>	<u>42,410,509</u>	<u>59,057,214</u>
Total liabilities	<u>72,184,786</u>	<u>112,619,770</u>	<u>184,804,556</u>
Net assets available for benefits	<u>\$ 4,788,544,798</u>	<u>\$ -</u>	<u>\$ 4,788,544,798</u>

The Plan's holdings in various investments were determined to be plan assets for Form 5500 purposes. This schedule reconciles audited financial statement amounts, plus the Plan's share of amounts provided by the investment managers to the Form 5500 Schedule H amounts. Also included above is the adjustment to net assets to present the property used in operations at fair value.

NORTH ATLANTIC STATES CARPENTERS PENSION FUND

SCHEDULE OF INTEREST BEARING CASH

DECEMBER 31, 2023

EIN 51-6040899, 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
	LENDINGCLUB	VARIABLE	ON DEMAND	\$ 132,843,768	\$ 132,843,768
	STATE STREET GOVERNMENT SHORT TERM				
*	INVESTMENT FUND	VARIABLE	ON DEMAND	90,907,503	90,907,503
*	STATE STREET CASH	VARIABLE	ON DEMAND	9,948,973	9,948,973
	ARA CORE PROPERTY FUND - INTEREST BEARING CASH			856,150	856,150
	BRIGADE HIGH YIELD FUND LP - INTEREST BEARING CASH			1,339,740	1,339,740
	ENTRUST CAPITAL DIVERSIFIED FUND LTD CLASS X SERIES 09/30/2017 - INTEREST BEARING CASH			4,786	4,786
	ENTRUST CAPITAL DIVERSIFIED FUND LTD CLASS X SERIES 12/31/2017 - INTEREST BEARING CASH			4,942	4,942
	ENTRUSTPERMAL SPECIAL OPPORTUNITIES EVERGREEN FUND LTD - INTEREST BEARING CASH			1,689,311	1,689,311
	ENTRUST SPECIAL OPPORTUNITIES FUND III LTD CLASS A - INTEREST BEARING CASH			277,648	277,648
	EUROPEAN STRATEGIC PARTNERS 2006 B LP - INTEREST BEARING CASH			83,739	83,739
	FIRST EAGLE GLOBAL VALUE FUND LP - INTEREST BEARING CASH			2,700	2,700
	GROSVENOR OPPORTUNISTIC CREDIT FUND III LTD - INTEREST BEARING CASH			11,046	11,046
	GROSVENOR OPPORTUNISTIC CREDIT FUND IV LTD - INTEREST BEARING CASH			41,564	41,564
	HAMILTON LANE PRIVATE EQUITY OFFSHORE FUND VIII LP - INTEREST BEARING CASH			74,891	74,891
	HAMILTON LANE STRATEGIC OPPORTUNITIES FUND IV LP - INTEREST BEARING CASH			6,391	6,391
	IRONSIDES DIRECT INVESTMENT FUND IV LP - INTEREST BEARING CASH			4,268	4,268
	IRONSIDES PARTNERSHIP FUND IV LP - INTEREST BEARING CASH			9,026	9,026
	IRONSIDES PARTNERSHIP FUND V LP - INTEREST BEARING CASH			5,640	5,640
	KOHINOOR SERIES (CAYMAN) FUND - INTEREST BEARING CASH			11,779,883	11,779,883
	NORTH ATLANTIC STATES CARPENTERS PENSION FUND REAL ESTATE INVESTMENT PROGRAM - INTEREST BEARING CASH			4,458,048	4,458,048
	ONE RIVER RISK RESPONDERS SP - INTEREST BEARING CASH			14,141,686	14,141,686
	PANTHEON EUROPE FUND V B LP - INTEREST BEARING CASH			102,761	102,761
	PANTHEON GLOBAL SECONDARY FUND III B LP - INTEREST BEARING CASH			83,993	83,993
	SIGULER GUFF DISTRESSED REAL ESTATE OPPORTUNITIES FUND II LP - INTEREST BEARING CASH			59,388	59,388
	SOLAMERE CAPITAL AF III A LP - INTEREST BEARING CASH			37,489	37,489
	SOLAMERE CAPITAL AF IV A LP - INTEREST BEARING CASH			36,943	36,943
	WCP SPECIAL CORE PLUS FUND II LP - INTEREST BEARING CASH			612,834	612,834
	WCP SPECIAL CORE PLUS FUND LP - INTEREST BEARING CASH			296,232	296,232
				\$ 269,721,343	\$ 269,721,343

NORTH ATLANTIC STATES CARPENTERS PENSION FUND

SCHEDULE OF INTEREST BEARING CASH

DECEMBER 31, 2023

EIN 51-6040899, 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

* PARTY-IN-INTEREST

HOLDINGS OF CERTAIN INVESTMENTS WERE DETERMINED TO BE PLAN ASSETS FOR FORM 5500 PURPOSES AND ARE SEPARATELY IDENTIFIED HERE BASED ON THE ALLOCATION OF UNDERLYING ASSETS PROVIDED BY THE INVESTMENT MANAGER, AS OF THE DATE OF THEIR LATEST AUDITED FINANCIAL STATEMENTS.

NORTH ATLANTIC STATES CARPENTERS PENSION FUND

SCHEDULE OF U.S. GOVERNMENT SECURITIES

DECEMBER 31, 2023

EIN 51-6040899, PLAN NO. 001

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

(a) NOT APPLICABLE

(b)	(c) - DESCRIPTION U.S. GOVERNMENT SECURITIES			(d)	(e)
ISSUER	INTEREST RATE	MATURITY DATE	PAR OR MATURITY VALUE	COST	CURRENT VALUE
FNMA POOL AE0467	5.50%	03/01/2024	\$ 1	\$ 2	\$ 1
SMALL BUSINESS ADMINISTRATION	5.09%	10/01/2025	6,787	6,787	6,689
FED HM LN PC POOL C90979	6.50%	06/01/2026	20,829	21,346	21,367
US TREASURY N/B	0.88%	06/30/2026	135,000	135,688	124,839
SMALL BUSINESS ADMINISTRATION	5.70%	08/01/2026	12,947	12,947	12,866
SMALL BUSINESS ADMINISTRATION	5.71%	06/01/2027	15,412	15,412	15,445
US TREASURY N/B	3.50%	01/31/2028	875,000	868,335	861,193
FNMA POOL AL7205	3.50%	12/01/2029	24,957	26,299	24,334
US TREASURY N/B	3.50%	01/31/2030	510,000	493,465	498,785
US TREASURY N/B	3.50%	04/30/2030	415,000	399,151	405,613
FED HM LN PC POOL G18555	3.50%	05/01/2030	44,651	46,744	43,589
US TREASURY N/B	3.75%	06/30/2030	3,478,000	3,420,588	3,446,768
US TREASURY N/B	4.00%	07/31/2030	1,947,000	1,932,678	1,957,650
FNMA POOL AB1763	4.00%	11/01/2030	31,950	34,027	31,330
FNMA POOL AL5861	4.50%	01/01/2031	23,662	25,769	23,458
FNMA POOL AL4549	4.50%	01/01/2032	24,209	26,044	24,038
FREDDIE MAC	6.50%	06/15/2032	29,113	29,591	30,163
FED HM LN PC POOL G30689	4.50%	07/01/2032	16,433	17,943	16,348
FHLMC STRUCTURED PASS THROUGH	4.64%	07/25/2032	27,547	28,614	26,812
FANNIE MAE	5.50%	10/25/2032	35,896	39,402	36,189
FNMA POOL 555424	5.50%	05/01/2033	47,366	50,556	48,715
US TREASURY N/B	3.38%	05/15/2033	1,015,000	975,550	974,085
FHLMC STRUCTURED PASS THROUGH	4.41%	07/25/2033	33,496	35,613	32,006
FED HM LN PC POOL G30670	4.50%	12/01/2033	48,643	53,302	48,503
FNMA POOL 735765	5.97%	08/01/2034	7,948	7,693	7,944
FNMA POOL MA1983	4.00%	08/01/2034	62,749	67,505	61,418
FNMA POOL MA2079	4.00%	11/01/2034	56,983	61,212	55,773
FED HM LN PC POOL G01749	5.50%	01/01/2035	20,024	21,764	20,650
FNMA POOL 821925	5.15%	06/01/2035	5,082	4,958	5,036
FNMA POOL MA2366	4.00%	08/01/2035	51,627	55,628	50,445
FED HM LN PC POOL C91853	3.50%	10/01/2035	53,593	55,787	51,455
FNMA POOL MA2455	4.00%	11/01/2035	55,290	59,419	54,017
FED HM LN PC POOL 1Q0069	5.22%	05/01/2036	2,457	2,424	2,469
FNMA POOL 745600	5.26%	06/01/2036	3,101	3,054	3,079
FNMA POOL 888367	7.00%	03/01/2037	38,194	43,278	39,965
FNMA POOL MA2923	3.50%	03/01/2037	62,902	64,524	60,011
FNMA POOL MA2962	3.50%	04/01/2037	69,726	72,297	66,520
FNMA POOL 888702	6.50%	08/01/2037	6,410	6,869	6,785
FED HM LN PC POOL G03600	7.00%	11/01/2037	14,422	15,668	15,387
FNMA POOL 257135	5.50%	03/01/2038	1,906	2,011	1,937
FED HM LN PC POOL 1Q1400	6.20%	07/01/2038	28,111	30,650	28,964
FNMA POOL AD0198	5.50%	09/01/2038	27,384	30,161	28,201
FED HM LN PC POOL G07338	6.00%	10/01/2038	14,956	16,386	15,436
FED HM LN PC POOL H09197	6.50%	10/01/2038	6,535	6,937	6,690
FED HM LN PC POOL 1Q1145	5.07%	05/01/2039	20,220	21,556	20,224
FNMA POOL AD0130	6.50%	08/01/2039	2,208	2,406	2,305
FED HM LN PC POOL A94663	4.50%	10/01/2040	49,043	52,392	48,685
FED HM LN PC POOL G06447	4.50%	05/01/2041	46,327	49,845	46,333
FANNIEMAE GRANTOR TRUST	7.50%	07/25/2041	46,719	48,194	47,371
FED HM LN PC POOL Q03086	4.50%	09/01/2041	21,704	23,017	21,683
FNMA POOL AL5441	4.50%	09/01/2041	34,862	37,918	34,473
FANNIE MAE	7.00%	10/25/2041	12,064	12,499	12,242
FNMA POOL AJ4102	6.07%	11/01/2041	19,876	20,668	20,383
FED HM LN PC POOL QK1220	2.00%	12/01/2041	785,001	666,669	670,768
FNMA POOL AO8469	4.58%	05/01/2042	7,039	7,257	7,022

NORTH ATLANTIC STATES CARPENTERS PENSION FUND

SCHEDULE OF U.S. GOVERNMENT SECURITIES

DECEMBER 31, 2023

EIN 51-6040899, 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	COST	CURRENT VALUE
FED HM LN PC POOL G07843	4.50%	06/01/2042	41,479	44,947	41,114
FNMA POOL AO4105	5.85%	06/01/2042	10,106	10,455	10,021
FANNIE MAE	6.50%	06/25/2042	48,392	50,472	49,773
FED HM LN PC POOL G60764	4.50%	10/01/2042	37,791	41,521	37,796
FHLMC STRUCTURED PASS THROUGH	6.50%	03/25/2043	88,677	90,815	89,837
FED HM LN PC POOL 849748	5.07%	10/01/2043	23,322	24,178	23,757
FED HM LN PC POOL G07596	4.50%	11/01/2043	54,844	58,692	54,784
US TREASURY N/B	4.75%	11/15/2043	490,000	530,329	525,603
FNMA POOL AL5697	5.83%	12/01/2043	14,560	15,055	14,578
FREDDIE MAC	4.50%	12/15/2043	179,256	198,358	177,175
FED HM LN PC POOL G08568	4.50%	01/01/2044	24,645	26,659	24,497
REPUBLIC OF COLOMBIA	5.63%	02/26/2044	200,000	146,200	167,902
FED HM LN PC POOL G07686	4.50%	03/01/2044	28,911	31,169	28,736
FNMA POOL BM1135	4.50%	07/01/2044	71,088	76,820	70,741
FNMA POOL AT7040	5.83%	09/01/2044	1,836	1,887	1,871
FED HM LN PC POOL 849625	5.47%	01/01/2045	21,415	22,248	21,762
FED HM LN PC POOL 2B3805	4.05%	02/01/2045	24,494	25,485	24,904
FED HM LN PC POOL G60034	4.50%	02/01/2045	19,238	20,880	18,950
FED HM LN PC POOL 849713	4.56%	05/01/2045	12,817	13,011	12,984
FNMA POOL AL8815	5.65%	05/01/2045	37,782	39,308	38,487
REPUBLIC OF COLOMBIA	5.00%	06/15/2045	200,000	120,976	154,998
FNMA POOL AX5655	7.40%	01/01/2046	12,488	12,911	12,399
FED HM LN PC POOL 840286	6.34%	05/01/2046	23,319	24,175	23,618
FNMA POOL AL9198	6.97%	07/01/2046	30,676	31,107	31,407
FNMA POOL AL8919	6.84%	07/01/2046	7,814	8,018	7,996
FED HM LN PC POOL 840380	6.02%	08/01/2046	37,426	38,793	38,469
FNMA POOL AL9011	7.27%	09/01/2046	4,250	4,363	4,363
FNMA POOL AS8835	4.50%	02/01/2047	112,865	121,366	111,744
FED HM LN PC POOL G61080	4.50%	03/01/2047	76,733	82,464	75,322
FED HM LN PC POOL Q48869	4.50%	06/01/2047	81,098	87,048	80,282
FNMA POOL BH5350	3.00%	07/01/2047	29,687	30,463	29,789
FED HM LN PC POOL G08786	4.50%	10/01/2047	52,105	55,630	51,580
FNMA POOL BJ9262	4.50%	06/01/2048	54,628	56,896	53,866
FNMA POOL BM4005	3.37%	06/01/2048	50,180	50,523	49,327
FNMA POOL BM4873	3.08%	10/01/2048	135,749	138,671	132,582
FNMA POOL BM5704	5.00%	12/01/2048	28,240	29,738	28,465
FNMA POOL AL0778	6.50%	01/01/2049	6,735	7,468	7,075
FANNIE MAE	7.00%	03/25/2049	14,810	15,550	15,844
FREDDIE MAC	2.50%	04/25/2050	1,134,119	985,266	976,575
FED HM LN PC POOL RA2958	2.00%	07/01/2050	690,205	708,755	573,982
FNMA POOL CA6271	2.50%	07/01/2050	410,964	428,751	352,693
FNMA POOL CA6329	2.50%	07/01/2050	640,887	675,084	552,925
FNMA POOL CA6401	2.50%	07/01/2050	351,050	367,409	301,275
FED HM LN PC POOL RA3454	2.00%	09/01/2050	167,377	174,497	138,476
FNMA POOL CA6902	2.00%	09/01/2050	1,041,064	1,080,429	861,408
FED HM LN PC POOL RA3690	2.00%	10/01/2050	1,960,977	2,040,489	1,632,121
FNMA POOL CA7241	2.50%	10/01/2050	3,738,129	3,961,832	3,222,641
FNMA POOL FM4714	2.50%	10/01/2050	1,199,787	1,270,649	1,035,116
FED HM LN PC POOL SD7530	2.50%	11/01/2050	442,419	469,846	381,542
FNMA POOL BM6916	2.17%	12/01/2050	680,135	645,544	602,518
FNMA POOL CA8099	2.00%	12/01/2050	634,870	662,125	528,142
FNMA POOL FM7599	3.50%	01/01/2051	2,441,125	2,401,743	2,264,265
FED HM LN PC POOL SD7536	2.50%	02/01/2051	1,657,823	1,723,618	1,431,762
FNMA POOL CA8847	2.00%	02/01/2051	4,364,830	4,548,971	3,630,186
FNMA POOL BR7227	2.00%	04/01/2051	438,814	442,243	364,694

NORTH ATLANTIC STATES CARPENTERS PENSION FUND

SCHEDULE OF U.S. GOVERNMENT SECURITIES

DECEMBER 31, 2023

EIN 51-6040899, 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	COST	CURRENT VALUE
FED HM LN PC POOL RA7063	3.50%	04/01/2052	1,272,613	1,107,322	1,166,884
FNMA POOL BU8931	3.50%	04/01/2052	334,407	298,902	306,628
FNMA POOL CB3332	3.50%	04/01/2052	2,812,124	2,741,382	2,600,202
FED HM LN PC POOL SD8214	3.50%	05/01/2052	348,872	300,193	320,093
FNMA POOL BM6921	2.26%	05/01/2052	1,009,824	942,292	889,554
FNMA POOL BV9893	3.50%	05/01/2052	2,074,613	1,939,439	1,909,599
FNMA POOL FS1865	3.50%	05/01/2052	999,943	978,069	922,118
FNMA POOL MA4600	3.50%	05/01/2052	665,496	607,681	610,639
FNMA POOL CB3841	3.50%	06/01/2052	1,188,359	1,136,554	1,100,076
FNMA POOL FS2089	3.50%	06/01/2052	1,908,422	1,825,227	1,766,645
FNMA POOL MA4625	3.50%	06/01/2052	231,663	193,439	212,567
FED HM LN PC POOL 841463	2.16%	07/01/2052	1,036,814	959,660	897,611
FED HM LN PC POOL RA7654	3.50%	07/01/2052	2,936,906	2,837,670	2,718,694
US TREASURY N/B	3.00%	08/15/2052	167,000	145,263	136,568
FED HM LN PC POOL SD1581	2.50%	09/01/2052	3,021,783	2,574,654	2,571,628
FED HM LN PC POOL SD8243	3.50%	09/01/2052	739,669	654,260	678,320
FED HM LN PC POOL SD2253	3.50%	12/01/2052	1,256,680	1,092,558	1,152,325
TSY INFL IX N/B	1.50%	02/15/2053	664,509	580,689	601,719
US TREASURY N/B	4.75%	11/15/2053	350,000	383,906	392,494
GOVERNMENT NATIONAL MORTGAGE A	5.58%	02/20/2068	287,268	287,057	282,586
GOVERNMENT NATIONAL MORTGAGE A	6.14%	10/20/2069	504,304	505,622	500,819
GOVERNMENT NATIONAL MORTGAGE A	6.16%	12/20/2071	411,560	419,660	398,642
GOVERNMENT NATIONAL MORTGAGE A	6.01%	04/20/2072	540,928	543,996	524,377
GOVERNMENT NATIONAL MORTGAGE A	6.31%	05/20/2072	229,270	230,989	228,878
GOVERNMENT NATIONAL MORTGAGE A	6.19%	01/20/2073	474,773	472,425	464,453
FIRST EAGLE GLOBAL VALUE FUND LP - U.S. GOV'T SECURITIES			-	846,060	1,004,030
KOHINOOR SERIES (CAYMAN) FUND - U.S. GOV'T SECURITIES			-	65,168,865	63,662,901
ONE RIVER RISK RESPONDERS SP - U.S. GOV'T SECURITIES			-	59,913,956	56,656,826
			<u>\$ 60,305,193</u>	<u>\$ 184,926,189</u>	<u>\$ 176,097,052</u>

HOLDINGS OF CERTAIN INVESTMENTS WERE DETERMINED TO BE PLAN ASSETS FOR FORM 5500 PURPOSES AND ARE SEPARATELY IDENTIFIED HERE BASED ON THE ALLOCATION OF UNDERLYING ASSETS PROVIDED BY THE INVESTMENT MANAGER, AS OF THE DATE OF THEIR LATEST AUDITED FINANCIAL STATEMENTS.

NORTH ATLANTIC STATES CARPENTERS PENSION FUND

SCHEDULE OF CORPORATE DEBT INSTRUMENTS - PREFERRED

DECEMBER 31, 2023

EIN 51-6040899, PLAN NO. 001

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

(a) NOT APPLICABLE

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NORTH ATLANTIC STATES CARPENTERS PENSION FUND

SCHEDULE OF CORPORATE DEBT INSTRUMENTS - OTHER

DECEMBER 31, 2023

EIN 51-6040899, 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 - OTHER			(d)	(e)
ISSUER	INTEREST RATE	MATURITY DATE	PAR OR MATURITY VALUE	COST	CURRENT VALUE
TELECOM ITALIA SPA	5.30%	05/30/2024	\$ 625,000	\$ 679,156	\$ 622,094
SOUTHERN CO	4.48%	08/01/2024	200,000	200,908	198,340
CITIGROUP INC	4.00%	08/05/2024	150,000	150,671	148,347
OCCIDENTAL PETROLEUM COR	2.90%	08/15/2024	150,000	135,840	147,458
BANK OF AMERICA CORP	4.20%	08/26/2024	100,000	99,927	99,062
MICROCHIP TECHNOLOGY INC	0.98%	09/01/2024	275,000	275,000	266,450
NEXTERA ENERGY CAPITAL	4.26%	09/01/2024	150,000	150,381	148,574
LLOYDS BANKING GROUP PLC	4.50%	11/04/2024	250,000	250,028	246,990
COX COMMUNICATIONS INC	3.85%	02/01/2025	175,000	172,837	172,036
NEXTERA ENERGY CAPITAL	6.05%	03/01/2025	75,000	75,188	75,668
DELL INT LLC / EMC CORP	5.85%	07/15/2025	25,000	24,966	25,245
IMPERIAL BRANDS FIN PLC	4.25%	07/21/2025	350,000	361,760	343,732
FORD MOTOR CREDIT CO LLC	4.13%	08/04/2025	575,000	612,969	558,871
AMERICAN ELECTRIC POWER	5.70%	08/15/2025	145,000	144,350	145,953
CAPITAL ONE FINANCIAL CO	4.20%	10/29/2025	175,000	186,867	171,563
ZOETIS INC	4.50%	11/13/2025	125,000	124,711	124,280
CIGNA GROUP/THE	4.13%	11/15/2025	50,000	49,959	49,367
LLOYDS BANKING GROUP PLC	4.58%	12/10/2025	200,000	204,276	195,728
BANK OF AMERICA CORP	4.45%	03/03/2026	50,000	49,701	49,450
LLOYDS BANKING GROUP PLC	4.65%	03/24/2026	200,000	209,734	196,100
DOMINION ENERGY INC	1.45%	04/15/2026	275,000	274,879	254,903
WELLS FARGO + COMPANY	4.10%	06/03/2026	75,000	75,284	73,351
DILLARDS INC	7.75%	07/15/2026	200,000	197,000	207,892
CAPITAL ONE FINANCIAL CO	3.75%	07/28/2026	175,000	181,944	167,591
VMWARE LLC	1.40%	08/15/2026	150,000	149,745	137,202
BNP PARIBAS	4.63%	03/13/2027	1,150,000	1,277,867	1,126,195
CIGNA GROUP/THE	7.88%	05/15/2027	89,000	116,055	97,023
FORD MOTOR CREDIT CO LLC	4.95%	05/28/2027	200,000	199,974	195,110
MCDONALD S CORP	3.50%	07/01/2027	25,000	24,879	24,283
DELL INT LLC / EMC CORP	6.10%	07/15/2027	100,000	104,125	103,939
NEXTERA ENERGY CAPITAL	4.63%	07/15/2027	225,000	224,912	224,593
WELLS FARGO + COMPANY	4.30%	07/22/2027	175,000	174,993	171,281
IMPERIAL BRANDS FIN PLC	6.13%	07/27/2027	250,000	247,390	256,708
SOUTHERN CO	5.11%	08/01/2027	275,000	276,246	278,707
COX COMMUNICATIONS INC	3.50%	08/15/2027	625,000	639,378	594,731
BANK OF AMERICA CORP	4.18%	11/25/2027	325,000	356,926	315,848
JPMORGAN CHASE + CO	3.63%	12/01/2027	300,000	335,958	287,877
GOLDMAN SACHS GROUP INC	3.62%	03/15/2028	675,000	675,000	647,420
NORDSTROM INC	6.95%	03/15/2028	225,000	259,223	228,375
BAT CAPITAL CORP	2.26%	03/25/2028	50,000	50,000	44,740
CVS HEALTH CORP	4.30%	03/25/2028	29,000	28,965	28,508
BARCLAYS PLC	4.84%	05/09/2028	200,000	231,476	195,288
CAPITAL ONE FINANCIAL CO	4.93%	05/10/2028	175,000	175,000	171,988
FORD MOTOR CREDIT CO LLC	6.80%	05/12/2028	775,000	772,724	809,449
SOUTHERN CO	4.85%	06/15/2028	150,000	149,307	151,104
BARCLAYS PLC	5.50%	08/09/2028	250,000	250,000	251,158
NATWEST GROUP PLC	5.52%	09/30/2028	350,000	350,000	351,859
BANK OF AMERICA CORP	6.20%	11/10/2028	225,000	225,000	234,707
BOSTON PROPERTIES LP	4.50%	12/01/2028	100,000	86,489	95,241
BAYER US FINANCE II LLC	4.38%	12/15/2028	775,000	826,563	736,436
CHARLES SCHWAB CORP	5.64%	05/19/2029	100,000	100,000	102,581
CAPITAL ONE FINANCIAL CO	6.31%	06/08/2029	75,000	75,000	76,943
HCA INC	4.13%	06/15/2029	75,000	74,623	71,709
IMPERIAL BRANDS FIN PLC	3.88%	07/26/2029	950,000	1,030,024	886,293
DOW CHEMICAL CO/THE	7.38%	11/01/2029	103,000	111,863	116,298

NORTH ATLANTIC STATES CARPENTERS PENSION FUND

SCHEDULE OF CORPORATE DEBT INSTRUMENTS - OTHER

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(a) NOT APPLICABLE

(b)	(c) - DESCRIPTION CORPORATE DEBT INSTRUMENTS - OTHER			(d)	(e)
ISSUER	INTEREST RATE	MATURITY DATE	PAR OR MATURITY VALUE	COST	CURRENT VALUE
PHILIP MORRIS INTL INC	5.63%	11/17/2029	50,000	49,957	52,431
PROSUS NV	3.68%	01/21/2030	525,000	545,248	459,512
BOSTON PROPERTIES LP	2.90%	03/15/2030	450,000	462,389	385,277
T MOBILE USA INC	3.88%	04/15/2030	735,000	762,560	697,001
BARCLAYS PLC	5.09%	06/20/2030	200,000	174,170	193,634
BAT CAPITAL CORP	6.34%	08/02/2030	125,000	125,000	131,238
JPMORGAN CHASE + CO	8.75%	09/01/2030	225,000	230,221	269,946
JPMORGAN CHASE + CO	2.74%	10/15/2030	155,000	166,115	137,814
WELLS FARGO + COMPANY	2.88%	10/30/2030	80,000	85,878	71,117
BOSTON PROPERTIES LP	3.25%	01/30/2031	225,000	216,064	193,046
WELLS FARGO + COMPANY	2.57%	02/11/2031	475,000	496,674	410,457
BANK OF AMERICA CORP	2.50%	02/13/2031	425,000	443,713	364,956
RTX CORP	6.00%	03/15/2031	75,000	74,950	79,897
BAT CAPITAL CORP	2.73%	03/25/2031	125,000	124,471	104,828
CITIGROUP INC	4.41%	03/31/2031	375,000	406,492	358,669
T MOBILE USA INC	3.50%	04/15/2031	125,000	127,969	114,274
JPMORGAN CHASE + CO	2.52%	04/22/2031	505,000	519,970	436,694
JPMORGAN CHASE + CO	2.96%	05/13/2031	400,000	381,518	351,508
AT+T INC	2.75%	06/01/2031	150,000	149,759	131,502
CEMEX SAB DE CV	3.88%	07/11/2031	350,000	351,313	313,030
PROSUS NV	3.06%	07/13/2031	200,000	149,463	161,544
HSBC HOLDINGS PLC	2.36%	08/18/2031	200,000	198,458	165,634
CAPITAL ONE FINANCIAL CO	7.62%	10/30/2031	75,000	75,000	82,417
PROSUS NV	4.19%	01/19/2032	200,000	163,750	172,514
PETROLEOS MEXICANOS	6.70%	02/16/2032	725,000	718,297	601,591
BAT CAPITAL CORP	4.74%	03/16/2032	600,000	586,209	575,586
CCO HLDGS LLC/CAP CORP	4.50%	05/01/2032	425,000	369,556	363,996
RELX CAPITAL INC	4.75%	05/20/2032	100,000	99,121	100,786
CITIGROUP INC	6.63%	06/15/2032	85,000	115,760	92,502
BANK OF AMERICA CORP	2.57%	10/20/2032	125,000	102,090	103,634
PHILIP MORRIS INTL INC	5.75%	11/17/2032	60,000	59,946	62,968
GE HEALTHCARE TECH INC	5.91%	11/22/2032	225,000	225,000	240,003
PHILIP MORRIS INTL INC	5.38%	02/15/2033	150,000	149,690	153,855
WELLS FARGO + COMPANY	3.35%	03/02/2033	125,000	108,063	109,178
CITIGROUP INC	3.79%	03/17/2033	275,000	275,000	247,321
HSBC HOLDINGS PLC	4.76%	03/29/2033	750,000	757,994	698,580
CAPITAL ONE FINANCIAL CO	5.27%	05/10/2033	200,000	200,269	196,246
CCO HLDGS LLC/CAP CORP	4.50%	06/01/2033	200,000	198,500	169,228
ILLINOIS ST	5.10%	06/01/2033	525,000	526,061	519,456
WELLS FARGO + COMPANY	4.90%	07/25/2033	100,000	93,783	97,417
BAT CAPITAL CORP	6.42%	08/02/2033	200,000	198,012	209,258
JPMORGAN CHASE + CO	5.72%	09/14/2033	200,000	200,097	206,940
HSBC HOLDINGS PLC	8.11%	11/03/2033	375,000	375,000	433,346
LLOYDS BANKING GROUP PLC	7.95%	11/15/2033	350,000	381,897	400,085
UBS GROUP AG	5.96%	01/12/2034	500,000	500,000	517,065
BOSTON PROPERTIES LP	6.50%	01/15/2034	31,000	30,906	32,697
NATWEST GROUP PLC	6.02%	03/02/2034	200,000	200,000	209,994
RTX CORP	6.10%	03/15/2034	100,000	99,812	108,524
UNICREDIT SPA	7.30%	04/02/2034	425,000	424,197	436,938
CHARLES SCHWAB CORP	5.85%	05/19/2034	50,000	50,000	51,613
CITIGROUP INC	6.17%	05/25/2034	100,000	100,000	103,478
CAPITAL ONE FINANCIAL CO	6.38%	06/08/2034	100,000	100,000	102,920
BARCLAYS PLC	7.12%	06/27/2034	425,000	425,000	452,931
CHARLES SCHWAB CORP	6.14%	08/24/2034	100,000	100,000	105,408
PETROLEOS MEXICANOS	6.63%	06/15/2035	100,000	64,250	76,695

NORTH ATLANTIC STATES CARPENTERS PENSION FUND

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UNICREDIT SPA	5.46%	06/30/2035	500,000	532,612	470,240
NATWEST GROUP PLC	3.03%	11/28/2035	200,000	155,422	165,896
HSBC HOLDINGS PLC	6.50%	05/02/2036	675,000	869,743	716,249
BANK OF AMERICA CORP	3.85%	03/08/2037	200,000	176,730	175,602
ENEL FINANCE INTL NV	6.80%	09/15/2037	175,000	186,195	190,808
HSBC HOLDINGS PLC	6.50%	09/15/2037	150,000	182,234	162,359
WALT DISNEY COMPANY/THE	6.65%	11/15/2037	100,000	139,368	117,452
TELECOM ITALIA CAPITAL	7.72%	06/04/2038	255,000	264,763	259,677
DOW CHEMICAL CO/THE	9.40%	05/15/2039	44,000	78,437	61,195
TIME WARNER CABLE LLC	6.75%	06/15/2039	125,000	130,556	123,979
ENEL FINANCE INTL NV	6.00%	10/07/2039	250,000	268,773	254,055
CVS HEALTH CORP	4.13%	04/01/2040	75,000	73,736	64,401
BAT CAPITAL CORP	3.73%	09/25/2040	25,000	25,000	18,378
PETROLEOS MEXICANOS	6.38%	01/23/2045	125,000	125,794	81,448
KINDER MORGAN INC	5.55%	06/01/2045	450,000	448,160	432,837
CHARTER COMM OPT LLC/CAP	6.48%	10/23/2045	800,000	896,147	786,088
CHARTER COMM OPT LLC/CAP	5.38%	05/01/2047	50,000	49,984	42,491
PETROLEOS MEXICANOS	6.75%	09/21/2047	125,000	108,174	81,771
KINDER MORGAN INC	5.20%	03/01/2048	175,000	195,666	159,721
AT+T INC	4.50%	03/09/2048	43,000	48,903	37,509
CVS HEALTH CORP	5.05%	03/25/2048	190,000	215,619	177,709
CHARTER COMM OPT LLC/CAP	5.75%	04/01/2048	700,000	896,056	621,236
PETROBRAS GLOBAL FINANCE	6.90%	03/19/2049	250,000	259,550	248,028
HCA INC	5.25%	06/15/2049	100,000	106,985	92,957
BAT CAPITAL CORP	4.76%	09/06/2049	125,000	133,850	99,074
PETROLEOS MEXICANOS	7.69%	01/23/2050	1,900,000	1,512,244	1,351,204
PETROBRAS GLOBAL FINANCE	6.75%	06/03/2050	250,000	301,720	244,720
PROSUS NV	4.03%	08/03/2050	500,000	278,750	328,045
BAT CAPITAL CORP	3.98%	09/25/2050	125,000	124,911	87,973
DOW CHEMICAL CO/THE	3.60%	11/15/2050	75,000	77,915	57,931
SOUTHERN CO	4.00%	01/15/2051	450,000	436,375	427,878
SOUTHERN CO	3.75%	09/15/2051	400,000	398,906	364,200
PROSUS NV	4.99%	01/19/2052	600,000	503,563	450,972
BAT CAPITAL CORP	5.65%	03/16/2052	75,000	72,377	67,698
CHARTER COMM OPT LLC/CAP	5.25%	04/01/2053	125,000	112,060	104,693
DOMINION ENERGY INC	5.75%	10/01/2054	425,000	417,313	417,418
AT+T INC	3.55%	09/15/2055	529,000	452,013	380,340
AT+T INC	3.80%	12/01/2057	275,000	221,411	204,419
VODAFONE GROUP PLC	7.00%	04/04/2079	375,000	408,500	386,626
ARA CORE PROPERTY FUND - CORPORATE DEBT INSTRUMENTS - OTHER			-	790,437	850,308
BRIGADE HIGH YIELD FUND LP - CORPORATE DEBT INSTRUMENTS - OTHER			-	77,914,355	81,536,954
			<u>\$ 40,328,000</u>	<u>\$ 119,394,960</u>	<u>\$ 120,224,357</u>

HOLDINGS OF CERTAIN INVESTMENTS WERE DETERMINED TO BE PLAN ASSETS FOR FORM 5500 PURPOSES AND ARE SEPARATELY IDENTIFIED HERE BASED ON THE ALLOCATION OF UNDERLYING ASSETS PROVIDED BY THE INVESTMENT MANAGER, AS OF THE DATE OF THEIR LATEST AUDITED FINANCIAL STATEMENTS.

NORTH ATLANTIC STATES CARPENTERS PENSION FUND

SCHEDULE OF CORPORATE STOCK - PREFERRED

DECEMBER 31, 2023

EIN 51-6040899, PLAN NO. 001

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

(a) NOT APPLICABLE

(b)	(c) - DESCRIPTION PREFERRED STOCK	(d)	(e)
ISSUER	NO. OF SHARES	COST	CURRENT VALUE
ARA CORE PROPERTY FUND - CORPORATE STOCK - PREFERRED	-	\$ 599,210	\$ 644,596
BRIGADE HIGH YIELD FUND LP - CORPORATE STOCK - PREFERRED	-	703,764	736,485
FIRST EAGLE GLOBAL VALUE FUND LP - CORPORATE STOCK - PREFERRED	-	745,785	885,033
SOLAMERE CAPITAL AF III A LP - CORPORATE STOCK - PREFERRED	-	722,390	1,319,610
SOLAMERE CAPIAL AF IV A LP - CORPORATE STOCK - PREFERRED	-	<u>1,052,342</u>	<u>1,172,334</u>
		<u>\$ 3,823,491</u>	<u>\$ 4,758,058</u>

HOLDINGS OF CERTAIN INVESTMENTS WERE DETERMINED TO BE PLAN ASSETS FOR FORM 5500 PURPOSES AND ARE SEPARATELY IDENTIFIED HERE BASED ON THE ALLOCATION OF UNDERLYING ASSETS PROVIDED BY THE INVESTMENT MANAGER, AS OF THE DATE OF THEIR LATEST AUDITED FINANCIAL STATEMENTS.

NORTH ATLANTIC STATES CARPENTERS PENSION FUND

SCHEDULE OF CORPORATE STOCK - COMMON

DECEMBER 31, 2023

EIN 51-6040899, 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
A.G. BARR PLC	5,877	\$ 30,763	\$ 38,434
A2A SPA	83,223	147,245	170,902
A8 NEW MEDIA GROUP LTD	282,000	14,458	5,562
AARON S CO INC/THE	900	17,862	9,792
AB SA	922	12,650	17,585
ABBVIE INC	2,200	233,136	340,934
ABM INVESTAMA TBK PT	71,300	10,756	15,745
ABN AMRO BANK NV CVA	825	14,050	12,385
ABOU KIR FERTIL + CHEMICALS	22,021	30,471	59,352
ABSA BANK LTD PREFERENCE	510	32,463	20,888
ABU DHABI ISLAMIC BANK/EGYPT	31,156	25,594	39,332
ACADEMY SPORTS + OUTDOORS IN	6,200	273,630	409,200
ACADIA PHARMACEUTICALS INC	22,255	423,304	696,804
ACCELLERON INDUSTRIES AG	3,694	104,510	115,255
ACCESSO TECHNOLOGY GROUP PLC	4,848	54,463	35,722
ACCOR SA	758	26,581	28,971
ACER INC	147,000	148,295	257,689
ACERINOX SA	4,130	45,756	48,610
ACI WORLDWIDE INC	47,830	1,535,204	1,463,598
ACROW LTD	21,085	10,808	14,891
ACS ACTIVIDADES CONS Y SERV	18,844	754,114	835,972
ACTER GROUP CORP LTD	8,000	45,169	46,268
ACUITY BRANDS INC	2,100	246,950	430,143
AD SOL NISSIN CORP	1,100	11,801	12,156
ADARO ENERGY INDONESIA TBK P	116,800	14,379	18,054
ADBRI LTD	22,204	56,717	45,453
ADDIKO BANK AG	1,307	13,248	19,274
ADECCO GROUP AG REG	14,811	691,159	726,252
ADENTRA INC	1,621	32,270	39,302
ADIRA DINAMIKA MULTI FINANCE	51,000	29,242	36,270
ADVANCED INFORMATION TE NVDR	162,500	23,974	17,996
ADVANCED PROCESS SYSTEMS COR	1,964	52,280	34,007
AECOM	6,992	283,376	646,271
AEGEAN AIRLINES	9,720	124,431	121,760
AFLAC INC	10,700	450,263	882,750
AG ANADOLU GRUBU HOLDING AS	10,115	83,022	68,806
AGCO CORP	5,945	585,951	721,782
AGF MANAGEMENT LTD CLASS B	5,500	37,309	32,159
AGILE GROUP HOLDINGS LTD	200	284	22
AGREE REALTY CORP	6,594	445,642	415,092
AGUNG PODOMORO LAND TBK PT	2,477,400	21,306	20,756
AICHI FINANCIAL GROUP INC	3,400	54,167	55,565
AICHI TOKEI DENKI CO LTD	1,100	11,829	18,297
AIR NEW ZEALAND LTD	89,544	43,301	36,001
AJIS CO LTD	1,200	21,149	19,475
AKR CORPORINDO TBK PT	214,800	10,867	20,577
AL BARAKA BANK EGYPT E.S.C	94,383	14,311	35,128
ALAM SUTERA REALTY TBK PT	2,282,300	25,332	24,310
ALASKA AIR GROUP INC	6,800	297,643	265,676
ALBAAD MASSUOT YITZHAK LTD	1	8	2
ALBERTSONS COS INC CLASS A	19,100	403,874	439,300
ALIBABA GROUP HOLDING LTD	132,276	2,648,179	1,280,656
ALIGHT INC CLASS A	75,990	766,458	648,195
ALK ABELLO A/S	1,110	11,952	16,646
ALKEMY SPA	2,687	51,361	27,278
ALKERMES PLC	643	17,948	17,837

NORTH ATLANTIC STATES CARPENTERS PENSION FUND

SCHEDULE OF CORPORATE STOCK - COMMON

DECEMBER 31, 2023

EIN 51-6040899, 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	
ALKERMES PLC	9,332	246,577	258,870	
ALLIANCE BANK MALAYSIA BHD	29,200	22,342	21,543	
ALLIANZ MALAYSIA BHD	5,900	13,960	23,677	
ALLIED TECNOLOGIA SA	4,400	6,185	6,793	
ALLISON TRANSMISSION HOLDING	5,500	224,479	319,825	
ALLTOP TECHNOLOGY CO LTD	6,000	35,973	37,536	
ALLY FINANCIAL INC	6,800	210,090	237,456	
ALLY LEASEHOLD REAL FOREIGN	66,500	14,968	12,566	
ALMIRALL SA	2,240	20,151	20,847	
ALPHABET INC CL A	17,152	910,351	2,395,963	
ALPS LOGISTICS CO LTD	2,000	16,791	23,564	
ALSEA SAB DE CV	3,444	11,959	13,048	
ALSO HOLDING AG REG	110	27,677	32,805	
ALTAMIR	532	15,476	13,987	
ALTUM LTD	7,542	174,252	241,103	
ALTIUS MINERALS CORPORATION	5,592	99,753	78,201	
ALTRIA GROUP INC	13,100	575,742	528,454	
ALVOPETRO ENERGY LTD	2,200	15,942	11,012	
ALZCHEM GROUP AG	569	11,390	16,342	
AMADA CO LTD	1,400	14,006	14,598	
AMADEUS FIRE AG	176	25,045	23,913	
AMARIN CORP PLC ADR	55,643	38,924	48,409	
AMAZE CO LTD	1,600	14,515	13,052	
AMDOCS LTD	5,194	333,046	456,501	
AMERICAN AIRLINES GROUP INC	3,100	48,887	42,594	
AMERICAN ASSETS TRUST INC	5,600	146,636	126,056	
AMERICAN AXLE + MFG HOLDINGS	6,500	54,210	57,265	
AMERICAN EXPRESS CO	10,722	942,705	2,008,659	
AMERICAN FINANCIAL GROUP INC	5,000	396,906	594,450	
AMERICAN INTERNATIONAL GROUP	15,500	820,004	1,050,125	
AMERICAN SOFTWARE INC CL A	132,064	1,477,215	1,492,323	
AMERICAN VANGUARD CORP	73,953	797,483	811,264	
AMERIPRISE FINANCIAL INC	2,500	441,240	949,575	
AMGEN INC	2,600	605,267	748,852	
AMICA SA	983	20,019	20,749	
AMICUS THERAPEUTICS INC	30,487	459,463	432,611	
AMIR MARKETING AND INVEST	1,069	14,221	5,854	
AMKOR TECHNOLOGY INC	12,500	158,813	415,875	
AMPOL LTD	1,282	25,853	31,623	
ANADOLU HAYAT EMEKLILIK	17,811	30,536	22,977	
ANALOGUE HOLDINGS LTD	68,000	13,072	8,883	
ANNALY CAPITAL MANAGEMENT IN	6,500	201,505	125,905	
ANSARADA GROUP LIMITED	8,090	13,025	9,495	
ANTARCHILE SA	2,699	21,434	21,789	
AP THAILAND PCL NVDR	1,273,000	345,478	421,443	
APA CORP	7,900	320,777	283,452	
APAC RESOURCES LTD	180,000	30,246	22,130	
APACER TECHNOLOGY INC	7,000	11,742	14,118	
API GROUP CORP	23,371	487,187	808,637	
APPLIED MATERIALS INC	4,900	349,426	794,143	
ARATA CORP	3,200	51,521	70,592	
ARCBEST CORP	3,100	108,547	372,651	
ARCHER DANIELS MIDLAND CO	4,100	335,584	296,102	
ARCOSA INC	9,003	252,689	744,008	
AREALINK CO LTD	1,500	16,554	28,621	
ARES CAPITAL CORP	8,300	119,313	166,249	

NORTH ATLANTIC STATES CARPENTERS PENSION FUND

SCHEDULE OF CORPORATE STOCK - COMMON

DECEMBER 31, 2023

EIN 51-6040899, 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
ARGENTEX GROUP PLC	5,334	7,841	6,120
ARGENX SE ADR	6,936	1,296,307	2,638,662
ARGO GRAPHICS INC	8,200	143,890	213,172
ARISE AB	6,744	34,631	30,415
ARISTA NETWORKS INC	6,433	436,454	1,515,036
ARLO TECHNOLOGIES INC	91,214	549,669	868,357
ARMSTRONG WORLD INDUSTRIES	7,708	665,092	757,851
AROA BIOSURGERY LTD	17,370	12,830	9,838
ARROW ELECTRONICS INC	4,800	430,174	586,800
ARTHUR J GALLAGHER + CO	5,746	1,127,254	1,292,160
ARWANA CITRAMULIA TBK PT	418,500	25,821	18,075
ASAHI NET INC	3,400	15,576	14,856
ASCENDIS PHARMA A/S ADR	20,464	2,593,816	2,577,441
ASCENDIS PHARMA A/S ADR	5,425	596,266	683,279
ASCOM HOLDING AG REG	29	372	283
ASIA CEMENT CHINA HOLDINGS	136,225	150,404	42,567
ASIA HOLDINGS CO LTD	795	64,571	115,432
ASIA PILE HOLDINGS CORP	4,200	14,902	20,943
ASIA TECH IMAGE INC	14,000	29,305	30,381
ASKA PHARMACEUTICAL HOLDINGS	1,100	18,615	13,920
ASMPT LTD	15,500	192,087	147,883
ASPIAL LIFESTYLE LTD	148,000	18,899	13,913
ASPO OYJ	1,666	12,278	11,005
ASROCK INC	8,805	79,630	73,732
ASSECO SOUTH EASTERN EUROPE	1,440	17,291	17,981
ASSYSTEM	899	37,704	49,157
ASTRA AGRO LESTARI TBK PT	25,800	11,570	11,771
ASTRA OTOPARTS TBK PT	94,700	15,257	14,515
ASURANSI TUGU PRATAMA INDONE	233,300	20,880	15,455
AT+T INC	61,600	1,285,963	1,033,648
ATALAYA MINING PLC	5,611	20,423	25,822
ATCO LTD CLASS I	15,335	561,714	449,723
ATHABASCA OIL CORP	5,200	14,964	16,445
ATKORE INC	1,935	242,387	309,600
ATKORE INC	5,300	130,036	848,000
ATLANTIC UNION BANKSHARES CO	11,900	450,755	434,826
ATLASSIAN CORP CL A	14,779	1,512,875	3,515,333
ATRESMEDIA CORP DE MEDIOS DE	2,926	12,109	11,617
ATRIA OYJ	999	10,971	11,543
AUDINATE GROUP LTD	3,138	27,072	34,645
AUDIOCODES LTD	1,166	12,108	14,074
AURAS TECHNOLOGY CO LTD	4,000	45,426	45,943
AUTOHOME INC ADR	12,560	386,094	352,434
AUTONATION INC	2,800	169,610	420,504
AUTOSPORTS GROUP LTD	12,405	18,605	19,807
AVANT GROUP CORP	2,500	23,871	25,216
AVANTOR INC	32,999	699,445	753,367
AVNET INC	7,600	322,024	383,040
AXIOMTEK CO LTD	10,993	24,765	31,521
AXIS CAPITAL HOLDINGS LTD	2,400	120,936	132,888
AXOS FINANCIAL INC	14,708	505,521	803,057
AXWAY SOFTWARE SA	656	15,042	19,131
AZIMUT HOLDING SPA	3,504	85,005	91,503
AZUREWAVE TECHNOLOGIES INC	12,000	11,293	18,807
B COMMUNICATIONS LTD	17,954	80,438	70,302
BAE SYSTEMS PLC	114,539	785,429	1,621,489

NORTH ATLANTIC STATES CARPENTERS PENSION FUND

SCHEDULE OF CORPORATE STOCK - COMMON

DECEMBER 31, 2023

EIN 51-6040899, 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	
BALFOUR BEATTY PLC	7,119	28,968	30,057	
BANCO BPM SPA	5,896	33,862	31,139	
BANCO COMERCIAL PORTUGUES R	78,367	24,254	23,754	
BANCO DE SABADELL SA	83,324	122,015	102,445	
BANGCHAK CORP PCL NVDR	151,800	130,143	193,461	
BANK OCBC NISP TBK PT	719,500	37,708	55,141	
BANK OF AMERICA CORP	20,700	567,192	696,969	
BANK OF NEW YORK MELLON CORP	44,404	1,553,114	2,311,228	
BANK OF NEW YORK MELLON CORP	18,000	693,193	936,900	
BANK OZK	10,876	465,155	541,951	
BANKUNITED INC	9,500	345,556	308,085	
BANPU PUBLIC CO LTD NVDR	56,700	14,256	11,296	
BASE RESOURCES LTD	70,959	15,378	7,505	
BASILEA PHARMACEUTICA REG	912	37,084	38,251	
BATH + BODY WORKS INC	16,288	717,450	702,990	
BATHURST RESOURCES LTD	17,718	14,877	11,606	
BATU KAWAN BHD	2,800	13,115	12,553	
BAUDROIE INC	900	16,127	22,759	
BECHTLE AG	535	25,169	26,825	
BEKAERT NV	286	13,515	14,697	
BEKASI FAJAR INDUSTRIAL ESTA	4,970,000	55,543	44,222	
BELIMO HOLDING AG REG	187	92,582	103,048	
BELLRING BRANDS INC	12,373	279,168	685,835	
BELSHIPS ASA	11,119	16,238	20,123	
BELVOIR GROUP PLC	6,846	27,040	22,604	
BENTLEY SYSTEMS INC CLASS B	23,885	942,680	1,246,319	
BERGMAN + BEVING AKTIEBOLAG	967	15,774	17,617	
BERKELEY GROUP HOLDINGS/THE	4,264	251,464	254,828	
BERKSHIRE HATHAWAY INC CL B	5,877	1,121,321	2,096,091	
BERMAZ AUTO BHD	164,100	71,285	84,282	
BERRY GLOBAL GROUP INC	7,760	400,074	522,946	
BERTRANDT AG	364	19,901	20,668	
BEST BUY CO INC	2,900	276,268	227,012	
BEST WORLD INTERNATIONAL LTD	35,011	45,717	45,652	
BEYOND INC	5,006	252,335	138,616	
BHIRAJ OFFICE LEASEHOLD FOR	82,900	11,478	12,144	
BIOCRIST PHARMACEUTICALS INC	25,075	196,708	150,199	
BIOGAIA AB B SHS	10,759	109,140	108,040	
BIPROGY INC	5,000	158,793	156,582	
BIRD CONSTRUCTION INC	833	6,588	9,097	
BJ S WHOLESALE CLUB HOLDINGS	10,270	728,689	684,598	
BJORN BORG AB	3,718	17,253	16,454	
BLACK DIAMOND GROUP LTD	2,700	8,703	16,729	
BLOOMSBURY PUBLISHING PLC	3,190	6,853	19,113	
BML INC	900	27,927	19,152	
BNK FINANCIAL GROUP INC	16,838	94,014	93,348	
BORAL LTD	21,647	53,532	79,615	
BORGWARNER INC	4,400	153,186	157,740	
BOUSTEAD SINGAPORE LTD	18,100	11,442	11,800	
BP PLASTICS HOLDING BHD	52,250	21,644	13,532	
BRC ASIA LTD	26,200	29,795	35,553	
BREEDON GROUP PLC	25,573	112,035	118,014	
BRICKWORKS LTD	846	11,101	16,140	
BRISTOL MYERS SQUIBB CO	18,800	1,219,563	964,628	
BRITISH AMERICAN TOBACCO BHD	6,000	11,756	12,131	
BUKIT ASAM TBK PT	1,927,275	371,306	305,420	

NORTH ATLANTIC STATES CARPENTERS PENSION FUND

SCHEDULE OF CORPORATE STOCK - COMMON

DECEMBER 31, 2023

EIN 51-6040899, 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	
BUMITAMA AGRI LTD	29,200	12,000	13,392	
BUNGE GLOBAL SA	2,260	233,768	228,147	
BURKHALTER HOLDING AG	123	8,519	13,547	
BUSINESS ENGINEERING CORP	1,200	11,173	35,069	
BUZZI SPA	1,578	48,068	48,006	
BW OFFSHORE LTD	3,997	10,697	8,824	
BYC CO LTD	45	15,541	14,902	
BYTES TECHNOLOGY GROUP PLC	2,264	14,522	17,663	
C.I. HOLDINGS BERHAD	13,900	13,257	8,682	
CABBEEN FASHION LTD	147,811	51,426	18,172	
CALIFORNIA RESOURCES CORP	10,400	474,161	568,672	
CAMBIUM NETWORKS CORP	5,458	122,750	32,748	
CAMURUS AB	427	8,956	22,795	
CANFOR CORP	5,000	101,643	67,685	
CANFOR PULP PRODUCTS INC	13,200	62,112	18,019	
CAPCOM CO LTD	600	7,997	19,390	
CAPITAL LTD	16,064	18,473	18,431	
CAPITAL ONE FINANCIAL CORP	5,700	676,473	747,384	
CAPRI HOLDINGS LTD	3,800	161,224	190,912	
CARD FACTORY PLC	45,989	52,845	63,200	
CARDINAL HEALTH INC	1,600	85,696	161,280	
CARGOTEC OYJ B SHARE	1,527	77,447	88,894	
CARINDALE PROPERTY TRUST	3,707	12,902	10,118	
CASCADES INC	9,014	67,365	87,023	
CASTRO MODEL LTD	807	27,508	8,720	
CATELLA AB	5,286	11,515	16,994	
CB INDUSTRIAL PRODUCT HLDG	83,000	26,745	24,205	
CBO TERRITORIA	4,055	17,026	16,394	
CELESTICA INC	7,800	101,560	229,575	
CELL BIOTECH CO LTD	1,080	11,438	9,409	
CENTENE CORP	6,100	414,481	452,681	
CENTURY CASINOS INC	29,726	241,485	145,063	
CES ENERGY SOLUTIONS CORP	11,100	17,371	29,042	
CEVA INC	12,768	578,053	289,961	
CEWE STIFTUNG + CO KGAA	649	67,341	72,552	
CFE	107	912	902	
CHAMPION MICROELECTRONIC COR	10,000	23,788	23,884	
CHAMPIONX CORP	16,489	356,363	481,644	
CHANGAN MINSHENG APLL LOGI H	32,000	21,735	8,237	
CHAOWEI POWER HOLDINGS LTD	85,000	31,165	15,675	
CHARACTER GROUP PLC	7,129	50,717	26,264	
CHART INDUSTRIES INC	2,285	143,365	311,514	
CHEMED CORP	1,219	643,049	712,810	
CHEMOURS CO/THE	2,500	61,975	78,850	
CHEN HSONG HOLDINGS	56,000	19,683	10,184	
CHENG UEI PRECISION INDUSTRY	42,000	59,876	66,099	
CHESAPEAKE ENERGY CORP	3,500	346,480	269,290	
CHESNARA PLC	1,192	4,662	3,974	
CHEVALIER INTERNATIONAL HOLD	6,000	9,663	3,942	
CHIA CHANG CO LTD	20,000	20,568	28,348	
CHICONY ELECTRONICS CO LTD	40,000	119,498	228,084	
CHIEN KUO CONSTRUCTION CO	26,000	11,154	14,614	
CHILLED + FROZEN LOGISTICS H	1,300	12,136	13,343	
CHINA BLUECHEMICAL LTD H	80,000	17,043	20,183	
CHINA DONGXIANG GROUP CO	1,224,000	135,154	44,674	
CHINA FOODS LTD	58,000	21,754	21,838	

NORTH ATLANTIC STATES CARPENTERS PENSION FUND

SCHEDULE OF CORPORATE STOCK - COMMON

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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
CHINA HANKING HOLDINGS LTD	107,000	25,800	10,962
CHINA MERCHANTS CHINA DIRECT	40,000	62,583	39,393
CHINA OIL AND GAS GROUP LTD	340,000	18,531	10,537
CHINA RENEWABLE ENERGY INVES	179,138	8,073	2,615
CHINA STARCH HOLDINGS LTD	730,000	22,941	12,714
CHINA SUNSINE CHEMICAL HLDGS	42,400	7,532	12,697
CHINA TAIPING INSURANCE HOLD	170,800	195,959	146,990
CHINO CORP	1,500	18,248	23,259
CHIPOTLE MEXICAN GRILL INC	1,433	1,174,999	3,277,214
CHIYODA INTEGRE CO LTD	900	15,589	17,862
CHUBU NIPPON BROADCASTING CO	1,000	5,840	4,525
CHURCHILL CHINA PLC	1,654	24,420	30,574
CHURCHILL DOWNS INC	6,286	321,465	848,170
CIA DE DISTRIBUCION INTEGRAL	733	17,986	19,822
CIA SANEAMENTO DO PARANA PRF	19,500	18,215	23,644
CIA SANEAMENTO MINAS GERAIS	3,800	13,017	16,021
CIE FINANCIERE RICHEMO A REG	8,686	614,184	1,194,564
CIMPRESS PLC	2,859	379,310	228,863
CIPUTRA DEVELOPMENT TBK PT	165,400	11,068	12,569
CISCO SYSTEMS INC	19,800	837,184	1,000,296
CITIGROUP CAPITAL XIII	15,044	404,731	429,356
CITIGROUP INC	24,983	1,336,621	1,285,126
CITIGROUP INC	19,600	1,174,650	1,008,224
CITIZEN WATCH CO LTD	1,900	12,352	11,334
CITIZENS FINANCIAL GROUP	20,173	582,883	668,533
CIVMEC LTD	28,300	15,026	16,734
CLARKSON PLC	1,210	47,725	48,820
CLAS OHLSON AB B SHS	1,991	20,776	31,215
CLASQUIN	380	27,832	51,841
CLEAN HARBORS INC	2,626	430,511	458,263
CLEARVIEW WEALTH LTD	1,792	1,039	709
CLIMB GLOBAL SOLUTIONS INC	39,735	1,236,056	2,178,670
CLINICA BAVIERA SA	807	15,521	20,503
CLINUVEL PHARMACEUTICALS LTD	2,148	42,265	23,451
CLIPAN FINANCE INDONESIA PT	1,050,800	31,448	33,441
CLIQ DIGITAL AG	964	29,274	21,170
CLS HOLDINGS PLC	29,461	33,232	38,308
CML MICROSYSTEMS PLC	639	6,149	3,047
CNO FINANCIAL GROUP INC	7,600	138,282	212,040
CNX RESOURCES CORP	66,000	914,052	1,320,000
COCA COLA CONSOLIDATED INC	997	297,435	925,615
COCA COLA HBC AG DI	1,359	32,421	39,933
COGECO INC	2	77	87
COGNOR SA	41,258	41,088	87,505
COLLEGIUM PHARMACEUTICAL INC	11,689	267,531	359,787
COLLIERS INTL GR SUBORD VOT	541	51,517	68,448
COLRUYT GROUP N.V	778	34,385	35,064
COMARCH SA	102	4,867	5,395
COMBINED MOTOR HOLDINGS LTD	3,046	6,382	4,497
COMCAST CORP CLASS A	36,800	1,495,969	1,613,680
COMET HOLDING AG REG	55	18,106	17,330
COMPAGNIE DES ALPES	2,349	38,276	36,639
COMPAGNIE FINANCIERE TRAD BR	167	15,364	23,414
COMPAL ELECTRONICS	532,000	461,300	690,774
COMPASS GROUP PLC	81,136	1,148,529	2,219,654
COMPASS MINERALS INTERNATION	52,354	2,393,028	1,325,603

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(a) NOT APPLICABLE

(b)	(c) - DESCRIPTION COMMON STOCK	(d)	(e)
ISSUER	NO. OF SHARES	COST	CURRENT VALUE
COMPUTACENTER PLC	123	1,384	4,378
COMPUTER ENGINEER + CONSULT	400	8,775	4,446
COMPUTER MODELLING GROUP LTD	5,800	27,012	44,558
CONAGRA BRANDS INC	13,500	482,143	386,910
CONCENTRIC AB	960	13,275	17,108
CONCENTRIX CORP	4,862	373,321	477,497
CONDUIT HOLDINGS LTD	4,097	25,209	24,495
CONSENSUS CLOUD SOLUTION	4,992	152,267	130,840
CONSENSUS CLOUD SOLUTION	133	4,826	3,486
CONSORCIO ARA S.A.B. SER	144,093	17,257	31,227
CONSTELLIUM SE	741	14,008	14,790
COPRO HOLDINGS CO LTD	1,400	7,649	15,144
CORE + MAIN INC CLASS A	8,387	312,150	338,919
CORE CORP	900	11,037	11,210
CORETRONIC CORP	18,000	40,808	41,935
CORP AMERICA AIRPORTS SA	12,354	163,852	198,405
CORUS ENTERTAINMENT INC B SH	138,100	143,241	76,311
COSTAIN GROUP PLC	17,396	11,795	14,060
COSTAR GROUP INC	14,747	1,121,554	1,288,740
COUSINS PROPERTIES INC	5,200	152,282	126,620
CRANE NXT CO	9,965	412,164	566,710
CRCC HIGH TECH EQUIPMENT C H	146,000	32,506	12,153
CREEPY JAR SA	68	13,304	10,341
CRITEO SA SPON ADR	2,091	49,937	52,944
CSG SYSTEMS INTL INC	4,000	166,620	212,840
CTI ENGINEERING CO LTD	800	7,994	29,848
CTT CORREIOS DE PORTUGAL	31,695	117,011	122,191
CUMMINS INC	2,480	519,173	594,134
CVS HEALTH CORP	14,400	943,900	1,137,024
CYBERLINK CORP	16,000	51,104	51,091
D AMICO INTERNATIONAL SHIPPI	6,794	31,633	42,403
D/S NORDEN	2,725	40,009	129,621
DAE HYUN CO LTD	13,692	32,951	21,369
DAEWON SAN UP CO LTD	14,174	89,799	64,272
DAI ICHI CUTTER KOGYO KK	3,800	33,369	35,580
DAIHATSU DIESEL MFG CO LTD	1,700	7,556	11,878
DAIHEN CORP	1,600	53,760	73,202
DAIMLER TRUCK HOLDING AG	15,255	422,421	573,286
DAISHIN SECURITIES CO LTD	597	8,782	6,629
DAITRON CO LTD	1,700	24,344	33,776
DANIELI + CO RSP	738	13,622	17,691
DANONE	40,393	2,666,910	2,618,309
DARFON ELECTRONICS CORP	21,000	33,006	37,086
DARKTRACE PLC	7,705	36,436	36,018
DATADOG INC CLASS A	9,891	697,880	1,200,570
DATASONIC GROUP BHD	219,200	21,720	20,274
DAVITA INC	3,202	303,896	335,442
DAYANG ENTERPRISE HLDGS BHD	56,500	22,199	19,674
DAYFORCE INC	20,842	1,393,329	1,398,915
DB FINANCIAL INVESTMENT CO L	4,986	15,350	14,905
DECEUNINCK NV	5,086	17,966	12,782
DECKERS OUTDOOR CORP	1,033	546,793	690,488
DELEUM BERHAD	31,700	8,507	6,588
DELL TECHNOLOGIES C	9,000	436,983	688,500
DELTA AIR LINES INC	8,800	345,216	354,024
DELTA DUNIA MAKMUR TBK PT	730,900	19,064	16,710

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(b) ISSUER	(c) - DESCRIPTION COMMON STOCK		(d)	(e)
	NO. OF SHARES	COST	CURRENT VALUE	
DENSAN SYSTEM HOLDINGS CO LT	800	14,929	15,707	
DENTSPLY SIRONA INC	24,639	998,931	876,902	
DERICHEBOURG	768	7,547	4,310	
DETERRA ROYALTIES LTD	32,074	103,965	115,338	
DEUTZ AG	3,186	14,078	16,893	
DEVELIA SA	12,516	13,326	14,450	
DEVON ENERGY CORP	12,400	125,054	561,720	
DEXCOM INC	21,471	1,489,752	2,664,336	
DFDS A/S	473	18,332	15,630	
DGB FINANCIAL GROUP INC	2,132	13,255	14,054	
DHT HOLDINGS INC	9,207	87,685	90,321	
DIAMOND BUILDING PDTS NVDR	108,152	24,100	25,824	
DICK S SPORTING GOODS INC	4,700	273,774	690,665	
DIGITAL CHINA HOLDINGS LTD	45,000	12,379	13,370	
DIGITAL HOLDINGS INC	3,400	32,360	30,194	
DIGITAL TURBINE INC	47,148	1,140,624	323,435	
DINE BRANDS GLOBAL INC	4,700	361,236	233,355	
DING SHENG XIN FINANCE CO LT	8,269	4,418	-	
DIODES INC	4,200	354,190	338,184	
DISCOVER FINANCIAL SERVICES	3,200	289,696	359,680	
DLH HOLDINGS CORP	164,839	1,719,503	2,596,214	
DMG MORI CO LTD	1,000	15,931	19,155	
DNO ASA	84,966	124,406	84,249	
DOF GROUP ASA	1,543	7,359	8,616	
DOM DEVELOPMENT SA	627	24,228	23,822	
DOMINO S PIZZA INC	1,981	768,874	816,628	
DON MUANG TOLLWAY PCL NVDR	112,500	36,333	44,496	
DONGKUK STEEL MILL CO LTD	825	4,221	5,624	
DONNELLEY FINANCIAL SOLUTION	26,661	761,453	1,662,847	
DORMAKABA HOLDING AG	105	51,708	56,639	
DOSHISHA CO LTD	3,000	46,912	44,347	
DOTDIGITAL GROUP PLC	20,653	25,662	26,039	
DOUTOR NICHIRE HOLDINGS CO	800	12,642	12,365	
DOXIMITY INC CLASS A	24,073	748,902	675,007	
DRAEGERWERK AG	269	19,333	13,283	
DROPSUITE LTD	81,099	13,031	15,771	
DS SMITH PLC	12,079	44,144	47,319	
DUCOMMUN INC	28,100	1,326,197	1,462,886	
DUERR AG	1,220	24,911	28,813	
DURATEC LTD	29,684	22,673	32,104	
DXC TECHNOLOGY CO	519	13,364	11,870	
E CREDIBLE CO LTD	3,438	47,669	37,106	
EAGLE EYE SOLUTIONS GROUP PL	2,953	19,240	18,446	
EAGLE MATERIALS INC	3,480	361,800	705,883	
EASTERN CO SAE	120,855	84,353	109,698	
EASTMAN CHEMICAL CO	4,770	390,950	428,441	
EBASE CO LTD	4,700	26,136	26,070	
EBAY INC	10,700	455,029	466,734	
ECIT AS B	13,900	10,426	10,676	
ECO WORLD DEVELOPMENT GROUP	156,500	21,282	35,762	
ECORA RESOURCES PLC	21,592	32,265	27,636	
ECOVYST INC	282,300	3,287,035	2,758,071	
EIFFAGE	1,844	214,475	197,627	
EINHELL GERMANY AG VORZUG	75	11,482	13,670	
EIZO CORP	400	15,837	14,002	
ELEMATEC CORP	2,600	29,336	32,329	

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(a) NOT APPLICABLE

(b) ISSUER	(c) - DESCRIPTION COMMON STOCK	(d)	(e)
	NO. OF SHARES	COST	CURRENT VALUE
ELEVANCE HEALTH INC	5,127	1,620,498	2,417,688
ELIS SA	1,609	29,293	33,575
EMAK SPA	7,765	11,438	9,418
EMECO HOLDINGS LTD	11	5	5
EMPEROR WATCH + JEWELLERY	910,000	25,510	19,345
EN JAPAN INC	6,100	104,105	117,907
ENDO LIGHTING CORP	4,800	40,743	40,891
ENERGIZER HOLDINGS INC	5,300	212,954	167,904
ENERPLUS CORP	9,700	155,072	149,406
ENNOCONN CORP	3,000	24,955	26,197
ENOVIS CORP	26,228	1,454,040	1,469,293
ENQUEST PLC	58,529	11,473	11,252
ENSIGN ENERGY SERVICES INC	105,375	213,024	173,414
ENTRUST INC	2,600	14,902	14,606
EPWIN GROUP PLC	11,852	18,048	12,314
EQ OYJ	576	6,200	9,913
EQUIFAX INC	3,190	719,192	788,855
EQUITAL LTD	-	8	10
ETSY INC	8,067	739,421	653,830
EUROEYES INTERNATIONAL EYE C	20,000	17,524	13,344
EURONET WORLDWIDE INC	12,706	1,446,970	1,289,532
EURONET WORLDWIDE INC	5,655	502,993	573,926
EUROZ HARTLEYS GROUP LTD	15,225	15,114	9,142
EUSU HOLDINGS CO LTD	11,533	56,708	51,849
EVENTBRITE INC CLASS A	48,057	398,588	401,757
EVEREST GROUP LTD	1,000	234,090	353,580
EVERLIGHT ELECTRONICS CO LTD	19,000	30,699	30,954
EVN AG	1,256	32,947	39,473
EVOLUS INC	21,748	183,278	229,006
EW SCRIPPS CO/THE A	486,209	4,114,139	3,884,810
EXACT SCIENCES CORP	23,262	1,696,266	1,720,923
EXCO TECHNOLOGIES LTD	5,600	32,611	33,466
EXILLON ENERGY PLC	2,097	3,273	-
EXPEDIA GROUP INC	7,715	867,625	1,171,060
EXPEDIA GROUP INC	3,462	508,817	525,497
EXXARO RESOURCES LTD	3,345	42,100	37,402
EXXON MOBIL CORP	15,500	1,375,986	1,549,690
FAISAL ISLAMIC BANK OF EGYPT	22,094	12,533	22,876
FAISAL ISLAMIC BK EGYPT US	12,859	13,107	12,730
FAITH INC	7,800	86,482	26,391
FALCO HOLDINGS CO LTD	2,100	25,709	31,102
FAMOUS BRANDS LTD	3,699	11,696	11,717
FAN COMMUNICATIONS INC	6,200	25,975	17,415
FDM GROUP HOLDINGS PLC	2,880	29,943	16,833
FEDERAL AGRIC MTG CORP CL C	2,757	224,097	527,194
FEDERAL AGRIC MTG CORP CL C	2,729	453,677	521,839
FEDEX CORP	3,700	852,978	935,989
FERGUSON PLC	2,498	326,505	482,289
FERREXPO PLC	9,607	16,871	11,053
FIBI HOLDINGS	1,702	44,203	74,444
FIBRA SHOP PORTAFOLIOS INMOB	13,803	7,360	4,996
FIELMANN GROUP AG	951	50,430	51,097
FIFTH THIRD BANCORP	6,800	187,476	234,532
FINETEK CO LTD	4,928	11,464	14,901
FINNING INTERNATIONAL INC	1,100	27,977	31,967
FIRST AMERICAN FINANCIAL	7,008	389,168	451,596

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(a) NOT APPLICABLE

(b)	(c) - DESCRIPTION COMMON STOCK	(d)	(e)
ISSUER	NO. OF SHARES	COST	CURRENT VALUE
FIRST BUSEY CORP	9,700	168,344	240,754
FIRST HORIZON CORP	30,300	375,217	429,048
FIRST RESOURCES LTD	22,100	24,317	23,958
FIRSTGROUP PLC	5,988	11,303	13,359
FISCHER (GEORG) REG	8,322	593,816	604,140
FIVE BELOW	5,962	1,021,101	1,270,860
FLEX LTD	14,800	351,883	450,808
FLEXIUM INTERCONNECT INC	10,000	30,620	28,771
FLSMIDTH + CO A/S	637	25,272	27,110
FM MATTSSON MORA GROUP AB	2,484	16,892	13,556
FOCALTECH SYSTEMS CO LTD	27,000	110,530	98,972
FOOT LOCKER INC	5,900	230,693	183,785
FORBO HOLDING AG REG	28	42,082	35,064
FORD MOTOR CO	48,400	588,680	589,996
FORESIGHT GROUP HOLDINGS LTD	1,563	8,674	8,588
FORTIVE CORP	22,305	1,475,830	1,642,317
FOUNDING CONSTRUCTION + DEV	23,000	15,924	18,136
FOX CORP CLASS A	14,400	484,837	427,248
FOXCONN TECHNOLOGY CO LTD	12,000	21,664	20,762
FRACTAL GAMING GROUP AB	3,527	12,174	12,214
FRANKLIN COVEY CO	11,181	390,415	486,709
FREENET AG	578	15,939	16,179
FRONTIER DEVELOPMENTS PLC	5,376	16,309	8,992
FTGROUP CO LTD	1,900	15,459	15,997
FUCHS SE PREF	482	19,301	21,457
FUJI CORP	1,500	17,737	17,534
FUJI FURUKAWA ENGINEERING +	1,200	19,717	40,814
FUJI MEDIA HOLDINGS INC	1,700	16,974	18,914
FUJII SANGYO CORP	500	6,234	8,473
FUJIKURA KASEI CO LTD	3,300	15,247	10,018
FUJIMORI KOGYO CO LTD	2,000	47,517	53,625
FUKUDA DENSHI CO LTD	200	5,784	10,455
FUKUI COMPUTER HOLDINGS INC	1,400	29,716	25,025
FUKUSHIMA GALILEI CO LTD	700	22,974	24,230
FULLCAST HOLDINGS CO LTD	1,600	30,196	20,803
FURUNO ELECTRIC CO LTD	3,200	29,948	42,083
FURYU CORP	2,600	25,646	25,709
FUSO PHARMACEUTICAL INDUST	1,200	28,983	16,096
FUTABA INDUSTRIAL CO LTD	4,500	19,382	25,855
GABIA INC	5,533	55,392	71,874
GAJAH TUNGGAL TBK PT	211,200	10,258	14,197
GAKUJO CO LTD	1,400	17,645	17,944
GALAPAGOS NV SPON ADR	329	12,412	13,374
GALLIFORD TRY HOLDINGS PLC	31,862	78,342	91,390
GAMANIA DIGITAL ENTERTAINMEN	6,000	13,879	14,467
GAMBLING.COM GROUP LTD	11,699	154,071	114,065
GAMES WORKSHOP GROUP PLC	151	20,861	18,999
GAS MALAYSIA BHD	18,500	12,760	12,924
GATTACA PLC	11,783	42,423	21,931
GAVAZZI CARLO HOLDING AG RG	126	30,438	47,906
GB CORP	60,089	12,809	15,778
GDH GUANGNAN HOLDINGS LTD	61,171	8,397	4,465
GECOSS CORP	2,200	14,247	16,526
GEM DIAMONDS LTD	12,725	19,632	2,153
GEMDALE PROPERTIES AND INVES	264,000	30,659	9,467
GENERAL INTERFACE SOLUTION	14,000	62,344	30,107

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(b) ISSUER	(c) - DESCRIPTION COMMON STOCK	(d)	(e)
	NO. OF SHARES	COST	CURRENT VALUE
GENERAL MOTORS CO	20,600	754,090	739,952
GENERAL PLASTIC INDUSTRIAL	12,000	12,759	13,529
GENERALPLUS TECHNOLOGY INC	37,000	63,033	66,187
GENESIS TECHNOLOGY INC	7,198	13,907	15,339
GENPACT LTD	10,233	410,214	355,187
GENTING PLANTATIONS BHD	18,200	39,256	22,498
GENUS PLC	604	14,750	16,709
GESCO SE NA O.N	1,401	35,430	28,786
GETAC HOLDINGS CORP	42,000	103,082	151,904
GEUMHWA PSC CO LTD	778	21,625	15,767
GHOST STUDIO CO LTD/NEW	1,520	11,941	13,325
GIGACLOUD TECHNOLOGY INC A	4,620	58,343	84,523
GILEAD SCIENCES INC	9,800	644,423	793,898
GINEBRA SAN MIGUEL INC	10,550	13,202	32,141
GLOBAL BRANDS MANUFACTURE	41,000	90,912	86,167
GLOBAL FERRONICKEL HOLDINGS	382,000	16,599	14,211
GLOBAL GREEN CHEMICALS NVDR	85,800	36,909	22,624
GLOBAL PAYMENTS INC	11,074	1,087,761	1,406,398
GLOBAL SHIP LEASE INC CL A	2,181	41,170	43,227
GLORY LTD	2,600	50,821	49,647
GODO STEEL LTD	1,200	37,369	39,240
GOLD ROAD RESOURCES LTD	12,638	10,713	16,945
GOLDMAN SACHS GROUP INC	2,000	461,361	771,540
GOLDPAC GROUP LTD	127,000	33,975	24,722
GOLDTEK TECHNOLOGY CO LTD	9,933	55,685	20,099
GOLUB CAPITAL BDC 4 INC	19,800,000	19,800,000	20,939,321
GOOD WILL INSTRUMENT CO LTD	30,000	30,280	37,096
GOODBABY INTERNATIONAL HOLDI	534,000	89,254	49,238
GOODYEAR TIRE + RUBBER CO	7,455	113,391	106,756
GR ENGINEERING SERVICES LTD	8,132	10,462	12,318
GRAINCORP LTD A	16,173	81,731	80,450
GRAM CAR CARRIERS ASA	1,268	23,256	25,970
GRANDY HOUSE CORP	6,000	23,956	26,131
GRANGE RESOURCES LTD	404,743	86,285	128,422
GRAVITY CO LTD SPONSORED ADR	544	34,383	37,841
GREAT ELM GROUP INC	240,040	500,586	465,678
GREAT LAKES DREDGE + DOCK CO	169,000	1,188,349	1,297,920
GREGGS PLC	4,599	191,667	152,550
GROUPE BRUXELLES LAMBERT NV	8,541	671,465	671,948
GROUPE GUILLIN	482	10,967	16,452
GROUPE SFPI	7,375	21,205	15,919
GRUPA PRACUJ SA	969	12,930	15,278
GRUPO GICSA SA DE CV	175	86	24
GS HOLDINGS	2,434	84,979	77,297
GUDANG GARAM TBK PT	52,685	78,620	69,547
GULF KEYSTONE PETROLEUM LTD	698	1,459	1,149
GUN EI CHEMICAL INDUSTRY CO	600	12,429	13,215
GUNGHO ONLINE ENTERTAINMENT	6,800	115,584	113,422
GXO LOGISTICS INC	3,510	118,680	214,672
HAAD THIP PCL NVDR	26,400	10,541	12,762
HAFNIA LTD	2,527	15,234	17,468
HALLADOR ENERGY CO	88,315	427,342	780,705
HALOZYME THERAPEUTICS INC	14,475	721,585	534,996
HANDSOME CO LTD	329	11,302	4,884
HANESBRANDS INC	9,500	162,179	42,370
HANNSTAR BOARD CORP	7,000	10,832	12,613

NORTH ATLANTIC STATES CARPENTERS PENSION FUND

SCHEDULE OF CORPORATE STOCK - COMMON

DECEMBER 31, 2023

EIN 51-6040899, 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
HANSAE YES24 HOLDINGS CO LTD	5,133	18,270	19,529
HANWA CO LTD	400	12,278	14,172
HARGREAVES SERVICES PLC	88	538	466
HARLEY DAVIDSON INC	7,300	222,852	268,932
HARTFORD FINANCIAL SVCS GRP	7,800	445,282	626,964
HARUM ENERGY TBK PT	96,100	11,367	8,332
HARVATEK CORP	20,000	16,384	17,171
HCA HEALTHCARE INC	2,900	421,628	784,972
HECTO FINANCIAL CO LTD	718	14,074	14,885
HECTO INNOVATION CO LTD	2,277	25,885	25,936
HEIDELBERG MATERIALS AG	28,150	1,942,978	2,516,902
HEINEKEN MALAYSIA BHD	5,800	29,210	30,471
HEINEKEN NV	12,362	1,269,788	1,255,504
HELIA GROUP LTD	50,699	112,841	150,486
HELLO GROUP INC SPN ADR	7,244	63,666	50,346
HENAN JINMA ENERGY CO LTD H	24,000	12,474	4,242
HERA SPA	3,847	12,012	12,630
HERC HOLDINGS INC	3,317	269,755	493,868
HEWLETT PACKARD ENTERPRISE	8,000	94,800	135,840
HEXINDO ADIPERKASA TBK PT	144,800	40,181	50,549
HF SINCLAIR CORP	9,400	327,147	522,358
HIKMA PHARMACEUTICALS PLC	27,464	770,762	626,349
HILL + SMITH PLC	1,618	32,987	39,355
HIM INTERNATIONAL MUSIC INC	4,000	12,324	13,881
HIMACS LTD	1,080	7,441	10,993
HISAMITSU PHARMACEUTICAL CO	400	16,199	12,232
HITEJINRO HOLDINGS CO LTD	2,796	22,698	18,931
HITO COMMUNICATIONS HOLDINGS	1,200	18,861	10,401
HOCHTIEF AG	214	15,808	23,710
HOEGH AUTOLINERS ASA	2,349	6,702	21,337
HOKKAIDO ELECTRIC POWER CO	5,600	24,226	24,810
HOKURIKU ELECTRICAL CONST	1,900	12,685	13,774
HOKURIKU GAS CO LTD	500	12,749	12,262
HOLLYWOOD BOWL GROUP PLC	4,494	11,890	17,531
HOLOGIC INC	3,291	133,274	235,142
HOME BANCSHARES INC	23,602	497,864	597,839
HOMELAND INTERACTIVE TECHNOL	48,000	11,907	13,647
HONEYS HOLDINGS CO LTD	2,000	22,781	24,769
HONG LEONG FINANCE LTD	10,658	21,243	20,199
HONG LEONG FINANCIAL GROUP	4,000	16,571	14,311
HONG LEONG INDUSTRIES BHD	13,400	18,962	26,858
HORIBA LTD	1,000	60,901	78,238
HORIZON OIL LTD	105,913	12,094	11,202
HOST HOTELS + RESORTS INC	19,800	347,603	385,506
HOTUNG INVESTMENT HOLDINGS	28,366	35,249	33,116
HP INC	19,100	416,555	574,719
HS AD	2,735	23,387	13,230
HSING TA CEMENT CO LTD	93,100	49,527	55,362
HUBBELL INC	3,320	872,430	1,092,048
HUBSPOT INC	4,235	900,646	2,458,587
HUDACO INDUSTRIES LTD	7,596	62,696	66,720
HUGEL INC	174	20,321	20,184
HUGO BOSS AG ORD	1,263	86,678	94,118
HUMANA AB	537	3,265	1,500
HUNT (JB) TRANSPRT SVCS INC	3,210	251,248	641,165
HUNTER GROUP ASA	3,874	18,332	816

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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
HUNTINGTON INGALLS INDUSTRIE	1,000	170,480	259,640
HUNTSMAN CORP	3,800	95,532	95,494
HURON CONSULTING GROUP INC	115	-	11,822
HURXLEY CORP	14,200	74,426	88,435
HUSCOMPAGNIET A/S	1,473	12,712	10,150
HWASUNG INDUSTRIAL CO LTD	601	7,047	5,063
HYUNDAI CORP	834	11,586	12,226
IAC INC	76,700	3,819,459	4,017,546
ICOM INC	800	18,467	20,428
ICON PLC	2,520	192,462	713,336
ID HOLDINGS CORP	1,600	12,126	19,123
IGG INC	453,119	498,678	188,013
ILKKA OYJ	2,550	15,685	9,014
ILUKA RESOURCES LTD	49,280	316,585	221,933
IMAGE RESOURCES NL	150,271	25,611	6,460
IMAX CORP	12,830	233,041	192,707
IMDEX LTD	23,455	28,643	30,169
IMI PLC	2,174	43,530	46,671
INCHCAPE PLC	2,866	27,876	26,141
INCITEC PIVOT LTD	18,129	34,715	35,132
INCYTE CORP	5,300	299,277	332,787
INDAH KIAT PULP + PAPER TBK	23,400	15,514	12,652
INDIKA ENERGY TBK PT	559,890	80,707	52,182
INDIVIOR PLC	8,133	122,775	122,860
INDO TAMBANGRAYA MEGAH TBK P	2,215	2,252	3,690
INDOCEMENT TUNGGAL PRAKARSA	19,200	11,496	11,722
INDOFOOD SUKSES MAKMUR TBK P	78,000	35,952	32,675
INDRA SISTEMAS SA	976	15,158	15,094
INDUSTRIAL LOGISTICS PROPERT	6,100	135,207	28,670
INFICON HOLDING AG REG	53	63,773	75,944
INFOMEDIA LTD	11,653	13,120	11,450
INFORMATION SERVICES CORP	900	15,518	15,139
INFOTEL	499	9,773	29,215
INFUSYSTEM HOLDINGS INC	102,489	782,897	1,080,234
INGERSOLL RAND INC	31,980	1,201,862	2,473,333
INGERSOLL RAND INC	9,776	302,834	756,076
INGEVITY CORP	10,581	842,757	499,635
INGEVITY CORP	4,580	310,555	216,268
INGHAMS GROUP LTD	7,145	16,092	19,307
INGREDION INC	700	55,069	75,971
INKEVERSE GROUP LTD	189,952	25,354	20,191
INMODE LTD	12,072	412,963	268,481
INMODE LTD	7,968	312,374	177,208
INNOTEK LTD	97,400	64,357	32,489
INSMED INC	6,049	169,213	187,459
INTEL CORP	12,900	699,659	648,225
INTERMEDIATE CAPITAL GROUP	1,521	27,278	32,584
INTERNATIONAL GAMES SYSTEM C	12,000	220,410	283,084
INTERNATIONAL HOUSEWARES RET	72,000	20,386	14,937
INTERNATIONAL PERSONAL FINAN	2,985	4,073	4,528
INTERNATIONAL SEAWAYS INC	8,845	146,430	402,271
INTERNET INITIATIVE JAPAN	11,800	74,085	241,390
INTERPARFUMS SA	1,220	76,998	67,923
INTL BUSINESS MACHINES CORP	2,100	262,724	343,455
INTRED SPA	759	16,159	9,223
INVISIO AB	2,070	40,008	40,176

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(a) NOT APPLICABLE

(b) ISSUER	(c) - DESCRIPTION COMMON STOCK		(d)	(e)
	NO. OF SHARES	COST	CURRENT VALUE	
INWIDO AB	2,998	28,674	40,220	
IOVANCE BIOTHERAPEUTICS INC	45,195	722,484	367,435	
IPSEN	2,087	210,596	248,753	
IRCE SPA	4,869	18,258	10,596	
IREN SPA	4,191	12,526	9,134	
IRHYTHM TECHNOLOGIES INC	9,997	1,046,933	1,070,079	
ITT INC	5,968	494,463	712,102	
ITURAN LOCATION AND CONTROL	911	23,346	24,816	
ITURAN LOCATION AND CONTROL	3,098	88,144	84,390	
IVECO GROUP NV	960	7,906	8,639	
IVU TRAFFIC TECHNOLOGIES AG	1,141	24,969	17,570	
JABIL INC	9,158	1,065,720	1,166,729	
JABIL INC	3,900	323,403	496,860	
JAC RECRUITMENT CO LTD	6,800	26,369	31,352	
JAPAN PETROLEUM EXPLORATION	900	31,453	33,452	
JAPAN PROPERTY MANAGEMENT CE	1,500	12,228	11,906	
JAPAN TRANCITY CORP	8,300	37,897	36,148	
JAPFA COMFEED INDONES TBK PT	152,100	11,925	11,657	
JAYA REAL PROPERTY PT	373,700	11,626	16,990	
JAZZ PHARMACEUTICALS PLC	3,194	440,079	392,862	
JAZZ PHARMACEUTICALS PLC	3,600	547,802	442,800	
JBCC HOLDINGS INC	3,000	40,108	78,947	
JENSEN GROUP NV	374	13,483	13,716	
JESS LINK PRODUCTS CO LTD	6,000	10,356	16,442	
JET2 PLC	6,105	89,964	97,205	
JETWAY INFORMATION CO LTD	10,000	13,694	13,766	
JFE SYSTEMS INC	2,400	28,564	62,307	
JFROG LTD	23,429	453,020	810,878	
JH EDUCATIONAL TECHNOLOGY IN	54,000	18,427	4,910	
JINHUI SHIPPING + TRANSPORTA	24,521	37,692	13,859	
JK HOLDINGS CO LTD	13,600	93,421	100,037	
JLS CO LTD	1,515	9,765	8,234	
JMS CO LTD	6,300	25,409	22,478	
JOHNSON + JOHNSON	4,850	786,766	760,189	
JOHNSON ELECTRIC HOLDINGS	116,000	177,743	184,208	
JOYY INC ADR	14,954	438,033	593,674	
JPMORGAN CHASE + CO	3,700	452,883	629,370	
JULIUS BAER GROUP LTD	357	23,680	19,999	
JUTAL OFFSHORE OIL SERVICES	330,000	39,868	24,512	
JYSKE BANK REG	371	25,211	26,609	
KA SHUI INTL HLDG LTD	116,000	17,560	5,719	
KADANT INC	3,811	150,925	1,068,261	
KAKEN PHARMACEUTICAL CO LTD	400	11,790	9,519	
KAMADA LTD	2,752	17,018	16,859	
KAMEI CORP	6,000	43,682	72,776	
KANEFUSA CORP	1,300	12,889	6,565	
KANGNAM JEVISCO CO LTD	1,032	20,615	16,627	
KARDEX HOLDING AG REG	89	18,397	23,052	
KARUNA THERAPEUTICS INC	1,613	273,394	510,531	
KAWADA TECHNOLOGIES INC	800	27,000	37,055	
KAWAI MUSICAL INSTRUMENTS MF	400	17,608	10,101	
KBR INC	22,700	645,670	1,257,807	
KC CO LTD	1,536	25,026	21,956	
KC TECH CO LTD	539	7,363	11,216	
KEIHANSHIN BUILDING CO LTD	2,000	17,219	20,173	
KELLER GROUP PLC	1,919	20,390	21,528	

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(a) NOT APPLICABLE

(b)	(c) - DESCRIPTION COMMON STOCK	(d)	(e)
ISSUER	NO. OF SHARES	COST	CURRENT VALUE
KERUR HOLDINGS LTD	1,148	22,541	20,244
KEYCORP	16,000	226,760	230,400
KEYSIGHT TECHNOLOGIES IN	4,776	703,162	759,814
KEYSTONE LAW GROUP PLC	1,607	8,282	10,448
KIMLY LTD	58,900	15,560	14,289
KIMURA CHEMICAL PLANTS CO	3,600	17,655	19,101
KIMURA UNITY CO LTD	3,200	16,595	30,393
KINEPOLIS	241	11,847	11,900
KINETIC DEVELOPMENT GROUP LT	166,000	12,185	11,692
KING CO LTD	2,000	8,391	9,746
KING S TOWN BANK	10,000	12,661	13,017
KING YUAN ELECTRONICS CO LTD	8,000	12,677	22,131
KINGBOARD HOLDINGS LTD	117,000	381,806	279,893
KINGSOFT CORP LTD	22,800	80,492	70,369
KINIKA PHARMACEUTICALS A	15,351	265,782	269,257
KINROSS GOLD CORP	5,000	22,930	30,411
KIP REIT	58,300	11,779	11,356
KISCO CORP	1,270	11,173	6,489
KITANO CONSTRUCTION CORP	2,200	46,313	49,468
KLINGELNBERG AG	21	470	409
KOENIG + BAUER AG	4,640	103,689	62,019
KOGENERACJA	1,172	12,002	19,314
KOIKE SANSEI KOGYO CO LTD	1,100	25,786	33,005
KOKUYO CO LTD	800	12,291	13,017
KONINKLIJKE BAM GROEP NV	5,980	16,692	15,973
KONINKLIJKE PHILIPS NV	75,171	2,517,535	1,750,849
KOOTH PLC	8,541	44,258	32,338
KOREA ASSET IN TRUST CO LTD	10,547	32,345	25,878
KOREAN REINSURANCE CO	424	1,984	2,354
KORN FERRY	7,470	352,913	443,345
KOSMOS ENERGY LTD	74,638	460,124	500,821
KRAFT HEINZ CO/THE	22,960	768,280	849,061
KROGER CO	17,800	568,266	813,638
KRUK SA	338	38,370	41,001
KRUNG THAI BANK NVDR	58,000	19,742	31,266
KSB SE + CO KGAA VORZUG	13	5,570	8,358
KSL HOLDINGS BHD	39,100	14,497	9,445
KTCS CORP	4,798	11,423	13,412
KUDELSKI SA BR	2,971	12,926	4,271
KUKBO DESIGN CO LTD	769	11,673	8,521
KUMPULAN FIMA BHD	74,650	33,865	30,055
KURIMOTO LTD	1,300	20,362	28,309
KURIYAMA HOLDINGS CORP	7,900	50,135	50,489
KYERYONG CONST INDUST CO LTD	410	8,848	4,600
KYODO PRINTING CO LTD	500	11,997	11,456
KYOWA LEATHER CLOTH CO LTD	1,800	12,468	9,167
KYUSHU LEASING SERVICE CO	2,800	17,991	20,159
LA FRANCAISE DES JEUX SAEM	1,722	69,015	62,469
LA Z BOY INC	4,600	157,389	169,832
LABORATORIOS FARMACEUTICOS R	290	19,931	19,285
LADPRAO GENERAL HOSPITAL NVDR	71,500	12,294	10,474
LAM RESEARCH CORP	1,254	591,060	982,208
LANDIS GYR GROUP AG	144	12,921	13,003
LANNER ELECTRONICS INC	17,300	38,387	63,415
LANTHEUS HOLDINGS INC	8,132	649,935	504,184
LANTHEUS HOLDINGS INC	2,600	144,677	161,200

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ISSUER	NO. OF SHARES	COST	CURRENT VALUE
LASSONDE INDS INC CLASS A	100	9,717	10,636
LATTICE SEMICONDUCTOR CORP	43,131	1,594,061	2,975,608
LAURENT PERRIER	246	28,142	32,881
LBS BINA GROUP BHD	241,500	28,444	30,220
LCI INDUSTRIES	4,248	564,962	534,016
LE SAUNDA HOLDINGS LTD	52,000	9,192	2,664
LEAR CORP	1,200	190,836	169,452
LEE S PHARMACEUTICAL HLDGS	46,000	18,966	9,013
LEFT FIELD PRINTING GROUP LT	1,500	117	77
LEIDOS HOLDINGS INC	5,262	470,558	569,559
LENNAR CORP A	4,027	327,303	600,184
LENOVO GROUP LTD	176,000	113,092	246,130
LEON S FURNITURE LTD	900	11,663	12,395
LEONARDO DRS INC	22,498	272,243	450,860
LEONARDO SPA	6,896	73,320	113,770
LIBERTY MEDIA CORP LIB NEW C	9,210	661,655	581,427
LIBERTY MEDIA CORP LIBER NEW	24,290	653,713	699,066
LIBERTY TRIPADVISOR HDG A	1,364,329	1,995,271	1,159,680
LIDA HOLDINGS LTD	22,000	21,485	22,652
LIFECORE BIOMEDICAL INC	187,314	1,825,633	1,159,474
LIGAND PHARMACEUTICALS	6,801	533,056	485,727
LINCOLN NATIONAL CORP	2,100	105,651	56,637
LINDAB INTERNATIONAL AB	845	14,535	16,694
LINGKARAN TRANS KOTA HLDGS	40,300	43,473	44
LIONS GATE ENTERTAINMENT B	170,000	1,719,342	1,732,300
LIPPO CIKARANG PT	321,300	28,657	16,694
LIPPO LTD	4,056	2,275	603
LITTELFUSE INC	2,225	446,136	595,321
LIU CHONG HING INVESTMENT	18,000	28,652	12,448
LIVE NATION ENTERTAINMENT IN	13,881	1,083,716	1,299,262
LKQ CORP	4,700	143,515	224,613
LLOYDS BANKING GROUP PLC	1,513,379	1,084,731	920,448
LOCK+LOCK CO LTD	4,174	20,225	20,126
LOCKHEED MARTIN CORP	1,400	551,333	634,536
LOGITECH INTERNATIONAL REG	10,535	764,631	998,362
LOGO YAZILIM SANAYI VE TICAR	9,668	28,508	24,208
LONKING HOLDINGS LTD	80,000	23,216	12,499
LOPEZ HOLDINGS CORP	360,900	53,320	28,383
LUBELSKI WEGIEL BOGDANKA SA	3,681	26,483	31,846
LUCARA DIAMOND CORP	18,610	9,727	5,434
LUCERO ENERGY CORP	90,000	43,583	37,540
LULULEMON ATHLETICA INC	1,869	667,080	955,601
LUMAX INTERNATIONAL CORP LTD	8,100	19,119	23,542
LUNG KEE BERMUDA HLDG LTD	84,000	27,044	15,598
LYCOPODIUM LTD	4,548	25,652	36,309
LYONDELLBASELL INDU CL A	4,300	334,916	408,844
M + T BANK CORP	3,923	498,874	537,765
M + T BANK CORP	3,170	413,051	434,544
MACAUTO INDUSTRIAL CO LTD	5,000	16,029	12,333
MACROBLOCK INC	4,000	16,014	14,402
MACY S INC	12,300	265,367	247,476
MADER GROUP LTD	81	343	379
MAEIL HOLDINGS CO LTD	4,440	47,819	28,097
MAEZAWA INDUSTRIES INC	1,900	12,493	13,221
MAEZAWA KASEI INDUSTRIES CO	100	1,030	1,082
MAGNI TECH INDUSTRIES BHD	25,066	10,230	10,201

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	NO. OF SHARES	COST	CURRENT VALUE
MAJOR DRILLING GROUP INTL	10,200	74,019	71,244
MAKEMYTRIP LTD	9,341	339,431	438,840
MAKIYA CO LTD	800	9,763	5,788
MALINDO FEEDMILL TBK PT	5,800	385	194
MAN GROUP PLC/JERSEY	12,696	35,402	37,646
MANDALA MULTIFINANCE TBK PT	127,000	5,046	24,085
MANPOWERGROUP INC	1,000	90,180	79,470
MAP AKTIF ADIPERKASA PT	896,700	48,285	47,756
MARATHON PETROLEUM CORP	3,900	289,920	578,604
MARIMEKKO OYJ	1,525	18,876	22,422
MARK DYNAMICS INDONESIA PT	613,400	19,313	24,302
MARKETAXESS HOLDINGS INC	1,639	504,950	479,981
MARKS + SPENCER GROUP PLC	52,517	142,815	182,368
MARRIOTT VACATIONS WORLD	2,300	357,735	195,247
MARSH + MCLENNAN COS	7,702	344,884	1,459,298
MARTINREA INTERNATIONAL INC	4,567	36,170	49,667
MARUZEN CO LTD	1,957	15,830	38,451
MASI AGRICOLA SPA	4,092	18,968	22,601
MASISA SA	515,595	9,773	10,480
MASONITE INTERNATIONAL CORP	13,184	1,130,720	1,116,157
MATAS A/S	643	7,047	10,996
MATRIX CONCEPTS HOLDINGS BHD	69,300	21,058	24,885
MATSUI CONSTRUCTION CO LTD	8,491	53,990	50,471
MAXIMUS INC	7,337	540,979	615,281
MAYORA INDAH PT	77,600	13,033	12,549
MBM RESOURCES BERHAD	16,200	12,568	14,948
MC GROUP PCL NVDR	39,000	10,416	15,082
MCKESSON CORP	1,400	190,606	648,172
MCMILLAN SHAKESPEARE LTD	13,947	126,862	151,887
MDA LTD	1,594	13,247	13,926
ME GROUP INTERNATIONAL PLC	9,052	12,210	14,424
MEDCO ENERGI INTERNASIONAL T	118,700	10,216	8,904
MEDIA NUSANTARA CITRA TBK PT	591,200	18,588	14,821
MEDIPAL HOLDINGS CORP	6,300	104,587	102,133
MEDISTIM ASA	864	39,092	18,206
MEDPACE HOLDINGS INC	4,080	575,080	1,250,642
MEG ENERGY CORP	27,200	460,439	488,263
MEIER TOBLER GROUP AG	1,994	59,091	87,540
MEIJI ELECTRIC INDUSTRIES CO	1,200	11,785	11,908
MEIKO NETWORK JAPAN CO LTD	5,500	24,629	29,884
MEIRAGTX HOLDINGS PLC	8,289	83,802	58,189
MEITEC GROUP HOLDINGS INC	7,200	118,660	144,378
MELCOR DEVELOPMENTS LTD	4,400	43,612	37,573
MELEXIS NV	230	18,139	23,184
MELISRON	17	1,449	1,322
MENSCH UND MASCHINE SOFTWARE	2,117	65,459	128,620
MERCK + CO. INC.	20,100	1,514,021	2,191,302
META PLATFORMS INC CLASS A	6,681	1,178,214	2,364,807
META PLATFORMS INC CLASS A	1,800	266,421	637,128
METALL ZUG AG SHS B REG	8	12,366	14,495
METALURGICA GERDAU SA PREF	75,100	164,837	167,899
METHANEX CORP	30	1,621	1,426
METLIFE INC	8,400	419,714	555,492
MFE MEDIAFOREUROPE NV CL A	21	159	55
MGAME CORP	3,006	19,969	14,471
MI CHANG OIL INDUSTRIAL CO	449	34,611	24,997

NORTH ATLANTIC STATES CARPENTERS PENSION FUND

SCHEDULE OF CORPORATE STOCK - COMMON

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EIN 51-6040899, 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
MICHAEL HILL INTERNATIONAL L	8,612	8,311	5,318
MICHELMERSH BRICK HOLDINGS P	7,580	14,444	9,083
MICRO STAR INTERNATIONAL CO	17,000	81,127	112,999
MIGROS TICARET A.S	6,309	74,145	71,562
MIKRON HOLDING AG REG NEW	2,239	20,684	40,702
MIMAKI ENGINEERING CO LTD	2,800	13,547	18,371
MIMASU SEMICONDUCTOR INDUST	1,400	24,791	31,778
MINISO GROUP HOLDING LTD ADR	6,698	117,908	136,639
MINMETALS LAND LTD	226,000	38,300	8,683
MIROKU JYOHU SERVICE CO LTD	1,600	16,121	19,929
MITIE GROUP PLC	18,049	22,625	22,848
MITO SECURITIES CO LTD	1,100	4,667	3,285
MITRABAHTERA SEGARA SEJATI T	184,200	13,557	14,476
MITRABARA ADIPERDANA TBK PT	49,881	12,158	13,769
MITSUBISHI PENCIL CO LTD	1,400	16,580	20,715
MITSUBISHI RESEARCH INSTITUT	800	32,163	26,273
MITSUBISHI SHOKUJIN CO LTD	1,600	39,747	54,589
MIXI INC	800	29,908	13,398
MIZUNO CORP	1,800	60,929	50,177
MK RESTAURANTS GROUP NVDR	99,600	160,131	115,992
MKH BHD	47,556	16,683	14,800
MMA OFFSHORE LTD	35,166	12,832	44,872
MOCHIDA PHARMACEUTICAL CO	400	17,709	9,278
MOLSON COORS BEVERAGE CO B	14,100	603,604	863,061
MOMENTUM METROPOLITAN HOLDIN	11,553	11,699	13,829
MONOLITHIC POWER SYSTEMS INC	3,194	1,403,844	2,014,711
MOOG INC CLASS A	3,955	441,898	572,605
MORESCO CORP	1,200	12,757	11,006
MORGAN SINDALL GROUP PLC	614	6,289	17,337
MORGAN STANLEY	4,300	251,771	400,975
MORITO CO LTD	3,900	33,202	35,548
MORY INDUSTRIES INC	700	19,996	20,780
MOSAIC CO/THE	10,100	383,547	360,873
MOTA ENGIL SGPS SA	19,009	36,472	83,153
MOTORCAR PARTS OF AMERICA IN	177,278	1,308,777	1,655,777
MPC CONTAINER SHIPS AS	137,215	419,576	180,036
MPI CORP	2,000	7,685	14,174
MSCI INC	1,599	491,201	904,474
MUDA HOLDINGS BERHAD	41,300	27,618	12,718
MULLEN GROUP LTD	1,200	10,387	12,777
MULTICAMPUS CO LTD	616	15,532	16,310
NAFCO CO LTD	3,500	59,461	46,226
NAKANO CORP	7,600	33,546	25,391
NANOSONICS LTD	214	696	643
NANYO CORP	800	12,402	12,115
NAPHTHA ISRAEL PETROLEUM CRP	4,835	22,348	24,921
NAPIER PORT HOLDINGS LTD	10,806	22,340	17,173
NATIONAL BANK OF GREECE	75,099	111,887	521,807
NATIONAL FUEL GAS CO	5,900	245,992	296,003
NATURHOUSE HEALTH SAU	7,763	17,821	13,892
NAVIENT CORP	11,800	112,159	219,716
NAVIGATOR CO SA/THE	6,877	27,514	26,953
NCC AB B SHS	2,088	23,494	26,023
NCR ATLEOS CORP	4,984	104,187	121,061
NCR ATLEOS CORP	1,200	34,895	29,148
NCR VOYIX CORP	9,968	165,031	168,559

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(a) NOT APPLICABLE

(b)	(c) - DESCRIPTION COMMON STOCK	(d)	(e)
ISSUER	NO. OF SHARES	COST	CURRENT VALUE
NCR VOYIX CORP	2,400	55,273	40,584
NEDAP N.V.	819	35,934	57,901
NEEDS WELL INC	4,000	20,461	22,131
NEMETSCHEK SE	8,007	688,460	694,150
NEO PERFORMANCE MATERIALS IN	4,282	44,338	24,778
NEOGEN CORP	9,775	150,340	196,575
NEOJAPAN INC	1,900	13,492	13,747
NEOPHARM CO LTD	846	11,819	16,980
NETAPP INC	3,400	156,009	299,744
NETBAY PCL NVDR	42,800	27,615	31,098
NETDRAGON WEBSOFT HOLDINGS L	65,500	169,229	103,846
NEUROCRINE BIOSCIENCES INC	4,220	321,900	556,027
NEW ENERGY SOLAR LTD UNLISTED	23,544	14,954	1,012
NEW HOPE CORP LTD	36,884	135,706	129,866
NEW WORK SE	1,012	123,083	88,091
NEWBORN TOWN INC	5,600	1,146	1,391
NEWMARKET CORP	2,500	779,764	1,364,575
NEWMARKET CORP	770	344,926	420,289
NEXSTAR MEDIA GROUP INC	3,239	379,567	507,713
NEXSTAR MEDIA GROUP INC	2,100	385,766	329,175
NICCA CHEMICAL CO LTD	1,900	12,345	12,871
NICE INFORMATION + TELECOM	3,480	72,764	58,230
NICHIBAN CO LTD	1,000	11,684	12,293
NICHIREKI CO LTD	16,145	118,948	276,680
NICHIRIN CO LTD	1,300	25,454	30,153
NIHON FLUSH CO LTD	2,000	11,870	12,881
NIHON KAGAKU SANGYO CO LTD	1,400	12,050	14,062
NIHON KOHDEN CORP	700	17,497	22,160
NIHON TRIM CO LTD	1,200	18,724	25,706
NILFISK HOLDING A/S	5,172	104,977	90,590
NILORNGRUPPEN AB B SHS	2,634	26,459	15,682
NINETY ONE PLC	8,477	18,594	19,830
NINTENDO CO LTD	12,700	721,812	662,926
NIOX GROUP PLC	12,412	10,280	10,601
NIPPON DRY CHEMICAL CO LTD	2,200	35,531	43,632
NIPPON SHINYAKU CO LTD	800	32,477	28,350
NIPPON TELEVISION HOLDINGS	3,400	32,656	37,128
NIPPON THOMPSON CO LTD	11,900	47,168	47,607
NIRAKU GC HOLDINGS INC	55,813	7,349	1,930
NISHIKAWA RUBBER CO LTD	1,500	14,950	18,545
NISHOKU TECHNOLOGY INC	13,000	38,991	44,053
NISSHIN FUDOSAN CO LTD	17,600	70,036	62,545
NISSO HOLDINGS CO LTD	6,300	33,043	35,526
NITTO KOHKI CO LTD	2,100	29,008	27,810
NJS CO LTD	700	10,616	13,520
NORCROS PLC	12,610	32,811	30,864
NORDIC AMERICAN TANKERS LTD	23,370	98,047	98,154
NOROO HOLDINGS CO LTD	6,128	78,084	54,528
NORTHERN OIL AND GAS INC	14,779	480,139	547,858
NOVAC CO LTD	600	11,677	13,066
NOVARTIS AG REG	25,075	2,033,509	2,528,504
NRG ENERGY INC	12,900	479,207	666,930
NRW HOLDINGS LTD	14,289	23,627	29,055
NTG NORDIC TRANSPORT GROUP A	656	40,291	28,579
NU HOLDINGS LTD/CAYMAN ISL A	62,238	443,699	518,443
NUFARM LTD	25,811	88,879	91,935

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(a) NOT APPLICABLE

(b)	(c) - DESCRIPTION COMMON STOCK	(d)	(e)
ISSUER	NO. OF SHARES	COST	CURRENT VALUE
NUVISTA ENERGY LTD	1,597	2,993	13,371
NVR INC	90	539,448	630,041
NWF GROUP PLC	5,080	12,524	14,409
NZME LTD	46,360	31,698	31,634
OCEANAGOLD CORP	49,301	77,062	94,968
OCHI HOLDINGS CO LTD	3,500	36,487	36,147
ODFJELL TECHNOLOGY LTD	2,317	10,603	12,662
ODP CORP/THE	130	3,809	7,319
OFFICE PROPERTIES INCOME TRU	2,900	65,888	21,228
OHBA CO LTD	2,600	15,795	16,930
OIE SANGYO CO LTD	1,200	15,165	14,862
OKEA ASA	42,695	149,763	111,828
OKI ELECTRIC INDUSTRY CO LTD	3,600	22,706	23,263
OKUMA CORP	400	19,958	17,236
OLD REPUBLIC INTL CORP	10,300	161,041	302,820
OLVI OYJ A SHARES	257	13,208	7,963
OM HOLDINGS LTD	29,031	20,121	8,815
OMEGA HEALTHCARE INVESTORS	9,800	329,136	300,468
OMNIAB INC	63,502	335,118	391,807
ON SEMICONDUCTOR	20,045	1,248,034	1,674,359
OPENJOBMETIS SPA AGENZIA PER	1,535	20,048	27,130
OPTINOSE INC	15,486	175,031	19,977
OPTION CARE HEALTH INC	21,461	654,151	723,021
ORANGE POLSKA SA	83,854	135,435	173,583
ORASCOM CONSTRUCTION PLC	3,464	21,395	20,354
ORGANON + CO	1,360	47,061	19,611
ORICA LTD	80,749	822,742	878,279
ORIENTAL WATCH HOLDINGS	46,000	8,617	24,742
ORIOLA CORP B	6,613	17,609	7,948
ORION HOLDINGS CORP	3,414	40,007	38,702
ORORA LTD	9,189	24,617	16,302
ORSERO SPA	1,897	23,674	35,540
OSHKOSH CORP	5,000	435,286	542,050
OUTFRONT MEDIA INC	139,800	1,272,685	1,951,608
OWENS CORNING	4,600	336,949	681,858
PACIFIC ANDES RESOURCES DEVE	49,000	7,110	-
PACIFIC BASIN SHIPPING LTD	470,000	270,086	154,689
PACIFIC ONLINE	52,000	11,410	3,197
PACIRA BIOSCIENCES INC	28,912	1,240,981	975,491
PACKAGING CORP OF AMERICA	2,735	322,932	445,559
PALFINGER AG	953	29,637	26,529
PAN HONG PROPERTY GROUP LTD	30,500	2,155	1,884
PANDORA A/S	7,420	706,215	1,026,080
PANTECH GROUP HOLDINGS BHD	229,800	34,527	45,010
PARAGON BANKING GROUP PLC	5,277	35,442	46,922
PARAMOUNT CORP BHD	141,900	24,293	28,720
PARAMOUNT GLOBAL CLASS B	9,200	302,938	136,068
PARKER CORP	5,000	26,340	27,238
PARKLAND CORP	2,900	94,522	93,932
PASCO CORP	1,900	22,412	23,774
PAX GLOBAL TECHNOLOGY LTD	421,000	197,926	326,187
PAYPAL HOLDINGS INC	8,000	530,213	491,280
PAYPOINT PLC	2,694	19,219	17,858
PCA CORP	1,900	13,766	15,162
PCC EXOL SA	10,049	9,084	7,424
PEC LTD	65,300	31,712	25,494

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(a) NOT APPLICABLE

(b)	(c) - DESCRIPTION COMMON STOCK	(d)	(e)
ISSUER	NO. OF SHARES	COST	CURRENT VALUE
PEGASUS CO LTD	10,700	51,058	33,926
PELAYARAN NASIONAL EKALYA PU	1,001,400	19,201	18,601
PELIKAN INTERNATIONAL CORP	188,900	31,889	11,511
PER AARSLEFF HOLDING A/S	624	25,750	29,821
PERENNIAL ENERGY HOLDINGS LT	255,000	37,214	27,758
PERENTI LTD	41,684	25,131	29,581
PERSEUS MINING LTD	28,416	36,794	35,871
PERUSAHAAN GAS NEGARA TBK PT	1,959,100	225,582	143,780
PFIZER INC	33,800	1,249,084	973,102
PGT INNOVATIONS INC	18,275	322,667	743,793
PHARMA FOODS INTERNATIONAL	2,400	20,480	17,058
PHARMA MAR SA	321	13,467	14,567
PHARMARESEARCH CO LTD	278	22,857	23,636
PHAROS ENERGY PLC	93,922	34,955	25,503
PHILIP MORRIS CR AS	17	12,133	11,881
PHILLIPS 66	4,900	463,437	652,386
PHINIA INC	880	21,208	26,655
PHISON ELECTRONICS CORP	10,000	151,202	169,434
PHX ENERGY SERVICES CORP	9,200	20,199	56,514
PICO FAR EAST HOLDINGS LTD	178,000	22,639	35,105
PIRAEUS FINANCIAL HOLDINGS S	3,277	11,805	11,584
PIRAEUS PORT AUTHORITY SA	1,538	30,663	39,416
PIXART IMAGING INC	3,000	10,931	15,054
PIZZA PIZZA ROYALTY CORP	2,000	20,885	22,327
PLAN B MEDIA PCL NVDR	60,300	13,499	15,635
PLAYMATES HOLDINGS LTD	354,000	40,904	25,388
POLAR CAPITAL HOLDINGS PLC	2,763	19,931	16,414
POLARIS INC	1,600	159,832	151,632
POLARIS RENEWABLE ENERGY INC	2,500	23,798	25,083
PONSSE OYJ	497	16,969	12,408
POOL CORP	1,939	692,060	773,099
POOL CORP	1,248	302,520	497,590
POONGSAN HOLDINGS CORP	2,905	65,672	83,345
PORR AG	1,628	20,585	22,839
POST HOLDINGS INC	7,979	642,661	702,631
POU CHEN	336,000	376,571	338,294
PRECISE CORP PCL NVDR	201,700	18,148	17,728
PRECISION DRILLING CORP	200	14,128	10,915
PRECISION TSUGAMI CHINA CORP	8,000	11,294	9,579
PREMIER INC CLASS A	7,355	248,141	164,458
PRESTIGE CONSUMER HEALTHCARE	19,497	717,697	1,193,606
PRIMA ANDALAN MANDIRI TBK PT	124,972	38,746	45,859
PRIMAX ELECTRONICS LTD	218,000	433,933	480,885
PRIMORIS SERVICES CORP	9,500	188,243	315,495
PRO MEDICUS LTD	4,166	167,380	272,413
PROACT IT GROUP AB	14,979	85,625	139,715
PROBI AB	109	5,146	2,196
PROFOTO HOLDING AB	1,317	14,376	9,671
PROGRESSIVE CORP	11,173	561,327	1,779,635
PRONEXUS INC	1,500	9,828	14,013
PROSPERITY BANCSHARES INC	7,891	480,520	534,457
PROTO CORP	3,600	25,994	34,524
PRUKSA HOLDING PCL NVDR	63,700	26,147	22,582
PT STEEL PIPE INDUSTRY OF IN	1,031,100	19,345	19,555
PULTEGROUP INC	7,608	337,429	785,298
PULTEGROUP INC	7,000	350,994	722,540

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(b) ISSUER	(c) - DESCRIPTION COMMON STOCK		(d)	(e)
	NO. OF SHARES	COST	CURRENT VALUE	
PUMA BIOTECHNOLOGY INC	6,358	265,130	27,530	
PURADELTA LESTARI TBK PT	2,513,700	27,861	26,611	
PUIULO OYJ	1,912	13,946	18,850	
Q TECHNOLOGY GROUP CO LTD	69,000	41,538	39,234	
QILU EXPRESSWAY CO LTD	44,000	13,144	10,932	
QINETIQ GROUP PLC	4,144	18,796	16,324	
QUADIENT SA	898	18,649	19,066	
QUALCOMM INC	4,980	687,937	720,257	
QUALYS INC	1,442	153,724	283,036	
QUANTA SERVICES INC	6,606	1,207,386	1,425,575	
QUEST DIAGNOSTICS INC	1,600	190,672	220,608	
QUIDELORTHO CORP	3,953	311,876	291,336	
RADCOM LTD	1,253	12,382	10,099	
RADIAN GROUP INC	12,600	230,834	359,730	
RADIANT OPTO ELECTRONICS COR	16,000	53,884	69,337	
RADWARE LTD	3,263	118,603	54,427	
RADWARE LTD	21,661	557,497	361,305	
RAIFFEISEN BANK INTERNATIONA	279	3,548	5,754	
RAJTHANEE HOSPITAL PCL NVDR	21,900	21,484	17,484	
RAKON LTD	24,987	19,533	19,459	
RANA GRUBER ASA	2,329	11,900	18,323	
RANDON PARTICIPACOES SA PREF	37,700	86,212	99,341	
RANDSTAD NV	12,556	717,042	786,706	
RASA CORPORATION	2,700	28,715	28,900	
RATCHAPHRUEK HOSPITAL NVDR	90,800	19,815	17,025	
RATIONAL AG	114	80,877	88,088	
RAVEN PROPERTY GROUP LTD	11,476	4,664	559	
RAYDIUM SEMICONDUCTOR CORP	34,505	259,742	450,278	
RAYSEARCH LABORATORIES AB	4,493	42,484	40,258	
RB GLOBAL INC	6,484	472,792	433,715	
RCS MEDIAGROUP SPA	15,578	14,072	12,751	
REACH SUBSEA ASA	48,460	19,115	21,473	
REALTEK SEMICONDUCTOR CORP	48,000	485,664	737,427	
RECKITT BENCKISER GROUP PLC	16,308	1,162,915	1,126,787	
REGIONAL CONTAINER LINE NVDR	13,200	11,722	9,359	
REGIONS FINANCIAL CORP	22,700	404,171	439,926	
REINSURANCE GROUP OF AMERICA	3,442	296,247	556,847	
REINSURANCE GROUP OF AMERICA	1,700	179,682	275,026	
REJLERS AB	1,123	11,701	13,650	
RELIANCE STEEL + ALUMINUM	2,042	134,361	571,107	
RELIANCE STEEL + ALUMINUM	1,500	167,648	419,520	
RENAULT SA	824	33,759	33,592	
RENTA 4 BANCO SA	2,136	19,265	24,067	
REPLIGEN CORP	8,191	1,278,744	1,472,742	
RESEARCH SOLUTIONS INC	536,535	1,291,924	1,394,991	
RESOURCE ALAM INDONESIA TBK	264,490	10,664	6,322	
REVANCE THERAPEUTICS INC	5,360	84,931	47,114	
REXEL SA	23,542	437,753	644,161	
REXFORD INDUSTRIAL REALTY IN	8,417	502,656	472,194	
RGB INTERNATIONAL BHD	407,800	30,670	23,962	
RICHTER GEDEON NYRT	520	13,389	13,150	
RICOH CO LTD	2,300	18,884	17,668	
RIDLEY CORP LTD	9,284	11,483	17,421	
RIKEN TECHNOS CORP	5,700	23,341	34,205	
RION CO LTD	1,100	17,639	19,030	
RISO KAGAKU CORP	1,300	22,744	24,482	

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(b) ISSUER	(c) - DESCRIPTION COMMON STOCK		(d)	(e)
	NO. OF SHARES	COST	CURRENT VALUE	
RITHM CAPITAL CORP	13,300	110,457	142,044	
ROBLOX CORP CLASS A	23,605	830,401	1,079,221	
ROCKWELL AUTOMATION INC	1,499	421,267	465,410	
ROCKWOOL A/S B SHS	2,537	630,480	742,865	
ROIVANT SCIENCES LTD	23,442	247,200	263,254	
ROLAND DG CORP	2,900	62,973	74,979	
ROMANDE ENERGIE HOLDING REG	675	37,121	44,110	
ROOTS CORP	8,200	23,628	15,547	
RUSSEL METALS INC	19,700	457,099	672,752	
RVRC HOLDING AB	3,995	15,039	23,884	
RXO INC	9,695	190,067	225,506	
RYAN SPECIALTY HOLDINGS INC	13,472	515,656	579,565	
RYDER SYSTEM INC	3,800	310,814	437,228	
S+C ENGINE GROUP LTD	10,085	13,398	164	
SAAB AB B	204	7,156	12,299	
SABRA HEALTH CARE REIT INC	9,100	132,451	129,857	
SAERON AUTOMOTIVE CORP	9,808	57,191	31,224	
SAF HOLLAND SE	1,133	14,891	19,024	
SAHA UNION CORP PCL NVDR	16,400	14,832	15,496	
SAIA INC	4,002	1,203,824	1,753,756	
SAKAI HEAVY INDUSTRIES LTD	500	17,519	21,244	
SALIM IVOMAS PRATAMA TBK PT	499,900	17,091	12,208	
SALLY BEAUTY HOLDINGS INC	11,300	107,746	150,064	
SALZGITTER AG	4,166	111,932	128,855	
SAM JUNG PULP CO LTD	220	8,956	4,262	
SAM YOUNG ELECTRONICS CO LTD	2,981	33,683	19,836	
SAMSUNG ELECTRONICS CO LTD	48,218	1,723,332	2,938,981	
SAMSUNG PUBLISHING CO LTD	1,115	12,747	17,272	
SAMUDERA INDONESIA TBK PT	946,000	30,869	19,661	
SAMUDERA SHIPPING LINE LTD	158,400	100,275	79,254	
SANDNES SPAREBANK	2,222	16,598	19,998	
SANIX INC	10,200	26,407	22,790	
SANKO METAL INDUSTRIAL CO	700	21,162	22,468	
SANKYO CO LTD	1,700	75,748	99,157	
SANLORENZO SPA/AMEGLIA	1,323	41,931	61,893	
SANTEN PHARMACEUTICAL CO LTD	2,900	27,181	28,901	
SANYO DENKI CO LTD	500	24,902	22,237	
SANYO SHOKAI LTD	2,200	35,759	37,015	
SAPIENS INTERNATIONAL CORP	394	11,995	11,402	
SAPPI LIMITED	5,409	13,195	13,073	
SARAMIN CO LTD	1,412	18,199	19,175	
SARAS SPA	173,480	266,486	309,682	
SARAWAK OIL PALMS BERHAD	31,700	19,428	17,868	
SATO HOLDINGS CORP	1,800	24,973	27,017	
SATO SHOJI CORP	5,900	47,316	60,975	
SAXA HOLDINGS INC	700	14,994	12,825	
SB TECHNOLOGY CORP	2,500	41,890	42,116	
SCHAEFFLER AG PREF	2,673	20,463	16,521	
SCHULZ SA PREF	39,800	47,123	57,763	
SCHWAB (CHARLES) CORP	20,196	1,089,888	1,389,485	
SCIENCE APPLICATIONS INTE	3,000	319,161	372,960	
SCREEN HOLDINGS CO LTD	600	22,849	50,773	
SCS GROUP PLC	4,380	13,378	14,741	
SEAH HOLDINGS CORP	154	13,964	12,914	
SECTRA AB B SHS	7,160	34,081	128,069	
SECURE ENERGY SERVICES INC	2,700	15,774	19,309	

NORTH ATLANTIC STATES CARPENTERS PENSION FUND

SCHEDULE OF CORPORATE STOCK - COMMON

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EIN 51-6040899, 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
SECUREWORKS CORP A	171,343	1,721,378	1,264,511
SEED CO LTD/TOKYO	2,800	11,833	16,226
SEIKA CORP	1,000	14,564	20,939
SEIKAGAKU CORP	16,700	176,978	90,145
SEKISUI JUSHI CORP	3,300	52,650	58,191
SEKISUI KASEI CO LTD	5,700	18,370	19,650
SELAMAT SEMPURNA PT	93,500	13,327	12,115
SELECT MEDICAL HOLDINGS CORP	3,356	82,864	78,866
SENSORTEK TECHNOLOGY CORP	3,000	43,741	42,375
SERVICE PROPERTIES TRUST	6,000	68,940	51,240
SEVERFIELD PLC	23,029	25,625	18,671
SGC E TEC E+C CO LTD	358	12,236	5,359
SHELL PILIPINAS CORP	47,800	17,747	9,443
SHELL PLC	53,909	1,305,389	1,767,216
SHENG YU STEEL CO LTD	13,000	11,716	12,390
SHIH HER TECHNOLOGIES INC	11,000	22,082	30,322
SHIKOKU ELECTRIC POWER CO	3,200	22,440	23,005
SHIN YOUNG WACOAL INC	580	7,303	4,251
SHINAGAWA REFRACTORIES CO	2,000	10,719	24,386
SHINE JUSTICE LTD	11,463	8,663	5,397
SHINMAYWA INDUSTRIES LTD	3,700	28,023	30,864
SHINNIHON CORP	2,800	24,022	22,562
SHINY BRANDS GROUP CO LTD	6,902	35,180	64,206
SHINYOUNG SECURITIES CO LTD	285	14,324	13,167
SHOCKWAVE MEDICAL INC	6,158	1,349,786	1,173,468
SHOPIFY INC CLASS A	20,286	765,453	1,580,279
SHOUGANG FUSHAN RESOURCES GR	362,000	88,047	133,515
SHUTTERSTOCK INC	9,404	522,422	454,025
SIEGFRIED HOLDING AG REG	57	19,714	58,209
SIERRA RUTILE HOLDINGS LTD	11	4	1
SIFY TECHNOLOGIES SPON ADR	9,854	18,418	18,427
SIGMA HEALTHCARE LTD	212,636	94,567	145,818
SIGMA HEALTHCARE LTD	114,938	-	23,921
SIMPLO TECHNOLOGY CO LTD	2,000	19,707	27,370
SIMS LTD	37,251	318,982	395,507
SINDOH CO LTD	2,169	56,058	55,071
SING INVESTMENTS + FINANCE	9,300	6,243	7,050
SINKO INDUSTRIES LTD	1,400	27,107	26,514
SINOPEC ENGINEERING GROUP H	29,500	16,964	15,112
SINOSTAR PEC HOLDINGS LTD	41,700	13,296	4,299
SITIME CORP	1,303	112,336	159,070
SIX FLAGS ENTERTAINMENT CORP	79,299	2,135,794	1,988,819
SKECHERS USA INC CL A	10,602	362,872	660,929
SKJERN BANK	1,322	19,422	28,112
SKY NETWORK TELEVISION LTD	65,472	84,836	114,412
SKY PERFECT JSAT HOLDINGS	3,500	16,150	17,329
SKYLINE CHAMPION CORP	7,784	243,171	578,040
SKYWORKS SOLUTIONS INC	3,600	387,420	404,712
SKYWORTH GROUP LTD	444,000	128,746	169,445
SLEEP NUMBER CORP	4,842	451,807	71,807
SMARTGROUP CORP LTD	2,133	12,207	12,692
SMITHS NEWS PLC	32,670	20,606	22,240
SMK CORP	1,900	33,195	34,528
SNAP ON INC	660	112,952	190,634
SNT DYNAMICS CO LTD	4,712	19,799	52,685
SOCIETE POUR L INFORMATIQUE	239	12,268	18,428

NORTH ATLANTIC STATES CARPENTERS PENSION FUND

SCHEDULE OF CORPORATE STOCK - COMMON

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EIN 51-6040899, 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	
SODA NIKKA CO LTD	8,800	38,489	66,914	
SODEXO SA	7,420	666,679	816,536	
SOFT WORLD INTL CORP	1,000	4,124	4,904	
SOFTCREATE HOLDINGS CORP	3,400	38,869	41,481	
SOKEN CHEMICAL + ENGINEERING	1,894	27,543	32,458	
SOLAR A/S B SHS	226	13,626	15,573	
SOLARWINDS CORP	4,103	74,425	51,246	
SOMBOON ADV TECH NVDR	179,100	116,942	94,974	
SONAE	83,400	97,215	83,330	
SONIX TECHNOLOGY CO LTD	9,000	13,853	16,833	
SOUTHERN CROSS ELECTRICAL	28,612	14,186	16,302	
SOUTHWEST AIRLINES CO	23,963	1,121,451	692,051	
SP SETIA BHD	64,700	10,317	11,264	
SPAR NORD BANK A/S	986	14,847	15,575	
SPAREBANK 1 NORD NORGE	686	3,193	6,971	
SPAREBANKEN MORE CAP CERT	2,011	14,179	16,633	
SPAREBANKEN OST	218	1,497	1,078	
SPAREKASSEN SJAELLAND FYN AS	754	20,880	22,324	
SPECTRUM BRANDS HOLDINGS INC	1,965	156,483	156,748	
SPIE SA	3,497	88,399	109,322	
SPIGEN KOREA CO LTD	1,433	38,084	36,718	
SPK CORP	1,200	16,051	15,721	
SPORTON INTERNATIONAL INC	15,850	123,021	124,464	
SPOTIFY TECHNOLOGY SA	8,927	1,429,094	1,677,473	
SPROUTS FARMERS MARKET INC	11,000	292,672	529,210	
STALEXPORT AUTOSTRADY SA	10,446	12,956	8,448	
STANDEX INTERNATIONAL CORP	5,889	416,208	932,700	
STAR MICRONICS CO LTD	1,900	26,949	23,167	
STAR PETROLEUM REFINING PCL	525,300	122,953	126,968	
STARRAGTORNOS GROUP AG	178	12,589	10,490	
STARTS CORP INC	600	15,727	12,474	
STATE STREET CORP	6,000	376,902	464,760	
STEALTHGAS INC	13,250	69,263	85,595	
STEEL DYNAMICS INC	3,500	129,045	413,350	
STELCO HOLDINGS INC	14,666	202,097	558,233	
STELLA JONES INC	4,200	160,065	245,642	
STHREE PLC	572	2,385	3,048	
STIFEL FINANCIAL CORP	5,600	331,966	387,240	
STOLT NIELSEN LTD	791	24,647	24,262	
STONEX GROUP INC	16,650	557,919	1,229,270	
STRABAG SE BR	1,779	62,484	81,358	
STRIDE INC	26,272	625,791	1,559,769	
STROEER SE + CO KGAA	208	12,221	12,350	
SUBSEA 7 SA	2,116	28,556	30,878	
SUEDZUCKER AG	5,268	82,701	82,576	
SUGIMOTO + CO LTD	1,100	14,039	17,423	
SUMBER TANI AGUNG RESOURCES	356,800	19,866	21,088	
SUMITOMO PHARMA CO LTD	15,300	137,761	50,573	
SUNNEXTA GROUP INC	4,200	38,413	28,213	
SUPALAI PCL NVDR	25,900	16,228	14,114	
SUPER MICRO COMPUTER INC	1,636	166,042	465,049	
SUPERNUS PHARMACEUTICALS INC	11,647	394,109	337,064	
SURIA CAPITAL HOLDINGS BHD	97,900	30,093	41,120	
SUZUKEN CO LTD	3,300	99,857	109,290	
SWATCH GROUP AG/THE BR	332	91,954	90,174	
SWISSQUOTE GROUP HOLDING REG	544	121,082	132,243	

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(a) NOT APPLICABLE

(b) ISSUER	(c) - DESCRIPTION COMMON STOCK		(d)	(e)
	NO. OF SHARES	COST	CURRENT VALUE	
SYARIKAT TAKAFUL MALAYSIA KE	67,700	49,201	54,514	
SYLVAMO CORP	6,600	311,591	324,126	
SYLVANIA PLATINUM LTD	13,072	8,244	12,665	
SYNERGIE SA	704	26,194	27,374	
SYNOPSIS INC	4,192	895,903	2,158,503	
SYNOVUS FINANCIAL CORP	8,500	206,933	320,025	
SYSTEM RESEARCH CO LTD	700	12,011	14,359	
SYSTEM SUPPORT INC	1,200	15,556	16,402	
SYSTEMS ENGINEERING CONSULTA	800	23,820	29,054	
SYSTEX CORP	8,000	26,879	29,195	
TA ANN HOLDINGS BERHAD	23,300	20,581	18,559	
TAALERI OYJ	5,732	67,533	56,923	
TAEKWANG INDUSTRIAL CO LTD	23	13,397	10,894	
TAISOL ELECTRONICS CO LTD	11,000	17,927	24,086	
TAIWAN PCB TECHVEST CO LTD	35,000	47,985	49,380	
TAKANO CO LTD	2,700	19,110	18,003	
TAKARA + CO LTD	1,200	18,939	23,161	
TAKARA BIO INC	1,000	11,627	8,881	
TAKASAGO INTERNATIONAL CORP	800	19,014	19,804	
TAKE TWO INTERACTIVE SOFTWARE	5,050	618,373	812,798	
TAKEUCHI MFG CO LTD	1,800	57,733	54,710	
TAMRON CO LTD	2,600	49,386	98,113	
TANSEISHA CO LTD	5,300	33,530	32,820	
TAYLOR WIMPEY PLC	14,712	24,469	27,579	
TBS ENERGI UTAMA TBK PT	346,100	13,901	6,833	
TD SYNEX CORP	8,716	662,478	937,929	
TD SYNEX CORP	1,000	76,070	107,610	
TECAN GROUP AG REG	365	110,156	148,923	
TECHNIP ENERGIES NV	3,897	84,896	91,090	
TECHNO MEDICA CO LTD	7,000	108,122	109,831	
TECHNOLOGY ONE LTD	9,033	87,760	94,736	
TECHTARGET	4,197	270,755	146,307	
TEGNA INC	13,600	193,907	208,080	
TEIKOKU ELECTRIC MFG CO LTD	2,000	23,577	41,807	
TEIKOKU TSUSHIN KOGYO CO LTD	2,300	29,785	33,037	
TELCOWARE CO LTD	1,835	23,098	14,220	
TELEDYNE TECHNOLOGIES INC	1,995	375,343	890,349	
TELEPHONE AND DATA SYSTEMS	12,529	161,835	229,907	
TELESTE OYJ	2,368	18,167	7,063	
TELEVISION FRANCAISE (T.F.1)	48	355	378	
TELSYS LTD	431	28,087	28,223	
TEMENOS AG REG	9,766	771,421	907,618	
TEMPO SCAN PACIFIC TBK PT	131,200	14,911	15,636	
TENET HEALTHCARE CORP	11,449	697,933	865,201	
TERASAKI ELECTRIC CO LTD	2,083	20,824	26,285	
TERRACOM LTD	11	6	3	
TEXTRON INC	8,690	554,254	698,850	
TEXWINCA HOLDINGS LTD	260,000	53,182	31,965	
TGS ASA	889	13,098	11,572	
THAI OIL PCL NVDR	75,226	112,237	118,462	
THAI STANLEY ELECTRIC PUB CO	4,200	21,459	22,826	
THAI WAH PCL NVDR	99,500	16,482	11,602	
THANTAWAN INDUSTRY PU NVDR	8,300	10,107	7,234	
THE CIGNA GROUP	3,000	616,899	898,350	
THOR INDUSTRIES INC	2,000	188,858	236,500	
THRACE PLASTICS HOLDING AND	3,138	10,342	14,524	

NORTH ATLANTIC STATES CARPENTERS PENSION FUND

SCHEDULE OF CORPORATE STOCK - COMMON

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(a) NOT APPLICABLE

(b) ISSUER	(c) - DESCRIPTION COMMON STOCK	(d)	(e)
	NO. OF SHARES	COST	CURRENT VALUE
THREE A RESOURCES BHD	64,900	16,553	11,794
THUNGELA RESOURCES LTD	25,294	256,692	205,851
THYSSENKRUPP AG	25,953	197,411	180,959
TIDEWATER INC	13,910	655,974	1,003,050
TIGERS POLYMER CORP	7,200	45,613	44,176
TIME WATCH INVESTMENTS LTD	90,000	12,074	5,360
TIMKEN CO	3,500	227,093	280,525
TIONG WOON CORP HLDG LTD	12,000	12,279	4,185
TIPTREE INC	93,431	1,210,258	1,771,452
TITAN CEMENT INTERNATIONAL T	1,156	19,114	27,136
TKO GROUP HOLDINGS INC	14,252	776,932	1,162,678
TOBA INC	700	15,900	16,882
TOBII AB	212	227	124
TOBISHIMA CORP	5,700	51,590	52,965
TOFU RESTAURANT CO LTD	2,000	12,008	17,660
TOHO SYSTEM SCIENCE CO LTD	2,300	19,248	20,328
TOKYO SEIMITSU CO LTD	300	12,032	18,452
TOKYO TEKKO CO LTD	2,000	26,574	58,519
TOLI CORP	26,500	62,179	59,962
TOMSON GROUP LTD	50,000	13,201	10,501
TOMTOM NV	219	1,652	1,545
TONAMI HOLDINGS CO LTD	500	13,719	16,013
TONGDA GROUP HOLDINGS LTD	1,060,000	60,620	13,982
TOP ENGINEERING CO LTD	1,886	15,260	8,069
TOPPS TILES PLC	15,620	15,988	9,956
TOPY INDUSTRIES LTD	1,400	22,044	25,372
TOREX GOLD RESOURCES INC	20,178	157,800	223,724
TORII PHARMACEUTICAL CO LTD	1,400	35,265	35,303
TORM PLC A	430	12,667	13,011
TOTAL ENERGY SERVICES INC	14,229	54,946	81,580
TOTALENERGIES SE	13,512	736,174	919,444
TOTO LTD	1,700	46,747	44,773
TOWA BANK LTD/THE	1,300	9,177	5,588
TOYO ENGINEERING CORP	8,900	39,899	49,683
TOYO MACHINERY + METAL CO	1,300	7,065	6,326
TRACTOR SUPPLY COMPANY	2,229	295,936	479,302
TRADEWEB MARKETS INC CLASS A	16,695	959,408	1,517,242
TRANS POWER MARINE TBK PT	394,000	16,736	18,041
TRANSUNION	5,843	371,722	401,473
TRATON SE	4,367	91,386	102,848
TRAVEL LEISURE CO	12,738	445,291	497,928
TREX COMPANY INC	19,593	1,500,721	1,622,104
TRICAN WELL SERVICE LTD	10,800	36,168	33,745
TRIPLE FLAG PRECIOUS MET	102,927	1,334,861	1,369,958
TRIVAGO NV ADR	7,635	56,519	18,629
TROAX GROUP AB	1,081	19,588	26,559
TSANN KUEN ENTERPRISE CO LTD	18,606	25,759	23,674
TSC AUTO ID TECHNOLOGY CO LT	4,399	32,093	34,615
TST GROUP HOLDING LTD	800	3,380	3,310
TSUTSUMI JEWELRY CO LTD	800	11,498	12,972
TUNAS BARU LAMPUNG TBK PT	458,700	20,356	20,705
TURKIYE SIGORTA AS	16,168	18,573	22,204
TV ASAHI HOLDINGS CORP	1,100	12,687	12,539
TV TOKYO HOLDINGS CORP	600	8,009	12,746
TWIST BIOSCIENCE CORP	11,448	382,527	421,973
TXC CORP	4,000	12,890	12,851

NORTH ATLANTIC STATES CARPENTERS PENSION FUND

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(a) NOT APPLICABLE

(b)	(c) - DESCRIPTION COMMON STOCK	(d)	(e)
ISSUER	NO. OF SHARES	COST	CURRENT VALUE
TYK CORP	6,900	17,511	20,899
TYLER TECHNOLOGIES INC	4,129	1,461,979	1,726,417
U BLOX HOLDING AG	438	46,595	51,989
UBS GROUP AG REG	92,548	1,425,144	2,869,961
UCHI TECHNOLOGIES BHD	23,100	15,535	18,651
UFP INDUSTRIES INC	5,792	337,630	727,186
UFP TECHNOLOGIES INC	1,616	259,126	278,017
UGI CORP	8,300	302,353	204,180
ULLICO INC	93,098	2,327,450	3,262,154
ULS GROUP INC	400	12,093	12,271
UNIMOT SA	934	21,388	29,453
UNION AUCTION PCL NVDR	45,100	12,250	15,063
UNION TOOL CO	500	11,563	11,846
UNIPAR CARBOCLORO SA ORD	3,150	55,603	45,646
UNIPOL GRUPPO SPA	2,110	11,807	12,032
UNIPRES CORP	5,800	48,760	39,207
UNIRITA INC	1,100	17,671	14,879
UNITED AIRLINES HOLDINGS INC	9,400	398,476	387,844
UNITED RENTALS INC	600	109,451	344,052
UNITED THERAPEUTICS CORP	2,976	700,609	654,393
UNITED THERAPEUTICS CORP	1,400	145,635	307,846
UNITI GROUP INC	25,000	311,977	144,500
UNIVANICH PALM OIL PCL NVDR	75,800	18,022	18,210
UNIVERSAL HEALTH SERVICES B	1,800	201,141	274,392
UNTRADE.CECEP COSTIN	150,000	22,108	-
US CELLULAR CORP	12,664	368,422	526,063
USERJOY TECHNOLOGY CO LTD	26,656	81,689	67,746
USU SOFTWARE AG	933	28,583	17,366
UTAH MEDICAL PRODUCTS INC	2,749	247,401	231,521
VAIL RESORTS INC	2,180	528,781	465,365
VAISALA OYJ A SHS	309	14,559	13,551
VALARIS LTD	7,432	393,045	509,612
VALERO ENERGY CORP	3,400	165,877	442,000
VALLOUREC SA	932	12,303	14,439
VAN DE VELDE NV	2,373	94,176	88,470
VAN LANSCHOT KEMPEN NV	4,111	114,129	127,835
VEDAN INTERNATIONAL HOLDINGS	332,000	42,117	20,621
VEEVA SYSTEMS INC CLASS A	12,624	1,641,653	2,430,372
VENTEC INTERNATIONAL GROUP C	14,000	39,878	41,146
VENTIA SERVICES GROUP PTY LT	15,966	27,350	34,208
VERISK ANALYTICS INC	4,195	812,705	1,002,018
VERIZON COMMUNICATIONS INC	28,500	1,678,485	1,074,450
VETOQUINOL SA	67	2,613	7,579
VETROPACK HOLDING REGISTERED	479	20,032	22,253
VIASAT INC	22,638	719,523	632,732
VIATRIS INC	11,165	179,219	120,917
VIEMED HEALTHCARE INC	2,396	20,787	18,809
VIEMED HEALTHCARE INC	184,062	1,352,761	1,444,887
VIENNA INSURANCE GROUP AG	1,102	30,442	32,259
VILLEROY + BOCH AG PREF	1,404	24,887	27,762
VINCENT MEDICAL HOLDINGS LTD	67,113	19,577	3,309
VISANG EDUCATION INC	1,680	14,033	7,070
VISHAY INTERTECHNOLOGY INC	6,300	130,473	151,011
VISTA ENERGY SAB DE CV	993	31,095	29,303
VISTRA CORP	19,191	434,607	739,237
VISTRA CORP	30,600	624,100	1,178,712

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(a) NOT APPLICABLE

(b)	(c) - DESCRIPTION COMMON STOCK	(d)	(e)
ISSUER	NO. OF SHARES	COST	CURRENT VALUE
VITAL KSK HOLDINGS INC	2,700	11,921	19,994
VITESSE ENERGY INC	52,712	1,212,044	1,153,866
VITESSE ENERGY INC	812	5,942	17,775
VONTIER CORP	19,924	594,348	688,374
VOXEL SA	1,378	17,134	27,544
VOYA FINANCIAL INC	2,200	129,382	160,512
VRG SA	19,005	11,885	16,433
VZ HOLDING AG	276	28,141	32,202
WAGNERS HOLDING CO LTD	396	614	270
WAH HONG INDUSTRIAL CORP	12,000	12,117	13,626
WAJAX CORP	5,200	79,382	119,372
WALGREENS BOOTS ALLIANCE INC	5,700	227,316	148,827
WALLENIOUS WILHELMSSEN ASA	1,826	6,376	16,002
WEATHERFORD INTERNATIONAL PL	6,117	556,980	598,426
WEBJET LTD	12	58	60
WEIBO CORP SPON ADR	14,896	238,027	163,111
WELLCALL HOLDINGS BHD	83,900	20,950	30,492
WELLS FARGO + CO	25,700	1,076,056	1,264,954
WESCO INTERNATIONAL INC	5,104	862,057	887,484
WEST PHARMACEUTICAL SERVICES	8,041	1,879,042	2,831,397
WESTAIM CORP/THE	4,500	11,882	12,832
WESTERN FOREST PRODUCTS INC	66,600	94,954	35,861
WESTROCK CO	1,600	69,648	66,432
WEX INC	3,904	239,040	759,523
WHIRLPOOL CORP	3,500	659,689	426,195
WHITE MOUNTAINS INSURANCE GP	1,500	1,364,779	2,257,515
WHITECAP RESOURCES INC	1,700	14,677	11,436
WHITEHAVEN COAL LTD	56,135	92,846	284,980
WIENERBERGER AG	2,847	78,015	95,040
WILH WILHELMSSEN HOLDING A	620	12,993	22,253
WILL GROUP INC	4,600	52,569	37,719
WILLDAN GROUP INC	9,192	375,362	197,628
WINGSTOP INC	2,675	438,978	686,352
WINMATE INC	9,000	37,113	35,923
WIX.COM LTD	6,431	508,328	791,142
WIX.COM LTD	3,500	453,665	430,570
WNS HOLDINGS LTD ADR	10,163	777,830	642,302
WNS HOLDINGS LTD ADR	22,679	1,367,382	1,433,313
WORLD HOLDINGS CO LTD	3,800	67,669	73,531
WORLD KINECT CORP	8,500	225,361	193,630
WR BERKLEY CORP	10,771	664,818	761,722
WT MICROELECTRONICS CO LTD	12,000	44,014	43,988
X LEGEND ENTERTAINMENT CO LT	12,000	33,290	23,929
XEROX HOLDINGS CORP	9,400	199,863	172,302
XINHUA WINSHARE PUBLISHING H	44,000	37,970	39,162
XIWANG SPECIAL STEEL CO LTD	589,000	127,704	754
XPO INC	9,695	307,392	849,185
XPS PENSIONS GROUP PLC	20,828	50,308	61,865
XYLEM INC	4,206	468,892	480,998
YALLA GROUP LTD	86	441	527
YAMADA CONSULTING GROUP CO L	1,400	15,229	16,991
YAMAICHI ELECTRONICS CO LTD	3,800	51,983	52,183
YANGZIJANG FINANCIAL HOLDIN	184,200	99,499	45,383
YANGZIJANG SHIPBUILDING	398,900	453,627	450,581
YELLOW PAGES LTD/CANADA	1,175	5,041	10,043
YOSSIX HOLDINGS CO LTD	900	14,968	17,351

NORTH ATLANTIC STATES CARPENTERS PENSION FUND

SCHEDULE OF CORPORATE STOCK - COMMON

DECEMBER 31, 2023

EIN 51-6040899, 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
YOUNGOV PLC	5,325	31,213	80,102
YOUNG POONG CORPORATION	141	78,820	56,492
YOUNGONE CORP	716	22,407	25,351
YOUNGONE HOLDINGS CO LTD	1,116	47,912	67,589
YPSOMED HOLDING AG REG	125	37,415	45,001
YTL POWER INTERNATIONAL BHD	108,300	28,047	59,866
YURTEC CORP	4,000	24,475	31,891
YUSHIN PRECISION EQUIPMENT	4,800	38,405	22,710
ZAOH COMPANY LTD	700	11,936	12,080
ZEDA LIMITED	9,650	6,785	6,728
ZENGAME TECHNOLOGY HOLDING	118,000	12,178	85,532
ZENITAKA CORP	500	12,433	14,186
ZHONGTAI FUTURES CO LTD	270,000	45,987	20,401
ZIFF DAVIS INC	13,823	983,260	928,767
ZIMPLATS HOLDINGS LTD	706	7,543	10,492
ZIONS BANCORP NA	7,000	221,120	307,089
ZSCALER INC	4,385	522,097	971,541
ZYXEL GROUP CORP	16,000	19,725	26,462
ARA CORE PROPERTY FUND - CORPORATE STOCK - COMMON	-	80,222,206	86,363,391
BRIGADE HIGH YIELD FUND LP - CORPORATE STOCK - COMMON	-	1,060,017	1,171,593
ENTRUST CAPITAL DIVERSIFIED FUND LTD CLASS X SERIES 09/30/2017 - CORPORATE STOCK - COMMON	-	958,574	55,339
ENTRUST CAPITAL DIVERSIFIED FUND LTD CLASS X SERIES 12/31/2017 - CORPORATE STOCK - COMMON	-	960,849	57,136
ENTRUST SPECIAL OPPORTUNITIES FUND III LTD CLASS A - CORPORATE STOCK - COMMON	-	884,378	737,912
ENTRUSTPERMAL SPECIAL OPPORTUNITIES EVERGREEN FUND LTD - CORPORATE STOCK - COMMON	-	2,576,605	2,507,558
FIRST EAGLE GLOBAL VALUE FUND LP - CORPORATE STOCK - COMMON	-	40,315,374	47,843,278
GROSVENOR OPPORTUNISTIC CREDIT FUND III LTD - CORPORATE STOCK - COMMON	-	243,387	331,251
GROSVENOR OPPORTUNISTIC CREDIT FUND IV LTD - CORPORATE STOCK - COMMON	-	291,421	341,331
HAMILTON LANE PE OFF FUND VIII - CORPORATE STOCK - COMMON	-	71,277	107,842
SIGULER GUFF DISTRESSED RE OPPS FUND II - CORPORATE STOCK - COMMON	-	214,158	214,411
		<u>\$ 489,557,794</u>	<u>\$ 580,403,423</u>

HOLDINGS OF CERTAIN INVESTMENTS WERE DETERMINED TO BE PLAN ASSETS FOR FORM 5500 PURPOSES AND ARE SEPARATELY IDENTIFIED HERE BASED ON THE ALLOCATION OF UNDERLYING ASSETS PROVIDED BY THE INVESTMENT MANAGER, AS OF THE DATE OF THEIR LATEST AUDITED FINANCIAL STATEMENTS.

NORTH ATLANTIC STATES CARPENTERS PENSION FUND

SCHEDULE OF PARTNERSHIPS/JOINT VENTURE INTERESTS

DECEMBER 31, 2023

EIN 51-6040899, PLAN NO. 001

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

(a) NOT APPLICABLE	(b)	(c) - DESCRIPTION PARTNERSHIPS	(d)	(e)
	ISSUER		COST	CURRENT VALUE
	ABS EMERGING MARKETS STRATEGIC PORTFOLIO LP OPTION			
	IB - UNRESTRICTED		\$ 45,000,000	\$ 52,786,227
	ACCOMPLICE FORTUITY POOL LP		3,300,000	6,305,491
	ACCOMPLICE FUND I LP		1,767,529	8,328,318
	ACCOMPLICE FUND II (PE) LP		-	9,224,126
	ACCOMPLICE FUND III LP		4,700,000	6,246,169
	ACCOMPLICE FUND IV LP		7,488,000	7,507,603
	ACTIS EMERGING MARKETS 3 LP		140,082	11,503
	ACTIS ENERGY 4 LP		-	1,298,752
	ACTIS ENERGY 5 LP		11,444,195	9,755,115
	AEW PARTNERS VI LP		-	131,120
	ALINDA INFRASTRUCTURE FUND II LP		-	33,460
	ALTARIS CONSTELLATION PARTNERS IV LP		366,175	1,665,997
	ALTARIS HEALTH PARTNERS IV LP		149,933	4,517,470
	ARA FUND II LP		23,740,813	29,506,684
	ARA FUND III LP		3,665,021	3,145,691
	ARES ENERGY INVESTORS FUND V LP		1,775,345	8,749,283
	ATLAS VENTURE FUND IX LP		-	6,180,693
	ATLAS VENTURE FUND VIII LP		-	4,090,904
	ATLAS VENTURE FUND X LP		-	2,899,734
	ATLAS VENTURE FUND XI LP		2,187,004	6,310,817
	ATLAS VENTURE FUND XII LP		5,540,400	7,093,493
	ATLAS VENTURE FUND XIII LP		2,095,501	3,301,131
	ATLAS VENTURE OPPORTUNITY FUND I LP		3,001,472	3,933,230
	ATLAS VENTURE OPPORTUNITY FUND II LP		1,437,623	3,000,447
	AUDAX MEZZANINE PARTNERS III LP		-	84,818
	AUDAX PRIVATE EQUITY FUND IV LP		-	3,241,362
	AUGUST EQUITY PARTNERS V A LP		8,219,683	11,394,473
	BASALT INFRASTRUCTURE PARTNERS II A LP		4,496,924	11,689,100
	BASALT INFRASTRUCTURE PARTNERS III A LP		32,335,431	37,772,271
	BASALT INFRASTRUCTURE PARTNERS IV A LP		4,537,466	4,368,597
	BCP INFRASTRUCTURE FUND LP		7,700,373	8,350,467
	BLACKSTONE INFRASTRUCTURE PARTNERS LP		34,497,341	46,070,138
	BLACKSTONE INFRASTRUCTURE PARTNERS V FEEDER LP		33,255,608	56,012,642
	CAPITAL INTERNATIONAL PRIVATE EQUITY FUND V LP		101,317	3,224
	CB OP AGGREGATOR I II & II-B III VI LP		1,216,146	1,314,634
	CHARLESBANK EQUITY FUND IX LP		1,806,964	5,249,689
	CHARLESBANK EQUITY FUND VII LP		-	8,192
	CHARLESBANK EQUITY FUND VIII LP		221,341	2,578,991
	CHARLESBANK EQUITY FUND X LP		4,367,856	5,364,132
	CHEQUERS CAPITAL XVI LP		-	247,507
	CHEQUERS CAPITAL XVII LP		1,122,459	3,725,276
	CITIC CAPITAL CHINA PARTNERS 3 LP		1,218,152	2,321,871
	CLEARWATER CAPITAL PARTNERS FUND III LP		71,739	169,426
	CLIMATE ADAPTIVE INFRASTRUCTURE FUND LP		18,610,683	22,023,742
	CORTEN REAL ESTATE FUND II LP		6,031,088	7,249,898
	CUSTOM CO-INVESTMENT FUND 2022 LP		9,919,026	10,143,642
	DBAG FUND VI (GUERNSEY) LP		138,353	497,872
	DBAG FUND VII B SCSP		3,586,059	5,019,668
	EIF US POWER FUND IV LP		2,873,492	3,528,965
	ENCAP ENERGY CAPITAL FUND IX LP		-	1,832,490
	ENCAP ENERGY CAPITAL FUND VIII LP		1,667,904	1,769,069
	ENCAP ENERGY CAPITAL FUND X LP		48,949	5,818,875
	ENCAP ENERGY CAPITAL FUND XI LP		7,204,660	16,606,948
	ENERGY VENTURES IV LP		930,016	308,219
	FELICIS VENTURES IX LP		1,000,000	920,797
	FIRST RESERVE FUND XI LP		718,401	706

NORTH ATLANTIC STATES CARPENTERS PENSION FUND

SCHEDULE OF PARTNERSHIPS/JOINT VENTURE INTERESTS

DECEMBER 31, 2023

EIN 51-6040899, PLAN NO. 001

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

(a) NOT APPLICABLE	(b)	(c) - DESCRIPTION PARTNERSHIPS	(d) COST	(e) CURRENT VALUE
	ISSUER			
	FOUNDATION CAPITAL LEADERSHIP FUND III LP		3,233,194	3,171,743
	FOUNDATION CAPITAL X LP		5,212,900	5,352,264
	FS EQUITY PARTNERS VIII LP		9,274,450	14,573,969
	GAMUT INVESTMENT FUND I LP		3,882,080	6,296,816
	GEM REALTY FUND V LP		2,122,561	3,547,729
	GREEN CITIES III LP		6,908,662	2,624,476
	GREEN CITIES IV LP		14,046,184	9,696,682
	GREEN CITIES V LP		390,989	8,832
	GILDE BUY OUT FUND IV LP		-	62,510
	GLOBAL INFRASTRUCTURE PART IV-A/B LP		25,275,927	27,499,999
	GLOBAL INFRASTRUCTURE PARTNERS - B LP		-	29,168
	GLOBAL INFRASTRUCTURE PARTNERS II-B FEEDER FUND LP		-	4,517,715
	GLOBAL INFRASTRUCTURE PARTNERS III-A/B LP		7,176,641	14,635,792
	GLOBAL INFRASTRUCTURE PARTNERS V-A/B LP		3,485,934	3,481,846
	GLOBAL RENEWABLE POWER INFRASTRUCTURE FUND III (B) LP		27,332,340	31,601,652
	GRAIN COMMUNICATIONS OPPORTUNITY FUND II LP		20,332,473	32,495,946
	GRAIN COMMUNICATIONS OPPORTUNITY FUND III LP		26,772,181	23,562,653
	GRAIN COMMUNICATIONS OPPORTUNITY FUND IV LP		493,356	(98,090)
	GREENBRIAR EQUITY FUND VI LP		1,451,874	1,363,344
	GTIS BRAZIL REAL ESTATE FUND II LP		9,124,374	3,894,636
	GTIS REAL ESTATE OPPORTUNITIES FUND I LP		-	151,645
	HARBOURVEST DOVER ST IX CYMN		29,197	6,059,585
	HARBOURVEST DOVER ST VIII CYMN		-	513,640
	HARBOURVEST PARTNERS 2013 FD LP		-	1,805,483
	HARBOURVEST PARTNERS VIII CAYMAN BUYOUT FUND L P		-	157,791
	HARBOURVEST PARTNERS VIII CAYMAN VENTURE FUND LP		-	2,787,705
	HIDDEN HARBOR CAPITAL PARTNERS II LP		4,171,388	7,637,579
	HIG MIDDLE MARKET LBO FUND II LP		-	2,038,279
	HITECVISION VI LP		-	1,217,631
	HITECVISION VII LP		98,044	3,260,649
	HONY CAPITAL FUND V LP		626,712	335,151
	IFM GLOBAL INFRASTRUCTURE (US) LP		83,727,169	111,717,498
	INSIGHT VENTURE PARTNERS IX LP		-	13,162,182
	INSTITUTIONAL VENTURE PARTNERS XIII LP		-	154,597
	INTERCONTINENTAL BUILD REAL ESTATE INVESTMENT FUND LLC		1,869	1,672,100
	IRONSIDES CO-INVESTMENT FUND VI LP		50,824,321	64,672,686
	IRONSIDES DIRECT INVESTMENT FUND V LP		29,241,059	62,117,448
	JLL PARTNERS VI LP		6,030	33,953
	JMI EQUITY FUND VII LP		-	82,518
	JMI EQUITY FUND X LP		8,544,600	10,396,225
	JMI EQUITY FUND XI-A LP		2,020,000	2,124,794
	K4 PRIVATE INVESTORS LP		5,301,488	9,401,220
	K5 PRIVATE INVESTORS LP		4,165,326	4,789,529
	KEROGEN ENERGY FUND II LP		4,033,341	8,218,040
	KEROGEN PANDION COINVESTMENT FUND LP		4,782,806	8,621,736
	KHOSLA VENTURES III LP		-	98,336
	KHOSLA VENTURES IV LP		-	2,355,888
	KHOSLA VENTURES SEED B LP		-	793,509
	KHOSLA VENTURES SEED C LP		1,350,219	7,460,583
	KHOSLA VENTURES SEED LP		237,630	393,948
	KHOSLA VENTURES V LP		3,623,237	9,987,673
	KHOSLA VENTURES VI LP		2,707,500	6,192,543
	KPS SPECIAL SITUATIONS FUND IV LP		-	1,114,314
	KPS SPECIAL SITUATIONS FUND V LP		4,224,422	7,997,021
	LINDEN CAPITAL PARTNERS III LP		37,234	4,637,588

NORTH ATLANTIC STATES CARPENTERS PENSION FUND

SCHEDULE OF PARTNERSHIPS/JOINT VENTURE INTERESTS

DECEMBER 31, 2023

EIN 51-6040899, PLAN NO. 001

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

(a) NOT APPLICABLE	(b)	(c) - DESCRIPTION PARTNERSHIPS	(d) COST	(e) CURRENT VALUE
	ISSUER			
	LINDEN CAPITAL PARTNERS IV LP		3,337,724	7,755,224
	LINDEN CAPITAL PARTNERS V LP		7,607,079	8,502,849
	MACQUARIE CROP PARTNERS FEEDER LIMITED PARTNERSHIP		-	326,477
	MBK PARTNERS FUND III LP		700	1,741,550
	MBK PARTNERS FUND IV LP		1,578,136	3,191,785
	MESA WEST REAL ESTATE INCOME FUND IV LP		5,088,944	5,219,514
	MSOUTH EQUITY PARTNERS II LP		-	9,834
	MSOUTH EQUITY PARTNERS III LP		233,042	1,164,516
	NB STRATEGIC CO-INVESTMENT CAYMAN PARTNERS IV LP		10,130,216	13,356,311
	NORMANDY REAL ESTATE FUND III LP		2,081,941	(71,078)
	NORMANDY REAL ESTATE FUND IV LP		13,149,577	4,352,749
	NORTHSTAR MEZZANINE PARTNERS V LP		-	2,451
	OAKLEY CAPITAL FUND V		1,651,070	1,786,923
	OAKTREE OPPORTUNITIES FUND VIIIB LP		-	195,397
	OAKTREE OPPORTUNITIES FUND XB LP		4,050,000	6,225,426
	OAKTREE REAL ESTATE DEBT FUND II LP		11,015,127	6,290,056
	OCM OPPORTUNITIES FUND VII B		-	539
	OCM OPPORTUNITIES FUND VIII		-	3,257
	ONCAP II LP		-	656,086
	ONCAP IV LP		1,443,309	2,667,669
	ONCAP US III LP		-	146,455
	ONEX PARTNERS II LP		6,291	4,866
	ORION EUROPEAN REAL ESTATE FUND III LP		1,710,888	515,050
	OVP VENTURE PARTNERS VII LP		102,215	2,798,142
	PACIFIC ROAD RESOURCES FUND II LP		3,663,174	1,571,523
	PAG ASIA I FEEDER FUND LP		-	226,809
	PAG ASIA II LP		2,128,630	6,344,522
	PAG ASIA III LP		5,483,492	6,945,302
	PAINE SCHWARTZ FOOD CHAIN FUND V LP		15,312,597	26,530,365
	PAINE SCHWARTZ FOOD CHAIN FUND VI LP		8,069,704	7,881,056
	PATRIA PRIVATE EQUITY FUND VI LP		5,633,818	8,791,612
	PATRIA BRAZILIAN PRIVATE EQUITY FUND IV LP		1,001,377	1,082,463
	PATRIA BRAZILIAN PRIVATE EQUITY FUND V LP		4,015,405	8,698,954
	PIMCO DISCO ONSHORE FUND III LP		-	535,422
	PIONEER SQUARE VENTURES II		2,565,000	2,616,352
	POINT 406 VENTURES IV LP		7,928,700	10,271,311
	PRISA III LP		28,683,315	38,169,926
	RELATED REAL ESTATE FUND III LP		15,879,855	18,901,692
	RFM NEC MA LLC		2,271,630	2,729,005
	RIDGEMONT EQUITY PARTNERS I LP		-	423,242
	RIDGEMONT EQUITY PARTNERS II LP		130,525	2,412,233
	RIDGEMONT EQUITY PARTNERS III LP		3,744,269	9,965,866
	RIDGEMONT EQUITY PARTNERS IV LP		5,725,957	5,959,537
	RIDGEWOOD ENERGY OIL AND GAS FUND II LP		4,291,102	4,337,387
	RIDGEWOOD ENERGY OIL AND GAS FUND III LP		4,270,903	9,856,966
	RIDGEWOOD ENERGY OIL AND GAS FUND IV LP		10,293,650	15,903,064
	RIVER VI PARALLEL LP		-	8,943
	RIVERSIDE CAPITAL APPRECIATION FUND V LP		69,403	66,450
	RIVERSIDE EUROPE FUND IV LP		1,994	115,775
	RIVERSIDE FUND V LP		1,680,169	3,132,895
	RIVERSIDE MICRO CAP FUND I LP		-	163,519
	RIVERSIDE MICRO CAP FUND III LP		-	2,828,628
	RUBENSTEIN PROPERTIES FUND IV LP		6,584,669	1,845,858
	SCALE VENTURE PARTNERS VI LP		2,970,260	5,317,787
	SCALE VENTURE PARTNERS VII LP		3,285,974	3,023,857
	SEIDLER EQUITY PARTNERS VIII LP		150,000	(33,589)
	SENTINEL CAPITAL PARTNERS V LP		-	1,041,901

NORTH ATLANTIC STATES CARPENTERS PENSION FUND

SCHEDULE OF PARTNERSHIPS/JOINT VENTURE INTERESTS

DECEMBER 31, 2023

EIN 51-6040899, PLAN NO. 001

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

(a) NOT APPLICABLE	(b)	(c) - DESCRIPTION PARTNERSHIPS	(d)	(e)
	ISSUER		COST	CURRENT VALUE
	SENTINEL CAPITAL PARTNERS VI LP		2,687,342	5,155,034
	SENTINEL CAPITAL PARTNERS VII LP		690,385	532,037
	SILVER LAKE PARTNERS III LP		-	92,421
	SJC ONSHORE DIRECT LENDING FUND III LP		10,761,553	19,259,987
	SK CAPITAL PARTNERS V LP		7,207,489	9,127,039
	SOLAMERE CAPITAL AF III LP LP		14,273,802	26,040,988
	SOUTHERN CROSS LATIN AM FUND IV LP		3,385,075	1,995,585
	SOUTHERN CROSS LATIN AM FUND V LP		3,623,183	2,101,421
	STAR AMERICA INFRASTRUCTURE FUND LP		-	6,457,450
	STELLEX CAPITAL PARTNERS II		2,858,095	3,304,927
	STERLING GROUP PARTNERS IV LP		-	6,586,776
	STERLING GROUP PARTNERS V LP		5,899,902	7,375,155
	STG VI LP		4,630,059	5,052,337
	STG VII LP		-	(173,696)
	TA REALTY CORE PROPERTY FUND LP		24,581,071	39,224,202
	TA REALTY FUND XI LP		-	676,007
	TA REALTY VALUE-ADD FUND XIII LP		7,500,000	5,713,079
	TA XII B		-	3,745,137
	TA XIII		4,161,000	9,528,296
	TA XIV LP		9,052,000	8,825,242
	THE FOURTH CINVEN FUND		-	1,335
	THIRD ROCK VENTURES II LP		-	2,289
	THIRD ROCK VENTURES III LP		-	139,482
	THIRD ROCK VENTURES IV LP		1,197,553	2,872,893
	THIRD ROCK VENTURES V LP		4,654,984	5,477,041
	THIRD ROCK VENTURES VI LP		3,200,000	3,057,528
	TOWERBROOK INVESTORS III LP		-	3,374
	TOWERBROOK INVESTORS IV LP		21,053	2,637,150
	TRILANTIC CAPITAL PARTNERS V LP		-	1,423,659
	TRILANTIC CAPITAL PARTNERS VI LP		4,196,149	6,353,362
	UBS TRUMBULL PROPERTY FUND LP		29,802,164	29,335,476
	US REAL ESTATE INVESTMENT FUND LP		61,850,430	61,390,243
	VALHALLA PARTNERS II LP		21,994	53,706
	VECTOR CAPITAL V LP		2,395,698	5,439,430
	VERITAS CAPITAL FUND IV LP		-	18,678
	VERITAS CAPITAL FUND V LP		205,121	8,725,115
	VERITAS CAPITAL FUND VI LP		-	5,709,067
	VISTA EQUITY PARTNERS IV LP		5,933	1,152,817
	VISTA EQUITY PARTNERS V LP		-	7,130,690
	VISTA FOUNDATION FUND III LP		80,006	4,019,716
	VITRUVIAN INVESTMENT PARTNERSHIP II LP		-	2,760,064
	VITRUVIAN INVESTMENT PARTNERSHIP III LP		2,791,879	10,945,843
	VITRUVIAN INVESTMENT PARTNERSHIP IV LP		9,388,996	11,486,479
	VITRUVIAN INVESTMENT PARTNERSHIP V LP		759,331	549,987
	VITRUVIAN PARTNERS LP		-	808,073
	WAUD CAPITAL PARTNERS III LP		15,466	252,398
	WAUD CAPITAL PARTNERS IV LP		1,042,313	5,925,524
	WAUD CAPITAL PARTNERS V LP		10,220,061	16,104,808
	WHITE DEER ENERGY I LP		-	25,680
	WHITE DEER ENERGY II LP		5,441,381	4,557,783
	WHITE DEER ENERGY III LP		15,780,080	19,813,871
	YUCAIPA AMERICAN ALLIANCE FUND II		9,000,912	8,828,108
	YUCAIPA CORPORATE INITIATIVE FUND II LP		97,721	11,406
	ARA CORE PROPERTY FUND LP - PARTNERSHIPS		8,451,581	9,091,736
	ENTRUST SPECIAL OPPORTUNITIES FUND III LTD CLASS A - PARTNERSHIPS		5,184,858	4,280,189

NORTH ATLANTIC STATES CARPENTERS PENSION FUND
SCHEDULE OF PARTNERSHIPS/JOINT VENTURE INTERESTS

DECEMBER 31, 2023

EIN 51-6040899, PLAN NO. 001

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

(a) NOT APPLICABLE	(b)	(c) - DESCRIPTION PARTNERSHIPS	(d)	(e)
	ISSUER		COST	CURRENT VALUE
	ENTRUSTPERMAL SPECIAL OPPORTUNITIES EVERGREEN FUND LTD - PARTNERSHIPS		20,196,836	19,610,335
	EUROPEAN STRATEGIC PARTNERS 2006 B LP - PARTNERSHIPS		-	34,764
	GROSVENOR OPPORTUNISTIC CREDIT FUND III LTD - PARTNERSHIPS		97,455	131,109
	GROSVENOR OPPORTUNISTIC CREDIT FUND IV LTD - PARTNERSHIPS		493,982	585,703
	HAMILTON LANE PRIVATE EQUITY OFFSHORE FUND VIII LP - PARTNERSHIPS		3,099,056	4,727,274
	HAMILTON LANE STRATEGIC OPPORTUNITIES OFFSHORE FUND IV LP - PARTNERSHIPS		5,756,453	4,649,580
	IRONSIDES DIRECT INVESTMENT FUND IV LP - PARTNERSHIPS		-	7,331,922
	IRONSIDES PARTNERSHIP FUND IV LP - PARTNERSHIPS		-	43,931,127
	IRONSIDES PARTNERSHIP FUND V LP - PARTNERSHIPS		30,735,755	46,690,899
	PANTHEON EUROPE FUND V B LP - PARTNERSHIPS		-	523,966
	PANTHEON GLOBAL SECONDARY FUND III B LP - PARTNERSHIPS		-	4,792
	SIGULER GUFF DISTRESSED REAL ESTATE OPPORTUNITIES FUND II - PARTNERSHIPS		4,249,211	4,254,308
	SOLAMERE CAPITAL AF III A LP - PARTNERSHIPS		29,290,972	53,537,658
	SOLAMERE CAPITAL AF IV A LP - PARTNERSHIPS		<u>25,024,150</u>	<u>27,881,711</u>
			<u>\$ 1,287,048,557</u>	<u>\$ 1,903,600,161</u>

HOLDINGS OF CERTAIN INVESTMENTS WERE DETERMINED TO BE PLAN ASSETS FOR FORM 5500 PURPOSES AND ARE SEPARATELY IDENTIFIED HERE BASED ON THE ALLOCATION OF UNDERLYING ASSETS PROVIDED BY THE INVESTMENT MANAGER, AS OF THE DATE OF THEIR LATEST AUDITED FINANCIAL STATEMENTS.

NORTH ATLANTIC STATES CARPENTERS PENSION FUND

SCHEDULE OF REAL ESTATE

DECEMBER 31, 2023

EIN 51-6040899, PLAN NO. 001

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

(a) NOT APPLICABLE

(b)	(c) - DESCRIPTION REAL ESTATE	(d)	(e)
ISSUER	NO. OF SHARES	COST	CURRENT VALUE
NORTH ATLANTIC STATES CARPENTERS PENSION FUND REAL			
ESTATE INVESTMENT PROGRAM - REAL ESTATE	-	\$ 130,678,842	\$ 127,885,050
OFFICE BUILDING - WILMINGTON, MA	-	8,058,152	7,200,000
OFFICE BUILDING - HAMDEN, CT	-	1,439,574	680,000
WCP SPECIAL CORE PLUS FUND LP - REAL ESTATE	-	3,670,909	5,246,727
WCP SPECIAL CORE PLUS FUND II LP - REAL ESTATE	-	<u>12,737,567</u>	<u>21,809,932</u>
		<u>\$ 156,585,044</u>	<u>\$ 162,821,709</u>

HOLDINGS OF CERTAIN INVESTMENTS WERE DETERMINED TO BE PLAN ASSETS FOR FORM 5500 PURPOSES AND ARE SEPARATELY IDENTIFIED HERE BASED ON THE ALLOCATION OF UNDERLYING ASSETS PROVIDED BY THE INVESTMENT MANAGER, AS OF THE DATE OF THEIR LATEST AUDITED FINANCIAL STATEMENTS.

NORTH ATLANTIC STATES CARPENTERS PENSION FUND

SCHEDULE OF NON-PARTICIPANT LOANS

DECEMBER 31, 2023

EIN 51-6040899, PLAN NO. 001

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

(a) NOT APPLICABLE	(b)	(c) - DESCRIPTION NON-PARTICIPANT LOANS		(d)	(e)	
	ISSUER	INTEREST RATE	MATURITY DATE	PAR OR MATURITY / NO. OF SHARES	COST	CURRENT VALUE
	ELANCO ANIMAL HEALTH INC	6.65%	08/28/2028	350,000	\$ 375,405	\$ 362,660
	CHARLES SCHWAB CORP	6.20%	11/17/2029	175,000	175,000	183,514
	CHARTER COMM OPT LLC/CAP	4.40%	04/01/2033	75,000	74,726	69,216
	BOSTON PROPERTIES LP	6.50%	01/15/2034	69,000	68,791	72,777
	US TREASURY N/B	4.13%	08/15/2053	4,011,000	3,676,761	4,054,239
	AGILE GROUP HOLDINGS LTD			3,800	5,393	414
	ASCOM HOLDING AG REG			1,419	18,212	13,859
	BIOCRYST PHARMACEUTICALS INC			28,400	222,791	170,116
	BLUE OWL CAPITAL CORP			22,700	312,914	335,052
	BORAL LTD			32,000	79,134	117,692
	BOUSTEAD SINGAPORE LTD			2,000	1,264	1,304
	CAMTEK LTD			960	54,587	66,605
	CELLEBRITE DI LTD			6,297	40,091	54,532
	CELSIUS HOLDINGS INC			12,667	695,692	690,605
	CIVITAS RESOURCES INC			1,800	111,656	123,084
	CLEARVIEW WEALTH LTD			54,000	31,297	21,371
	CLINUVEL PHARMACEUTICALS LTD			5,232	102,946	57,121
	COLLIERS INTL GR SUBORD VOT			3,409	324,626	431,307
	EMECO HOLDINGS LTD			46,173	21,994	21,109
	ESTABLISHMENT LABS HOLDINGS			18,518	879,513	479,431
	FRONTLINE PLC			690	12,197	13,835
	FUJII SANGYO CORP			1,000	12,469	16,946
	GULF KEYSTONE PETROLEUM LTD			34,156	71,372	56,213
	HARGREAVES SERVICES PLC			4,274	26,109	22,611
	INMODE LTD			1,532	60,060	34,072
	KLINGELNBERG AG			994	22,225	19,369
	KOHL'S CORP			7,100	350,760	203,628
	MADER GROUP LTD			3,944	16,716	18,435
	MAEZAWA KASEI INDUSTRIES CO			1,000	10,304	10,817
	MAKEMYTRIP LTD			5,372	195,206	252,377
	MFE MEDIAFOREUROPE NV CL A			1,003	7,618	2,613
	MICHAEL HILL INTERNATIONAL L			35,370	34,133	21,842
	NANOSONICS LTD			10,442	33,977	31,350
	NEWBORN TOWN INC			106,400	21,782	26,435
	PERION NETWORK LTD			17,379	368,234	536,490
	PRO MEDICUS LTD			703	28,245	45,969
	QUIDELORTHO CORP			247	19,487	18,204
	REPAIRE THERAPEUTICS INC			6,576	21,328	48,005
	REVANCE THERAPEUTICS INC			15,001	237,695	131,859
	SIERRA RUTILE HOLDINGS LTD			28,575	9,963	1,872
	TELEVISION FRANCAISE (T.F.1)			2,347	17,336	18,498
	TERRACOM LTD			27,005	14,882	7,739
	THUNGELA RESOURCES LTD			3,789	38,452	30,836
	TOBII AB			10,371	11,124	6,061
	TOMTOM NV			10,712	80,802	75,554
	TORM PLC A			2,143	63,128	64,846
	UPBOUND GROUP INC			2,160	82,706	73,375
	VERONA PHARMA PLC			11,978	171,821	238,123
	VIASAT INC			88,348	2,808,039	2,469,327
	VIEMED HEALTHCARE INC			97	842	761
	WAGNERS HOLDING CO LTD			19,362	30,008	13,212
	WEBJET LTD			12,539	60,969	62,801
	YALLA GROUP LTD			8,230	42,227	50,450

NORTH ATLANTIC STATES CARPENTERS PENSION FUND

SCHEDULE OF NON-PARTICIPANT LOANS

DECEMBER 31, 2023

EIN 51-6040899, PLAN NO. 001

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

(a) NOT APPLICABLE

(b)	(c) - DESCRIPTION NON-PARTICIPANT LOANS			(d)	(e)
ISSUER	INTEREST RATE	MATURITY DATE	PAR OR MATURITY / NO. OF SHARES	COST	CURRENT VALUE
				\$ 12,255,009	\$ 11,950,533

NORTH ATLANTIC STATES CARPENTERS PENSION FUND

SCHEDULE OF COMMON/COLLECTIVE TRUST FUNDS

DECEMBER 31, 2023

EIN 51-6040899, PLAN NO. 001

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

(a)	(b)	(c) - DESCRIPTION COMMON/ COLLECTIVE TRUST FUNDS	(d)	(e)
	ISSUER	NO. OF SHARES	COST	CURRENT VALUE
	AFL CIO BUILDING INVESTMENT TRUST	1,421	\$ 10,039,787	\$ 7,739,900
	ASB ALLEGIANCE REAL ESTATE FUND	3,926,957	3,926,957	4,871,876
	BLACKROCK 0-5 YR U.S. TREASURY INFLATION PROTECTED SECURITIES FUND	9,837,394	118,000,000	51,507,351
	BLACKROCK 1-3 YR GOVERNMENT/CREDIT BOND INDEX FUND	4,373,583	50,000,000	121,075,691
	BLACKROCK EAFE EQUITY INDEX FUND	129,322	37,974,571	45,267,873
	BLACKROCK EQUITY INDEX FUND A	20,983	36,790,822	39,859,662
	BLACKROCK JPM EMBI GLBL DIV INDEX FUND C	5,804,387	59,000,000	54,289,961
	BLACKROCK MSCI EMERGING MARKETS FREE FUND	469,868	27,720,542	25,768,004
	BLACKROCK MSCI EQUITY INDEX FUND RUSSIA	26,299	-	183
	BLACKROCK RUSSELL 1000 GROWTH FUND	785,479	45,000,000	58,039,517
	BLACKROCK RUSSELL 2000 INDEX FUND A	523,577	26,716,788	39,060,668
	BLACKROCK SHORT TERM INVESTMENT FUND	43,727	43,726	43,727
	BLACKROCK U.S. DEBT INDEX FUND	707,631	57,143,491	52,918,622
	BLACKROCK U.S. TREASURY INFLATION PROTECTED SECURITIES FUND	4,704,559	115,224,181	120,127,066
	CRESCENT CAPITAL TRUST II LEVERED	13,746,128	13,746,128	18,484,051
	GQG PARTNERS EMERGING MARKETS EQUITY CIT	6,267,527	72,419,080	92,132,642
	JP MORGAN CHASE BANK STRATEGIC PROPERTY FUND	1,404,670	9,515,236	15,802,678
	NEW TOWER TRUST COMPANY MULTI EMPLOYER PROPERTY TRUST	934	5,379,306	12,199,577
*	STATE ST S&P GLOBAL NATURAL RESOURCES INDEX NL FUND	246,309	2,681,379	4,237,987
	WELLINGTON EMERGING MARKET DEBT	11,340,209	95,648,847	59,195,893
			<u>\$ 786,970,841</u>	<u>\$ 822,622,929</u>

* PARTY-IN-INTEREST

NORTH ATLANTIC STATES CARPENTERS PENSION FUND

SCHEDULE OF POOLED SEPARATE ACCOUNTS

DECEMBER 31, 2023

EIN 51-6040899, PLAN NO. 001

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

(a) NOT APPLICABLE

(b)	(c) - DESCRIPTION POOLED SEPARATE ACCOUNTS	(d)	(e)
ISSUER	UNITS	COST	CURRENT VALUE
ULLICO SEPARATE ACCOUNT J	2,092,640	\$ 31,681,159	\$ 37,271,013
		\$ 31,681,159	\$ 37,271,013

NORTH ATLANTIC STATES CARPENTERS PENSION FUND

SCHEDULE OF 103-12 INVESTMENT ENTITIES

DECEMBER 31, 2023

EIN 51-6040899, PLAN NO. 001

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

(a) NOT APPLICABLE

(b)	(c) - DESCRIPTION 103-12 INVESTMENT ENTITIES	(d)	(e)
ISSUER	NO. OF SHARES	COST	CURRENT VALUE
HARBOURVEST PARTNERS IX LP	-	\$ -	\$ 7,505,489
HARBOURVEST PARTNERS VIII BUYOUT FUND LP	-	-	207,010
HARBOURVEST PARTNERS VIII CAYMAN MEZZANINE & DISTRESSED DEBT FUND LP	-	-	55,884
HARBOURVEST PARTNERS VIII MEZZANINE & DISTRESSED DEBT FUND	-	-	40,913
HARBOURVEST PARTNERS VIII VENTURE FUND LP	-	-	1,639,119
HARDMAN JOHNSTON INTERNATIONAL EQUITY GROUP TRUST	2,025,268	90,336,399	75,301,688
HIPEP V CAYMAN US DOLLAR PARTNERSHIP FUND LP	-	-	14,308
INCOME PLUS INVESTMENT FUND	23,341	63,526	14,920
MCMORGAN INFRASTRUCTURE FUND I LP	8,884,311	8,884,311	11,770,487
NCS GROUP TRUST - GLOBAL FUND	1,702,414	44,481,042	108,507,348
PROLOAN BOND FUND LLC	10,357	19,084,103	17,644,017
RHUMBLINE QSI INDEX LLC	4,582,475	64,323,436	185,645,189
SENIOR FLOATING RATE FUND LLC	76,882,616	76,882,616	107,777,664
ULLICO INFRASTRUCTURE FUND LP	35,115,374	64,993,018	76,743,938
		<u>\$ 369,048,451</u>	<u>\$ 592,867,974</u>

NORTH ATLANTIC STATES CARPENTERS PENSION FUND

SCHEDULE OF REGISTERED INVESTMENT COMPANIES

DECEMBER 31, 2023

EIN 51-6040899, 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
AFL-CIO HOUSING INVESTMENT TRUST	56,685	\$ 64,411,574	\$ 55,193,737
COLUMBIA MID CAP INDEX FUND-INSTITUTIONAL CLASS	586	6,973	8,041
COLUMBIA SMALL CAP INDEX FUND-INSTITUTIONAL CLASS	917	16,216	21,575
DFA EMERGING MARKETS VALUE PORTFOLIO	3,233,422	99,872,843	95,159,598
FIMM GOVERNMENT PORTFOLIO-INSTITUTIONAL CLASS	178,448	178,448	178,448
GLOBAL X & ARTIFICIAL INTELLIGENCE ETF	785	19,252	22,372
ISHARES CORE US AGGREGATE BOND ETF	615	62,401	61,039
ISHARES RUSSELL MID CAP ETF	175	8,776	13,603
ISHARES S&P 100 ETF	100	12,622	22,339
ISHARES US HIGH YIELD CORPORATE BOND ETF	570	21,349	20,720
LORD ABBETT SHORT DURATION INCOME FUND	20,692	86,952	79,872
SPDR BLOOMBERG HIGH YIELD BOND ETF	295	26,988	27,945
VANGUARD 500 INDEX FUND	100	27,066	43,680
VANGUARD FTSE DEVELOPED MARKETS ETF	440	19,421	21,076
VANGUARD REAL ESTATE ETF	240	18,383	21,206
VANGUARD TOTAL INTL BOND ETF	860	45,621	42,454
FIRST EAGLE GLOBAL VALUE FUND LP - REGISTERED INVESTMENT COMPANIES	-	<u>6,820,342</u>	<u>8,093,788</u>
		<u>\$ 171,655,227</u>	<u>\$ 159,031,493</u>

HOLDINGS OF CERTAIN INVESTMENTS WERE DETERMINED TO BE PLAN ASSETS FOR FORM 5500 PURPOSES AND ARE SEPARATELY IDENTIFIED HERE BASED ON THE ALLOCATION OF UNDERLYING ASSETS PROVIDED BY THE INVESTMENT MANAGER, AS OF THE DATE OF THEIR LATEST AUDITED FINANCIAL STATEMENTS.

NORTH ATLANTIC STATES CARPENTERS PENSION FUND

SCHEDULE OF UNALLOCATED CONTRACTS

DECEMBER 31, 2023

EIN 51-6040899, PLAN NO. 001

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

(a) NOT APPLICABLE

(b)	(c) - DESCRIPTION UNALLOCATED CONTRACTS	(d)	(e)
ISSUER		COST	CURRENT VALUE
AXA EQUITABLE LIFE INSURANCE COMPANY		\$ 401,024	\$ 401,024
AETNA LIFE INSURANCE COMPANY		<u>1,213,476</u>	<u>467,939</u>
		<u>\$ 1,614,500</u>	<u>\$ 868,963</u>

NORTH ATLANTIC STATES CARPENTERS PENSION FUND

SCHEDULE OF OTHER INVESTMENTS

DECEMBER 31, 2023

EIN 51-6040899, PLAN NO. 001

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

(a) NOT APPLICABLE

(b)	(c) - DESCRIPTION OTHER INVESTMENTS	(d)	(e)
ISSUER		COST	CURRENT VALUE
BRIGADE HIGH YIELD FUND LP - OTHER INVESTMENTS		\$ 282,273	\$ 295,397
FIRST EAGLE GLOBAL VALUE FUND LP - OTHER INVESTMENTS		8,589,160	10,192,866
KOHINOOR SERIES (CAYMAN) FUND - OTHER INVESTMENTS		21,364,936	20,946,803
ONE RIVER RISK RESPONDERS SP - OTHER INVESTMENTS		<u>8,951,256</u>	<u>8,464,635</u>
		<u>\$ 39,187,625</u>	<u>\$ 39,899,701</u>

HOLDINGS OF CERTAIN INVESTMENTS WERE DETERMINED TO BE PLAN ASSETS FOR FORM 5500 PURPOSES AND ARE SEPARATELY IDENTIFIED HERE BASED ON THE ALLOCATION OF UNDERLYING ASSETS PROVIDED BY THE INVESTMENT MANAGER, AS OF THE DATE OF THEIR LATEST AUDITED FINANCIAL STATEMENTS.

NORTH ATLANTIC STATES CARPENTERS PENSION FUND

SCHEDULE OF REPORTABLE TRANSACTIONS

YEAR ENDED DECEMBER 31, 2023

EIN 51-6040899, PLAN NO. 001

FORM 5500, SCHEDULE H, PAGE 4, PART IV, ITEM 4J - SCHEDULE OF REPORTABLE TRANSACTIONS DURING THE YEAR

(a) IDENTITY OF PARTY INVOLVED	(b) DESCRIPTION OF ASSET	(c) PURCHASE PRICE	(d) SELLING PRICE	(e) LEASE RENTAL	(f) EXPENSE INCURRED WITH TRANSACTION	(g) COST OF ASSET	(h) CURRENT VALUE OF ASSET ON TRANSACTION DATE	(i) NET GAIN OR (LOSS)
*	GSTIF 25 BPS	\$ 521,500,207	\$ -	\$ -	\$ -	\$ -	\$ 521,500,207	\$ -
*	GSTIF 25 BPS	-	476,865,523	-	-	476,865,523	476,865,523	-
N/A	BLACKROCK EQUITY INDEX FUND A	208,331,311	-	-	-	-	208,331,311	-
N/A	BLACKROCK EQUITY INDEX FUND A	-	234,256,985	-	-	227,848,008	234,256,985	6,408,977

* PARTY-IN-INTEREST

**Application for Extension of Time
To File Certain Employee Plan Returns**

► Go to www.irs.gov/Form5558 for the latest information.

OMB No. 1545-1610

File With IRS Only

Part I Identification

A Name of filer, plan administrator, or plan sponsor (see instructions) BOT OF THE NORTH ATLANTIC STATES CARPENTERS PENSION FUND	B Employer Identification Number (EIN)) 51-6040899
☐ Number, Street, and room or suite no. (if a P.O. box, see instructions) 350 FORDHAM ROAD	
City or town, state, and ZIP code WILMINGTON MA 01887	
C Name of Plan N. ATLANTIC STATES CARP. PENSION FUND	D Three-digit plan number (PN) 001
E Plan Year End Date 12/31/2023	

Part II Extension of Time to File Form 5500 Series, and/or Form 8955-SSA

- 1 ☐ Check this box if you are requesting an extension of time on line 2 to file the first Form 5500 series return/report for the plan listed in Part I, C above.
- 2 I request an extension of time until 10 / 15 / 2024 to file Form 5500 series. See instructions.
- 3 I request an extension of time until 10 / 15 / 2024 to file Form 8955-SSA. See instructions.

The application is **automatically approved** to the date shown on line 2 and/or line 3 (above) if **(a)** the Form 5558 is filed on or before the normal due date of Form 5500 series, and/or Form 8955-SSA for which this extension is requested; and **(b)** the date on line 2 and/or line 3 (above) is not later than the 15th day of the 3rd month after the normal due date.

Certified Article Number

9414 7266 9904 2182 6319 54

SENDER'S RECORD

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 2023 This Form is Open to Public Inspection.
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For calendar plan year 2023 or fiscal plan year beginning and ending		
A Name of plan	B Three-digit plan number (PN) ▶	
C Plan sponsor's name as shown on line 2a of Form 5500	D Employer Identification Number (EIN)	

Part I	Distributions
--------	---------------

All references to distributions relate only to payments of benefits during the plan year.

1	Total value of distributions paid in property other than in cash or the forms of property specified in the instructions.....	1	
2	Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits): EIN(s): _____		
Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.			
3	Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year	3	

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
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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

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

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):

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

(1) Contribution rate (in dollars and cents)

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

14 Enter the number of deferred vested and retired participants (inactive participants), as of the beginning of the plan year, whose contributing employer is no longer making contributions to the plan for:

a The current plan year. Check the box to indicate the counting method used to determine the number of inactive participants: ☐ last contributing employer ☐ alternative ☐ reasonable approximation (see instructions for required attachment).....

14a

b The plan year immediately preceding the current plan year. ☐ Check the box if the number reported is a change from what was previously reported (see instructions for required attachment).....

14b

c The second preceding plan year. ☐ Check the box if the number reported is a change from what was previously reported (see instructions for required attachment).....

14c

15 Enter the ratio of the number of participants under the plan on whose behalf no employer had an obligation to make an employer contribution during the current plan year to:

a The corresponding number for the plan year immediately preceding the current plan year.....

15a

b The corresponding number for the second preceding plan year.....

15b

16 Information with respect to any employers who withdrew from the plan during the preceding plan year:

a Enter the number of employers who withdrew during the preceding plan year.....

16a

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) and (b)

a Enter the percentage of plan assets held as:

Public Equity: _____% Private Equity: _____% Investment-Grade Debt and Interest Rate Hedging Assets: _____%

High-Yield Debt: _____% Real Assets: _____% Cash or Cash Equivalents: _____% Other: _____%

b Provide the average duration of the Investment-Grade Debt and Interest Rate Hedging Assets:

☐ 0-5 years ☐ 5-10 years ☐ 10-15 years ☐ 15 years or more

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 _____

Part VII IRS Compliance Questions

21a Does the plan satisfy the coverage and nondiscrimination tests of Code sections 410(b) and 401(a)(4) by combining this plan with any other plans under the permissive aggregation rules? ☐ Yes ☐ No

21b If this is a Code section 401(k) plan, check all boxes that apply to indicate how the plan is intended to satisfy the nondiscrimination requirements for employee deferrals and employer matching contributions (as applicable) under Code sections 401(k)(3) and 401(m)(2).

☐ Design-based safe harbor method

☐ "Prior year" ADP test

☐ "Current year" ADP test

☐ N/A

22 If the plan sponsor is an adopter of a pre-approved plan that received a favorable IRS Opinion Letter, enter the date of the Opinion Letter _____ (MM/DD/YYYY) and the Opinion Letter serial number _____.

Attachment to 2023 Form 5500
Schedule R, line 13d - Collective Bargaining Agreement Expiration Date

Plan Name N. ATLANTIC STATES CARP. PENSION FUND

EIN: 51-6040899

Plan Sponsor's Name BOT OF THE NORTH ATLANTIC STATES CARPENTERS PENSION FUND

PN: 001

Collective Bargaining Agreement	Expiration Date
NEW ENGLAND FINISH SYSTEMS - NASRCC - BOSTON AGREEMENT	08/31/2027
NEW ENGLAND FINISH SYSTEMS - NASRCC - EASTERN AGREEMENT	08/31/2027
NEW ENGLAND FINISH SYSTEMS - MAINE AGREEMENT	08/31/2027
NEW ENGLAND FINISH SYSTEMS - NEW HAMPSHIRE AGREEMENT	08/31/2027
NEW ENGLAND FINISH SYSTEMS - VERMONT AGREEMENT	08/31/2027
NEW ENGLAND FINISH SYSTEMS - WESTERN MASS AGREEMENT	08/31/2027
NEW ENGLAND FINISH SYSTEMS - SHOP - NEW ENGLAND FINISH AGREEMENT	11/30/2024
CENTURY DRYWALL INC - NASRCC - BOSTON AGREEMENT	08/31/2027
CENTURY DRYWALL INC - NASRCC - EASTERN AGREEMENT	08/31/2027
CENTURY DRYWALL INC - CONNECTICUT AGC & HH AGREEMENT	04/30/2027
CENTURY DRYWALL INC - RHODE ISLAND AGC AGREEMENT	05/31/2027
SWEENEY DRYWALL FINISHES - NASRCC - BOSTON AGREEMENT	08/31/2027
SWEENEY DRYWALL FINISHES - NASRCC - EASTERN AGREEMENT	08/31/2027
SWEENEY DRYWALL FINISHES - MAINE AGREEMENT	08/31/2027
SWEENEY DRYWALL FINISHES - NEW HAMPSHIRE AGREEMENT	08/31/2027
SWEENEY DRYWALL FINISHES - VERMONT AGREEMENT	08/31/2027
SWEENEY DRYWALL FINISHES - WESTERN MASS AGREEMENT	08/31/2027
SWEENEY DRYWALL FINISHES - CONNECTICUT AGC & HH AGREEMENT	04/30/2027
SWEENEY DRYWALL FINISHES - RHODE ISLAND AGC AGREEMENT	05/31/2027
T J MCCARTNEY INC - NASRCC - BOSTON AGREEMENT	08/31/2027
T J MCCARTNEY INC - NASRCC - EASTERN AGREEMENT	08/31/2027
T J MCCARTNEY INC - NEW HAMPSHIRE AGREEMENT	08/31/2027
T J MCCARTNEY INC - RESIDENTIAL CONSTRUCTION AGREEMENT	09/30/2027
RIGGS CONTRACTING INC - NASRCC - BOSTON AGREEMENT	08/31/2027
RIGGS CONTRACTING INC - NASRCC - EASTERN AGREEMENT	08/31/2027
RIGGS CONTRACTING INC - MAINE AGREEMENT	08/31/2027
RIGGS CONTRACTING INC - NEW HAMPSHIRE AGREEMENT	08/31/2027
RIGGS CONTRACTING INC - VERMONT AGREEMENT	08/31/2027
RIGGS CONTRACTING INC - WESTERN MASS AGREEMENT	08/31/2027
RIGGS CONTRACTING INC - CONNECTICUT AGC & HH AGREEMENT	04/30/2027
RIGGS CONTRACTING INC - RHODE ISLAND AGC AGREEMENT	05/31/2027
H CARR & SONS LLC - NASRCC - BOSTON AGREEMENT	08/31/2027
H CARR & SONS LLC - NASRCC - EASTERN AGREEMENT	08/31/2027
H CARR & SONS LLC - WESTERN MASS AGREEMENT	08/31/2027
H CARR & SONS LLC - CONNECTICUT AGC & HH AGREEMENT	04/30/2027
H CARR & SONS LLC - RHODE ISLAND AGC AGREEMENT	05/31/2027
MARGUERITE CONCRETE CONTRACTOR - NASRCC - BOSTON AGREEMENT	08/31/2027
MARGUERITE CONCRETE CONTRACTOR - NASRCC - EASTERN AGREEMENT	08/31/2027
MARGUERITE CONCRETE CONTRACTOR - MAINE AGREEMENT	08/31/2027
MARGUERITE CONCRETE CONTRACTOR - NEW HAMPSHIRE AGREEMENT	08/31/2027
MARGUERITE CONCRETE CONTRACTOR - VERMONT AGREEMENT	08/31/2027
MARGUERITE CONCRETE CONTRACTOR - WESTERN MASS AGREEMENT	08/31/2027
MARGUERITE CONCRETE CONTRACTOR - CONNECTICUT AGC & HH AGREEMENT	04/30/2027
MARGUERITE CONCRETE CONTRACTOR - RHODE ISLAND AGC AGREEMENT	05/31/2027
TURNER CONSTRUCTION COMPANY - NASRCC - BOSTON AGREEMENT	08/31/2027
TURNER CONSTRUCTION COMPANY - NASRCC - EASTERN AGREEMENT	08/31/2027
TURNER CONSTRUCTION COMPANY - MAINE AGREEMENT	08/31/2027

PN: 001

[illegible]

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 2023 This Form is Open to Public Inspection.
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For calendar plan year 2023 or fiscal plan year beginning and ending		
A Name of plan	B Three-digit plan number (PN) ▶	
C Plan sponsor's name as shown on line 2a of Form 5500	D Employer Identification Number (EIN)	

Part I	Distributions
--------	---------------

All references to distributions relate only to payments of benefits during the plan year.

1	Total value of distributions paid in property other than in cash or the forms of property specified in the instructions.....	1	
2	Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits): EIN(s): _____		
Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.			
3	Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year	3	

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
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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
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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

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

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):

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

(1) Contribution rate (in dollars and cents)

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

14 Enter the number of deferred vested and retired participants (inactive participants), as of the beginning of the plan year, whose contributing employer is no longer making contributions to the plan for:

a The current plan year. Check the box to indicate the counting method used to determine the number of inactive participants: ☐ last contributing employer ☐ alternative ☐ reasonable approximation (see instructions for required attachment).....

14a

b The plan year immediately preceding the current plan year. ☐ Check the box if the number reported is a change from what was previously reported (see instructions for required attachment).....

14b

c The second preceding plan year. ☐ Check the box if the number reported is a change from what was previously reported (see instructions for required attachment).....

14c

15 Enter the ratio of the number of participants under the plan on whose behalf no employer had an obligation to make an employer contribution during the current plan year to:

a The corresponding number for the plan year immediately preceding the current plan year.....

15a

b The corresponding number for the second preceding plan year.....

15b

16 Information with respect to any employers who withdrew from the plan during the preceding plan year:

a Enter the number of employers who withdrew during the preceding plan year.....

16a

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) and (b)

a Enter the percentage of plan assets held as:

Public Equity: _____% Private Equity: _____% Investment-Grade Debt and Interest Rate Hedging Assets: _____%

High-Yield Debt: _____% Real Assets: _____% Cash or Cash Equivalents: _____% Other: _____%

b Provide the average duration of the Investment-Grade Debt and Interest Rate Hedging Assets:

☐ 0-5 years ☐ 5-10 years ☐ 10-15 years ☐ 15 years or more

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 _____

Part VII IRS Compliance Questions

21a Does the plan satisfy the coverage and nondiscrimination tests of Code sections 410(b) and 401(a)(4) by combining this plan with any other plans under the permissive aggregation rules? ☐ Yes ☐ No

21b If this is a Code section 401(k) plan, check all boxes that apply to indicate how the plan is intended to satisfy the nondiscrimination requirements for employee deferrals and employer matching contributions (as applicable) under Code sections 401(k)(3) and 401(m)(2).

☐ Design-based safe harbor method

☐ "Prior year" ADP test

☐ "Current year" ADP test

☐ N/A

22 If the plan sponsor is an adopter of a pre-approved plan that received a favorable IRS Opinion Letter, enter the date of the Opinion Letter _____ (MM/DD/YYYY) and the Opinion Letter serial number _____.

Attachment to 2023 Form 5500
Schedule R, line 13e - Information on Contribution Rates and Base Units

Plan Name N. ATLANTIC STATES CARP. PENSION FUND

EIN: 51-6040899

Plan Sponsor's Name BOT OF THE NORTH ATLANTIC STATES CARPENTERS PENSION FUND

PN: 001

Contribution rate (in dollars and cents)	11.38
Base unit measure: ☒ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):	
Contribution rate (in dollars and cents)	11.41
Base unit measure: ☒ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):	
Contribution rate (in dollars and cents)	11.47
Base unit measure: ☒ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):	
Contribution rate (in dollars and cents)	8.88
Base unit measure: ☒ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):	
Contribution rate (in dollars and cents)	11.25
Base unit measure: ☒ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):	
Contribution rate (in dollars and cents)	4.47
Base unit measure: ☒ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):	
Contribution rate (in dollars and cents)	8.73
Base unit measure: ☒ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):	
Contribution rate (in dollars and cents)	11.38
Base unit measure: ☒ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):	
Contribution rate (in dollars and cents)	11.41
Base unit measure: ☒ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):	
Contribution rate (in dollars and cents)	11.44
Base unit measure: ☒ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):	
Contribution rate (in dollars and cents)	11.47
Base unit measure: ☒ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):	
Contribution rate (in dollars and cents)	8.20
Base unit measure: ☒ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):	
Contribution rate (in dollars and cents)	10.40
Base unit measure: ☒ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):	
Contribution rate (in dollars and cents)	8.65
Base unit measure: ☒ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):	
Contribution rate (in dollars and cents)	10.85
Base unit measure: ☒ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):	
Contribution rate (in dollars and cents)	13.07
Base unit measure: ☒ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):	
Contribution rate (in dollars and cents)	11.41
Base unit measure: ☒ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):	
Contribution rate (in dollars and cents)	11.44
Base unit measure: ☒ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):	
Contribution rate (in dollars and cents)	11.47
Base unit measure: ☒ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):	
Contribution rate (in dollars and cents)	8.88
Base unit measure: ☒ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):	
Contribution rate (in dollars and cents)	10.40
Base unit measure: ☒ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):	

Attachment to 2023 Form 5500
Schedule R, line 13e - Information on Contribution Rates and Base Units

Plan Name N. ATLANTIC STATES CARP. PENSION FUND

EIN: 51-6040899

Plan Sponsor's Name BOT OF THE NORTH ATLANTIC STATES CARPENTERS PENSION FUND

PN: 001

Contribution rate (in dollars and cents)	13.07
Base unit measure:	☒ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):
Contribution rate (in dollars and cents)	11.25
Base unit measure:	☒ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):
Contribution rate (in dollars and cents)	11.38
Base unit measure:	☒ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):
Contribution rate (in dollars and cents)	11.41
Base unit measure:	☒ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):
Contribution rate (in dollars and cents)	11.44
Base unit measure:	☒ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):
Contribution rate (in dollars and cents)	11.47
Base unit measure:	☒ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):
Contribution rate (in dollars and cents)	8.88
Base unit measure:	☒ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):
Contribution rate (in dollars and cents)	4.47
Base unit measure:	☒ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):
Contribution rate (in dollars and cents)	11.41
Base unit measure:	☒ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):
Contribution rate (in dollars and cents)	11.44
Base unit measure:	☒ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):
Contribution rate (in dollars and cents)	11.47
Base unit measure:	☒ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):
Contribution rate (in dollars and cents)	8.88
Base unit measure:	☒ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):
Contribution rate (in dollars and cents)	11.23
Base unit measure:	☒ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):
Contribution rate (in dollars and cents)	11.25
Base unit measure:	☒ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):
Contribution rate (in dollars and cents)	10.40
Base unit measure:	☒ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):
Contribution rate (in dollars and cents)	10.85
Base unit measure:	☒ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):
Contribution rate (in dollars and cents)	13.07
Base unit measure:	☒ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):
Contribution rate (in dollars and cents)	11.41
Base unit measure:	☒ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):
Contribution rate (in dollars and cents)	11.44
Base unit measure:	☒ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):
Contribution rate (in dollars and cents)	11.47
Base unit measure:	☒ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):
Contribution rate (in dollars and cents)	11.21
Base unit measure:	☒ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):

Attachment to 2023 Form 5500
Schedule R, line 13e - Information on Contribution Rates and Base Units

Plan Name N. ATLANTIC STATES CARP. PENSION FUND

EIN: 51-6040899

Plan Sponsor's Name BOT OF THE NORTH ATLANTIC STATES CARPENTERS PENSION FUND

PN: 001

Contribution rate (in dollars and cents)	11.23
Base unit measure:	☒ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):
Contribution rate (in dollars and cents)	11.25
Base unit measure:	☒ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):
Contribution rate (in dollars and cents)	8.20
Base unit measure:	☒ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):
Contribution rate (in dollars and cents)	10.40
Base unit measure:	☒ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):
Contribution rate (in dollars and cents)	10.85
Base unit measure:	☒ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):
Contribution rate (in dollars and cents)	13.07
Base unit measure:	☒ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):
Contribution rate (in dollars and cents)	11.41
Base unit measure:	☒ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):
Contribution rate (in dollars and cents)	11.44
Base unit measure:	☒ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):
Contribution rate (in dollars and cents)	11.47
Base unit measure:	☒ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):
Contribution rate (in dollars and cents)	8.88
Base unit measure:	☒ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):
Contribution rate (in dollars and cents)	8.20
Base unit measure:	☒ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):
Contribution rate (in dollars and cents)	10.40
Base unit measure:	☒ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):
Contribution rate (in dollars and cents)	10.85
Base unit measure:	☒ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):
Contribution rate (in dollars and cents)	13.07
Base unit measure:	☒ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):
Contribution rate (in dollars and cents)	11.25
Base unit measure:	☒ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):
Contribution rate (in dollars and cents)	11.41
Base unit measure:	☒ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):
Contribution rate (in dollars and cents)	11.44
Base unit measure:	☒ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):
Contribution rate (in dollars and cents)	11.47
Base unit measure:	☒ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):
Contribution rate (in dollars and cents)	8.88
Base unit measure:	☒ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):
Contribution rate (in dollars and cents)	8.20
Base unit measure:	☒ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):
Contribution rate (in dollars and cents)	8.65
Base unit measure:	☒ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):

Attachment to 2023 Form 5500
Schedule R, line 13e - Information on Contribution Rates and Base Units

Plan Name N. ATLANTIC STATES CARP. PENSION FUND

EIN: 51-6040899

Plan Sponsor's Name BOT OF THE NORTH ATLANTIC STATES CARPENTERS PENSION FUND

PN: 001

Contribution rate (in dollars and cents)	10.40
Base unit measure:	☒ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):
Contribution rate (in dollars and cents)	10.85
Base unit measure:	☒ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):
Contribution rate (in dollars and cents)	11.41
Base unit measure:	☒ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):
Contribution rate (in dollars and cents)	11.44
Base unit measure:	☒ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):
Contribution rate (in dollars and cents)	11.47
Base unit measure:	☒ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):
Contribution rate (in dollars and cents)	8.88
Base unit measure:	☒ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):
Contribution rate (in dollars and cents)	11.25
Base unit measure:	☒ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):
Contribution rate (in dollars and cents)	11.38
Base unit measure:	☒ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):
Contribution rate (in dollars and cents)	11.41
Base unit measure:	☒ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):
Contribution rate (in dollars and cents)	11.44
Base unit measure:	☒ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):
Contribution rate (in dollars and cents)	11.47
Base unit measure:	☒ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):
Contribution rate (in dollars and cents)	8.88
Base unit measure:	☒ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):
Contribution rate (in dollars and cents)	
Base unit measure:	☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):
Contribution rate (in dollars and cents)	
Base unit measure:	☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):
Contribution rate (in dollars and cents)	
Base unit measure:	☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):
Contribution rate (in dollars and cents)	
Base unit measure:	☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):
Contribution rate (in dollars and cents)	
Base unit measure:	☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):
Contribution rate (in dollars and cents)	
Base unit measure:	☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):
Contribution rate (in dollars and cents)	
Base unit measure:	☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):
Contribution rate (in dollars and cents)	
Base unit measure:	☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):
Contribution rate (in dollars and cents)	
Base unit measure:	☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):