

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

Part I Annual Report Identification Information

For calendar plan year 2023 or fiscal plan year beginning 07/01/2023 and ending 06/30/2024

- A This return/report is for: [X] 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. [X]
D Check box if filing under: [X] 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 #910 ANNUITY FUND
1b Three-digit plan number (PN): 002
1c Effective date of plan: 04/01/1988
2a Plan sponsor's name (employer, if for a single-employer plan): TRUSTEES OF THE I.B.E.W. LOCAL 910 ANNUITY FUND
2b Employer Identification Number (EIN): 22-6447520
2c Plan Sponsor's telephone number: 315-782-5941
2d Business code (see instructions): 561110

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.

Table with 4 columns: SIGN HERE, Signature of plan administrator, Date, Enter name of individual signing as plan administrator. Includes rows for employer/plan sponsor and DFE.

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

<p>3a Plan administrator's name and address <input type="checkbox"/> Same as Plan Sponsor</p> <p>TRUSTEES OF THE I.B.E.W. LOCAL 910 ANNUITY FUND</p> <p>25001 WATER STREET WATERTOWN, NY 13601-2145</p>	<p>3b Administrator's EIN 22-6447520</p> <p>3c Administrator's telephone number 315-782-5941</p>
<p>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:</p> <p>a Sponsor's name</p> <p>c Plan Name</p>	<p>4b EIN</p> <p>4d PN</p>
<p>5 Total number of participants at the beginning of the plan year</p>	<p>5 738</p>
<p>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).</p> <p>a(1) Total number of active participants at the beginning of the plan year 6a(1) 347</p> <p>a(2) Total number of active participants at the end of the plan year 6a(2) 355</p> <p>b Retired or separated participants receiving benefits 6b</p> <p>c Other retired or separated participants entitled to future benefits 6c 401</p> <p>d Subtotal. Add lines 6a(2), 6b, and 6c. 6d 756</p> <p>e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits 6e</p> <p>f Total. Add lines 6d and 6e. 6f 756</p> <p>g(1) Number of participants with account balances as of the beginning of the plan year (only defined contribution plans complete this item) 6g(1) 738</p> <p>g(2) Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item) 6g(2) 756</p> <p>h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested 6h</p>	
<p>7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item).....</p>	<p>7 41</p>

8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions:
2E

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

<p>9a Plan funding arrangement (check all that apply)</p> <p>(1) <input type="checkbox"/> Insurance</p> <p>(2) <input type="checkbox"/> Code section 412(e)(3) insurance contracts</p> <p>(3) <input checked="" type="checkbox"/> Trust</p> <p>(4) <input type="checkbox"/> General assets of the sponsor</p>	<p>9b Plan benefit arrangement (check all that apply)</p> <p>(1) <input type="checkbox"/> Insurance</p> <p>(2) <input type="checkbox"/> Code section 412(e)(3) insurance contracts</p> <p>(3) <input checked="" type="checkbox"/> Trust</p> <p>(4) <input type="checkbox"/> General assets of the sponsor</p>
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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)

<p>a Pension Schedules</p> <p>(1) <input type="checkbox"/> R (Retirement Plan Information)</p> <p>(2) <input type="checkbox"/> MB (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary</p> <p>(3) <input type="checkbox"/> SB (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary</p> <p>(4) <input type="checkbox"/> DCG (Individual Plan Information) – Number Attached _____</p> <p>(5) <input type="checkbox"/> MEP (Multiple-Employer Retirement Plan Information)</p>	<p>b General Schedules</p> <p>(1) <input checked="" type="checkbox"/> H (Financial Information)</p> <p>(2) <input type="checkbox"/> I (Financial Information – Small Plan)</p> <p>(3) <input type="checkbox"/> A (Insurance Information) – Number Attached _____</p> <p>(4) <input checked="" type="checkbox"/> C (Service Provider Information)</p> <p>(5) <input type="checkbox"/> D (DFE/Participating Plan Information)</p> <p>(6) <input type="checkbox"/> G (Financial Transaction Schedules)</p>
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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 C (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	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.	<small>OMB No. 1210-0110</small> 2023 This Form is Open to Public Inspection.
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For calendar plan year 2023 or fiscal plan year beginning **07/01/2023** and ending **06/30/2024**

A Name of plan I.B.E.W. LOCAL #910 ANNUITY FUND	B Three-digit plan number (PN) ▶	002
C Plan sponsor's name as shown on line 2a of Form 5500 TRUSTEES OF THE I.B.E.W. LOCAL 910 ANNUITY FUND	D Employer Identification Number (EIN) 22-6447520	

Part I Service Provider Information (see instructions)

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

b If you answered line 1a "Yes," enter the name and EIN or address of each person providing the required disclosures for the service providers who received only eligible indirect compensation. Complete as many entries as needed (see instructions).

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

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

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

NATIONAL REAL ESTATE ADVISORS LLC

990 SEVENTH ST NW SU 900
WASHINGTON, DC 20001

26-3437991

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28	INVESTMENT MANAGER	67626	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

MANNING & NAPIER

290 WOODCLIFF DRIVE
FAIRPORT, NY 13204

16-0995736

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28	INVESTMENT MANAGER	66009	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

C.S. MCKEE LP

ONE GATEWAY CENTRE
PITTSBURGH, PA 15222

25-1900687

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28	INVESTMENT MANAGER	61753	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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)

SEIZERT CAPITAL LLP

185 OAKLAND AVENUE SU 100
BIRMINGHAM, MI 48009

38-3553488

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28	INVESTMENT MANAGER	54289	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

HIGHTOWER ADVISORS MORGIA GROUP

151 MULLIN STREET
WATERTOWN, NY 13601

36-4500709

(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	INVESTMENT ADVISORS	50400	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

WEDGEWOOD PARTNERS INC

9909 CLAYTON ROAD
ST LOUIS, MO 63124

43-1468106

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28	INVESTMENT MANAGER	47983	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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)

COMMUNITY BANK NA

PO BOX 690
OLEAN, NY 14760

15-0436580

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
19	CUSTODIAN	29977	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

BLITMAN & KING LLP

443 NORTH FRANKLING ST
SYRACUSE, NY 13204

16-1047304

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
29	ATTORNEY	20364	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

D'ARCANGELO & CO., LLP

120 LOMOND COURT
UTICA, NY 13502

13-2550103

(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	20000	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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)

STACKEL & NAVARRA CPA PC

216 WASHINGTON ST SU 402
WATERTOWN, NY 13601

16-1215909

(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	ACCOUNTANT	9700	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

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

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

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

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

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

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

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE H (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	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
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For calendar plan year 2023 or fiscal plan year beginning 07/01/2023 and ending 06/30/2024	
A Name of plan I.B.E.W. LOCAL #910 ANNUITY FUND	B Three-digit plan number (PN) ▶ 002
C Plan sponsor's name as shown on line 2a of Form 5500 TRUSTEES OF THE I.B.E.W. LOCAL 910 ANNUITY FUND	D Employer Identification Number (EIN) 22-6447520

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

		(a) Beginning of Year	(b) End of Year
Assets			
a Total noninterest-bearing cash	1a	103429	274016
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	354375	419656
(2) Participant contributions	1b(2)		
(3) Other	1b(3)	141252	139744
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	1393701	1117516
(2) U.S. Government securities	1c(2)	10258870	11468030
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)	5915002	6784960
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)	37536274	44906920
(5) Partnership/joint venture interests	1c(5)	6021100	5272738
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)	1103011	1028862
(9) Value of interest in common/collective trusts	1c(9)		
(10) Value of interest in pooled separate accounts	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)		
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other	1c(15)	1545449	833647

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	64372463	72246089
Liabilities			
g Benefit claims payable	1g		
h Operating payables	1h	20557	22146
i Acquisition indebtedness	1i		
j Other liabilities	1j	10547	9383
k Total liabilities (add all amounts in lines 1g through 1j)	1k	31104	31529
Net Assets			
l Net assets (subtract line 1k from line 1f)	1l	64341359	72214560

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)	3207491	
(B) Participants	2a(1)(B)		
(C) Others (including rollovers)	2a(1)(C)		
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		3207491
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	13711	
(B) U.S. Government securities	2b(1)(B)	695173	
(C) Corporate debt instruments	2b(1)(C)		
(D) Loans (other than to participants)	2b(1)(D)		
(E) Participant loans	2b(1)(E)	85722	
(F) Other	2b(1)(F)		
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		794606
(2) Dividends:			
(A) Preferred stock	2b(2)(A)		
(B) Common stock	2b(2)(B)	591245	
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)		
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		591245
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets:			
(A) Aggregate proceeds	2b(4)(A)	32628795	
(B) Aggregate carrying amount (see instructions)	2b(4)(B)	31970099	
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)		658696
(5) Unrealized appreciation (depreciation) of assets:			
(A) Real estate	2b(5)(A)		
(B) Other	2b(5)(B)	6003830	
(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)		
(7) Net investment gain (loss) from pooled separate accounts.....	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts.....	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities.....	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds).....	2b(10)		
c Other income.....	2c		39693
d Total income. Add all income amounts in column (b) and enter total.....	2d		11295561

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers.....	2e(1)	2947446	
(2) To insurance carriers for the provision of benefits.....	2e(2)		
(3) Other.....	2e(3)		
(4) Total benefit payments. Add lines 2e(1) through (3)	2e(4)		2947446
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)		
(2) Contract administrator fees.....	2i(2)		
(3) Recordkeeping fees.....	2i(3)		
(4) IQPA audit fees.....	2i(4)	20000	
(5) Investment advisory and investment management fees.....	2i(5)	378038	
(6) Bank or trust company trustee/custodial fees.....	2i(6)		
(7) Actuarial fees.....	2i(7)		
(8) Legal fees.....	2i(8)	19608	
(9) Valuation/appraisal fees.....	2i(9)		
(10) Other trustee fees and expenses.....	2i(10)		
(11) Other expenses.....	2i(11)	57268	
(12) Total administrative expenses. Add lines 2i(1) through (11)	2i(12)		474914
j Total expenses. Add all expense amounts in column (b) and enter total.....	2j		3422360

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		7873201
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: **D'ARCANGELO & CO., LLP**

(2) EIN: **13-2550103**

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.)		X	
b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)		X	
c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)		X	
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)		X	
e Was this plan covered by a fidelity bond?	X		2000000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		X	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	X		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.)		X	
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?		X	
l Has the plan failed to provide any benefit when due under the plan?		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)		X	
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.		X	

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 _____.

D'Arcangelo & Co., LLP

Certified Public Accountants & Consultants

120 Lomond Court, Utica, N.Y. 13502-5950

315-735-5216 Fax: 315-735-5210

Independent Auditor's Report

To the Board of Trustees of
IBEW Local Union 910 Annuity Fund

Opinion

We have audited the accompanying financial statements of IBEW Local Union 910 Annuity Fund, an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (ERISA), which comprise the statements of net assets available for benefits as of June 30, 2024 and 2023, and the related statements of changes in net assets available for benefits for the years then ended, and the related notes to the financial statements.

In our opinion, the financial statements referred to above present fairly in all material respects, the net assets available for benefits of IBEW Local Union 910 Annuity Fund as of June 30, 2024 and 2023, and the changes in its net assets available for benefits for the years then ended, in accordance with accounting principles generally accepted in the United States of America.

Basis for Opinion

We conducted our audits in accordance with auditing standards generally accepted in the United States of America. 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 Union 910 Annuity Fund 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 Union 910 Annuity Fund'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.

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 Union 910 Annuity Fund'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 Union 910 Annuity Fund'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 Schedule Required by ERISA

Our audits were conducted for the purpose of forming an opinion on the financial statements as a whole. The supplemental schedule of assets (held at end of year) is presented for purposes of additional analysis and is not a required part of the financial statements but is supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with generally accepted auditing standards.

In forming our opinion on the supplemental schedule, we evaluated whether the supplemental schedule, including its form and content, is 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 schedule is fairly stated, in all material respects, in relation to the financial statements as a whole, and the form and content is presented in conformity with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.

D'Arcangelo + Co., LLP

January 31, 2025

Utica, New York

INTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS
LOCAL UNION 910 ANNUITY FUND

SCHEDULE OF ASSETS (HELD AT END OF YEAR)
ATTACHMENT FOR SCHEDULE H, LINE 4i

6/30/2024

EIN# 22-6447520 Plan #002

(a) Description of Investment	(b) Shares	(c) Cost	(d) FMV @ 6/30/24	(e) Appreciation (Depreciation)
EQUITIES				
ALPHABET INC CLASS A	3,323	\$ 347,718	\$ 605,285	\$ 257,566
AMAZON.COM INC	4,155	487,193	802,954	315,761
APPLE INC	1,064	196,122	224,100	27,978
APPLIED MATERIALS INC	1,595	173,184	376,404	203,220
ATLISSIAN CORPORATION CL A	843	136,628	149,110	12,482
BLACKROCK INC	218	174,499	171,636	(2,863)
COCA COLA COMPANY	5,457	289,893	347,338	57,445
CONSTELLATION BRANDS INC	1,121	251,563	288,411	36,848
COPART INC	3,099	78,866	167,842	88,975
CSX CORP	5,534	179,728	185,112	5,385
ELECTRONIC ARTS INC	2,622	305,834	365,323	59,490
EPAM SYSTEMS INC	1,252	229,721	235,514	5,792
EVERGY INC	4,455	240,420	235,981	(4,438)
FISERV INC	1,658	254,061	247,108	(6,953)
HEICO CORP NEW CL A	562	87,325	99,766	12,441
HUMANA INC	882	376,413	329,559	(46,853)
IDEXX LABS INC	227	102,394	110,594	8,201
INTERCONTINENTAL EXCHANGE GRP	2,444	258,872	334,559	75,687
INTUIT INC	279	112,852	183,362	70,509
INTUITIVE SURGICAL INC	596	126,783	265,131	138,348
JOHNSON & JOHNSON	2,374	365,026	346,984	(18,042)
JPMORGAN CHASE & CO	814	105,411	164,640	59,229
L3HARRIS TECHNOLOGIES INC	2,075	422,713	466,004	43,291
MASCO CORP	3,456	186,239	230,412	44,173
MASTERCARD INC CLASS A	1,162	236,949	512,628	275,679
MERCADOLIBRE INC	78	64,204	128,185	63,982
META PLATFORMS INC	1,092	164,831	550,608	385,778
MICRON TECHNOLOGY	1,783	109,608	234,518	124,910
MICROSOFT CORP	1,001	168,266	447,397	279,132
MONDELEZ INTL INC CL A	2,380	150,211	155,747	5,536
MOODY'S CORP	884	210,942	372,102	161,160
MSCI INC	268	127,063	129,109	2,046
NORFOLK SOUTHERN CORP	350	80,609	75,142	(5,467)
NORTHROP GRUMMAN CORP	424	189,846	184,843	(5,003)
NVIDIA CORPORATION	2,580	162,930	318,733	155,804
PHILIP MORRIS INTL INC	2,321	208,091	235,187	27,096
ROLLINS INC	1,904	85,981	92,896	6,915
S&P GLOBAL INC	608	161,849	271,168	109,319
SALESFORCE INC	1,282	248,093	329,602	81,509
SERVICENOW INC	532	281,756	418,508	136,752
THERMO FISHER SCIENTIFIC INC	408	129,796	225,624	95,828
UNION PACIFIC CORP	528	110,015	119,465	9,450
UNITEDHEALTH GROUP INC	640	296,457	325,926	29,469
VERTEX PHARMACEUTICALS INC	365	82,906	171,083	88,177
VISA INC CLASS A	1,731	287,214	454,336	167,122
ALCON INC	2,040	134,475	181,723	47,248
ASTRAZENECA PLC ADR	5,265	369,102	410,617	41,515
CANADIAN NATL RAILWAY CO	1,296	157,887	153,097	(4,791)
GLOBALANT SA	1,083	187,835	193,056	5,221
HDFC BANK LTD	2,813	178,667	180,960	2,293
SONY CORP ADR	1,823	183,917	154,864	(29,053)
TAIWAN SEMICONDUCTOR MFG LTD SPONSORED ADS	1,901	196,718	330,413	133,695
WEST FRASER TIMBER CO LTD	1,726	134,409	132,678	(1,731)
ACUITY BRANDS INC	1,589	212,082	383,648	171,566
ALLISON TRANSMISSION HLDGS	7,489	297,133	568,415	271,282
AUTOZONE INC	164	261,299	486,112	224,814
CENTENE CORP	4,737	341,730	314,063	(27,666)
CIRRUS LOGIC INC	3,467	276,720	442,597	165,878
COGNIZANT TECH SOLUTION CL A	4,814	346,046	327,352	(18,694)
ELECTRONIC ARTS INC	2,636	304,640	367,274	62,634
EXELIXIS INC	14,506	301,369	325,950	24,581

See Independent Auditor's Report.

INTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS
LOCAL UNION 910 ANNUITY FUND

SCHEDULE OF ASSETS (HELD AT END OF YEAR)
ATTACHMENT FOR SCHEDULE H, LINE 4i

6/30/2024

EIN# 22-6447520 Plan #002

(a) Description of Investment	(b) Shares	(c) Cost	(d) FMV @ 6/30/24	(e) Appreciation (Depreciation)
FS INC	2,285	334,634	393,546	58,912
FOX CORP	10,939	339,332	375,973	36,642
GODADDY INC CL A	2,473	186,582	345,503	158,920
GRAHAM HLDGS CO	592	335,227	414,134	78,907
HOLOGIC INC	3,207	268,151	238,120	(30,031)
INCYTE CORP	3,761	275,776	227,992	(47,784)
LIBERTY BROADBAND CORP C	3,318	379,162	181,893	(197,269)
LIBERTY MEDIA SIRIUSXM SER C	15,467	287,407	342,749	55,341
LKQ CORPORATION	7,084	297,243	294,624	(2,620)
MARKEL GROUP INC	349	369,250	549,905	180,656
MUELLER INDS INC	6,579	340,200	374,608	34,408
NETAPP INC	3,505	199,252	451,444	252,192
ROBERT HALF INTL INC	3,440	264,948	220,091	(44,857)
SNAP ON INC	1,172	345,752	306,349	(39,402)
T ROWE PRICE GROUP INC	3,089	360,022	356,193	(3,829)
UNITED THERAPEUTICS CORP	1,064	164,054	338,937	174,884
WARNER BROS DISCOVERY INC	25,380	473,875	188,827	(285,048)
ZIONS BANCORP	7,364	311,562	319,377	7,814
CHECK POINT SOFTWARE TECH LT	1,937	243,314	319,605	76,291
ALPHABET INC CLASS A	5,905	402,384	1,075,596	673,212
APPLE INC	4,005	211,597	843,533	631,936
BOOKING HOLDINGS INC	140	323,529	554,610	231,081
CDW CORPORATION	2,239	303,273	501,178	197,905
COPART INC	11,880	286,216	643,421	357,205
EDWARDS LIFESCIENCES CORP	5,550	299,033	512,654	213,621
META PLATFORMS INC	1,907	428,853	961,548	532,694
MICROSOFT CORP	1,545	325,015	690,538	365,523
MOTOROLA SOLUTIONS INC	1,818	300,116	701,839	401,723
O REILLY AUTOMOTIVE INC	205	190,176	216,492	26,316
OLD DOMINION FGHT LINES INC	1,372	193,944	242,295	48,351
PAYPAL HOLDINGS INC	11,859	902,815	688,178	(214,637)
POOL CORPORATION	783	301,036	240,639	(60,397)
S&P GLOBAL INC	560	156,101	249,760	93,659
TEXAS PACIFIC LAND CORP	315	132,800	231,295	98,495
TRACTOR SUPPLY CO	2,250	215,281	607,500	392,219
UNITEDHEALTH GROUP INC	1,328	598,176	676,297	78,122
VISA INC CLASS A	2,909	550,858	763,525	212,668
TAIWAN SEMICONDUCTOR MFG LTD SPONSORED ADS	5,840	619363,36	1015050,4	395,687
ABERDEEN STD PHY SWISS GOLD ETF	47,751	742,871	1,061,027	318,157
DOUBLELINE STRATEGIC COMMODITY I	277,369	2,530,093	2,121,870	(408,223)
ISHARES GOLD TRUST	24,077	743,239	1,057,703	314,464
SPDR GOLD SHARES	4,904	745,126	1,054,409	309,283
GQG PARTNERS EMERG MKT INSTL	117,801	2,041,269	2,166,366	125,097
PIMCO RAE EMERGING MKT INSTL	194,835	2,126,982	2,150,974	23,992
TOTAL EQUITIES		\$ 34,376,987	\$ 44,906,920	\$ 10,529,933

See Independent Auditor's Report.

INTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS
LOCAL UNION 910 ANNUITY FUND

SCHEDULE OF ASSETS (HELD AT END OF YEAR)
ATTACHMENT FOR SCHEDULE H, LINE 4i

6/30/2024

EIN# 22-6447520 Plan #002

(a) Description of Investment	(b) Shares	(c) Cost	(d) FMV @ 6/30/24	(e) Appreciation (Depreciation)
GOVERNMENT BONDS/SECURITIES				
FANNIE MAE REMIC TRUST 5 000% 01/25/53	64,003	\$ 62,538	\$ 62,082	\$ (456)
FED NATL MORTG ASSN 3 000% 01/01/52	42,030	35,975	35,892	(83)
FEDERAL FARM CREDIT BANK 5 740% 01/30/32	148,000	147,815	146,801	(1,014)
FEDERAL FARM CREDIT BANK 5.950% 07/11/33	466,000	465,301	465,795	494
FEDERAL FARM CREDIT BANK 5.980% 12/27/33	248,000	247,566	247,462	(104)
FEDERAL FARM CREDIT BANKS 2.480% 01/19/34	255,000	225,843	209,965	(15,879)
FEDERAL HOME LN MTG CORP 1 500% 10/29/32	100,000	76,743	77,689	946
FEDERAL HOME LOAN MORTG CO 5 000% 12/01/52	89,599	86,995	88,390	1,394
FEDERAL HOME LOAN MORG CORP 6.000% 05/01/53	59,424	59,220	59,886	666
FEDERAL HOME LOAN MORT CORP 3 500% 07/01/51	79,138	74,464	71,072	(3,392)
FEDERAL HOME LOAN MORTG CO 2.000% 08/01/50	23,191	17,404	18,541	1,137
FEDERAL HOME LOAN MORTG CO 2.000% 09/01/36	77,810	65,944	68,459	2,515
FEDERAL HOME LOAN MORTG CO 2 500% 02/01/52	37,451	28,960	30,908	1,949
FEDERAL HOME LOAN MORTG CO 2 500% 12/01/50	28,368	22,265	23,639	1,374
FEDERAL HOME LOAN MORTG CO 5 500% 05/01/43	142,862	141,344	143,295	1,951
FEDERAL HOME LOAN MORTG CORP 0 750% 12/25/50	50,296	37,345	36,858	(487)
FEDERAL HOME LOAN MORTG CORP 2 500% 05/01/51	91,226	75,689	76,081	393
FEDERAL HOME LOAN MORTG CORP 2 500% 09/01/51	72,883	61,575	60,846	(729)
FEDERAL HOME LOAN MORTG CORP 3 000% 02/01/50	45,693	40,931	40,151	(780)
FEDERAL HOME LOAN MORTG CORP 4 500% 05/01/39	93,439	92,111	90,809	(1,302)
FEDERAL HOME LOAN MORTG CORP 5 000% 04/01/54	133,985	129,433	129,729	297
FEDERAL HOME LOAN MORTG CORP 5 000% 07/01/53	72,169	70,308	70,838	530
FEDERAL HOME LOAN MORTG CORP 5 500% 06/01/53	35,940	35,283	35,536	253
FEDERAL HOME LOAN MORTG CORP 6 000% 02/01/53	84,587	86,173	85,934	(239)
FEDERAL HOME LOAN MORTG CORP 6 000% 08/01/53	32,851	32,738	33,001	263
FEDERAL HOME LOAN MORTG CORP 6 500% 11/01/53	71,191	73,994	73,806	(188)
FEDERAL HOME LOAN MORTGAGE 3 000% 08/01/52	75,124	60,733	64,668	3,934
FEDERAL HOME LOAN MORTGAGE 4 000% 09/01/52	69,905	62,996	64,129	1,133
FEDERAL HOME LOAN MORTGAGE 5 000% 02/01/53	43,034	41,195	41,696	501
FEDERAL HOME LOAN MTG 2 000% 01/25/51	35,799	36,990	28,420	(8,571)
FEDERAL HOME LOAN MTG 2 000% 03/25/44	158,636	162,420	145,149	(17,271)
FEDERAL HOME LOAN MTG 2 000% 05/25/46	15,803	16,297	13,576	(2,721)
FEDERAL HOME LOAN MTG 2 000% 06/25/42	41,580	42,769	38,135	(4,634)
FEDERAL HOME LOAN MTG 2 000% 11/01/51	64,842	65,212	51,122	(14,090)
FEDERAL HOME LOAN MTG 2 500% 03/01/51	63,573	65,689	52,971	(12,718)
FEDERAL HOME LOAN MTG 2 500% 06/01/51	63,375	65,553	52,237	(13,317)
FEDERAL HOME LOAN MTG 2 500% 10/25/48	2,643	2,711	2,337	(374)
FEDERAL HOME LOAN MTG 3 000% 05/01/42	76,867	73,205	67,478	(5,727)
FEDERAL HOME LOAN MTG 3 000% 06/25/48	215,419	220,670	193,355	(27,315)
FEDERAL HOME LOAN MTG 3 000% 11/01/42	9,752	9,496	8,629	(867)
FEDERAL HOME LOAN MTG 3 000% 11/01/46	11,914	11,571	10,432	(1,139)
FEDERAL HOME LOAN MTG 3 000% 11/01/46	28,922	29,930	25,340	(4,590)
FEDERAL HOME LOAN MTG 3 000% 12/01/46	22,178	21,610	19,418	(2,192)
FEDERAL HOME LOAN MTG 3 500% 01/01/48	9,986	10,410	9,043	(1,367)
FEDERAL HOME LOAN MTG 3 500% 04/01/34	3,996	4,142	3,797	(345)
FEDERAL HOME LOAN MTG 3 500% 07/01/47	100,004	104,238	90,751	(13,487)
FEDERAL HOME LOAN MTG 3 500% 08/01/32	7,354	7,828	7,032	(796)
FEDERAL HOME LOAN MTG 3 500% 08/01/49	11,400	11,776	10,238	(1,538)
FEDERAL HOME LOAN MTG 3 500% 10/01/34	7,793	8,239	7,390	(849)
FEDERAL HOME LOAN MTG 4 000% 01/01/41	2,244	2,307	2,124	(183)
FEDERAL HOME LOAN MTG 4 000% 11/01/33	7,589	7,970	7,355	(615)
FEDERAL HOME LOAN MTG 5 500% 09/01/53	79,503	78,410	79,282	872
FEDERAL HOME LOAN MTG CO 3 500% 05/01/52	51,729	43,226	46,153	2,927
FEDERAL NATIONAL MORT ASSC 5 000% 07/25/51	98,038	95,021	96,077	1,057
FEDERAL NATIONAL MORT ASSOC 3 000% 12/01/51	101,331	91,863	87,664	(4,199)
FEDERAL NATIONAL MORTG ASN 2 500% 06/01/51	55,569	43,327	46,281	2,955
FEDERAL NATIONAL MORTG ASSN 1 500% 10/01/36	77,619	64,909	66,898	1,989
FEDERAL NATIONAL MORTG ASSN 2 000% 02/01/52	69,861	52,625	55,909	3,284
FEDERAL NATIONAL MORTG ASSN 2 000% 03/01/52	80,022	62,442	63,822	1,380
FEDERAL NATIONAL MORTG ASSN 2 000% 05/01/36	46,217	39,692	40,909	1,217
FEDERAL NATIONAL MORTG ASSN 2 000% 05/01/51	94,467	74,836	74,638	(197)
FEDERAL NATIONAL MORTG ASSN 2 500% 02/01/51	56,828	45,711	47,494	1,783
FEDERAL NATIONAL MORTG ASSN 2 500% 02/01/51	61,259	47,983	50,740	2,757
FEDERAL NATIONAL MORTG ASSN 2 500% 06/01/50	61,679	49,372	51,481	2,108

See Independent Auditor's Report.

INTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS
LOCAL UNION 910 ANNUITY FUND

SCHEDULE OF ASSETS (HELD AT END OF YEAR)
ATTACHMENT FOR SCHEDULE H, LINE 4i

6/30/2024

EIN# 22-6447520 Plan #002

(a) Description of Investment	(b) Shares	(c) Cost	(d) FMV @ 6/30/24	(e) Appreciation (Depreciation)
FEDERAL NATIONAL MORTG ASSN 3.000% 02/01/52	60,517	52,035	52,104	69
FEDERAL NATIONAL MORTG ASSN 3.500% 01/01/52	45,191	41,279	40,250	(1,028)
FEDERAL NATIONAL MORTG ASSN 3.500% 02/01/52	58,591	51,903	52,046	143
FEDERAL NATIONAL MORTG ASSN 3.500% 09/01/42	54,381	49,300	49,778	478
FEDERAL NATIONAL MORTG ASSN 5.000% 06/01/50	32,569	32,498	32,117	(380)
FEDERAL NATIONAL MORTG ASSN 5.500% 03/01/54	90,101	88,524	89,423	899
FEDERAL NATIONAL MORTG ASSN 5.500% 06/25/44	66,273	65,942	65,916	(26)
FEDERAL NATIONAL MORTG ASSN 5.500% 11/01/38	22,187	21,851	22,249	398
FEDERAL NATIONAL MORTG ASSN 6.500% 01/01/53	56,943	57,015	58,163	1,149
FEDERAL NATIONAL MORTG ASSOC 5.500% 07/01/53	35,524	34,897	35,144	247
FEDERAL NATIONAL MTG ASSN 6.000% 09/01/53	66,473	66,494	67,624	1,130
FEDERAL NATIONAL MTG ASSC 2.000% 02/01/52	80,747	64,194	64,247	53
FEDERAL NATIONAL MTG ASSC 2.000% 03/01/37	71,570	61,103	63,439	2,336
FEDERAL NATIONAL MTG ASSC 2.500% 05/01/51	41,878	34,346	34,365	19
FEDERAL NATIONAL MTG ASSC 2.500% 05/01/51	96,148	86,218	79,668	(6,550)
FEDERAL NATIONAL MTG ASSC 2.500% 06/01/51	62,581	51,903	52,119	216
FEDERAL NATIONAL MTG ASSC 2.500% 11/01/50	89,600	79,646	74,183	(5,463)
FEDERAL NATIONAL MTG ASSC 5.000% 09/01/52	93,746	93,893	90,999	(2,893)
FEDERAL NATIONAL MTG ASSN 4.500% 07/25/46	76,982	75,039	74,048	(991)
FEDERAL NATIONAL MTG ASSO 1.000% 02/25/51	25,825	25,906	19,166	(6,740)
FEDERAL NATIONAL MTG ASSO 2.000% 01/01/41	45,127	46,827	38,223	(8,603)
FEDERAL NATIONAL MTG ASSO 2.000% 01/01/51	41,023	42,523	32,643	(9,880)
FEDERAL NATIONAL MTG ASSO 2.000% 07/01/41	19,101	18,033	16,110	(1,923)
FEDERAL NATIONAL MTG ASSO 2.000% 10/01/40	71,320	73,560	60,415	(13,146)
FEDERAL NATIONAL MTG ASSO 2.000% 10/25/44	22,233	22,761	19,655	(3,106)
FEDERAL NATIONAL MTG ASSO 2.500% 04/01/37	37,384	39,084	33,578	(5,506)
FEDERAL NATIONAL MTG ASSO 2.500% 04/01/48	53,091	53,997	44,952	(9,044)
FEDERAL NATIONAL MTG ASSO 2.500% 06/01/50	84,719	87,883	70,643	(17,240)
FEDERAL NATIONAL MTG ASSO 2.500% 07/01/49	69,540	72,648	58,955	(13,693)
FEDERAL NATIONAL MTG ASSO 2.500% 07/01/51	77,773	81,005	64,601	(16,404)
FEDERAL NATIONAL MTG ASSO 2.500% 08/01/51	110,592	115,356	91,658	(23,698)
FEDERAL NATIONAL MTG ASSO 2.500% 10/01/41	117,812	123,408	102,898	(20,510)
FEDERAL NATIONAL MTG ASSO 2.500% 10/01/50	24,711	26,596	20,685	(5,911)
FEDERAL NATIONAL MTG ASSO 2.500% 10/01/51	102,426	105,659	84,208	(21,451)
FEDERAL NATIONAL MTG ASSO 2.500% 12/01/47	162,466	145,783	137,601	(8,182)
FEDERAL NATIONAL MTG ASSO 3.000% 01/01/40	57,550	60,563	51,890	(8,672)
FEDERAL NATIONAL MTG ASSO 3.000% 01/01/52	37,801	39,443	32,607	(6,836)
FEDERAL NATIONAL MTG ASSO 3.000% 02/01/50	51,711	47,501	44,960	(2,541)
FEDERAL NATIONAL MTG ASSO 3.000% 02/01/50	59,903	61,681	52,467	(9,214)
FEDERAL NATIONAL MTG ASSO 3.000% 02/01/52	129,940	130,996	111,606	(19,390)
FEDERAL NATIONAL MTG ASSO 3.000% 02/25/49	15,575	16,209	13,967	(2,242)
FEDERAL NATIONAL MTG ASSO 3.000% 03/01/45	22,420	23,467	19,816	(3,651)
FEDERAL NATIONAL MTG ASSO 3.000% 04/25/45	94,016	92,469	86,621	(5,847)
FEDERAL NATIONAL MTG ASSO 3.000% 05/01/33	8,146	8,280	7,606	(674)
FEDERAL NATIONAL MTG ASSO 3.000% 05/01/41	7,899	8,205	7,011	(1,194)
FEDERAL NATIONAL MTG ASSO 3.000% 06/01/43	4,119	4,238	3,640	(598)
FEDERAL NATIONAL MTG ASSO 3.000% 09/01/42	10,964	11,407	9,699	(1,708)
FEDERAL NATIONAL MTG ASSO 3.000% 10/01/46	20,044	21,184	17,527	(3,657)
FEDERAL NATIONAL MTG ASSO 3.000% 10/01/51	22,937	24,003	19,604	(4,399)
FEDERAL NATIONAL MTG ASSO 3.000% 11/01/46	134,552	139,376	118,913	(20,463)
FEDERAL NATIONAL MTG ASSO 3.000% 11/01/46	7,149	7,183	6,238	(944)
FEDERAL NATIONAL MTG ASSO 3.000% 12/01/49	20,819	21,379	18,011	(3,368)
FEDERAL NATIONAL MTG ASSO 3.500% 01/01/35	9,137	9,288	8,651	(637)
FEDERAL NATIONAL MTG ASSO 3.500% 04/01/32	4,062	4,111	3,881	(230)
FEDERAL NATIONAL MTG ASSO 3.500% 04/01/39	11,410	11,857	10,647	(1,211)
FEDERAL NATIONAL MTG ASSO 3.500% 05/01/35	33,673	34,925	31,676	(3,249)
FEDERAL NATIONAL MTG ASSO 3.500% 05/01/47	21,045	22,180	19,177	(3,003)
FEDERAL NATIONAL MTG ASSO 3.500% 05/01/47	16,034	16,726	14,540	(2,185)
FEDERAL NATIONAL MTG ASSO 3.500% 06/01/49	153,530	154,274	138,602	(15,671)
FEDERAL NATIONAL MTG ASSO 3.500% 08/01/34	33,184	33,361	31,474	(1,887)
FEDERAL NATIONAL MTG ASSO 3.500% 09/01/49	19,326	20,003	17,358	(2,645)
FEDERAL NATIONAL MTG ASSO 3.500% 10/01/37	63,837	66,991	60,138	(6,853)
FEDERAL NATIONAL MTG ASSO 3.500% 11/01/35	4,871	5,073	4,610	(463)
FEDERAL NATIONAL MTG ASSO 3.500% 11/01/48	4,007	4,119	3,626	(493)

See Independent Auditor's Report.

INTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS
LOCAL UNION 910 ANNUITY FUND

SCHEDULE OF ASSETS (HELD AT END OF YEAR)
ATTACHMENT FOR SCHEDULE H, LINE 4i

6/30/2024

EIN# 22-6447520 Plan #002

(a) Description of Investment	(b) Shares	(c) Cost	(d) FMV @ 6/30/24	(e) Appreciation (Depreciation)
FEDERAL NATIONAL MTG ASSO 3 500% 12/01/34	2,988	3,126	2,830	(296)
FEDERAL NATIONAL MTG ASSO 4.000% 01/01/41	3,471	3,570	3,281	(290)
FEDERAL NATIONAL MTG ASSO 4.000% 01/01/41	3,709	3,894	3,506	(389)
FEDERAL NATIONAL MTG ASSO 4.000% 02/01/46	4,812	5,036	4,513	(523)
FEDERAL NATIONAL MTG ASSO 4.000% 03/01/39	1,354	1,560	1,280	(280)
FEDERAL NATIONAL MTG ASSO 4.000% 03/01/45	25,812	27,441	24,435	(3,006)
FEDERAL NATIONAL MTG ASSO 4.000% 07/01/46	3,693	3,846	3,463	(383)
FEDERAL NATIONAL MTG ASSO 4.000% 09/01/34	30,008	31,058	29,022	(2,036)
FEDERAL NATIONAL MTG ASSO 4.000% 09/01/40	10,135	10,427	9,581	(846)
FEDERAL NATIONAL MTG ASSO 4.000% 10/01/34	4,163	4,469	4,026	(442)
FEDERAL NATIONAL MTG ASSO 4.000% 10/01/46	116,440	128,011	110,080	(17,931)
FEDERAL NATIONAL MTG ASSO 4.000% 11/01/34	4,312	4,632	4,169	(462)
FEDERAL NATIONAL MTG ASSO 4.000% 11/01/35	11,484	12,130	11,128	(1,002)
FEDERAL NATIONAL MTG ASSO 4.000% 12/01/37	20,001	21,907	19,404	(2,504)
FEDERAL NATIONAL MTG ASSO 4.500% 03/01/47	16,850	17,913	16,195	(1,718)
FEDERAL NATIONAL MTG ASSO 4.500% 11/01/48	2,437	2,542	2,334	(208)
FEDERAL NATL MORTG ASSN 2.500% 03/01/2051	85,260	70,459	70,344	(115)
FEDERAL NATL MORTG ASSN 4.000% 07/01/53	95,132	87,194	87,739	545
FEDERAL NATL MORTG ASSN 4.500% 01/01/51	50,000	46,957	47,968	1,011
FEDERAL NATL MORTGAGE ASSN 4.500% 11/01/52	132,000	126,060	125,148	(912)
FEDERAL NATL MTG ASSN 1 630% 09/14/35	301,000	216,008	216,946	938
FHLMC SUPER 30Y FIXED 4.500% 08/01/52	135,298	134,202	127,963	(6,239)
FNMA 3 000% 02/01/47	69,237	72,948	61,195	(11,753)
GENERAL NATL MORT ASSN 3 500% 03/20/52	23,219	21,166	20,733	(433)
GINNIE MAE REMIC TRUST 6.000% 11/20/44	82,523	82,238	82,974	736
GNMA 5.000% 08/20/47	72,659	72,217	71,441	(776)
GNMA PLATINUM POOLS 5 500% 09/20/53	60,177	59,560	60,237	677
GNMA POOL #MA5266 5 000% 06/20/48	5,574	5,855	5,513	(342)
GOV'T NATIONAL MORT ASSN 5 500% 02/20/50	33,759	33,110	33,754	643
GOV'T NATIONAL MORTG ASSN 5 500% 08/20/35	35,220	35,322	35,434	112
GOVERNMENT NATIONAL MORT ASN 6 000% 09/20/53	84,713	82,993	85,369	2,376
GOVERNMENT NATIONAL MORTG ASN 2 500% 09/20/51	77,751	61,326	64,645	3,318
GOVERNMENT NATIONAL MORTG ASN 3 500% 01/20/50	61,987	53,347	56,244	2,896
GOVERNMENT NATIONAL MTG ASSC 5 000% 07/20/53	48,424	47,456	47,664	209
GOVERNMENT NATIONAL MTG ASSO 1 750% 09/20/51	46,298	46,924	38,801	(8,123)
GOVERNMENT NATL MORT ASSC 6 000% 03/20/42	48,263	47,946	48,348	402
GOVERNMENT NATL MORT ASSN 3 500% 07/20/45	43,202	39,975	39,276	(699)
GOVT NATIONAL MORTG ASSN 5 500% 02/20/54	78,193	78,621	77,947	(674)
GOVT NATL MORTG ASSN 3 500% 01/20/52	58,396	55,577	55,144	(433)
UNITED STATES TREASURY BOND 3 000% 05/15/45	267,000	209,972	208,551	(1,421)
UNITED STATES TREASURY BOND 4 250% 02/15/54	606,000	576,410	580,627	4,217
UNITED STATES TREASURY BOND 4 750% 11/15/43	374,000	382,450	380,604	(1,846)
UNITED STATES TREASURY BOND 4 750% 11/15/53	373,000	388,359	387,980	(379)
UNITED STATES TREASURY NOTE 4 375% 05/15/34	65,000	64,906	65,163	257
UNITED STATES TREASURY NOTE 4 625% 04/30/31	754,000	766,560	766,961	401
TOTAL GOVERNMENT BONDS/SECURITIES		<u>\$ 11,966,606</u>	<u>\$ 11,468,030</u>	<u>\$ (498,576)</u>

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**INTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS
LOCAL UNION 910 ANNUITY FUND**

**SCHEDULE OF ASSETS (HELD AT END OF YEAR)
ATTACHMENT FOR SCHEDULE H, LINE 4i**

6/30/2024

EIN# 22-6447520 Plan #002

(a)	(b)	(c)	(d)	(e)	
Description of Investment	Shares	Cost	FMV @ 6/30/24	Appreciation (Depreciation)	
CORPORATE BONDS					
ALABAMA POWER CO 3.450% 10/01/49	60,000	\$ 67,450	\$ 42,937	\$ (24,513)	
ALLY AUTO REC TR 4.760% 05/17/27	99,258	99,257	98,734	(523)	
AMERICAN HONDA FIN CORP 2.000% 03/24/28	33,000	32,944	29,679	(3,265)	
AMERICAN TOWER CORP NOTE 3.800% 8/15/29	54,000	48,604	50,258	1,653	
AMGEN INC 5.650% 03/02/53	41,000	40,941	40,597	(344)	
APPLE INC 2.950% 09/11/49	48,000	33,518	33,038	(480)	
APPLE INC 4.650% 02/23/46	49,000	46,905	45,388	(1,517)	
AT&T INC 4.350% 03/01/29	16,000	15,307	15,517	210	
AT&T INC 5.400% 02/15/34	18,000	17,543	18,035	492	
BANK OF AMERICA CORP 1.658% 03/11/27	226,000	214,516	211,819	(2,698)	
BBCMS MORTGAGE TRUST 3.674% 02/15/50	112,000	110,752	106,459	(4,292)	
BERKSHIRE HATHAWAY ENERGY CO 3.700% 07/15/30	20,000	18,105	18,611	506	
BOEING CO 4.875% 5/01/25	124,000	128,742	122,682	(6,060)	
BURLINGTON NORTHN SANTA FE C 4.550% 09/01/44	147,000	180,632	129,814	(50,818)	
CANADIAN IMPERIAL BK 5.001% 04/28/28	43,000	42,646	42,715	69	
CANADIAN IMPERIAL BK 5.260% 04/08/29	44,000	43,996	43,950	(46)	
CANADIAN PAC RY CO NEW NOTE 2.050% 3/05/30	18,000	17,964	15,368	(2,597)	
CAPITAL ONE FINANCIAL CORP 1.878% 11/02/27	36,000	32,804	33,006	202	
CAPITAL ONE FINANCIAL CORP 6.312% 06/08/29	37,000	37,891	37,875	(16)	
CAPITAL ONE PRIME 5.820% 06/15/28	223,000	222,959	225,034	2,075	
CARMAX AUTO 5.340% 08/16/27	50,000	49,455	49,904	449	
CISCO SYSTEMS INC 4.950% 02/26/31	47,000	46,906	47,016	109	
CITIGROUP INC 5.174% 02/13/30	28,000	28,000	27,853	(147)	
COCA COLA CO 5.000% 05/13/34	70,000	69,803	70,438	634	
COMCAST CORP 3.250% 11/01/39	66,000	52,579	50,949	(1,630)	
CONOCOPHILIPS CO 5.300% 05/15/53	90,000	87,343	85,888	(1,455)	
CONS EDISON CO NY INC 5.700% 05/15/54	16,000	16,233	16,047	(186)	
DISNEY WALT CO 3.500% 05/13/40	53,000	59,931	42,441	(17,490)	
DJP MORGAN CHASE BANK NA 1.578% 04/22/27	80,000	76,449	74,658	(1,791)	
DUKE ENERGY CAROLINAS LLC 5.300% 02/15/40	211,000	256,112	204,729	(51,383)	
DUKE ENERGY CORP 2.450% 06/01/30	19,000	19,196	16,327	(2,870)	
ENERGY TRANSFER LP 6.400% 12/01/30	32,000	31,963	33,650	1,686	
ENTERGY CORP 1.900% 06/15/28	41,000	40,857	36,157	(4,700)	
ENTERPRISE PRODS OPER LLC 4.800% 02/01/49	48,000	45,447	42,702	(2,745)	
EXXON MOBIL CORP NOTE 4.327% 3/19/50	130,000	115,843	110,083	(5,760)	
FLORIDA PWR & LT CO 3.000% 04/01/53	54,000	53,731	52,324	(1,407)	
FOX CORPORATION 6.500% 10/13/33	84,000	83,544	88,153	4,609	
GENERAL MOTORS FINANCIAL CO 5.800% 01/07/29	34,000	33,972	34,321	349	
GENERAL MTRS FINL CO INC 4.300% 04/06/29	51,000	50,052	48,481	(1,572)	
GM FIN ATMBL LEASE 5.160% 04/20/26	313,000	311,678	312,315	637	
GOLDMAN SACHS BK 5.414% 05/21/27	47,000	47,000	46,923	(77)	
GOLDMAN SACHS GROUP INC 1.431% 03/09/27	119,000	109,365	111,038	1,673	
GOLDMAN SACHS GROUP INC 1.992% 01/27/32	180,000	166,508	146,302	(20,206)	
HARLEY DAVIDSON MOTORCYCLE 5.370% 03/15/29	48,000	47,998	48,205	207	
HONEYWELL INTERNATIONAL INC 4.950% 09/01/31	100,000	99,820	100,208	388	
INTEL CORP 5.700% 02/10/53	23,000	22,990	22,733	(257)	
INTERNATIONAL BANK 5.550% 01/25/29	94,000	93,953	94,013	60	
INTL BANK FOR RECON & DEV 2.700% 12/28/37	380,000	339,297	293,615	(45,683)	
INTL BANK FOR RECON & DEV 5.750% 06/27/33	90,000	89,055	90,412	1,357	
INTL BANK RECON & DEVELOP 5.750% 08/26/33	100,000	100,000	100,589	589	
JOHN DEERE CAPITAL CORP 4.700% 06/10/30	40,000	39,964	39,635	(330)	
JOHNSON & JOHNSON 4.900% 06/01/31	113,000	112,898	114,196	1,297	
JOHNSON CONTROLS INTL 5.500% 04/19/29	39,000	38,897	39,478	581	
JPMORGAN CHASE & CO 2.8218% 8/15/49	11,000	11,330	10,401	(928)	
JPMORGAN CHASE & CO 5.299% 07/24/29	95,000	95,185	95,368	182	
KEURIG DR PEPPER 5.200% 03/15/31	70,000	69,861	69,914	53	
MCDONALDS CORP MED TERM NT B MTNF 3.600% 7/01/30	48,000	44,747	44,470	(278)	
META PLATFORMS INCORPORATED 5.600% 05/15/53	27,000	26,846	27,712	866	
MIDAMERICAN ENERGY COMPANY MTG 4.250% 7/15/49	220,000	282,168	181,720	(100,448)	
MORGAN STANLEY 1.593% 05/04/27	134,000	133,151	124,920	(8,231)	
MS BOA 3.306 4/17/48	165,000	162,757	161,449	(1,308)	
NEXTERA ENERGY 4.900% 02/28/28	71,000	70,345	70,353	8	
NORTHWESTERN UNIVERSITY BOND 3.688% 12/01/38	14,000	14,000	12,160	(1,840)	
ORACLE CORP 2.300% 03/25/28	67,000	56,971	60,609	3,638	

See Independent Auditor's Report.

INTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS
LOCAL UNION 910 ANNUITY FUND

SCHEDULE OF ASSETS (HELD AT END OF YEAR)
ATTACHMENT FOR SCHEDULE H, LINE 4i

6/30/2024

EIN# 22-6447520 Plan #002

(a) Description of Investment	(b) Shares	(c) Cost	(d) FMV @ 6/30/24	(e) Appreciation (Depreciation)
ORACLE CORP 3.600% 4/01/40	112,000	112,511	86,408	(26,103)
PACIFIC GAS & ELECTRIC CO 6.400% 06/15/33	42,000	42,053	43,481	1,428
PFIZER INVESTMENT ENTERPRISE S 110% 05/19/43	11,000	10,875	10,504	(371)
PFIZER INVNT ENTERPRISES 4.750% 05/19/33	77,000	74,661	75,167	505
PHILIP MORRIS INTL INC S 125% 02/15/30	54,000	52,321	53,837	1,516
PHILLIPS 66 CO 5.250% 06/15/31	46,000	45,808	45,871	63
PNC FINL SVCS GROUP INC 5.492% 05/14/30	32,000	32,245	32,195	(50)
PROCTER & GAMBLE COMPANY 4.550% 01/29/34	60,000	60,000	59,005	(995)
ROYAL BANK S 1.50% 02/01/34	65,000	64,420	64,637	218
SCHWAB CHARLES CORP 5.643% 05/19/29	42,000	41,277	42,583	1,306
STARBUCKS CORPORATION 4.900% 02/15/31	105,000	104,654	104,005	(649)
THE CIGNA GROUP 5.000% 05/15/29	47,000	46,719	46,819	99
TORONTO DOMINION BANK 3.200% 03/10/32	38,000	32,653	32,941	288
TORONTO DOMINION BANK 4.693% 09/15/27	68,000	68,000	67,007	(993)
TORONTO DOMINION BANK 4.994% 04/05/29	59,000	59,000	58,539	(461)
TOTALENERGIES CAPITAL S.A 5.488% 04/05/54	66,000	66,137	65,407	(730)
TRANSCANADA PIPELINE 2.500% 10/12/31	125,000	101,404	104,926	3,522
UNION PACIFIC RAILROAD 5.082% 01/02/29	24,063	25,856	23,847	(2,009)
UNION PACIFIC RAILROAD BOND 3.227% 05/14/26	135,137	148,420	130,443	(17,977)
UNITED AIR LINES INC S 800% 07/15/37	45,000	45,000	45,749	749
UNITED PARCEL SERVICES INC S 1.50% 05/22/34	70,000	69,727	69,949	222
UNITEDHEALTH GROUP INC 5.300% 02/15/30	14,000	14,314	14,249	(65)
US BANCORP 4.839% 02/01/34	68,000	64,614	64,586	(28)
US BANCORP FINANCIALS 4.653% 02/01/29	26,000	24,025	25,452	1,426
VERIZON COMMUNICATIONS INC 2.100% 03/22/28	61,000	53,034	54,881	1,847
VERIZON COMMUNICATIONS INC NOTE 2.650% 11/20/40	124,000	84,215	85,741	1,526
VERIZON MASTER 5.670% 11/20/29	75,000	74,991	75,914	924
VIRGINIA ELEC & PWR CO 5.450% 04/01/53	108,000	108,087	103,552	(4,536)
WELLS FARGO & CO 3.526% 03/24/28	114,000	114,092	108,765	(5,327)
WELLS FARGO & CO 4.897% 07/25/33	79,000	75,887	76,128	242
TOTAL CORPORATE BONDS		\$ 7,174,679	\$ 6,784,960	\$ (389,719)

See Independent Auditor's Report.

INTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS
LOCAL UNION 910 ANNUITY FUND

SCHEDULE OF ASSETS (HELD AT END OF YEAR)
ATTACHMENT FOR SCHEDULE H, LINE 4i

EIN# 22-6447520 Plan #002		6/30/2024			
(a)	(b) (c)	(d)	(e)		
Description of Investment	Shares	Cost	FMV @ 6/30/24	Appreciation (Depreciation)	
CD'S					
BANK OF AMERICA CD 5.050% 06/22/26	245,000	\$ 244,633	\$ 245,737	\$	1,105
MORGAN STANLEY BK CD 4.950% 06/14/27	95,000	94,763	95,164		402
MORGAN STANLEY CD 4.800% 06/20/2028	100,000	99,650	100,483		833
MORGAN STANLEY CD 4.800% 06/20/28	99,000	98,654	99,478		825
MRGN STNLY PRIVATE BK CD 4.950% 06/14/27	95,000	94,763	95,164		402
WELLS FARGO BANK CD 4.900% 06/11/27	190,000	189,525	190,105		580
TOTAL CD'S		\$ 821,986	\$ 826,132	\$	4,146
INDURE BUILT TO CORE FUND	2,715	\$ 4,050,000	\$ 5,272,738	\$	1,222,738
PARTICIPANT LOANS 4.25% - 9.50%		\$ 1,028,862	\$ 1,028,862	\$	0
GRAND TOTAL 6/30/24		\$ 59,419,120	\$ 70,287,642	\$	10,868,522

See Independent Auditor's Report.

INTERNATIONAL BROTHERHOOD
OF ELECTRICAL WORKERS

LOCAL UNION 910
ANNUITY FUND

For the Year Ended
June 30, 2024

FINANCIAL STATEMENTS
AND SUPPLEMENTAL
SCHEDULE

INTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS

LOCAL UNION 910 ANNUITY FUND

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INTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS

LOCAL UNION 910 ANNUITY FUND

STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS

June 30, 2024 and 2023

	2024	2023
Assets		
Investments, at Fair Value		
U.S. Government and Agency Debt Securities	\$ 11,468,030	10,258,870
Corporate Bonds	6,784,960	5,915,002
Common Stocks and Mutual Funds	44,906,920	37,536,274
Certificates of Deposit	826,132	1,564,521
INDURE Build to Core Fund, LLC	5,272,738	6,021,100
Total Investments	69,258,780	61,295,767
Receivables		
Notes Receivable from Participants	1,028,862	1,103,011
Employer Contributions	366,252	327,382
Reciprocal Contributions	53,404	26,993
Accrued Income	137,744	139,252
Bond Premium (Discount)	7,515	(19,072)
Other Receivable	2,000	2,000
Total Receivables	1,595,777	1,579,566
Cash		
Cash Management	1,066,735	1,143,545
Demand Deposits	274,016	103,429
Money Market	50,781	250,156
Total Cash and Cash Equivalents	1,391,532	1,497,130
Total Assets	72,246,089	64,372,463
Liabilities		
Accounts Payable and Other Payables	31,529	31,104
Net Assets Available for Benefits	\$ 72,214,560	\$ 64,341,359

The Accompanying Notes are an Integral Part of These Financial Statements.

INTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS

LOCAL UNION 910 ANNUITY FUND

STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS

For the Year Ended June 30, 2024 and 2023

	2024	2023
Additions		
Investment Income		
Net Appreciation in Fair Value of Investments	\$ 6,662,526	\$ 1,072,503
Interest and Dividends	1,300,129	1,845,693
Total Investment Income	7,962,655	2,918,196
Less: Investment Expense	(378,038)	(348,660)
Net Investment Income	7,584,617	2,569,536
Employer Contributions (Net of Reciprocals)	3,207,491	3,248,875
Interest Income on Notes Receivable from Participants	85,722	68,820
Other Income	39,693	101,972
Total Additions	10,917,523	5,989,203
Deductions		
Benefits Paid to Participants	2,947,446	3,114,129
Professional Services	51,808	55,706
Insurance	12,958	12,466
Administrative Services	24,000	16,000
Overhead Costs	8,110	6,250
Total Deductions	3,044,322	3,204,551
Net Increase	7,873,201	2,784,652
Net Assets Available for Benefits, Beginning of Year	64,341,359	61,556,707
Net Assets Available for Benefits, End of Year	\$ 72,214,560	\$ 64,341,359

The Accompanying Notes are an Integral Part of These Financial Statements.

INTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS

LOCAL UNION 910 ANNUITY FUND

NOTES TO FINANCIAL STATEMENTS

NOTE 1 SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

The I.B.E.W. Local Union 910 Annuity Fund (the Fund) is a multi-employer defined contribution plan that was formed on April 1, 1988, under an agreement between National Electrical Contractors Association and the Labor Union. The Fund is a collectively bargained defined contribution benefit plan subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA). The collective bargaining agreement provides for employers of members of the Labor Union to contribute a prescribed amount for each member hour worked. The amounts available in all participants' accounts constitute a fund and shall be invested and administered as a unit. The Fund office is located in Watertown, New York. Contributing employers primarily represent electricians in northern New York State. Approximately 40 percent of employer contributions are derived from the Fund's three largest employers.

Basis of Accounting

The accompanying financial statements have been prepared using the accrual basis of accounting in which revenue is recognized when earned or otherwise available, and expenses are recognized when incurred. The preparation of the financial statements are in accordance with accounting principles generally accepted in the United States of America (GAAP).

Investment Valuation and Income Recognition

The Plan's investments are stated 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 for discussion of fair value measurements.

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

Use of Estimates

The preparation of financial statements in conformity with generally accepted accounting principles requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

INTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS

LOCAL UNION 910 ANNUITY FUND

NOTES TO FINANCIAL STATEMENTS

NOTE 1 SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

Contributions Receivable

Contributions receivable is valued at cost and represent amounts due as of June 30, 2024 and 2023, under terms of the collective bargaining agreement. There was no credit loss adjustment or allowance balance at June 30, 2024 and 2023 as the amounts are considered fully collectible at year end.

Notes Receivable from Participants

Notes receivable from participants are measured at their unpaid principal balance plus any accrued and unpaid interest. The Plan considers notes receivable from participants to be fully collectible, accordingly no allowance for doubtful accounts is required. Delinquent participant loans are reclassified as distributions based upon the terms of the plan document.

NOTE 2 DESCRIPTION OF PLAN

The foregoing description of the plan provides only general information. Participants should refer to the Individual Account Plan for a more complete description of the Plan's provisions. Copies of the Plan are available from the office of the trustees of the Annuity Fund.

Contributions

Participating employers contribute \$3.25 per hour worked pursuant to a collective bargaining agreement between employers and the union (expiring on April 1, 2025). Depending on the tier the participant is in, their hourly contribution to the Annuity Fund is as follows:

<u>4/1/23 - 3/31/24</u>	<u>4/1/24 - 3/31/25</u>
Tier A .14	Tier A .49
Tier B 2.75	Tier B 3.25
Tier C 7.00	Tier C 7.67
Tier D 13.06	Tier D 13.99

Participant Accounts

Each participant's account is credited with employer contributions for hours worked plus net investment income of the Plan. Investment income is calculated each month and is posted to the individual account. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account. The Trustees have established a tier allocation for hourly contribution between the Health & Welfare Fund and the Annuity Fund.

INTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS

LOCAL UNION 910 ANNUITY FUND

NOTES TO FINANCIAL STATEMENTS

NOTE 2 DESCRIPTION OF PLAN (Continued)

Vesting

Participants are fully vested in their employer contributions plus actual earnings once their individual account has a balance of 160 hours or more of current employer contributions.

Payment of Benefits

Benefits are recorded when paid. On termination of services due to death, disability or retirement, a participant may elect to receive an amount equal to the value of the participant's account in a lump sum, or if retired, in equal installments over a maximum of ten years. For termination of service for other reasons, a participant may receive the value of interest in their account in a lump sum. Participants may also take hardship distributions which they are taxed on.

Notes Receivable from Participants

A participant who has had an individual account for five years or more may apply to the Trustees for a loan. Loans to individual participants are secured by the participants' account balance, must be a minimum of \$1,000 and are limited to the lesser of \$50,000 or 50% of the participants' account balance. A participant may only have one outstanding loan. The repayment terms of these loans will be between five and fifteen years and will be determined by the intended use of the borrowed funds as described in the Plan Document. Payments must be made at least monthly and all loans will bear interest at Prime plus 1%.

Operating Expenses

All expenses of maintaining the Plan are paid by the Fund.

NOTE 3 PLAN TERMINATION

In the event the Plan terminates, the net assets of the Plan will be allocated, as prescribed by ERISA and its related regulations.

Termination, partial termination, or discontinuance of the Plan may be affected by the Trustees only with the consent of the Union and the Association. In such event, all the assets of the Plan shall be used for the exclusive benefit of participants and beneficiaries. In the event of discontinuance of the Plan, each individual account shall be revalued pursuant to Article V of the plan agreement including allocations of all net income and expenses as provided thereunder.

The rights of all affected participants to benefits accrued to the date of such termination, partial termination, or discontinuance, to the extent funded as of such date, or the amounts credited to the participants' individual accounts, are nonforfeitable. Expenses of termination of the Plan shall be deducted pro-rata from the balance in each participant's individual account thus determined, and the remaining balance shall be paid to each participant in one lump sum.

INTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS

LOCAL UNION 910 ANNUITY FUND

NOTES TO FINANCIAL STATEMENTS

NOTE 4 FAIR VALUE MEASUREMENTS

The Financial Accounting Standards Board authoritative guidance on fair value measurements establishes a framework for measuring fair value. That 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 are described as follows:

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

Level 2: Inputs to the valuation methodology include the following:

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

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

Level 3: Inputs to the valuation methodology are unobservable and significant to the fair 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.

The following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodologies used at June 30, 2024 and 2023.

U.S. Government and Agency Debt Securities: Bonds, notes, and government securities for which no sale was reported on that date are valued at the last reported bid price.

Corporate Bonds: Corporate bonds traded in the over-the-counter market and listed securities for which no sale was reported on the last business day of the plan year are valued at the average of the last reported bid and asked prices.

Common Stocks and Mutual Funds: Fair values of securities traded on a national exchange are based on the last reported sales price on the last business day of the year.

Short-Term Investments and Certificates of Deposit: Valued at amortized cost which approximates fair value

INTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS

LOCAL UNION 910 ANNUITY FUND

NOTES TO FINANCIAL STATEMENTS

NOTE 4 FAIR VALUE MEASUREMENTS (Continued)

LLC Investment: Valued at the NAV of units of a bank collective trust. The NAV, as provided by the trustee, is used as a practical expedient to estimate fair value. The NAV is based on the fair value of the underlying investments held by the fund less its liabilities. This practical expedient is not used when it is determined to be probable that the fund will sell the investment for an amount different than the reported NAV. Participant transactions (purchased and sold) may occur daily were the Plan to initiate a full redemption of the collective trust, the investment advisor reserves the right to temporarily delay withdrawal from the trust in order to ensure that securities liquidations will be carried out in an orderly business manner.

All assets have been valued using a market approach, except for the INDURE Build to Core Fund, LLC. The Board of Trustees is responsible for oversight of investment valuation policies and procedures. The Board is provided with information sufficient to evaluate and determine fair values such as support from the investment manager, quarterly reports, and most importantly annual independent audits and appraisals.

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

The following table sets forth by level, within the fair value hierarchy, the Plan's assets measured at fair value on a recurring basis as of June 30, 2024 and 2023:

<u>Investments</u>	<u>Total</u>	June 30, 2024		
		Fair Value Measurements at Reporting		
		Date Using the Above Criteria		
		<u>(Level 1)</u>	<u>(Level 2)</u>	<u>(Level 3)</u>
Common Stocks and Mutual Funds	\$ 44,906,920	\$ 44,906,920	\$ 0	\$ 0
U.S. Government and Agency Debt				
Securities	11,468,030	0	11,468,030	0
Corporate Bonds	6,784,960	0	6,784,960	0
Certificates of Deposit	826,132	826,132	0	0
INDURE Build to Core Fund, LLC (a)	5,272,738	0	0	0
Total	<u>\$ 69,258,780</u>	<u>\$ 45,733,052</u>	<u>\$ 18,252,990</u>	<u>\$ 0</u>

INTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS

LOCAL UNION 910 ANNUITY FUND

NOTES TO FINANCIAL STATEMENTS

NOTE 4 FAIR VALUE MEASUREMENTS (Continued)

<u>Investments</u>	<u>Total</u>	June 30, 2023		
		Fair Value Measurements at Reporting		
		Date Using the Above Criteria		
		<u>(Level 1)</u>	<u>(Level 2)</u>	<u>(Level 3)</u>
Common Stocks and Mutual Funds	\$ 37,536,274	\$ 37,536,274	\$ 0	\$ 0
U.S. Government and				
Agency Debt Securities	10,258,870	0	10,258,870	0
Corporate Bonds	5,915,002	0	5,915,002	0
Certificates of Deposit	1,564,521	1,564,521	0	0
INDURE Build to Core Fund, LLC (a)	<u>6,021,100</u>	<u>0</u>	<u>0</u>	<u>0</u>
Total	<u>\$ 61,295,767</u>	<u>\$ 39,100,795</u>	<u>\$ 16,173,872</u>	<u>\$ 0</u>

(a) In accordance with Subtopic 820-10, certain investments that are measured at fair value using net asset value per share (or its equivalent) practical expedient have not been classified in the fair value hierarchy. The fair value amounts presented in this table are intended to permit reconciliation of the fair value hierarchy to the amounts presented in the statements of the net assets available for benefits.

The following table sets forth additional disclosures of the Fund's investments whose fair value is estimated using net asset value per share (or its equivalent) as of June 30, 2024 and 2023:

	<u>Fair Value</u>		<u>Unfunded</u>	<u>Redemption</u>
	<u>2024</u>	<u>2023</u>		
INDURE Build to Core Fund, LLC	\$ 5,272,738	\$ 6,021,100	\$ 0	Yes – see below

I.B.E.W. – NECA Diversified Underwritten Real Estate Fund, LLC (INDURE Build to Core Fund, LLC) – Formed on April 7, 2008 as an open-ended comingled real estate fund to provide potential members, principally Taft-Hartley Funds and Pension Trusts, endowments, charitable foundations and certain other entities, including real estate investment trusts, a medium for pooling their funds to invest in commercial and residential real estate and real estate assets, for the purpose of generating income and appreciation on such real estate investments.

On June 19, 2014 the Fund changed the name of the company to INDURE Build-to-Core Fund, LLC (the Fund). The number of units issued in exchange for members' capital contribution is equal to the dollar value of the members' capital contribution divided by the per unit asset value of the Fund as of the valuation date, as defined in the Fund's operating agreement. immediately preceding the date of the member capital contribution. Initially units were issued at a \$1,000 per unit value. A member may request redemption of all or a portion of its units at any time with respect to units purchased with cash. For units purchased in exchange for capital contribution other than cash, the Fund shall not be required to redeem more than 20% of the initial aggregate amount of such units during the 24 full calendar month period immediately following the date of issuance of such units.

INTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS

LOCAL UNION 910 ANNUITY FUND

NOTES TO FINANCIAL STATEMENTS

NOTE 5 RISKS AND UNCERTAINTIES

Contributions Receivable - Contributing employers primarily represent electricians in the northern region of New York State. Contributions are pursuant to collective bargaining agreements, and no collateral is required.

Investments – The Fund may invest in various types of investment securities. Investment securities are exposed to various market risks, such as interest rate, market, and credit risk. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in the values of investment securities will occur in the near term and that such changes could materially affect the amounts reported in the statements of net assets available for plan benefits.

NOTE 6 INCOME TAX STATUS

In April 2015, the Plan received a favorable determination letter dated March 6, 2015 that includes plan amendments through November 3, 2014, in which the Internal Revenue Service stated that the plan, as then designed was in compliance with the applicable requirements of the Internal Revenue Code. The plan has been amended since receiving the determination letter. However, the plan administrator and the plan's tax council 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 federal or state taxing authorities. The plan administrator has analyzed the tax positions taken by the plan, and has concluded that as of June 30, 2024 and 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.

NOTE 7 RELATED PARTY TRANSACTIONS

The Fund has common trustees with and shares certain administrative personnel costs with I.B.E.W. Local Union 910 Pension Fund (Pension Fund) and I.B.E.W. Local Union 910 Welfare Fund (Welfare Fund). The Fund shares numerous expenses with the Welfare Fund and the Pension Fund. Management fees paid to each of the Welfare Fund and the Pension Fund for the years ended June 30, 2024 and 2023 were \$12,000 and \$8,000, respectively.

The Welfare Fund also has a common checking account in which employer contributions covering all benefit funds are deposited, and subsequently distributed to the appropriate benefit funds.

INTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS

LOCAL UNION 910 ANNUITY FUND

NOTES TO FINANCIAL STATEMENTS

NOTE 8 ADDITIONAL INFORMATION

At June 30, 2024, the Annuity Fund recognized net investment gain of \$7,584,617 which is an 11.80% return on each participant's account as of that date. At June 30, 2023, the Annuity Fund recognized net investment gain of \$2,569,536 which is a 4.45% return on each participant's account as of that date.

NOTE 9 PLAN AMENDMENTS

There was a plan amendment adopted during the year ended June 30, 2023 stating that an individual ceases to be a participant if their account balance does not exceed \$400 or if the balance of their account has been previously distributed. Also, the forfeiture of an individual's account occurs when a participant has no contributions require to be tendered to the participant account for 12 consecutive months, and the individual has a balance of less than 160 hours of current employer contributions, and if any funds are received from prior lawsuits or claims, the funds are forfeited.

NOTE 10 PARTY IN INTEREST

A party-in-interest is defined under the Department of Labor regulations as any fiduciary of the Plan, any party rendering services to the Plan or an employer whose employees are covered by the Plan. The Plan pays expenses related to Plan operations and investment activity to various service providers. Therefore, payments to such service providers by the Plan qualify as party-in-interest transactions.

NOTE 11 SUBSEQUENT EVENTS

Management has evaluated subsequent events through January 31, 2025, the date on which the financial statements were available to be issued.

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.

Part I Annual Report Identification Information

For calendar plan year 2023 or fiscal plan year beginning **07/01/2023** and ending **06/30/2024**

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.)

B This return/report is: 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 #910 ANNUITY FUND	1b Three-digit plan number (PN) ▶ 002
	1c Effective date of plan 04/01/1988
2a Plan sponsor's name (employer, if for a single-employer plan) Mailing address (include room, apt., suite no. and street, or P.O. Box) City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions) TRUSTEES OF THE I.B.E.W. LOCAL 910 ANNUITY FUND 25001 WATER STREET WATERTOWN NY 13601	2b Employer Identification Number (EIN) **-***7520 2c Plan Sponsor's telephone number 315-782-5941 2d Business code (see instructions) 561110

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	<i>Mark A. Capone</i>	4/9/25	MARK A. CAPONE
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	<i>Travis J. Flint</i>	4/9/25	TRAVIS J. FLINT
	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 <input type="checkbox"/> Same as Plan Sponsor TRUSTEES OF THE I.B.E.W. LOCAL 910 ANNUITY FUND 25001 WATER STREET WATERTOWN NY 13601-2145	3b Administrator's EIN ** - *** 7520 3c Administrator's telephone number 315-7825941
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4 If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report: a Sponsor's name c Plan Name	4b EIN 4d PN
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5 Total number of participants at the beginning of the plan year	5	738
6 Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines 6a(1), 6a(2), 6b, 6c, and 6d).		
a (1) Total number of active participants at the beginning of the plan year	6a(1)	347
a (2) Total number of active participants at the end of the plan year	6a(2)	355
b Retired or separated participants receiving benefits	6b	
c Other retired or separated participants entitled to future benefits	6c	401
d Subtotal. Add lines 6a(2), 6b, and 6c	6d	756
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits	6e	
f Total. Add lines 6d and 6e	6f	756
g (1) Number of participants with account balances as of the beginning of the plan year (only defined contribution plans complete this item)	6g(1)	738
(2) Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	6g(2)	756
h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested	6h	
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	7	41

8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions:
 2E

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

9a Plan funding arrangement (check all that apply) (1) <input type="checkbox"/> Insurance (2) <input type="checkbox"/> Code section 412(e)(3) insurance contracts (3) <input checked="" type="checkbox"/> Trust (4) <input type="checkbox"/> General assets of the sponsor	9b Plan benefit arrangement (check all that apply) (1) <input type="checkbox"/> Insurance (2) <input type="checkbox"/> Code section 412(e)(3) insurance contracts (3) <input checked="" type="checkbox"/> Trust (4) <input type="checkbox"/> 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) <input type="checkbox"/> R (Retirement Plan Information) (2) <input type="checkbox"/> MB (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary (3) <input type="checkbox"/> SB (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary (4) <input type="checkbox"/> DCG (Individual Plan Information) - Number Attached _____ (5) <input type="checkbox"/> MEP (Multiple-Employer Retirement Plan Information)	b General Schedules (1) <input checked="" type="checkbox"/> H (Financial Information) (2) <input type="checkbox"/> I (Financial Information - Small Plan) (3) <input type="checkbox"/> A (Insurance Information) - Number Attached _____ (4) <input checked="" type="checkbox"/> C (Service Provider Information) (5) <input type="checkbox"/> D (DFE/Participating Plan Information) (6) <input type="checkbox"/> G (Financial Transaction Schedules)
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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 _____