

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) _____ ☐ 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 I.B.E.W. LOCAL 1158 ANNUITY PLAN
1b	Three-digit plan number (PN) ▶ 004
1c	Effective date of plan 01/01/1999
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) I.B.E.W. LOCAL 1158 1149 BLOOMFIELD AVENUE CLIFTON, NJ 07012
2b	Employer Identification Number (EIN) 22-0886457
2c	Plan Sponsor's telephone number 973-344-1800
2d	Business code (see instructions) 813930

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.	10/14/2024	GEORGE SERIO
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	Filed with authorized/valid electronic signature.	10/14/2024	GEORGE SERIO
	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	5 632
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) 632 6a(2) 558 6b 0 6c 53 6d 611 6e 0 6f 611 6g(1) 626 6g(2) 606 6h 0
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	7

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

2E 2F 2H 2J 2X

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 1
- (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 I.B.E.W. LOCAL 1158 ANNUITY PLAN	B Three-digit plan number (PN) ▶	004
C Plan sponsor's name as shown on line 2a of Form 5500 I.B.E.W. LOCAL 1158	D Employer Identification Number (EIN) 22-0886457	

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
VOYA RETIREMENT INSURANCE AND ANNUITY CO.

(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
71-0294708	86509	874041	12	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 1795	(b) Total amount of fees paid 0
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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
MORGAN STANLEY SMITH BARNEY
1 NEW YORK PLAZA
NEW YORK, NY 10004

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
1795			3

(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	75890
5 Current value of plan's interest under this contract in separate accounts at year end.....	5	739542

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) ▶ **INDIVIDUAL GROUP ANNUITY****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**

72002

c Additions: (1) Contributions deposited during the year**7c(1)**

2613

(2) Dividends and credits

7c(2)

(3) Interest credited during the year

7c(3)

1007

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

7c(4)

268

(5) Other (specify below)

7c(5)

▶

(6) Total additions.....

7c(6)

3888

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

75890

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**

75890

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 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 I.B.E.W. LOCAL 1158 ANNUITY PLAN	B Three-digit plan number (PN) ▶	004
C Plan sponsor's name as shown on line 2a of Form 5500 I.B.E.W. LOCAL 1158	D Employer Identification Number (EIN) 22-0886457	

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

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

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

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

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

MORGAN STANLEY

34 WEST 52ST
NEW YORK, NY 10019

26-4310632

(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 28	BROKER	73961	Yes ☐ No ☒	Yes ☐ No ☒		Yes ☐ No ☒

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

ROSENBERG RICH BAKER BERMAN & CO.,

265 DAVIDSON AVE.
SOMERSET, NJ 08873

22-3271252

(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	AUDITOR	30500	Yes ☐ No ☒	Yes ☐ No ☒		Yes ☐ No ☒

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

E.H. THOMSON & CO., INC.

800 THE PLAZA
SEA GIRT, NJ 08750

22-2602083

(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 12 14 15 17	RECORDKEEPER ACTUARY ADMI	44765	Yes ☐ No ☒	Yes ☐ No ☒		Yes ☐ No ☒

Part I Service Provider Information (continued)

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE D (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration		DFE/Participating Plan Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500.		OMB No. 1210-0110 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 I.B.E.W. LOCAL 1158 ANNUITY PLAN				B Three-digit plan number (PN) ▶ 004	
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 I.B.E.W. LOCAL 1158				D Employer Identification Number (EIN) 22-0886457	
Part I Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs) (Complete as many entries as needed to report all interests in DFEs)					
a Name of MTIA, CCT, PSA, or 103-12 IE: NT COLLECTIVE S&P 500 INDEX FUNDS					
b Name of sponsor of entity listed in (a): NORTHERN TRUST COLLECTIVE FUND TRUST					
c EIN-PN 45-6138589-003		d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) -440638		
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)		
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)		
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)		
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)		
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)		
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)		
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)		
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)		
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)		
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)		
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)		
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)		
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)		
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)		
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)		
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)		
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)		
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)		
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)		
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)		
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)		
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)		
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)		
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)		
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)		
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)		
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)		
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)		
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)		
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)		
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		

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

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

SCHEDULE H (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Financial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ► File as an attachment to Form 5500.	OMB No. 1210-0110
		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 I.B.E.W. LOCAL 1158 ANNUITY PLAN	B Three-digit plan number (PN) ►	004
C Plan sponsor's name as shown on line 2a of Form 5500 I.B.E.W. LOCAL 1158	D Employer Identification Number (EIN) 22-0886457	

Part I	Asset and Liability Statement
---------------	--------------------------------------

1 Current value of plan assets and liabilities at the beginning and end of the plan year. Combine the value of plan assets held in more than one trust. Report the value of the plan's interest in a commingled fund containing the assets of more than one plan on a line-by-line basis unless the value is reportable on lines 1c(9) through 1c(14). Do not enter the value of that portion of an insurance contract which guarantees, during this plan year, to pay a specific dollar benefit at a future date. **Round off amounts to the nearest dollar.** MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 1b(1), 1b(2), 1c(8), 1g, 1h, and 1i. CCTs, PSAs, and 103-12 IEs also do not complete lines 1d and 1e. See instructions.

Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	100957	112675
(2) Participant contributions	1b(2)	0	
(3) Other	1b(3)	19778	24099
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	384483	362752
(2) U.S. Government securities	1c(2)	1431165	1928438
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)	1092161	1169221
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)	3304340	3784588
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)		
(9) Value of interest in common/collective trusts	1c(9)	888901	
(10) Value of interest in pooled separate accounts	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	1381426	2540104
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other	1c(15)		

1d Employer-related investments:		(a) Beginning of Year	(b) End of Year
(1) Employer securities	1d(1)		
(2) Employer real property	1d(2)		
e Buildings and other property used in plan operation	1e		
f Total assets (add all amounts in lines 1a through 1e)	1f	8603211	9921877
Liabilities			
g Benefit claims payable	1g		
h Operating payables	1h	20350	81850
i Acquisition indebtedness	1i	0	
j Other liabilities	1j		
k Total liabilities (add all amounts in lines 1g through 1j)	1k	20350	81850
Net Assets			
l Net assets (subtract line 1k from line 1f)	1l	8582861	9840027

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)	1230094	
(B) Participants	2a(1)(B)	0	
(C) Others (including rollovers)	2a(1)(C)	0	
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		1230094
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	299	
(B) U.S. Government securities	2b(1)(B)	35321	
(C) Corporate debt instruments	2b(1)(C)	38714	
(D) Loans (other than to participants)	2b(1)(D)	0	
(E) Participant loans	2b(1)(E)		
(F) Other	2b(1)(F)	-20022	
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		54312
(2) Dividends: (A) Preferred stock	2b(2)(A)		
(B) Common stock	2b(2)(B)	77047	
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	70979	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		148026
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)	3362563	
(B) Aggregate carrying amount (see instructions)	2b(4)(B)	2775108	
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)		587455
(5) Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)	218096	
(B) Other	2b(5)(B)	0	
(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)		-440638
(7) Net investment gain (loss) from pooled separate accounts.....	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts.....	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities.....	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		221333
c Other income	2c		0
d Total income. Add all income amounts in column (b) and enter total	2d		2018678

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	548301	
(2) To insurance carriers for the provision of benefits.....	2e(2)	0	
(3) Other	2e(3)		
(4) Total benefit payments. Add lines 2e(1) through (3)	2e(4)		548301
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)	0	
(2) Contract administrator fees.....	2i(2)	0	
(3) Recordkeeping fees.....	2i(3)	30500	
(4) IQPA audit fees.....	2i(4)	0	
(5) Investment advisory and investment management fees	2i(5)	73961	
(6) Bank or trust company trustee/custodial fees	2i(6)	0	
(7) Actuarial fees	2i(7)	44765	
(8) Legal fees	2i(8)	63485	
(9) Valuation/appraisal fees	2i(9)	0	
(10) Other trustee fees and expenses	2i(10)	0	
(11) Other expenses	2i(11)	500	
(12) Total administrative expenses. Add lines 2i(1) through (11)	2i(12)		213211
j Total expenses. Add all expense amounts in column (b) and enter total	2j		761512

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		1257166
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: **ROSENBERG RICH BAKER BERMAN & CO.**

(2) EIN: **22-3271252**

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?	☒		500000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		☒	
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?		☒	
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 _____.

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 I.B.E.W. LOCAL 1158 ANNUITY PLAN		B Three-digit plan number (PN) ▶ 004
C Plan sponsor's name as shown on line 2a of Form 5500 I.B.E.W. LOCAL 1158		D Employer Identification Number (EIN) 22-0886457
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): 22-2021330		
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		
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

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
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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
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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 <u>06 / 20 / 2020</u> (MM/DD/YYYY) and the Opinion Letter serial number <u>Q703803A</u> .	

IBEW Local 1158 Annuity Plan
Financial Statements
December 31, 2023 and 2022

**IBEW Local 1158 Annuity Plan
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December 31, 2023 and 2022**

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Independent Auditor's Report

To the Board of Trustees
of the IBEW Local 1158 Annuity Plan

Opinion

We have audited the accompanying financial statements of IBEW Local 1158 Annuity 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 plan benefits as of December 31, 2023 and 2022, and the related statements of changes in net assets available for plan benefits for the years then ended, and the related notes to the financial statements.

In our opinion, the financial statements referred to above present fairly, in all material respects, the net assets available for plan benefits of IBEW Local 1158 Annuity Plan as of December 31, 2023 and 2022, and the changes in its net assets available for plan benefits for the years then ended, in accordance with accounting principles generally accepted in the United States of America.

Basis for Opinion

We conducted our audits in accordance with auditing standards generally accepted in the United States of America. 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 IBEW Local 1158 Annuity 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 IBEW Local 1158 Annuity Plan's ability to continue as a going concern for one year after the date the financial statements are available to be issued.

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



ROSENBERG RICH BAKER BERMAN, P.A.

To the Board of Trustees
of the IBEW Local 1158 Annuity Plan

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 IBEW Local 1158 Annuity 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 IBEW Local 1158 Annuity Plan's ability to continue as a going concern for a reasonable period of time.

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

Supplemental Schedules Required by ERISA

Our audits were conducted for the purpose of forming an opinion on the financial statements as a whole. The supplemental Schedule of Assets Held for Investment Purposes and Schedule of Reportable Transactions are presented for purposes of additional analysis and are not a required part of the financial statements but are supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Such information are 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.



ROSENBERG RICH BAKER BERMAN, P.A.

To the Board of Trustees
of the IBEW Local 1158 Annuity Plan

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

Rosenberg Rich Baker Berman, P.A.

Somerset, New Jersey
October 15, 2024

IBEW Local 1158 Annuity Plan
Statements of Net Assets Available for Benefits

	December 31,	
	<u>2023</u>	<u>2022</u>
Assets		
Investments at fair value:		
Short-term investments	\$ 362,752	\$ 384,483
Mutual funds	1,724,672	725,847
U.S. government securities	1,928,438	1,431,165
Corporate bonds	1,169,221	995,017
Asset backed securities	-	97,144
Common stock	3,784,588	3,304,340
Common collective trust	-	888,901
Investment contract	<u>815,432</u>	<u>655,579</u>
Total Investments	9,785,103	8,482,476
Receivables:		
Employer contributions receivable	112,675	100,957
Accrued investment income receivable	24,099	15,401
Due from broker	<u>-</u>	<u>4,377</u>
Total Receivables	<u>136,774</u>	<u>120,735</u>
Total Assets	<u>9,921,877</u>	<u>8,603,211</u>
Liabilities and Net Assets Available for Benefits		
Accounts payable and accrued expenses	<u>81,850</u>	<u>20,350</u>
Total Liabilities	<u>81,850</u>	<u>20,350</u>
Net Assets Available for Benefits	<u>\$ 9,840,027</u>	<u>\$ 8,582,861</u>

IBEW Local 1158 Annuity Plan
Statements of Changes in Net Assets Available for Benefits

	For the Years Ended December 31,	
	<u>2023</u>	<u>2022</u>
Additions to Net Assets Attributed to:		
Investment income:		
Net appreciation (depreciation) in fair value of investments	\$ 586,246	\$ (1,120,726)
Interest and dividends	<u>202,338</u>	<u>131,354</u>
Total investment (loss) income	788,584	(989,372)
Investment expenses	<u>(73,961)</u>	<u>(68,440)</u>
Net investment (loss) income	714,623	(1,057,812)
Employer contributions	<u>1,230,094</u>	<u>1,112,075</u>
Total Additions	<u>1,944,717</u>	<u>54,263</u>
Deductions from Net Assets Attributed to:		
Benefit Payments:		
Benefits paid to participants	<u>548,301</u>	<u>635,504</u>
Administrative Expenses:		
Auditing fees	30,500	22,000
Insurance expense	500	500
Legal fees	63,485	18,393
Plan administration fees	<u>44,765</u>	<u>38,143</u>
Total Administrative Expenses	<u>139,250</u>	<u>79,036</u>
Total Deductions	<u>687,551</u>	<u>714,540</u>
Net Increase (Decrease) in Net Assets Available for Benefits	1,257,166	(660,277)
Net Assets Available for Benefits - Beginning of Year	<u>8,582,861</u>	<u>9,243,138</u>
Net Assets Available for Benefits - End of Year	<u>\$ 9,840,027</u>	<u>\$ 8,582,861</u>

IBEW Local 1158 Annuity Plan
Notes to Financial Statements
Years Ended December 31, 2023 and 2022

1. Description of Plan:

The following brief description of the IBEW Local 1158 Annuity Plan ("the Plan") is provided for general information purposes only. Participants should refer to the Plan document for more complete information.

General

The Plan is a defined contribution plan administered jointly by IBEW Local 1158 and the Passaic Valley Sewerage Commissioners (PVSC). It was established for the benefit of eligible IBEW Local 1158 employees as of January 1, 1999. The PVSC adopted the Plan on behalf of their employees effective January 1, 2002. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA).

Benefits

The Plan provides retirement benefits to employees whose employment is subject to a collective bargaining agreement with the IBEW Local 1158 Union and to other non-union employees who are employed by the PVSC. The Plan also provides retirement benefits to employees of IBEW Local 1158. IBEW Local 1158 represents a separate employer adopting the Plan.

Eligibility

A covered employee is eligible to participate in the Plan upon commencement of one hour of employment with an adopting employer and attaining age twenty one, provided that they are not a non-resident alien.

Contributions

The PVSC provides benefits to their union and non-union employees pursuant to a collective bargaining agreement. The PVSC contributed one dollar and five cents (\$1.05) per hour up to a maximum of forty-four (\$44) per week in 2023 and ninety five cents (\$0.95) per hour up to a maximum of thirty-eight (\$38) dollars per week in 2022.

For the years ended December 31, 2023 and 2022, contributions on behalf of PVSC covered employees totaled \$1,183,399 and \$1,067,192, respectively. No employee contributions are required.

The IBEW Local 1158 provides benefits to their employees based on a discretionary formula determined each year. The IBEW Local 1158 contributed \$2.50 per hour up to a maximum of forty hours per week (a maximum contribution of \$5,200 per year) for each covered employee in 2023 and 2022.

For the years ended December 31, 2023 and 2022, contributions on behalf of IBEW Local 1158 covered employees totaled \$46,695 and \$44,883, respectively. No employee contributions are allowed or required.

Retirement

Participants will be eligible to retire and receive distribution of benefits on the later of the participant's sixty-fifth birthday or the fifth anniversary of commencement in the Plan. If a participant works past their normal retirement date, distributions will not begin until the participant actually retires. Distributions can be received by employees in the IBEW 1158 Staff Plan at age 59 1/2 related to salary deferral contributions or from qualified nonelective or qualified matching contributions. Participants of the Passaic Valley Sewerage Commission are only allowed to receive distributions upon separation of employment.

Participant Accounts

For participants employed by PVSC all allocations made on a participant's behalf are credited to a separate bookkeeping account established in the name of the participant. At the end of each Plan year, allocations are made to participant accounts and interest is credited based on the net earnings experienced by the Trust Fund for the Plan year.

**IBEW Local 1158 Annuity Plan
Notes to Financial Statements
Years Ended December 31, 2023 and 2022**

1. Description of Plan (continued):

Participant Accounts (continued)

IBEW Local 1158 participants may choose to invest contributions made on their behalf into 18 mutual funds of varying type and risk. The participants are allowed to change their choices or transfer between funds through automated systems.

Vesting and Forfeitures

All participants are immediately 100% vested in their individual participant accounts and no forfeitures occur. An eligible participant may receive their distribution upon normal retirement, termination of employment, disability, or death.

2. Summary of Significant Accounting Policies:

Basis of Accounting

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

Use of Estimates

The preparation of financial statements in conformity with U.S. generally accepted accounting principles requires management to make estimates and assumptions that affect the reported amount of assets and liabilities and changes therein, and disclosure of contingent assets and liabilities. Actual results could differ from those estimates.

Investment Valuation and Income Recognition

Investments are reported at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date (see Note 4, Fair Value Measurements). Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded on the accrual basis. Dividends are recorded on the ex-dividend date. Net appreciation (depreciation) includes the Plan's gains and losses on investments bought and sold as well as held during the year.

Contributions Receivable

Employer contributions receivable are accrued for contribution revenue earned but not collected by year-end.

Payment of Benefits

Benefit payments to participants are recorded upon distribution.

Subsequent Events Evaluation Date

The Plan evaluated the events and transactions subsequent to the date of its Statements of Net Assets Available for Plan Benefits, in accordance with FASB ASC 855-10-50, "Subsequent Events" through October 15, 2024, which is the date the financial statements were available to be issued.

3. Investments:

During the years ended December 31, 2023 and 2022, the Plan's investments (including investments bought, sold, as well as held during the years) appreciated (depreciated) in fair value by \$586,246 and \$(1,120,726), respectively.

IBEW Local 1158 Annuity Plan
Notes to Financial Statements
Years Ended December 31, 2023 and 2022

1. Description of Plan (continued):

Participant Accounts (continued)

IBEW Local 1158 participants may choose to invest contributions made on their behalf into 18 mutual funds of varying type and risk. The participants are allowed to change their choices or transfer between funds through automated systems.

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Investments are reported at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date (see Note 4, Fair Value Measurements). Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded on the accrual basis. Dividends are recorded on the ex-dividend date. Net appreciation (depreciation) includes the Plan's gains and losses on investments bought and sold as well as held during the year.

Contributions Receivable

Employer contributions receivable are accrued for contribution revenue earned but not collected by year-end.

Payment of Benefits

Benefit payments to participants are recorded upon distribution.

Subsequent Events Evaluation Date

The Plan evaluated the events and transactions subsequent to the date of its Statements of Net Assets Available for Plan Benefits, in accordance with FASB ASC 855-10-50, "Subsequent Events" through October 14, 2024, which is the date the financial statements were available to be issued.

3. Investments:

During the years ended December 31, 2023 and 2022, the Plan's investments (including investments bought, sold, as well as held during the years) appreciated (depreciated) in fair value by \$586,246 and \$(1,120,726), respectively.

**IBEW Local 1158 Annuity Plan
Notes to Financial Statements
Years Ended December 31, 2023 and 2022**

4. Fair Value Measurements:

Financial Accounting Standards Board (FASB) Accounting Standards Codification (ASC) Topic 820, "Fair Value Measurements and Disclosures", establishes a framework for measuring fair value. This framework 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 under FASB ASC 820 are described as follows:

- (1) Level 1 - Inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets that the Plan has the ability to access.
- (2) Level 2 - Inputs other than quoted prices that are observable for the asset or liability; inputs that are derived principally from or corroborated by observable market data by correlation or other means. If the asset or liability has a specified (contractual) term, the level 2 input must be observable for substantially the full term of the asset or liability.
- (3) Level 3 - Inputs to the valuation methodology are unobservable and significant to the fair value measurement.

The asset's or liability'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.

Following is a description of the valuation methodologies used for assets at fair value. There have been no changes in the methodologies used at December 31, 2023 and 2022.

Short-term investments, mutual funds and common stock: Valued at the closing price reported in the active market in which the individual security is traded based on information obtained from independent quotation services (Level 1).

U.S. government securities and mortgage backed securities: U.S. Treasury Bonds are valued at the closing price reported in the active market in which the securities are traded based on information obtained from independent quotation services (Level 1). Other government securities, agency bonds and mortgage backed securities are valued using pricing models maximizing the use of observable inputs for similar securities (Level 2).

Corporate bonds and asset-backed securities: Valued based on yields currently available on comparable securities of issuers with similar credit ratings. When quoted prices are not available for identical or similar securities, the security is valued under an approach that maximizes observable inputs, such as current yields of similar instruments, broker/dealer quotes, bids and benchmark securities (Level 2).

Common collective trust: Valued at the net asset value (NAV) of units of a collective trust. Consists of pools of investments used by institutional investors to obtain equity and fixed income market exposures by investing in funds which are intended to mirror indices such as the Standard & Poor's 500® Index, Russell 2000® Index, or a custom benchmark index. They are valued on the basis of the relative interest of each participating investor in the fair value of the underlying assets of each of the respective common collective trusts (NAV).

IBEW Local 1158 Annuity Plan
Notes to Financial Statements
Years Ended December 31, 2023 and 2022

4. Fair Value Measurements (continued):

Investment contract: Valued at the net asset value (NAV) of the underlying registered mutual funds selected under the variable annuity contract based on observable market inputs of the funds as published on recognized market exchanges (NAV).

Assets measured at fair value on a recurring basis are summarized below:

Assets at Fair Value as of December 31, 2023				
	Total	Level 1	Level 2	Level 3
Short-term investments	\$ 362,752	\$ 362,752	\$ -	\$ -
Mutual funds	1,724,672	1,724,672	-	-
U.S. government securities	1,928,438	1,432,784	495,654	-
Corporate bonds	1,169,221	-	1,169,221	-
Common stock	<u>3,784,588</u>	<u>3,784,588</u>	<u>-</u>	<u>-</u>
Total investments at fair value	8,969,671	7,304,796	1,664,875	-
Investments measured at NAV *	<u>815,432</u>	<u>-</u>	<u>-</u>	<u>-</u>
Total Investments	<u>\$ 9,785,103</u>	<u>\$ 7,304,796</u>	<u>\$ 1,664,875</u>	<u>\$ -</u>

Assets at Fair Value as of December 31, 2022				
	Total	Level 1	Level 2	Level 3
Short-term investments	\$ 384,483	\$ 384,483	\$ -	\$ -
Mutual funds	725,847	725,847	-	-
U.S. government securities	1,431,165	1,229,030	202,135	-
Corporate bonds	995,017	-	995,017	-
Asset backed securities	97,144	-	97,144	-
Common stock	<u>3,304,340</u>	<u>3,304,340</u>	<u>-</u>	<u>-</u>
Total investments at fair value	6,937,996	5,643,700	1,294,296	-
Investments measured at NAV *	<u>1,544,480</u>	<u>-</u>	<u>-</u>	<u>-</u>
Total Investments	<u>\$ 8,482,476</u>	<u>\$ 5,643,700</u>	<u>\$ 1,294,296</u>	<u>\$ -</u>

(*) In accordance with Subtopic 820-15, certain investments that were measured at net asset value per share (or its equivalent) have not been classified in the fair value hierarchy. The fair value amounts presented in this table are intended to permit reconciliation of the fair value hierarchy to the line items presented in the statement of net assets available for benefits.

IBEW Local 1158 Annuity Plan
Notes to Financial Statements
Years Ended December 31, 2023 and 2022

4. Fair Value Measurements (continued):

The following table sets forth additional disclosures of Plan's investments whose fair value is estimated using net asset value per share (or its equivalent) as of December 31, 2023 and 2022:

		December 31, 2023		
		Unfunded	Redemption	Redemption
	<u>Fair Value</u>	<u>Commitment</u>	<u>Frequency</u>	<u>Notice Period</u>
Investment Contract:				
VOYA Retirement Insurance and Annuity Company	<u>815,432</u>	None	Daily	30 Days
Total	<u>\$ 815,432</u>			

		December 31, 2022		
		Unfunded	Redemption	Redemption
	<u>Fair Value</u>	<u>Commitment</u>	<u>Frequency</u>	<u>Notice Period</u>
Common Collective Trust:				
Collective S&P 500 Index Fund Non-Lending	\$ 888,901	None	Daily	30 Days
Investment Contract				
VOYA Retirement Insurance and Annuity Company	<u>655,579</u>	None	Daily	30 Days
Total	<u>\$ 1,544,480</u>			

Changes in Fair Value Levels - The availability of observable market data is monitored to assess the appropriate classification of financial instruments within the fair value hierarchy. Changes in economic conditions or model-based valuation techniques may require the transfer of financial instruments from one fair value level to another. In such instances, the transfer is reported at the beginning of the reporting period.

We evaluate the significance of transfers between levels based upon the nature of the financial instrument and size of the transfer relative to total net assets available for benefits. For the years ended December 31, 2023 and 2022, there were no significant transfers in or out of levels 1, 2, or 3.

IBEW Local 1158 Annuity Plan
Notes to Financial Statements
Years Ended December 31, 2023 and 2022

5. Nonparticipant-Directed Investments:

Information about the net assets and the significant components of the changes in net assets relating to the nonparticipant-directed investments is as follows:

	<u>December 31,</u>	
	<u>2023</u>	<u>2022</u>
Net Assets:		
Investments at fair value:		
Short-Term Investments	\$ 362,752	\$ 384,483
U.S. Government Securities	1,928,438	1,431,165
Corporate Bonds	1,169,221	995,017
Asset Backed Securities	-	97,144
Common Stock	3,784,588	3,304,340
Common Collective Trust	-	888,901
Mutual Funds	<u>1,724,672</u>	<u>725,847</u>
Total investments at fair value	8,969,671	7,826,897
Receivables	136,774	120,735
Liabilities	<u>(81,850)</u>	<u>(20,350)</u>
	<u>\$ 9,024,595</u>	<u>\$ 7,927,282</u>
	<u>Years Ended December 31,</u>	
	<u>2023</u>	<u>2022</u>
Changes in Net Assets:		
Contributions	\$ 1,183,399	\$ 1,067,192
Interest and Dividends	202,338	131,354
Net (Depreciation) Appreciation	473,088	(986,422)
Investment Expenses	(73,961)	(68,440)
Administrative Expenses	(87,400)	(79,035)
Benefits Paid to Participants	<u>(548,301)</u>	<u>(635,504)</u>
	<u>\$ 1,149,163</u>	<u>\$ (570,855)</u>

6. Plan Termination:

In the event of a termination or partial termination of the Plan, or in the event of complete discontinuance of contributions, each employee shall have a non-forfeitable right to the assets remaining after providing for the expenses of the Plan and for the payment of any accumulated share. Each participant shall receive that part of the total remaining assets in the same ratio as his or her accumulated share bears to the aggregate amount of the accumulated shares of all participants.

7. Parties-in-Interest:

The Plan's investments are held at Morgan Stanley, VOYA and Northern Trust, thus these entities are parties-in-interest. Also, certain other professionals, officers and employees of the Plan perform administrative functions and are compensated by the Plan. Such transactions are not deemed prohibited party-in-interest transactions because they are covered by statutory or administrative exemptions from the IRS and ERISA rules on prohibited transactions.

IBEW Local 1158 Annuity Plan
Notes to Financial Statements
Years Ended December 31, 2023 and 2022

8. Tax Status:

The Plan has been restated as of January 1, 2022 by adopting a Non-Standardized Pre-Approved Profit Sharing/Money Purchase Plan, which received a favorable opinion letter from the Internal Revenue Service dated June 30, 2020, which stated that the plan and related trust were designed in accordance with the applicable sections of the Internal Revenue Code ("IRC"). The Plan administrator and the Plan's tax counsel believe that the Plan is currently designed and being operated in compliance with the applicable requirements of the Internal Revenue Code.

Accounting principles generally accepted in the United States of America require Plan management to evaluate tax positions taken by the Plan and recognize a tax liability (or asset) if the Plan has taken an uncertain position that more likely than not would not be sustained upon examination by the Internal Revenue Service. The plan administrator has analyzed the tax positions taken by the Plan, and has concluded that as of December 31, 2023, there are no uncertain positions taken or expected to be taken that would require recognition of a liability (or asset) or disclosure in the financial statements. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress.

9. Risks and Uncertainties:

Investment Risk: 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 statement of net assets available for benefits.

Concentrations: As of December 31, 2023 and 2022, there were only two contributing employers. There exists the possibility that contributions could be reduced significantly due to changing circumstances and conditions, which would have a significant negative impact on the Fund.

10. Plan Restatement:

Effective January 1, 2022, the Plan was restated through a FIS Volume Submitter Document to comply with the Internal Revenue Service Cycle 3 Defined Contribution Plan Restatement.

11. Other Matters:

On April 19, 2023, the Plan received an Internal Revenue Service Closeout Letter for the examination of the plan year ending December 31, 2019. The Close Out Letter concluded that there were two deficiencies that should be corrected going forward in the 2022 Form 5500. These corrections resulted in the identification of the Plan as a multiple-employer plan and updating the effective date of the Plan to January 1, 1999.

IBEW Local 1158 Annuity Plan
Schedule H, Line 4(i) - Schedule of Assets (Held at End of Year)
December 31, 2023

2023 Form 5500
EIN: 22-0886457
Plan #004

(a)	(b) Identity of issuer, borrower, lessor, or similar part	(c) Description of investment including maturity date, rate of interest, collateral, par, or maturity value	(d) Cost	(e) Current Value
	American Funds - Balanced	Investment Contract	**	\$ 5,548
	American Funds - Fundamental Investors	Investment Contract	**	9,358
	BlackRock Equity Dividend Fund	Investment Contract	**	93,072
	ClearBridge Small Cap Growth Fund	Investment Contract	**	6,643
	Dodge & Cox International Stock Fund	Investment Contract	**	3,200
	Fidelity Advisors New Insights Fund	Investment Contract	**	182,341
	Invesco Dev Markets Equity Fund	Investment Contract	**	1,355
	Invest Eqv International Equity Fund	Investment Contract	**	1,172
	Invesco Small Cap Equity Fund	Investment Contract	**	14,797
	Pimco Vit Real Return Port Admin	Investment Contract	**	1,009
*	VOYA Fixed Account	Investment Contract	**	75,890
*	VOYA Government Money Market Port I	Investment Contract	**	2,424
*	VOYA HighYield Portfolio	Investment Contract	**	7,862
*	VOYA Index Solution 2025 Portfolio	Investment Contract	**	50,058
*	VOYA Index Solution 2035 Portfolio	Investment Contract	**	35,041
*	VOYA Index Solution 2040 Portfolio	Investment Contract	**	16,636
*	VOYA Index Solution 2050 Portfolio	Investment Contract	**	9,981
*	VOYA Index Solution Inc P Adv	Investment Contract	**	5,583
*	VOYA Intermediate Bond Portfolio	Investment Contract	**	122,215
*	VOYA MidCap Opportunities Portfolio	Investment Contract	**	114,628
*	VOYA Russell MidCap Index Portfolio	Investment Contract	**	56,619
*	Northern Trust Collective S&P 500 Index Fund Non-Lending	Short Term Investment	32	32
*	Morgan Stanley Account #552-112030-644	See attached details	6,713,156	8,969,639
				<u>\$ 9,785,103</u>

* Indicates a party-in-interest as defined in the Employee Security Act of 1974.

** Cost information is not presented for participant-directed investments.



Plan Account Number: 552-112030-644
For the Period: 01/01/2023 - 12/31/2023

Holdings

Cash, Deposits, Money Market Funds, and Certificates of Deposit

BANK DEPOSITS	Security Description	Account Number	Market Value
	MORGAN STANLEY BANK N.A.	552-038330-644	\$0.02
	MORGAN STANLEY BANK N.A.	552-038332-644	223.08
	MORGAN STANLEY BANK N.A.	552-038334-644	66,003.56
	MORGAN STANLEY BANK N.A.	552-038456-644	1,260.29
	MORGAN STANLEY BANK N.A.	552-071764-644	64.33
	MORGAN STANLEY BANK N.A.	552-078072-644	27,125.40
	MORGAN STANLEY BANK N.A.	552-078073-644	18,952.13
	MORGAN STANLEY PRIVATE BANK NA	552-038330-644	23,372.28
	MORGAN STANLEY PRIVATE BANK NA	552-038332-644	9,878.60
	MORGAN STANLEY PRIVATE BANK NA	552-038334-644	115,209.98
	MORGAN STANLEY PRIVATE BANK NA	552-038346-644	17,463.28
	MORGAN STANLEY PRIVATE BANK NA	552-038456-644	60,697.37
	MORGAN STANLEY PRIVATE BANK NA	552-071764-644	771.72
Total Bank Deposits			\$341,022.04

Percentage of Assets	Original Total Cost	Carrying Value	Market Value	Unrealized Gain/(Loss)	5500 Unrealized Gain/(Loss)	Accrued Income
3.79%	\$0.00	\$0.00	\$341,022.04	\$0.00	\$0.00	\$0.00

Total Cash, Deposits, Money Market Funds and Certificates of Deposit

Plan Account Number: 552-112030-644
For the Period: 01/01/2023 - 12/31/2023

Holdings

Savings and Time Deposits

USD SAVINGS AND TIME DEPOSITS

Security Description	Account Number	Value
MSPBNA PREFERRED SAVINGS- QC	552-038334-644	\$21,698.32
Asset Class: Cash		
Total USD Savings Deposits		\$21,698.32
Total USD Savings and Time Deposits		\$21,698.32

	Percentage of Assets	Value	Accrued Interest
Total Savings and Time Deposits	0.24%	\$21,698.32	\$0.00

US Government Securities

TREASURY SECURITIES

Security Description	Account Number	Face Value	Unit Price	Original Total Cost	Carrying Value	Market Value	Unrealized Gain/(Loss)	5500 Unrealized Gain/(Loss)	Accrued Income
UNITED STATES TREASURY NOTE									
Coupon Rate 4.375%; Matures 11/30/2028; CUSIP 91282CJN2	552-038330-644	189,000.00	\$102.352	\$190,928.68	\$191,064.23	\$193,444.45	\$2,542.71	\$3,080.58	\$700.36
Interest Paid Semi-Annually; Yield to Maturity 3.845%; Moody AAA; Issued 11/30/23; Asset Class: FI & Pref									
UNITED STATES TREASURY NOTE									
Coupon Rate 1.625%; Matures 05/15/2026; CUSIP 912828R36	552-038330-644	230,000.00	94.402	212,961.75	213,466.84	217,125.39	4,163.64	4,130.87	472.32
Interest Paid Semi-Annually May/Nov; Yield to Maturity 4.125%; Moody AAA; Issued 05/16/16; Asset Class: FI & Pref									
UNITED STATES TREASURY NOTE									
Coupon Rate 3.500%; Matures 04/30/2028; CUSIP 91282CHA2	552-038330-644	200,000.00	98.445	198,413.02	199,230.00	196,890.63	(1,421.83)	(1,166.29)	1,173.08
Interest Paid Semi-Annually Apr/Oct; Yield to Maturity 3.893%; Moody AAA; Issued 05/01/23; Asset Class: FI & Pref									
UNITED STATES TREASURY NOTE									
Coupon Rate 2.125%; Matures 03/31/2024; CUSIP 912828W71	552-038330-644	4,000.00	99.238	4,087.36	3,897.18	3,969.53	(40.25)	93.72	21.37
Interest Paid Semi-Annually Mar/Sep; Yield to Maturity 5.198%; Moody AAA; Issued 03/31/17; Asset Class: FI & Pref									
UNITED STATES TREASURY NOTE									
Coupon Rate 1.375%; Matures 11/15/2031; CUSIP 91282CDJ7	552-038330-644	106,000.00	83.086	101,671.73	86,471.51	88,071.09	(13,600.64)	1,783.77	184.19
Interest Paid Semi-Annually May/Nov; Yield to Maturity 3.890%; Moody AAA; Issued 11/15/21; Asset Class: FI & Pref									

CONTINUED

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Morgan Stanley

Plan Account Number: 552-112030-644
For the Period: 01/01/2023 - 12/31/2023

Holdings

TREASURY SECURITIES (CONTINUED)

Security Description	Account Number	Face Value	Unit Price	Original Total Cost	Carrying Value	Market Value	Unrealized Gain/(Loss)	5500 Unrealized Gain/(Loss)	Accrued Income
UNITED STATES TREASURY NOTE Coupon Rate 3.875%; Matures 08/15/2033; CUSIP 91282CHT1 Interest Paid Semi-Annually; Yield to Maturity 3.883%; Moody AAA	552-038330-644	77,000.00	99.938	71,586.28	72,040.33	76,951.88	5,365.60	6,030.46	1,118.91
UNITED STATES TREASURY NOTE Coupon Rate 3.750%; Matures 05/31/2030; CUSIP 91282CHF1 Interest Paid Semi-Annually; Yield to Maturity 3.898%; Moody AAA	552-038330-644	57,000.00	99.164	56,393.10	56,738.05	56,523.52	130.42	(33.49)	181.04
UNITED STATES TREASURY NOTE Coupon Rate 4.625%; Matures 11/15/2026; CUSIP 91282CJK8 Interest Paid Semi-Annually; Yield to Maturity 4.026%; Moody AAA	552-038330-644	328,000.00	101.605	330,589.23	331,464.42	333,265.94	2,740.83	3,718.61	1,917.09
UNITED STATES TREASURY NOTE Coupon Rate 1.875%; Matures 02/15/2032; CUSIP 91282CDY4 Interest Paid Semi-Annually; Yield to Maturity 3.899%; Moody AAA	552-038330-644	195,000.00	86.023	169,038.79	166,765.45	167,745.70	(1,293.08)	2,351.34	1,371.09
UNITED STATES TREASURY NOTE Coupon Rate 3.250%; Matures 06/30/2029; CUSIP 91282CEV9 Interest Paid Semi-Annually; Yield to Maturity 3.890%; Moody AAA	552-038330-644	102,000.00	96.859	99,973.76	101,265.17	98,796.56	(1,177.21)	(829.13)	1,639.48
Total Treasury Securities				\$1,435,643.70	\$1,422,403.18	\$1,432,784.69	\$(2,589.81)	\$19,160.44	\$8,778.93

FEDERAL AGENCIES

Security Description	Account Number	Face Value	Unit Price	Original Total Cost	Carrying Value	Market Value	Unrealized Gain/(Loss)	5500 Unrealized Gain/(Loss)	Accrued Income
FEDERAL NATIONAL MTG ASSN POOL MA4761 Coupon Rate 5.000%; Matures 09/01/2052; CUSIP 31418EJF8 Interest Paid Monthly; Yield to Maturity 5.061%; Factor .9052076; Issued 08/01/22; Current Face 82,373.900; Asset Class: FI & Pref	552-038330-644	91,000.00	\$99.077	\$82,123.85	\$80,190.82	\$81,613.58	\$1,434.21	\$1,765.98	\$343.22
FEDERAL NATIONAL MTG ASSN POOL MA4654 Coupon Rate 3.500%; Matures 07/01/2052; CUSIP 31418EDE8 Interest Paid Monthly; Yield to Maturity 3.979%; Factor .9281813; Issued 06/01/22; Current Face 27,845.439; Asset Class: FI & Pref	552-038330-644	30,000.00	91.873	26,008.24	25,427.54	25,582.44	954.63	236.12	81.22
FEDERAL NATIONAL MTG ASSN POOL MA4600 Coupon Rate 3.500%; Matures 05/01/2052; CUSIP 31418EDE7 Interest Paid Monthly; Yield to Maturity 3.981%; Factor .9079068; Issued 04/01/22; Current Face 67,185.107; Asset Class: FI & Pref	552-038330-644	74,000.00	91.873	71,673.07	61,324.98	61,724.97	(3,347.50)	595.95	195.96
FEDERAL NATIONAL MTG ASSN POOL MA4869 Coupon Rate 5.500%; Matures 01/01/2053; CUSIP 31418EMT4 Interest Paid Monthly; Yield to Maturity 5.464%; Factor .9197539; Issued 12/01/22; Current Face 129,685.306; Asset Class: FI & Pref	552-038330-644	141,000.00	100.520	136,379.53	130,022.21	130,359.66	715.97	931.84	594.39
									CONTINUED

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Morgan Stanley

Plan Account Number: 552-112030-644
For the Period: 01/01/2023 - 12/31/2023

Holdings

FEDERAL AGENCIES (CONTINUED)

Security Description	Account Number	Face Value	Unit Price	Original Total Cost	Carrying Value	Market Value	Unrealized Gain/(Loss)	5500 Unrealized Gain/(Loss)	Accrued Income
FEDERAL NATIONAL MTG ASSN POOL MA4580 Coupon Rate 3.500%; Matures 04/01/2052; CUSIP 31418EC57 Interest Paid Monthly; Yield to Maturity 3.981%; Factor .8832708; Issued 03/01/22; Current Face 113,058,674; Asset Class: FI & Pref	552-038330-644	128,000.00	91.876	127,083.95	103,227.86	103,873.78	(8,504.20)	975.67	329.75
FEDERAL NATIONAL MTG ASSN POOL MA4785 Coupon Rate 5.000%; Matures 10/01/2052; CUSIP 31418EJ76 Interest Paid Monthly; Yield to Maturity 5.055%; Factor .9092643; Issued 09/01/22; Current Face 12,729,701; Asset Class: FI & Pref	552-038330-644	14,000.00	99.168	11,869.18	11,755.98	12,623.79	906.97	920.85	53.04
FHLMC 30 YR GOLD SD8316 Coupon Rate 5.500%; Matures 03/01/2053; CUSIP 3132DWGZ0 Interest Paid Monthly; Yield to Maturity 5.465%; Factor .9365324; Issued 03/01/23; Current Face 25,286,375; Asset Class: FI & Pref	552-038330-644	27,000.00	100.506	24,194.71	24,009.18	25,414.32	1,491.97	1,521.04	115.90
FHLMC 30 YR GOLD SD3097 Coupon Rate 3.500%; Matures 06/01/2052; CUSIP 3132DQNN2 Interest Paid Monthly; Yield to Maturity 3.981%; Factor .9562046; Issued 05/01/23; Current Face 59,284,685; Asset Class: FI & Pref	552-038330-644	62,000.00	91.864	50,119.73	49,565.80	54,461.28	5,014.98	5,068.39	172.91
Total Federal Agencies				\$529,452.26	\$485,524.37	\$495,653.82	\$(1,332.97)	\$12,015.84	\$1,886.39

Percentage of Assets	Original Total Cost	Carrying Value	Market Value	Unrealized Gain/(Loss)	5500 Unrealized Gain/(Loss)	Accrued Income
21.56%	\$1,965,095.96	\$1,907,927.55	\$1,928,438.51	\$(3,922.78)	\$31,176.28	\$10,665.32
Total Government Securities						

Corporate Fixed Income

CORPORATE BONDS

Security Description	Account Number	Face Value	Unit Price	Original Total Cost	Carrying Value	Market Value	Unrealized Gain/(Loss)	5500 Unrealized Gain/(Loss)	Accrued Income
ABBVIE INC Coupon Rate 2.950%; Matures 11/21/2026; CUSIP 00287YBVO Interest Paid Semi-Annually May/Nov; Callable \$100.00 on 09/21/26; Yield to Maturity 4.462%; Moody A3 S&P A-; Issued 05/21/20; Asset Class: FI & Pref	552-038330-644	64,000.00	\$95.941	\$65,788.90	\$59,952.22	\$61,402.24	\$(3,326.19)	\$1,659.80	\$209.78
AIR LEASE CORP Coupon Rate 3.250%; Matures 10/01/2029; CUSIP 00914AAE2 Interest Paid Semi-Annually Apr/Oct; Callable \$100.00 on 07/01/29; Yield to Maturity 5.161%; S&P BBB; Issued 09/16/19; Asset Class: FI & Pref	552-038330-644	70,000.00	90.593	67,235.70	60,312.95	63,415.10	(3,820.60)	3,670.90	568.75

CONTINUED

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Morgan Stanley

Plan Account Number: 552-112030-644
For the Period: 01/01/2023 - 12/31/2023

Holdings

CORPORATE BONDS (CONTINUED)

Security Description	Account Number	Face Value	Unit Price	Original Total Cost	Carrying Value	Market Value	Unrealized Gain/(Loss)	5500 Unrealized Gain/(Loss)	Accrued Income
AMERICAN ELECTRIC POWER CO INC Coupon Rate 5.625%; Matures 03/01/2033; CUSIP 025537AX9 Interest Paid Semi-Annually Mar/Sep; Callable \$100.00 on 12/01/32; Yield to Call 5.010%; Moody BAA2	552-038330-644	63,000.00	104.372	64,606.74	65,189.40	65,754.36	1,257.35	1,746.21	1,181.25
BANK OF AMERICA CORP FXD TO 102024 VAR THRAFTER 2.4560% Coupon Rate 2.456%; Matures 10/22/2025; CUSIP 06051GHW2 Interest Paid Semi-Annually Apr/Oct; Callable \$100.00 on 10/22/24; Floating Rate; Moody A1	552-038330-644	61,000.00	97.460	62,938.49	58,061.09	59,450.60	(2,157.92)	1,668.33	278.82
BANK OF AMERICA CORP FXD TO 072031 VAR THRAFTER 2.2990% Coupon Rate 2.299%; Matures 07/21/2032; CUSIP 06051GKA6 Interest Paid Semi-Annually Jan/Jul; Callable \$100.00 on 07/21/31; Floating Rate; Moody A1	552-038330-644	80,000.00	81.708	74,572.38	62,286.10	65,366.00	(9,113.35)	3,887.10	807.20
BOEING CO/THE Coupon Rate 2.196%; Matures 02/04/2026; CUSIP 097023DG7 Interest Paid Semi-Annually Feb/Aug; Callable \$100.00 on 01/08/24; Yield to Maturity 4.970%; Moody BAA2	552-038330-644	64,000.00	94.551	63,172.78	58,871.58	60,512.64	(2,639.51)	2,214.95	573.89
CAPITAL ONE FINANCIAL CORP Coupon Rate 4.200%; Matures 10/29/2025; CUSIP 14040HBJ3 Interest Paid Semi-Annually Apr/Oct; Callable \$100.00 on 09/29/25; Yield to Maturity 5.220%; Moody BAA1	552-038330-644	62,000.00	98.238	64,515.24	60,489.49	60,907.56	(1,580.73)	866.54	448.47
CHENIERE CORPUS CHRISTI HOLDINGS LLC Coupon Rate 5.875%; Matures 03/31/2025; CUSIP 16412XAC9 Interest Paid Semi-Annually Jun/Dec; Callable \$100.00 on 10/02/24; Yield to Call 5.497%; Moody BAA2	552-038330-644	59,000.00	100.265	59,434.87	59,314.42	59,156.35	(42.82)	1,565.43	1,723.50
CITIGROUP INC FXD TO 012027 VAR THRAFTER 3.8870% Coupon Rate 3.887%; Matures 01/10/2028; CUSIP 172967LD1 Interest Paid Semi-Annually Jan/Jul; Callable \$100.00 on 01/10/27; Floating Rate; Moody A3	552-038330-644	96,000.00	96.803	102,081.81	91,635.16	92,930.88	(6,704.21)	3,047.46	1,751.74
EDISON INTERNATIONAL Coupon Rate 5.750%; Matures 06/15/2027; CUSIP 281020AN7 Interest Paid Semi-Annually Jun/Dec; Callable \$100.00 on 04/15/27; Yield to Call 4.981%; Moody BAA2	552-038330-644	30,000.00	102.297	34,413.76	30,191.81	30,689.10	(1,536.93)	573.96	76.67
ENERGY TRANSFER LP Coupon Rate 5.250%; Matures 04/15/2029; CUSIP 29278NAG8 Interest Paid Semi-Annually Apr/Oct; Callable \$100.00 on 01/15/29; Yield to Call 5.055%; Moody BAA3	552-038330-644	62,000.00	100.856	63,597.61	60,754.98	62,530.72	(300.97)	2,462.91	687.17
GENERAL MOTORS FINANCIAL CO INC Coupon Rate 4.300%; Matures 07/13/2025; CUSIP 37045XAZ9 Interest Paid Semi-Annually Jan/Jul; Callable \$100.00 on 04/13/25; Yield to Maturity 5.388%; Moody BAA2	552-038330-644	61,000.00	98.418	66,609.72	60,362.28	60,034.68	(2,685.96)	896.47	1,224.07

CONTINUED

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Morgan Stanley

Plan Account Number: 552-112030-644
For the Period: 01/01/2023 - 12/31/2023

Holdings

CORPORATE BONDS (CONTINUED)

Security Description	Account Number	Face Value	Unit Price	Original Total Cost	Carrying Value	Market Value	Unrealized Gain/(Loss)	5500 Unrealized Gain/(Loss)	Accrued Income
GOLDMAN SACHS GROUP INC/THE FX D 552-038330-644									
TO 12/2025 VAR THRAFTER 1.093%									
Coupon Rate 1.093%; Matures 12/09/2026; CUSIP 38141GXM1									
Interest Paid Semi-Annually Jun/Dec; Callable \$100.00 on 12/09/25; Floating Rate; Moody A2									
HEWLETT PACKARD ENTERPRISE CO 552-038330-644									
Coupon Rate 4.900%; Matures 10/15/2025; CUSIP 42824CAW9									
Interest Paid Semi-Annually Apr/Oct; Callable \$100.00 on 07/15/25; Yield to Maturity 5.068%; Moody BAA2									
JPMORGAN CHASE & CO FXD TO 552-038330-644									
04/2025 VAR THRAFTER 4%									
Coupon Rate 4.000%; Perpetual Maturity; CUSIP 48128BAH4									
Interest Paid Semi-Annually Apr/Oct; Callable \$100.00 on 04/01/25; Floating Rate; Moody BAA2									
NORTHERN TRUST CORP 552-038330-644									
Coupon Rate 6.125%; Matures 11/02/2032; CUSIP 665859AX2									
Interest Paid Semi-Annually May/Nov; Callable \$100.00 on 08/02/32; Yield to Call 5.032%; Moody A2									
TORONTO-DOMINION BANK/THE 552-038330-644									
Coupon Rate 5.103%; Matures 01/09/2026; CUSIP 89115A2K7									
Interest Paid Semi-Annually Jan/Jul; Yield to Maturity 4.694%; Moody A1									
WELLS FARGO & CO FXD TO 04/2025 552-038330-644									
VAR THRAFTER 3.908%									
Coupon Rate 3.908%; Matures 04/25/2026; CUSIP 95000U2X0									
Interest Paid Semi-Annually Apr/Oct; Callable \$100.00 on 04/25/25; Floating Rate; Moody A1									
ZIMMER BIOMET HOLDINGS INC 552-038330-644									
Coupon Rate 1.450%; Matures 11/22/2024; CUSIP 98956PAU6									
Interest Paid Semi-Annually May/Nov; Callable \$100.00 on 01/08/24; Yield to Maturity 5.640%; Moody BAA2									
Total Corporate Bonds									
				\$1,206,964.61	\$1,146,376.69	\$1,169,221.37	\$(23,016.57)	\$36,161.38	\$13,316.70
Total Fixed Income									
				\$1,206,964.61	\$1,146,376.69	\$1,169,221.37	\$(23,016.57)	\$36,161.38	\$13,316.70

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Morgan Stanley

Plan Account Number: 552-112030-644
For the Period: 01/01/2023 - 12/31/2023

Holdings

Stocks

COMMON STOCKS

Security Description	Account Number	Quantity	Share Price	Original Total Cost	Carrying Value	Market Value	Unrealized Gain/(Loss)	5500 Unrealized Gain/(Loss)
ACADIA HEALTHCARE COMPANY INC (ACHC) <i>Asset Class: Equities</i>	552-038332-644	91.000	\$77.760	\$5,709.69	\$7,491.12	\$7,076.16	\$1,366.47	\$(414.96)
AGREE REALTY CORP (ADC) <i>Next Dividend Payable 01/16/24; Asset Class: Alt</i>	552-038332-644	98.000	62.950	6,609.13	6,951.14	6,169.10	(440.03)	(782.04)
ALTRIA GROUP INC (MO) <i>Next Dividend Payable 01/10/24; Asset Class: Equities</i>	552-038456-644	624.000	40.340	20,934.96	28,523.04	25,172.16	4,237.20	(3,350.88)
APTARGROUP INC (ATR) <i>Next Dividend Payable 02/2024; Asset Class: Equities</i>	552-038332-644	37.000	123.620	4,937.20	4,069.26	4,573.94	(363.26)	504.68
AT&T INC (T) <i>Next Dividend Payable 02/2024; Asset Class: Equities</i>	552-038456-644	2,382.000	16.780	53,748.39	43,852.62	39,969.96	(13,778.43)	(3,882.66)
ATKORE INC (ATKR) <i>Asset Class: Equities</i>	552-038332-644	58.000	160.000	5,999.15	6,578.36	9,280.00	3,280.85	2,701.64
ATLANTIC UN BANKSHARES CORP (AUB) <i>Next Dividend Payable 02/2024; Asset Class: Equities</i>	552-038332-644	185.000	36.540	6,920.31	6,500.90	6,759.90	(160.41)	259.00
AZENTA INC (AZTA) <i>Asset Class: Equities</i>	552-038332-644	132.000	65.140	8,281.19	7,087.70	8,598.48	317.29	1,510.78
BANK OF AMERICA CORP (BAC) <i>Next Dividend Payable 03/2024; Asset Class: Equities</i>	552-038456-644	1,804.000	33.670	50,858.71	59,044.02	60,740.68	9,881.97	1,696.66
BCE INC (BCE) <i>Next Dividend Payable 01/15/24; Asset Class: Equities</i>	552-038456-644	1,392.000	39.380	61,140.20	60,071.22	54,816.96	(6,323.24)	(5,254.26)
BIO RAD LAB A (BIO) <i>Asset Class: Equities</i>	552-038332-644	20.757	322.890	12,423.59	8,528.37	6,702.23	(5,721.36)	(1,826.14)
BJS WHSL CLUB HLDGS INC (BJ) <i>Asset Class: Equities</i>	552-038332-644	181.000	66.660	10,300.09	11,974.96	12,065.46	1,765.37	90.50
BOOZ ALLEN HAMILTON HLDG CL-A (BAH) <i>Next Dividend Payable 03/2024; Asset Class: Equities</i>	552-038332-644	94.000	127.910	7,586.49	9,824.88	12,023.54	4,437.05	2,198.66
BRIGHT HORIZONS FAMILY SOLUT (BFAM) <i>Asset Class: Equities</i>	552-038332-644	78.156	94.240	9,253.56	5,802.82	7,365.42	(1,888.14)	1,562.60
BROADCOM INC (AVGO) <i>Next Dividend Payable 03/2024; Asset Class: Equities</i>	552-038456-644	49.524	1,116.250	16,258.26	27,690.36	55,281.17	39,022.91	27,590.81
BURLINGTON STORES INC (BURL) <i>Asset Class: Equities</i>	552-038332-644	31.000	194.480	9,515.01	6,285.56	6,028.88	(3,486.13)	(256.68)
CARTER'S (CRI) <i>Next Dividend Payable 03/2024; Asset Class: Equities</i>	552-038332-644	43.999	74.890	3,681.93	3,282.77	3,295.09	(386.84)	12.32

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Holdings

COMMON STOCKS (CONTINUED)

Security Description	Account Number	Quantity	Share Price	Original Total Cost	Carrying Value	Market Value	Unrealized Gain/(Loss)	5500 Unrealized Gain/(Loss)
CATALENT INC (CTLT)	552-038332-644	82.000	44.930	4,105.02	3,730.49	3,684.26	(420.76)	(46.23)
Asset Class: Equities								
CAVCO INDUSTRIES INC (CVCO)	552-038332-644	34.000	346.620	8,587.49	7,692.50	11,785.08	3,197.59	4,092.58
Asset Class: Equities								
CCC INTELLIGENT SOLUTIONS HLD (CCCS)	552-038332-644	658.000	11.390	7,834.46	7,834.46	7,494.62	(339.84)	(339.84)
Asset Class: Equities								
CHAMPIONX CORPORATION (CHX)	552-038332-644	126.000	29.210	2,583.84	3,652.74	3,680.46	1,096.62	27.72
Next Dividend Payable 01/2024; Asset Class: Equities								
CHART INDS INC (GTLS)	552-038332-644	29.236	136.330	4,733.47	4,733.47	3,985.74	(747.73)	(747.73)
Asset Class: Equities								
CHEVRON CORP (CVX)	552-038456-644	321.000	149.160	29,632.12	57,616.29	47,880.36	18,248.24	(9,735.93)
Next Dividend Payable 03/2024; Asset Class: Equities								
CHUBB LTD (CB)	552-038456-644	325.000	226.000	34,462.39	71,695.00	73,450.00	38,987.61	1,755.00
Next Dividend Payable 01/05/24; Asset Class: Equities								
CISCO SYS INC (CSCO)	552-038456-644	1,133.000	50.520	31,642.04	54,491.41	57,239.16	25,597.12	2,747.75
Next Dividend Payable 01/2024; Asset Class: Equities								
CITIGROUP INC NEW (C)	552-038456-644	881.000	51.440	54,663.50	39,847.63	45,318.64	(9,344.86)	5,471.01
Next Dividend Payable 02/2024; Asset Class: Equities								
COGNEX CORP (CGNX)	552-038332-644	213.000	41.740	13,787.59	9,566.40	8,890.62	(4,896.97)	(675.78)
Next Dividend Payable 03/2024; Asset Class: Equities								
COLUMBUS MCKINNON CORP (CMCO)	552-038332-644	144.000	39.020	6,936.11	4,675.68	5,618.88	(1,317.23)	943.20
Next Dividend Payable 02/2024; Asset Class: Equities								
COMCAST CORP (NEW) CLASS A (CMCSA)	552-038456-644	1,281.000	43.850	50,234.89	45,372.21	56,171.85	5,936.96	10,799.64
Next Dividend Payable 01/24/24; Asset Class: Equities								
COMFORT SYSTEMS USA INC (FIX)	552-038332-644	57.079	205.670	4,234.80	6,568.65	11,739.44	7,504.64	5,170.79
Next Dividend Payable 02/2024; Asset Class: Equities								
CONOCOPHILLIPS (COP)	552-038456-644	389.000	116.070	18,340.70	45,902.00	45,151.23	26,810.53	(750.77)
Next Dividend Payable 03/2024; Asset Class: Equities								
CROWN CASTLE INC (CCI)	552-038456-644	262.000	115.190	24,076.12	24,076.12	30,179.78	6,103.66	6,103.66
Next Dividend Payable 01/24/24; Asset Class: Alt								
CYBERARK SOFTWARE LTD SHS (CYBR)	552-038332-644	58.194	219.050	9,046.11	7,873.81	12,747.40	3,701.29	4,873.59
Asset Class: Equities								
DIAGEO PLC SPON ADR NEW (DEO)	552-038456-644	183.000	145.660	17,718.33	31,088.75	26,655.78	8,937.45	(4,432.97)
Next Dividend Payable 04/2024; Asset Class: Equities								
DORMAN PRODUCTS, INC (DORM)	552-038332-644	76.000	83.410	7,327.46	6,146.12	6,339.16	(988.30)	193.04
Asset Class: Equities								

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Holdings

COMMON STOCKS (CONTINUED)

Security Description	Account Number	Quantity	Share Price	Original Total Cost	Carrying Value	Market Value	Unrealized Gain/(Loss)	5500 Unrealized Gain/(Loss)
DOW INC (DOW)	552-038456-644	970.000	54.840	47,096.24	49,451.83	53,194.80	6,098.56	3,742.97
Next Dividend Payable 03/2024; Asset Class: Equities								
DUKE ENERGY CORPORATION (DUK)	552-038456-644	571.000	97.040	51,164.10	58,807.29	55,409.84	4,245.74	(3,397.45)
Next Dividend Payable 03/2024; Asset Class: Equities								
EAGLE MATLS INC (EXP)	552-038332-644	54.488	202.840	8,101.12	7,238.73	11,052.35	2,951.23	3,813.62
Next Dividend Payable 01/12/24; Asset Class: Equities								
EASTERLY GOVT PTYS INC COM (DEA)	552-038332-644	393.000	13.440	7,968.85	5,505.19	5,281.92	(2,686.93)	(223.27)
Next Dividend Payable 02/2024; Asset Class: Alt								
EASTGROUP PROPERTIES INC (EGP)	552-038332-644	39.000	183.540	6,406.92	5,774.34	7,158.06	751.14	1,383.72
Next Dividend Payable 01/12/24; Asset Class: Alt								
ELEMENT SOLUTIONS INC (ESI)	552-038332-644	414.000	23.140	9,384.47	7,530.66	9,579.96	195.49	2,049.30
Next Dividend Payable 03/2024; Asset Class: Equities								
ENTEGRIS INC (ENTG)	552-038332-644	92.000	119.820	10,197.74	6,034.28	11,023.44	825.70	4,989.16
Next Dividend Payable 02/2024; Asset Class: Equities								
EXPONENT INC (EXPO)	552-038332-644	74.000	88.040	8,312.23	7,320.50	6,514.96	(1,797.27)	(805.54)
Next Dividend Payable 03/2024; Asset Class: Equities								
EXXON MOBIL CORP (XOM)	552-038456-644	436.000	99.980	16,675.07	48,090.80	43,591.28	26,916.21	(4,499.52)
Next Dividend Payable 03/2024; Asset Class: Equities								
FEDERAL SIGNAL CORP (FSS)	552-038332-644	124.000	76.740	4,732.22	5,762.28	9,515.76	4,783.54	3,753.48
Next Dividend Payable 03/2024; Asset Class: Equities								
FIVE BELOW (FIVE)	552-038332-644	43.000	213.160	9,279.28	7,605.41	9,165.88	(113.40)	1,560.47
Asset Class: Equities								
GATES INDUSTRIAL CORP PLC (GTES)	552-038332-644	504.000	13.420	7,395.41	5,804.13	6,763.68	(631.73)	959.55
Asset Class: Equities								
GENL DYNAMICS CORP (GD)	552-038456-644	243.000	259.670	40,972.51	59,649.73	63,099.81	22,127.30	3,450.08
Next Dividend Payable 02/2024; Asset Class: Equities								
GENTHERM INC COM (THRM)	552-038332-644	84.000	52.360	6,878.19	5,484.36	4,398.24	(2,479.95)	(1,086.12)
Asset Class: Equities								
GENUINE PARTS CO (GPC)	552-038456-644	340.000	138.500	18,186.42	58,993.40	47,090.00	28,903.58	(11,903.40)
Next Dividend Payable 01/02/24; Asset Class: Equities								
GIBRALTAR INDUSTRIES INC (ROCK)	552-038332-644	96.410	78.980	6,047.96	4,423.29	7,614.46	1,566.50	3,191.17
Asset Class: Equities								
GLACIER BANCORP INC NEW (GBCI)	552-038332-644	123.000	41.320	6,277.35	5,914.64	5,082.36	(1,194.99)	(832.28)
Next Dividend Payable 03/2024; Asset Class: Equities								
GLOBANT S.A (GLOB)	552-038332-644	48.000	237.980	11,818.54	8,071.68	11,423.04	(395.50)	3,351.36
Asset Class: Equities								

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Morgan Stanley

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Holdings

COMMON STOCKS (CONTINUED)

Security Description	Account Number	Quantity	Share Price	Original Total Cost	Carrying Value	Market Value	Unrealized Gain/(Loss)	5500 Unrealized Gain/(Loss)
GLOBUS MEDICAL INC A (GMED)	552-038332-644	143.000	53.290	10,067.88	9,972.72	7,620.47	(2,447.41)	(2,352.25)
Asset Class: Equities								
GRAND CANYON ED INC COM (LOPE)	552-038332-644	43.000	132.040	3,722.49	4,543.38	5,677.72	1,955.23	1,134.34
Asset Class: Equities								
HALOZYME THERAPEUTICS INC (HALO)	552-038332-644	158.000	36.960	7,081.27	8,818.88	5,839.68	(1,241.59)	(2,979.20)
Asset Class: Equities								
HEALTHPEAK PPTYS INC (PEAK)	552-038456-644	2,139.000	19.800	57,519.90	49,715.36	42,352.20	(15,167.70)	(7,363.16)
Next Dividend Payable 02/2024; Asset Class: Alt								
HEXCEL CORP NEW (HXL)	552-038332-644	104.000	73.750	5,675.40	6,120.40	7,670.00	1,994.60	1,549.60
Next Dividend Payable 02/2024; Asset Class: Equities								
HOLOGIC INC (HOLX)	552-038332-644	95.105	71.450	6,882.80	7,234.83	6,795.25	(87.55)	(439.58)
Asset Class: Equities								
IDACORP INC (IDA)	552-038332-644	73.000	98.320	7,910.76	7,873.05	7,177.36	(733.40)	(695.69)
Next Dividend Payable 02/2024; Asset Class: Equities								
IDEX CORPORATION DELAWARE (IEX)	552-038332-644	41.183	217.110	8,814.16	8,814.16	8,941.24	127.08	127.08
Next Dividend Payable 01/2024; Asset Class: Equities								
INTEGER HOLDINGS CORP (ITGR)	552-038332-644	91.000	99.080	8,075.24	6,295.67	9,016.28	941.04	2,720.61
Asset Class: Equities								
INTEL CORP (INTC)	552-038456-644	620.000	50.250	16,380.71	16,386.60	31,155.00	14,774.29	14,768.40
Next Dividend Payable 03/2024; Asset Class: Equities								
INTRACELLULAR THERAPIES INC (ITCI)	552-038332-644	131.000	71.620	7,096.41	6,847.69	9,382.22	2,285.81	2,534.53
Asset Class: Equities								
ITT INC (ITT)	552-038332-644	72.000	119.320	6,621.97	6,621.97	8,591.04	1,969.07	1,969.07
Next Dividend Payable 03/2024; Asset Class: Equities								
JAZZ PHARMACEUTICALS PLC (JAZZ)	552-038332-644	59.000	123.000	7,928.92	9,217.78	7,257.00	(671.92)	(1,960.78)
Asset Class: Equities								
JOHNSON & JOHNSON (JNJ)	552-038456-644	403.000	156.740	42,511.75	15,332.16	63,166.22	20,654.47	47,834.06
Next Dividend Payable 03/2024; Asset Class: Equities								
JOHNSON CTL'S INTL PLC (JCI)	552-038456-644	1,092.000	57.640	47,060.28	69,888.00	62,942.88	15,882.60	(6,945.12)
Next Dividend Payable 01/12/24; Asset Class: Equities								
JPMORGAN CHASE & CO (JPM)	552-038456-644	541.000	170.100	35,896.89	72,548.10	92,024.10	56,127.21	19,476.00
Next Dividend Payable 01/2024; Asset Class: Equities								
KENVUE INC (KVUE)	552-038456-644	2,188.000	21.530	38,672.34	103,698.39	47,107.64	8,435.30	(56,590.75)
Next Dividend Payable 02/2024; Asset Class: Equities								
KINSALE CAP GROUP INC (KNSL)	552-038332-644	32.000	334.910	5,947.10	8,368.64	10,717.12	4,770.02	2,348.48
Next Dividend Payable 03/2024; Asset Class: Equities								

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Holdings

COMMON STOCKS (CONTINUED)

Security Description	Account Number	Quantity	Share Price	Original Total Cost	Carrying Value	Market Value	Unrealized Gain/(Loss)	5500 Unrealized Gain/(Loss)
KRISPY KREME INC (DNUT)	552-038332-644	183.000	15.090	2,651.74	1,888.56	2,761.47	109.73	872.91
Next Dividend Payable 02/2024; Asset Class: Equities								
LANCASTER COLONY CRP (LANC)	552-038332-644	42.000	166.390	7,759.44	8,286.60	6,988.38	(771.06)	(1,298.22)
Next Dividend Payable 03/2024; Asset Class: Equities								
LINCOLN ELEC HLDGS INC (LECO)	552-038332-644	43.770	217.460	5,995.01	6,324.33	9,518.22	3,523.21	3,193.89
Next Dividend Payable 01/12/24; Asset Class: Equities								
LITHIA MTRS INC (LAD)	552-038332-644	33.000	329.280	10,861.84	6,756.42	10,866.24	4.40	4,109.82
Next Dividend Payable 02/2024; Asset Class: Equities								
LOWES COMPANIES INC (LOW)	552-038456-644	186.000	222.550	19,451.03	37,058.64	41,394.30	21,943.27	4,335.66
Next Dividend Payable 02/2024; Asset Class: Equities								
MACOM TECHNOLOGY SOLU HLD (MTSI)	552-038332-644	73.000	92.950	4,133.25	4,133.25	6,785.35	2,652.10	2,652.10
Asset Class: Equities								
MAGNOLIA OIL & GAS CORP CL A (MGV)	552-038332-644	252.000	21.290	6,173.94	5,909.40	5,365.08	(808.86)	(544.32)
Next Dividend Payable 03/2024; Asset Class: Equities								
MANHATTAN ASSOC INC (MANH)	552-038332-644	49.600	215.320	7,307.96	6,021.44	10,679.87	3,371.91	4,658.43
Asset Class: Equities								
MARKETAXESS HOLDINGS INC (MKTIX)	552-038332-644	17.000	292.850	4,095.05	4,741.13	4,978.45	883.40	237.32
Next Dividend Payable 02/2024; Asset Class: Equities								
MATADOR RES CO (MTDR)	552-038332-644	108.000	56.860	6,605.92	6,605.92	6,140.88	(465.04)	(465.04)
Next Dividend Payable 03/2024; Asset Class: Equities								
MEDTRONIC PLC SHS (MDT)	552-038456-644	606.000	82.380	60,540.99	47,098.32	49,922.28	(10,618.71)	2,823.96
Next Dividend Payable 01/12/24; Asset Class: Equities								
MERCK & CO INC NEW COM (MRK)	552-038456-644	428.000	109.020	15,427.82	47,486.60	46,660.56	31,232.74	(826.04)
Next Dividend Payable 01/08/24; Asset Class: Equities								
MICROSOFT CORP (MSFT)	552-038456-644	74.000	376.040	3,744.84	17,746.68	27,826.96	24,082.12	10,080.28
Next Dividend Payable 03/2024; Asset Class: Equities								
MOLINA HEALTHCARE INC (MOH)	552-038332-644	10.190	361.310	2,702.29	3,364.94	3,681.75	979.46	316.81
Asset Class: Equities								
MORGAN STANLEY (MS)	552-038456-644	716.000	93.250	29,863.47	60,874.32	66,767.00	36,903.53	5,892.68
Next Dividend Payable 02/2024; Asset Class: Equities								
NATIONAL STORAGE AFFILIATES TR (NSA)	552-038332-644	115.000	41.470	5,897.39	4,326.53	4,769.05	(1,128.34)	442.52
Next Dividend Payable 03/2024; Asset Class: Alt								
NEUROCRINE BIOSCIENCES INC (NBIX)	552-038332-644	77.000	131.760	6,992.01	9,196.88	10,145.52	3,153.51	948.64
Asset Class: Equities								
NEXTERA ENERGY INC (NEE)	552-038456-644	867.000	60.740	26,985.25	70,049.27	52,661.58	25,676.33	(17,387.69)
Next Dividend Payable 03/2024; Asset Class: Equities								
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Holdings

COMMON STOCKS (CONTINUED)

Security Description	Account Number	Quantity	Share Price	Original Total Cost	Carrying Value	Market Value	Unrealized Gain/(Loss)	5500 Unrealized Gain/(Loss)
NORDSON CP (NDSN)	552-038332-644	44.000	264.160	10,122.09	10,459.68	11,623.04	1,500.95	1,163.36
Next Dividend Payable 01/02/24; Asset Class: Equities								
NOVARTIS AG ADR (NVS)	552-038456-644	584.000	100.970	38,558.57	52,980.48	58,966.48	20,407.91	5,986.00
Next Dividend Payable 03/2024; Asset Class: Equities								
OVINTIV INC (OVV)	552-038332-644	112.000	43.920	5,606.40	5,679.52	4,919.04	(687.36)	(760.48)
Next Dividend Payable 03/2024; Asset Class: Equities								
PAYLOCITY HOLDING CORPORATION (PCTV)	552-038332-644	49.000	164.850	11,768.14	9,388.59	8,077.65	(3,690.49)	(1,310.94)
Asset Class: Equities								
PERFORMANCE FOOD GROUP CO (PFGC)	552-038332-644	162.000	69.150	7,590.22	9,459.18	11,202.30	3,612.08	1,743.12
Asset Class: Equities								
PFIZER INC (PFE)	552-038456-644	1,597.000	28.790	47,816.05	69,995.20	45,977.63	(1,838.42)	(24,017.57)
Next Dividend Payable 03/2024; Asset Class: Equities								
PHILIP MORRIS INTL INC (PM)	552-038456-644	633.000	94.080	52,677.93	64,065.93	59,552.64	6,874.71	(4,513.29)
Next Dividend Payable 01/10/24; Asset Class: Equities								
PHYSICIANS REALTY TRUST (DOC)	552-038332-644	249.000	13.310	4,573.87	3,603.03	3,314.19	(1,259.68)	(288.84)
Next Dividend Payable 01/18/24; Asset Class: Alt								
PINNACLE FINCL PARTNERS INC (PNFP)	552-038332-644	125.000	87.220	8,916.60	9,175.00	10,902.50	1,985.90	1,727.50
Next Dividend Payable 02/2024; Asset Class: Equities								
PIPER SANDLER COMPANIES (PIPR)	552-038332-644	57.000	174.870	7,989.99	7,420.83	9,967.59	1,977.60	2,546.76
Next Dividend Payable 03/2024; Asset Class: Equities								
POLARIS INC (PLI)	552-038332-644	62.586	94.770	7,732.43	6,321.19	5,931.28	(1,801.15)	(389.91)
Next Dividend Payable 03/2024; Asset Class: Equities								
PORTLAND GENERAL ELEC CO (POR)	552-038332-644	147.000	43.340	7,247.84	6,987.00	6,370.98	(876.86)	(616.02)
Next Dividend Payable 01/15/24; Asset Class: Equities								
PROCORE TECHNOLOGIES INC (PCOR)	552-038332-644	106.000	69.220	6,249.42	6,249.42	7,337.32	1,087.90	1,087.90
Asset Class: Equities								
QUAKER HOUGHTON (KWR)	552-038332-644	45.594	213.420	10,164.95	7,579.74	9,730.67	(434.28)	2,150.93
Next Dividend Payable 01/2024; Asset Class: Equities								
R P M INC (RPM)	552-038332-644	86.000	111.630	7,221.34	8,380.70	9,600.18	2,378.84	1,219.48
Next Dividend Payable 01/2024; Asset Class: Equities								
RAPID7 INC (RPD)	552-038332-644	91.000	57.100	10,042.06	3,092.18	5,196.10	(4,845.96)	2,103.92
Asset Class: Equities								
RBC BEARINGS INC (RBC)	552-038332-644	47.000	284.890	10,030.66	9,839.45	13,389.83	3,359.17	3,550.38
Asset Class: Equities								
RTX CORPORATION (RTX)	552-038456-644	580.000	84.140	24,521.08	57,887.81	48,801.20	24,280.12	(9,086.61)
Next Dividend Payable 03/2024; Asset Class: Equities								

CONTINUED

Additional information and disclosures about this report and the information contained herein can be found in the section entitled Messages at the end of this report.



Morgan Stanley

Plan Account Number: 552-112030-644
For the Period: 01/01/2023 - 12/31/2023

Holdings

COMMON STOCKS (CONTINUED)

Security Description	Account Number	Quantity	Share Price	Original Total Cost	Carrying Value	Market Value	Unrealized Gain/(Loss)	5500 Unrealized Gain/(Loss)
SCHNEIDER NATIONAL INC CL B (SNDRI)	552-038332-644	213.000	25.450	5,022.60	5,172.93	5,420.85	398.25	247.92
Next Dividend Payable 01/08/24; Asset Class: Equities								
SIEMENS AKTIENGESSELLSCHAFT (SIEGY)	552-038456-644	512.000	93.852	28,692.31	35,419.65	48,052.22	19,359.91	12,632.57
Next Dividend Payable 02/2024; Asset Class: Equities								
SILICON LAB INC (SLAB)	552-038332-644	51.000	132.270	7,943.00	6,919.17	6,745.77	(1,197.23)	(173.40)
Asset Class: Equities								
SM ENERGY COMPANY (SM)	552-038332-644	94.000	38.720	3,953.47	3,274.02	3,639.68	(313.79)	365.66
Next Dividend Payable 02/2024; Asset Class: Equities								
STEFEL FINANCIAL CORPORATION (SF)	552-038332-644	92.892	69.150	5,557.99	5,557.99	6,423.48	865.49	865.49
Next Dividend Payable 03/2024; Asset Class: Equities								
SUN COMMUNITIES INC (SUI)	552-038332-644	62.000	133.650	12,284.73	8,866.00	8,286.30	(3,998.43)	(579.70)
Next Dividend Payable 01/16/24; Asset Class: Alt								
TANDEM DIABETES CARE INC (TNDM)	552-038332-644	195.000	29.580	4,619.43	4,619.43	5,768.10	1,148.67	1,148.67
Asset Class: Equities								
TARGET CORPORATION (TGT)	552-038456-644	308.000	142.420	29,212.70	45,904.32	43,865.36	14,652.66	(2,038.96)
Next Dividend Payable 03/2024; Asset Class: Equities								
TEXAS ROADHOUSE INC CL A (TXRH)	552-038332-644	102.000	122.230	9,220.06	9,276.90	12,467.46	3,247.40	3,190.56
Next Dividend Payable 03/2024; Asset Class: Equities								
TORO CO (TTC)	552-038332-644	77.000	95.990	8,295.73	8,716.40	7,391.23	(904.50)	(1,325.17)
Next Dividend Payable 01/11/24; Asset Class: Equities								
TRAVELERS COMPANIES INC COM (TRV)	552-038456-644	175.000	190.490	8,841.69	32,810.75	33,335.75	24,494.06	525.00
Next Dividend Payable 03/2024; Asset Class: Equities								
TRUIST FINL CORP (TFC)	552-038456-644	1,351.000	36.920	60,961.01	53,940.72	49,878.92	(11,082.08)	(4,061.80)
Next Dividend Payable 03/2024; Asset Class: Equities								
UNILEVER PLC (NEW) ADS (UL)	552-038456-644	979.000	48.480	39,878.73	49,292.65	47,461.92	7,583.19	(1,830.73)
Asset Class: Equities								
UNITED PARCEL SER INC CL-B (UPS)	552-038456-644	219.000	157.230	35,270.22	37,848.80	34,433.37	(836.85)	(3,415.43)
Next Dividend Payable 02/2024; Asset Class: Equities								
VAIL RESORTS (MTN)	552-038332-644	23.000	213.470	6,071.90	5,482.05	4,909.81	(1,162.09)	(572.24)
Next Dividend Payable 01/09/24; Asset Class: Equities								
VERICEL CORP (VCEL)	552-038332-644	126.000	35.610	4,207.22	3,318.84	4,486.86	279.64	1,168.02
Asset Class: Equities								
VICI PROPERTIES INC (VICI)	552-038456-644	1,449.000	31.880	44,641.83	46,644.15	46,194.12	1,552.29	(450.03)
Next Dividend Payable 01/04/24; Asset Class: Alt								
VOYA FINL INC (VOYA)	552-038332-644	166.000	72.960	10,589.88	10,207.34	12,111.36	1,521.48	1,904.02
Next Dividend Payable 03/2024; Asset Class: Equities								

CONTINUED

Additional information and disclosures about this report and the information contained herein can be found in the section entitled Messages at the end of this report.

Morgan Stanley

Plan Account Number: 552-112030-644
For the Period: 01/01/2023 - 12/31/2023

Holdings

COMMON STOCKS (CONTINUED)

Security Description	Account Number	Quantity	Share Price	Original Total Cost	Carrying Value	Market Value	Unrealized Gain/(Loss)	5500 Unrealized Gain/(Loss)
WINTRUST FIN CORP (WTFCL)	552-038332-644	82,000	92.750	5,820.98	5,820.98	7,605.50	1,784.52	1,784.52
Next Dividend Payable 02/2024; Asset Class: Equities								
ZEBRA TECH CL-A (ZBRA)	552-038332-644	25,000	273.330	13,362.73	6,410.25	6,833.25	(6,529.48)	423.00
Asset Class: Equities								
Total Common Stocks				\$2,075,332.28	\$2,593,820.65	\$2,678,409.72	\$603,077.45	\$84,589.07

Security Description	Account Number	Quantity	Share Price	Original Total Cost	Carrying Value	Market Value	Unrealized Gain/(Loss)	5500 Unrealized Gain/(Loss)
INVESTCO S&P 500 EQUAL WEIGHT E (RSP)	552-078073-644	7,010,000	\$157.800	\$1,055,541.97	\$1,055,541.97	\$1,106,178.00	\$50,636.03	\$50,636.03
Next Dividend Payable 03/2024; Asset Class: Equities								
ISHARES MSCI EAFE ETF (EFA)	552-071764-644	10,755,000	75.350	859,147.56	708,324.84	810,389.25	(48,758.31)	102,064.41
Purchases								
		10,755,000		859,147.56	708,324.84	810,389.25	(48,758.31)	102,064.41
		644,000		43,878.46	42,413.87	48,525.40	4,646.94	6,111.53
Reinvestments		11,399,000		903,026.02	750,738.71	858,914.65	(44,111.37)	108,175.94
Next Dividend Payable 06/2024; Asset Class: Equities								
VANGUARD TOTAL BOND MARKET (BND)	552-078072-644	11,771,000	73.550	872,985.77	872,985.77	865,757.05	(7,228.72)	(7,228.72)
Next Dividend Payable 01/2024; Asset Class: FI & Pref								
Total Exchange-Traded & Closed-End Funds				\$2,831,553.76	\$2,679,266.45	\$2,830,849.70	\$(704.06)	\$151,583.25

Exchange-Traded & Closed-End Funds

Security Description	Account Number	Quantity	Share Price	Original Total Cost	Carrying Value	Market Value	Unrealized Gain/(Loss)	5500 Unrealized Gain/(Loss)
INVESTCO S&P 500 EQUAL WEIGHT E (RSP)	552-078073-644	7,010,000	\$157.800	\$1,055,541.97	\$1,055,541.97	\$1,106,178.00	\$50,636.03	\$50,636.03
Next Dividend Payable 03/2024; Asset Class: Equities								
ISHARES MSCI EAFE ETF (EFA)	552-071764-644	10,755,000	75.350	859,147.56	708,324.84	810,389.25	(48,758.31)	102,064.41
Purchases								
		10,755,000		859,147.56	708,324.84	810,389.25	(48,758.31)	102,064.41
		644,000		43,878.46	42,413.87	48,525.40	4,646.94	6,111.53
Reinvestments		11,399,000		903,026.02	750,738.71	858,914.65	(44,111.37)	108,175.94
Next Dividend Payable 06/2024; Asset Class: Equities								
VANGUARD TOTAL BOND MARKET (BND)	552-078072-644	11,771,000	73.550	872,985.77	872,985.77	865,757.05	(7,228.72)	(7,228.72)
Next Dividend Payable 01/2024; Asset Class: FI & Pref								
Total Exchange-Traded & Closed-End Funds				\$2,831,553.76	\$2,679,266.45	\$2,830,849.70	\$(704.06)	\$151,583.25

Additional information and disclosures about this report and the information contained herein can be found in the section entitled Messages at the end of this report.



Plan Administration Report

I.B.E.W. LOCAL 1158

Plan 874041

01/01/2023 through 12/31/2023

Run Date: February 06, 2024

Overview - Participant Summary By Source, Fund							
Participant Name Money Source / Fund	Beginning Balance	Contributions	Fund Transfers	Internal Transfers	Misc	Gain/Loss	Ending Balance
Employer Profit-Sharing							
Voya Indx Solution 2035 P Adv	\$25,294.79	\$5,200.00	\$0.00	\$0.00	\$0.00	\$4,546.05	\$35,040.84
Source Total	\$25,294.79	\$5,200.00	\$0.00	\$0.00	\$0.00	\$4,546.05	\$35,040.84
Participant Total	\$25,294.79	\$5,200.00	\$0.00	\$0.00	\$0.00	\$4,546.05	\$35,040.84
SERIO, GEORGE F							
Employer Profit-Sharing							
BlkRck Equity Dividend Fnd R	\$46,109.27	\$1,768.00	\$0.00	\$0.00	\$0.00	\$5,537.55	\$53,414.82
Voya Intermediate Bond Prt I	\$49,004.16	\$3,432.00	\$0.00	\$0.00	\$0.00	\$3,315.56	\$55,751.72
Source Total	\$95,113.43	\$5,200.00	\$0.00	\$0.00	\$0.00	\$8,853.11	\$109,166.54
Participant Total	\$95,113.43	\$5,200.00	\$0.00	\$0.00	\$0.00	\$8,853.11	\$109,166.54
TAYLOR, CHRIS							
Employer Profit-Sharing							
Voya High Yield Port Srv	\$4,868.76	\$880.00	\$290.63	\$0.00	\$0.00	\$614.90	\$6,654.29
Voya Indx Solution 2040 Pt Adv	\$12,171.91	\$2,200.00	(\$114.00)	\$0.00	\$0.00	\$2,377.83	\$16,635.74
Voya Indx Solution 2050 Pt Adv	\$7,303.15	\$1,320.00	(\$176.63)	\$0.00	\$0.00	\$1,534.92	\$9,981.44
Source Total	\$24,343.82	\$4,400.00	\$0.00	\$0.00	\$0.00	\$4,527.65	\$33,271.47
Participant Total	\$24,343.82	\$4,400.00	\$0.00	\$0.00	\$0.00	\$4,527.65	\$33,271.47
Tortorelli, Michael P							
Employer Profit-Sharing							
BlkRck Equity Dividend Fnd R	\$582.76	\$1,144.00	(\$4.87)	\$0.00	\$0.00	\$152.60	\$1,874.49
Dodge & Cox Intl Stock Fd I	\$217.86	\$416.00	(\$11.99)	\$0.00	\$0.00	\$60.25	\$682.12
Fidelity Adv Nw Insight Fd M	\$408.86	\$832.00	\$17.24	\$0.00	\$0.00	\$260.73	\$1,518.83
Inv Dev Mkts Fd A	\$293.09	\$572.00	(\$9.92)	\$0.00	\$0.00	\$42.27	\$897.44
Invesco EQV Intl Equity FR	\$215.55	\$416.00	(\$8.65)	\$0.00	\$0.00	\$68.18	\$688.18
Invesco Small Cap Eqty Fnd R	\$154.68	\$312.00	\$2.81	\$0.00	\$0.00	\$48.52	\$518.01
PIMCO VIT Real Return Port Adm	\$128.05	\$260.00	(\$129.49)	\$0.00	\$0.00	\$6.26	\$264.82
Voya Fixed Account	\$0.00	\$0.00	\$268.54	\$0.00	\$0.00	\$3.62	\$272.16
Voya High Yield Port Srv	\$129.64	\$260.00	\$1.79	\$0.00	\$0.00	\$30.09	\$421.52
Voya Intermediate Bond Prt I	\$258.38	\$520.00	(\$129.12)	\$0.00	\$0.00	\$32.50	\$681.76
Voya Russell MdCp Indx Prt I	\$233.11	\$468.00	\$3.66	\$0.00	\$0.00	\$82.42	\$787.19
Source Total	\$2,621.98	\$5,200.00	\$0.00	\$0.00	\$0.00	\$784.54	\$8,606.52
Participant Total	\$2,621.98	\$5,200.00	\$0.00	\$0.00	\$0.00	\$784.54	\$8,606.52
Plan Total	\$655,579.05	\$46,695.00	\$0.00	\$0.00	\$0.00	\$113,157.54	\$815,431.59

Part Summary By Source, Fund

Portfolio Statement

1 JAN 23 - 31 DEC 23

Account number 4469641
Account Name PASSAIC VALLEY SEWERAGE COMM

Page 1 of 16

◆ Change in Book and Market Value

	Cost	Market value	For more information
Opening balance	448,262.16	888,900.56	
Miscellaneous Cash Disbursements	- 931,522.67	- 931,522.67	See funding & disbursement summary
Total disbursements	- 931,522.67	- 931,522.67	See funding & disbursement summary
Income received	120.22	120.22	See income & expense summary, cash activity detail
Unrealized gain/loss change	0.00	- 440,638.40	See asset summary
Realized gain/loss	483,140.67	483,140.67	See realized gain/loss summary
Closing balance	0.38	0.38	

Plan Account Number: 552-112030-644
For the Period: 01/01/2023 - 12/31/2023

Activity

ACTIVITY DETAILS - CONTRIBUTIONS, DISTRIBUTIONS AND OTHER DEPOSITS (CONTINUED)

Activity Date	Account Number	Activity Type	Description	Quantity/ Face Value	Amount
Distributions (Continued)					
Rollovers (Continued)					
Total Distributions					\$(208,909.75)

TRANSACTIONS IN EXCESS OF 5% OVER PLAN BEGINNING MARKET VALUE

Plan Beginning Market Value With Loans: \$6,957,775.23

SINGLE TRANSACTIONS

Activity Date	Settlement Date	Account Number	Security Description	Activity Type	Quantity	Price	Amount	% Of Mkt Value
01/26/23	01/30/23	552-078072-644	VANGUARD TOTAL BOND MARKET	Bought	10,086.000	\$74.16	\$748,026.17	10.75%
01/27/23	01/31/23	552-078073-644	INVESCO S&P 500 EQUAL WEIGHT E	Bought	7,010.000	150.57	1,055,541.97	15.17%

SERIES OF TRANSACTIONS

Activity Date	Settlement Date	Account Number	Security Description	Activity Type	Quantity	Price	Amount	% Of Mkt Value
01/26/23	01/30/23	552-078072-644	VANGUARD TOTAL BOND MARKET	Bought	10,086.000	74.16	748,026.17	10.75%
01/26/23	01/30/23	552-078072-644	VANGUARD TOTAL BOND MARKET	Bought	1,685.000	74.16	124,959.60	1.80%
							\$872,985.77	12.55%
01/03/23	01/04/23	552-038330-644	UNITED STATES TREASURY NOTE 0.250% DUE 2025-08-31 (91282CAJ0)	Bought	5,000.000	90.07	4,508.31	0.06%
01/23/23	01/24/23	552-038330-644	UNITED STATES TREASURY NOTE 0.250% DUE 2025-08-31 (91282CAJ0)	Sold	4,000.000	90.92	3,641.07	0.05%
01/24/23	01/25/23	552-038330-644	UNITED STATES TREASURY NOTE 0.250% DUE 2025-08-31 (91282CAJ0)	Sold	6,000.000	90.93	5,462.34	0.08%
01/24/23	01/25/23	552-038330-644	UNITED STATES TREASURY NOTE 0.250% DUE 2025-08-31 (91282CAJ0)	Sold	4,000.000	90.90	3,640.47	0.05%

CONTINUED



Plan Account Number: 552-112030-644
For the Period: 01/01/2023 - 12/31/2023

Activity

TRANSACTIONS IN EXCESS OF 5% OVER PLAN BEGINNING MARKET VALUE (CONTINUED)
SERIES OF TRANSACTIONS (CONTINUED)

Activity Date	Settlement Date	Account Number	Security Description	Activity Type	Quantity	Price	Amount	% Of Mkt Value
05/31/23	06/01/23	552-038330-644	UNITED STATES TREASURY NOTE 0.250% DUE 2025-08-31 (91282CAJ0)	Bought	18,000.000	91.43	16,470.36	0.24%
08/02/23	08/02/23	552-038330-644	UNITED STATES TREASURY NOTE 0.250% DUE 2025-08-31 (91282CAJ0)	Sold	10,000.000	90.92	9,102.85	0.13%
08/24/23	08/25/23	552-038330-644	UNITED STATES TREASURY NOTE 0.250% DUE 2025-08-31 (91282CAJ0)	Bought	7,000.000	91.01	6,379.45	0.09%
12/06/23	12/06/23	552-038330-644	UNITED STATES TREASURY NOTE 0.250% DUE 2025-08-31 (91282CAJ0)	Sold	356,000.000	92.66	330,119.94	4.74%
							\$379,324.79	5.44%

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, 204, 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 <u>01/01/2023</u> and ending <u>12/31/2023</u>	
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 <u>I.B.E.W. Local 1158 Annuity Plan</u> 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) <u>I.B.E.W. Local 1158</u> <u>1149 Bloomfield Avenue</u> <u>US Clifton NJ 07012</u>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="background-color: #f2f2f2;">1b Three-digit plan number (PN) ▶</td> <td><u>004</u></td> </tr> <tr> <td style="background-color: #f2f2f2;">1c Effective date of plan</td> <td><u>01/01/1999</u></td> </tr> <tr> <td style="background-color: #f2f2f2;">2b Employer Identification Number (EIN)</td> <td><u>22-0886457</u></td> </tr> <tr> <td style="background-color: #f2f2f2;">2c Plan Sponsor's telephone number</td> <td><u>(973) 344-1800</u></td> </tr> <tr> <td style="background-color: #f2f2f2;">2d Business code (see instructions)</td> <td><u>813930</u></td> </tr> </table>	1b Three-digit plan number (PN) ▶	<u>004</u>	1c Effective date of plan	<u>01/01/1999</u>	2b Employer Identification Number (EIN)	<u>22-0886457</u>	2c Plan Sponsor's telephone number	<u>(973) 344-1800</u>	2d Business code (see instructions)	<u>813930</u>
1b Three-digit plan number (PN) ▶	<u>004</u>										
1c Effective date of plan	<u>01/01/1999</u>										
2b Employer Identification Number (EIN)	<u>22-0886457</u>										
2c Plan Sponsor's telephone number	<u>(973) 344-1800</u>										
2d Business code (see instructions)	<u>813930</u>										

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		<u>10/18/24</u>	George Serio
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE		<u>10/10/24</u>	George Serio
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

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

Form 5500 (2023)
v. 230728

IBEW Local 1158 Annuity Plan
Schedule H, Line 4(i) - Schedule of Assets (Held at End of Year)
December 31, 2023

2023 Form 5500
 EIN: 22-0886457
 Plan #004

(a)	(b) Identity of issuer, borrower, lessor, or similar part	(c) Description of investment including maturity date, rate of interest, collateral, par, or maturity value	(d) Cost	(e) Current Value
	American Funds - Balanced	Investment Contract	**	\$ 5,548
	American Funds - Fundamental Investors	Investment Contract	**	9,358
	BlackRock Equity Dividend Fund	Investment Contract	**	93,072
	ClearBridge Small Cap Growth Fund	Investment Contract	**	6,643
	Dodge & Cox International Stock Fund	Investment Contract	**	3,200
	Fidelity Advisors New Insights Fund	Investment Contract	**	182,341
	Invesco Dev Markets Equity Fund	Investment Contract	**	1,355
	Invest Eqv International Equity Fund	Investment Contract	**	1,172
	Invesco Small Cap Equity Fund	Investment Contract	**	14,797
	Pimco Vit Real Return Port Admin	Investment Contract	**	1,009
*	VOYA Fixed Account	Investment Contract	**	75,890
*	VOYA Government Money Market Port I	Investment Contract	**	2,424
*	VOYA HighYield Portfolio	Investment Contract	**	7,862
*	VOYA Index Solution 2025 Portfolio	Investment Contract	**	50,058
*	VOYA Index Solution 2035 Portfolio	Investment Contract	**	35,041
*	VOYA Index Solution 2040 Portfolio	Investment Contract	**	16,636
*	VOYA Index Solution 2050 Portfolio	Investment Contract	**	9,981
*	VOYA Index Solution Inc P Adv	Investment Contract	**	5,583
*	VOYA Intermediate Bond Portfolio	Investment Contract	**	122,215
*	VOYA MidCap Opportunities Portfolio	Investment Contract	**	114,628
*	VOYA Russell MidCap Index Portfolio	Investment Contract	**	56,619
*	Northern Trust Collective S&P 500 Index Fund Non-Lending	Short Term Investment	32	32
*	Morgan Stanley Account #552-112030-644	See attached details	6,713,156	8,969,639
				<u>\$ 9,785,103</u>

* Indicates a party-in-interest as defined in the Employee Security Act of 1974.

** Cost information is not presented for participant-directed investments.