

Form 5500 Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Annual Return/Report of Employee Benefit Plan This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6057(b) and 6058(a) of the Internal Revenue Code (the Code). ▶ Complete all entries in accordance with the instructions to the Form 5500.	OMB Nos. 1210-0110 1210-0089 2023 This Form is Open to Public Inspection
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Part I	Annual Report Identification Information
For calendar plan year 2023 or fiscal plan year beginning 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.) ☐ 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 LABORERS' LOCAL #157 PENSION FUND
1b	Three-digit plan number (PN) ▶ 001
1c	Effective date of plan 07/01/1963
2a	Plan sponsor's name (employer, if for a single-employer plan) Mailing address (include room, apt., suite no. and street, or P.O. Box) City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions) LABORERS' LOCAL #157 PENSION FUND 348 DUANESBURG RD SCHENECTADY, NY 12306 348 DUANESBURG RD. SCHENECTADY, NY 12306-0000
2b	Employer Identification Number (EIN) 14-6076460
2c	Plan Sponsor's telephone number 518-374-8872
2d	Business code (see instructions) 237310

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

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

SIGN HERE	Filed with authorized/valid electronic signature.	04/14/2025	MICHAEL BRADY
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

3a Plan administrator's name and address ☐ Same as Plan Sponsor MICHAEL P. BRADY 348 DUANESBURG RD. SCHENECTADY, NY 12306-0000	3b Administrator's EIN 14-6076460 3c Administrator's telephone number 518-374-8872
4 If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report: a Sponsor's name c Plan Name	4b EIN 4d PN
5 Total number of participants at the beginning of the plan year	5 1041
6 Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines 6a(1) , 6a(2) , 6b , 6c , and 6d). a(1) Total number of active participants at the beginning of the plan year a(2) Total number of active participants at the end of the plan year b Retired or separated participants receiving benefits c Other retired or separated participants entitled to future benefits d Subtotal. Add lines 6a(2) , 6b , and 6c e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits. f Total. Add lines 6d and 6e g(1) Number of participants with account balances as of the beginning of the plan year (only defined contribution plans complete this item) g(2) Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item) h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested	6a(1) 516 6a(2) 591 6b 303 6c 161 6d 1055 6e 75 6f 1130 6g(1) 6g(2) 6h
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	7 87

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

1B

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

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

a Pension Schedules

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

b General Schedules

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

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

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

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

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

11c Enter the Receipt Confirmation Code for the 2023 Form M-1 annual report. If the plan was not required to file the 2023 Form M-1 annual report, enter the Receipt Confirmation Code for the most recent Form M-1 that was required to be filed under the Form M-1 filing requirements. (Failure to enter a valid Receipt Confirmation Code will subject the Form 5500 filing to rejection as incomplete.)

Receipt Confirmation Code _____

SCHEDULE A (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Insurance Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500. ▶ Insurance companies are required to provide the information pursuant to ERISA section 103(a)(2).	OMB No. 1210-0110 2023 This Form is Open to Public Inspection
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For calendar plan year 2023 or fiscal plan year beginning 07/01/2023 and ending 06/30/2024		
A Name of plan LABORERS' LOCAL #157 PENSION FUND	B Three-digit plan number (PN) ▶	001
C Plan sponsor's name as shown on line 2a of Form 5500 LABORERS' LOCAL #157 PENSION FUND	D Employer Identification Number (EIN) 14-6076460	

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

(a) Name of insurance carrier
UNION LABOR LIFE INSURANCE COMPANY

(b) EIN	(c) NAIC code	(d) Contract or identification number	(e) Approximate number of persons covered at end of policy or contract year	Policy or contract year	
				(f) From	(g) To
13-1423090	69744	GA-01127		07/01/2023	06/30/2024

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

(a) Total amount of commissions paid	(b) Total amount of fees paid
0	13379

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

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid
ULLICO INVESTMENT COMPANY
1625 I STREET NW
WASHINGTON, DC 20006

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
	13379		7

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

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

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

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

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

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

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

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

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

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

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

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

Part II Investment and Annuity Contract Information

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

4 Current value of plan's interest under this contract in the general account at year end	4	
5 Current value of plan's interest under this contract in separate accounts at year end.....	5	2109192

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

Specify nature of costs ▶

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

(2) Dividends and credits

7c(2)

(3) Interest credited during the year

7c(3)

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

7c(4)

(5) Other (specify below)

7c(5)

▶

(6) Total additions.....

7c(6)

0

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

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

7e(1)

(2) Administration charge made by carrier

7e(2)

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

7e(3)

(4) Other (specify below)

7e(4)

▶

(5) Total deductions.....

7e(5)

0

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

Part III Welfare Benefit Contract Information

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

8 Benefit and contract type (check all applicable boxes)

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

9 Experience-rated contracts:

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

10 Nonexperience-rated contracts:

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

Specify nature of costs.

Part IV Provision of Information

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

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

SCHEDULE MB (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6059 of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500 or 5500-SF.	OMB No. 1210-0110 2023 This Form is Open to Public Inspection
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For calendar plan year 2023 or fiscal plan year beginning 07/01/2023 and ending 06/30/2024

▶ Round off amounts to nearest dollar.
▶ Caution: A penalty of \$1,000 will be assessed for late filing of this report unless reasonable cause is established.

A Name of plan LABORERS' LOCAL #157 PENSION FUND	B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF LABORERS' LOCAL #157 PENSION FUND	D Employer Identification Number (EIN) 14-6076460

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

1a Enter the valuation date: Month 07 Day 01 Year 2023	
b Assets	
(1) Current value of assets	1b(1) 84050743
(2) Actuarial value of assets for funding standard account.....	1b(2) 88080647
c (1) Accrued liability for plan using immediate gain methods	1c(1) 90922429
(2) Information for plans using spread gain methods:	
(a) Unfunded liability for methods with bases	1c(2)(a)
(b) Accrued liability under entry age normal method.....	1c(2)(b)
(c) Normal cost under entry age normal method	1c(2)(c)
(3) Accrued liability under unit credit cost method.....	1c(3) 86794385
d Information on current liabilities of the plan:	
(1) Amount excluded from current liability attributable to pre-participation service (see instructions).....	1d(1)
(2) "RPA '94" information:	
(a) Current liability	1d(2)(a) 172284727
(b) Expected increase in current liability due to benefits accruing during the plan year	1d(2)(b) 6446555
(c) Expected release from "RPA '94" current liability for the plan year	1d(2)(c)
(3) Expected plan disbursements for the plan year	1d(3) 5431235

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

SIGN HERE	03/31/2025
Signature of actuary FRANK IANNUCCI	Date 23-05241
Type or print name of actuary SUMMIT ACTUARIAL SERVICES, LLC	Most recent enrollment number 845-567-6090
Firm name 11 RACQUET ROAD, NEWBURGH, NY 12550	Telephone number (including area code)
Address of the firm	

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

2 Operational information as of beginning of this plan year:

a Current value of assets (see instructions)	2a	84050743
b "RPA '94" current liability/participant count breakdown:	(1) Number of participants	(2) Current liability
(1) For retired participants and beneficiaries receiving payment	375	70144773
(2) For terminated vested participants	149	20379707
(3) For active participants:		
(a) Non-vested benefits		7096954
(b) Vested benefits		74663293
(c) Total active	516	81760247
(4) Total	1040	172284727
c If the percentage resulting from dividing line 2a by line 2b(4), column (2), is less than 70%, enter such percentage	2c	48.79 %

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

(a) Date (MM/DD/YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM/DD/YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees
01/31/2024	7862753	0			
07/31/2024	1240216	0			
Totals ▶			3(b)	9102969	3(c) 0
(d) Total withdrawal liability amounts included in line 3(b) total					3(d) 0

4 Information on plan status:

a Funded percentage for monitoring plan's status (line 1b(2) divided by line 1c(3))	4a	101.5 %
b Enter code to indicate plan's status (see instructions for attachment of supporting evidence of plan's status). If entered code is "N," go to line 5	4b	N
c Is the plan making the scheduled progress under any applicable funding improvement or rehabilitation plan?		☐ Yes ☐ No
d If the plan is in critical status or critical and declining status, does line 1(c) reflect any benefit reductions for the first time (see instructions)?		☐ Yes ☐ No
e If line d is "Yes," enter the reduction in liability resulting from the reduction in benefits (see instructions), measured as of the valuation date	4e	
f If the plan is in critical status or critical and declining status, and is:	4f	
• Projected to emerge from critical status within 30 years, enter the plan year in which it is projected to emerge;		
• Projected to become insolvent within 30 years, enter the plan year in which insolvency is expected and check here. ☐		
• Neither projected to emerge from critical status nor become insolvent within 30 years, enter "9999."		

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

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

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

6 Checklist of certain actuarial assumptions:

a Interest rate for "RPA '94" current liability	6a		2.85 %
	Pre-retirement		Post-retirement
b Rates specified in insurance or annuity contracts	☐ Yes ☒ No ☐ N/A		☐ Yes ☒ No ☐ N/A
c Mortality table code for valuation purposes:			
(1) Males	6c(1)	A	A
(2) Females	6c(2)	AF	AF
d Valuation liability interest rate	6d	6.25 %	6.25 %
e Salary scale	6e	% ☐ N/A	
f Withdrawal liability interest rate:			
(1) Type of interest rate	6f(1)	☒ Single rate ☐ ERISA 4044 ☐ Other ☐ N/A	
(2) If "Single rate" is checked in (1), enter applicable single rate	6f(2)	6.25 %	
g Estimated investment return on actuarial value of assets for year ending on the valuation date	6g	7.5 %	
h Estimated investment return on current value of assets for year ending on the valuation date	6h	6.9 %	
i Expense load included in normal cost reported in line 9b	6i	☐ N/A	
(1) If expense load is described as a percentage of normal cost, enter the assumed percentage	6i(1)	%	
(2) If expense load is a dollar amount that varies from year to year, enter the dollar amount included in line 9b	6i(2)	275000	
(3) If neither (1) nor (2) describes the expense load, check the box	6i(3)	☐	

7 New amortization bases established in the current plan year:

(1) Type of base	(2) Initial balance	(3) Amortization Charge/Credit
1	-2052040	-202116

8 Miscellaneous information:

a If a waiver of a funding deficiency has been approved for this plan year, enter the date (MM/DD/YYYY) of the ruling letter granting the approval	8a	
b Demographic, benefit, and contribution information		
(1) Is the plan required to provide a projection of expected benefit payments? (See instructions) If "Yes," see instructions for required attachment.	☐ Yes ☒ No	
(2) Is the plan required to provide a Schedule of Active Participant Data? (See instructions).	☒ Yes ☐ No	
(3) Is the plan required to provide a projection of employer contributions and withdrawal liability payments? (See instructions) If "Yes," attach a schedule.	☐ Yes ☒ No	
c Are any of the plan's amortization bases operating under an extension of time under section 412(e) (as in effect prior to 2008) or section 431(d) of the Code?	☐ Yes ☒ No	
d If line c is "Yes," provide the following additional information:		
(1) Was an extension granted automatic approval under section 431(d)(1) of the Code?	☐ Yes ☐ No	
(2) If line 8d(1) is "Yes," enter the number of years by which the amortization period was extended ..	8d(2)	
(3) Was an extension approved by the Internal Revenue Service under section 412(e) (as in effect prior to 2008) or 431(d)(2) of the Code?	☐ Yes ☐ No	
(4) If line 8d(3) is "Yes," enter number of years by which the amortization period was extended (not including the number of years in line (2))	8d(4)	
(5) If line 8d(3) is "Yes," enter the date of the ruling letter approving the extension	8d(5)	
(6) If line 8d(3) is "Yes," is the amortization base eligible for amortization using interest rates applicable under section 6621(b) of the Code for years beginning after 2007?	☐ Yes ☐ No	
e If box 5h is checked or line 8c is "Yes," enter the difference between the minimum required contribution for the year and the minimum that would have been required without using the shortfall method or extending the amortization base(s)	8e	

9 Funding standard account statement for this plan year:**Charges to funding standard account:**

a Prior year funding deficiency, if any	9a	
b Employer's normal cost for plan year as of valuation date	9b	2629820

c Amortization charges as of valuation date:**(1)** All bases except funding waivers and certain bases for which the amortization period has been extended**(2)** Funding waivers**(3)** Certain bases for which the amortization period has been extended

	Outstanding balance	
9c(1)	31771713	4829029
9c(2)		
9c(3)		

d Interest as applicable on lines 9a, 9b, and 9c**9d** 457584**e** Total charges. Add lines 9a through 9d**9e** 7916433**Credits to funding standard account:****f** Prior year credit balance, if any**9f** 21194318**g** Employer contributions. Total from column (b) of line 3**9g** 9102969**h** Amortization credits as of valuation date

	Outstanding balance	
9h	7735613	1393653

i Interest as applicable to end of plan year on lines 9f, 9g, and 9h**9i** 1657459**j** Full funding limitation (FFL) and credits:**(1)** ERISA FFL (accrued liability FFL)**(2)** "RPA '94" override (90% current liability FFL)**(3)** FFL credit

9j(1)	10095350	
9j(2)	71829154	
9j(3)		

k (1) Waived funding deficiency**(2)** Other credits

9k(1)		
9k(2)		

l Total credits. Add lines 9f through 9i, 9j(3), 9k(1), and 9k(2)**9l** 33348399**m** Credit balance: If line 9l is greater than line 9e, enter the difference**9m** 25431966**n** Funding deficiency: If line 9e is greater than line 9l, enter the difference**9n****o** Current year's accumulated reconciliation account:**(1)** Due to waived funding deficiency accumulated prior to the current plan year**9o(1)****(2)** Due to amortization bases extended and amortized using the interest rate under section 6621(b) of the Code:**(a)** Reconciliation outstanding balance as of valuation date**(b)** Reconciliation amount (line 9c(3) balance minus line 9o(2)(a))**(3)** Total as of valuation date

9o(2)(a)		
9o(2)(b)		
9o(3)		

10 Contribution necessary to avoid an accumulated funding deficiency. (see instructions.)**10****11** Has a change been made in the actuarial assumptions for the current plan year? If "Yes," see instructions☐ Yes ☒ No

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

For calendar plan year 2023 or fiscal plan year beginning 07/01/2023 and ending 06/30/2024		
A Name of plan LABORERS' LOCAL #157 PENSION FUND	B Three-digit plan number (PN) ▶	001
C Plan sponsor's name as shown on line 2a of Form 5500 LABORERS' LOCAL #157 PENSION FUND	D Employer Identification Number (EIN) 14-6076460	

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

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

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation
ENTRUST PARTNERS OFFSHORE LP
90-0644478

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation
SIGULAR GUFF ADVISERS, LLC
13-3855629

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation
SALIENT CAPITAL ADVISORS, LLC
27-2587653

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation
NEUBERGER BERMAN INVESTMENT ADVISER
02-0654486

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

RAINIER INVESTMENT MANAGEMENT LLC

46-4242069

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

SEI TRUST COMPANY

06-1271230

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

CENTRAL PARK ADVISORS, LLC

125 W. 55TH STREET
NEW YORK, NY 10019

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

NB ALTERNATIVES ADVISORS, LLC

30-0536163

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

ASB CAPITAL MANAGEMENT, LLC

80-0618452

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

CHEVY CHASE TRUST COMPANY

52-2037618

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

IRONWOOD CAPITAL MANAGEMENT

91-1797297

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

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

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

MORGAN STANLEY SMITH BARNEY

20-8764829

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
27 50 72 71 19 99 15 33 55	NONE	262605	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☐ No ☒

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

KARPUS INVESMTENT MANAGEMENT

16-1290558

(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	NONE	41494	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

MICHAEL BRADY

14-6076460

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
14 30	EMPLOYEE	41490	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

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

SUMMIT ACTUARIAL SERVICES LLC

77-0645890

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
11	NONE	40000	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

TEAL, BECKER & CHIARAMONTE CPAS PC

14-1624930

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
10	NONE	35800	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

CHARTWELL INVESTMENT PARTNERS, LLC

36-4776242

(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	NONE	19590	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

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

OCIO MONITOR

11419 SOUTH HOLLY SPRINGS DRIVE
SOUTH JORDAN, UT 84009

(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	NONE	19558	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

KEYBANK NATIONAL ASSOCIATION

34-1784820

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
18	NONE	16368	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

BLITMAN & KING LLP

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	NONE	13378	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

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

JOSEPH MCCARTHY

16-1120588

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	11953	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

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

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

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

Part I Service Provider Information (continued)

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE D (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration	DFE/Participating Plan Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110 2023 This Form is Open to Public Inspection.
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For calendar plan year 2023 or fiscal plan year beginning 07/01/2023 and ending 06/30/2024

A Name of plan <u>LABORERS' LOCAL #157 PENSION FUND</u>	B Three-digit plan number (PN) ▶ <u>001</u>
---	--

C Plan or DFE sponsor's name as shown on line 2a of Form 5500 <u>LABORERS' LOCAL #157 PENSION FUND</u>	D Employer Identification Number (EIN) <u>14-6076460</u>
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Part I	Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs) (Complete as many entries as needed to report all interests in DFEs)
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a Name of MTIA, CCT, PSA, or 103-12 IE: SEPARATE ACCOUNT J

b Name of sponsor of entity listed in (a): THE UNION LABOR LIFE INSURANCE COMPANY

c EIN-PN <u>13-1423090-203</u>	d Entity code <u>P</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>2109192</u>
---------------------------------------	-------------------------------	--

a Name of MTIA, CCT, PSA, or 103-12 IE: ASB ALLEGIANCE REAL ESTATE FUND

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

c EIN-PN <u>52-6257033-006</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>1241083</u>
---------------------------------------	-------------------------------	--

a Name of MTIA, CCT, PSA, or 103-12 IE: RAINIER MULTIPLE INVESTMENT TRUST

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

c EIN-PN <u>27-2402927-042</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>1496082</u>
---------------------------------------	-------------------------------	--

a Name of MTIA, CCT, PSA, or 103-12 IE: PROLOAN BOND FUND, LLC

b Name of sponsor of entity listed in (a): POLOAN BOND FUND, LLC

c EIN-PN <u>26-3436991-001</u>	d Entity code <u>E</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>4703561</u>
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a Name of MTIA, CCT, PSA, or 103-12 IE:

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

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

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

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

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

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

Part II Information on Participating Plans (to be completed by DFEs, other than DCGs)

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

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

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

For calendar plan year 2023 or fiscal plan year beginning 07/01/2023 and ending 06/30/2024		
A Name of plan LABORERS' LOCAL #157 PENSION FUND	B Three-digit plan number (PN) ▶	001
C Plan sponsor's name as shown on line 2a of Form 5500 LABORERS' LOCAL #157 PENSION FUND		
		D Employer Identification Number (EIN) 14-6076460

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

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

Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a	587475	901532
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	1144020	1240216
(2) Participant contributions	1b(2)		
(3) Other	1b(3)	88142	127684
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	2740175	1761483
(2) U.S. Government securities	1c(2)	40667	0
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)	8216232	12247960
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)	25756728	22087228
(5) Partnership/joint venture interests	1c(5)	15996042	18375009
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)		
(9) Value of interest in common/collective trusts	1c(9)	3068836	2737165
(10) Value of interest in pooled separate accounts	1c(10)	2018420	2109192
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities	1c(12)	3373603	4703561
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	21057111	26699596
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other	1c(15)		

1d Employer-related investments:		(a) Beginning of Year	(b) End of Year
(1) Employer securities	1d(1)		
(2) Employer real property	1d(2)		
e Buildings and other property used in plan operation	1e	11035	7344
f Total assets (add all amounts in lines 1a through 1e)	1f	84098486	92997970
Liabilities			
g Benefit claims payable	1g		
h Operating payables	1h	47743	104310
i Acquisition indebtedness	1i		
j Other liabilities	1j		
k Total liabilities (add all amounts in lines 1g through 1j)	1k	47743	104310
Net Assets			
l Net assets (subtract line 1k from line 1f)	1l	84050743	92893660

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)	8559168	
(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)		8559168
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	13680	
(B) U.S. Government securities	2b(1)(B)	169	
(C) Corporate debt instruments	2b(1)(C)	480154	
(D) Loans (other than to participants)	2b(1)(D)		
(E) Participant loans	2b(1)(E)		
(F) Other	2b(1)(F)		
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		494003
(2) Dividends: (A) Preferred stock	2b(2)(A)		
(B) Common stock	2b(2)(B)	328884	
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	1022501	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		1351385
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)	15181582	
(B) Aggregate carrying amount (see instructions)	2b(4)(B)	14481665	
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)		699917
(5) Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)		
(B) Other	2b(5)(B)	3352838	
(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)		-316171
(7) Net investment gain (loss) from pooled separate accounts.....	2b(7)		104150
(8) Net investment gain (loss) from master trust investment accounts.....	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities.....	2b(9)		143865
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		681675
c Other income	2c		87
d Total income. Add all income amounts in column (b) and enter total	2d		15070917

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	5431235	
(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)		5431235
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)	97467	
(2) Contract administrator fees.....	2i(2)		
(3) Recordkeeping fees.....	2i(3)		
(4) IQPA audit fees.....	2i(4)	47753	
(5) Investment advisory and investment management fees	2i(5)	508673	
(6) Bank or trust company trustee/custodial fees	2i(6)	16368	
(7) Actuarial fees	2i(7)	40000	
(8) Legal fees	2i(8)	13378	
(9) Valuation/appraisal fees	2i(9)		
(10) Other trustee fees and expenses	2i(10)	3789	
(11) Other expenses	2i(11)	69337	
(12) Total administrative expenses. Add lines 2i(1) through (11)	2i(12)		796765
j Total expenses. Add all expense amounts in column (b) and enter total	2j		6228000

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		8842917
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: **TEAL, BECKER & CHIARAMONTE, CPAS**

(2) EIN: **14-1624930**

d The opinion of an independent qualified public accountant is **not attached** as part of Schedule H because:

(1) ☐ This form is filed for a CCT, PSA, DCG or MTIA. (2) ☐ It will be attached to the next Form 5500 pursuant to 29 CFR 2520.104-50.

Part IV Compliance Questions

4 CCTs and PSAs do not complete Part IV. MTIAs, 103-12 IEs, and GIAs do not complete lines 4a, 4e, 4f, 4g, 4h, 4k, 4m, 4n, or 5. 103-12 IEs also do not complete lines 4j and 4l. MTIAs also do not complete line 4l. DCGs do not complete lines 4e, 4f, 4k, 4l, and 5, and DCGs generally complete the rest of Part IV collectively for all plans in the DCG, except as otherwise provided (see instructions).

During the plan year:

	Yes	No	Amount
a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)		☒	
b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)		☒	
c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)		☒	
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)		☒	
e Was this plan covered by a fidelity bond?	☒		500000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		☒	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?		☒	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?		☒	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	☒		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.)	☒		
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?		☒	
l Has the plan failed to provide any benefit when due under the plan?		☒	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)		☒	
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.		☒	

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

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

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

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

If "Yes" is checked, enter the My PAA confirmation number from the PBGC premium filing for this plan year 535494.

SCHEDULE R (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Retirement Plan Information This schedule is required to be filed under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110 2023 This Form is Open to Public Inspection.
For calendar plan year 2023 or fiscal plan year beginning 07/01/2023 and ending 06/30/2024		
A Name of plan LABORERS' LOCAL #157 PENSION FUND		B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 LABORERS' LOCAL #157 PENSION FUND		D Employer Identification Number (EIN) 14-6076460
Part I	Distributions	
All references to distributions relate only to payments of benefits during the plan year.		
1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions.....		1
2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits): EIN(s): _____ Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.		
3 Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year		3 3
Part II	Funding Information (If the plan is not subject to the minimum funding requirements of section 412 of the Internal Revenue Code or ERISA section 302, skip this Part.)	
4 Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)? ☐ Yes ☒ No ☐ N/A If the plan is a defined benefit plan, go to line 8.		
5 If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. Date: Month _____ Day _____ Year _____ If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.		
6 a Enter the minimum required contribution for this plan year (include any prior year accumulated funding deficiency not waived)		6a
b Enter the amount contributed by the employer to the plan for this plan year		6b
c Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount)		6c
If you completed line 6c, skip lines 8 and 9.		
7 Will the minimum funding amount reported on line 6c be met by the funding deadline? ☐ Yes ☐ No ☐ N/A		
8 If a change in actuarial cost method was made for this plan year pursuant to a revenue procedure or other authority providing automatic approval for the change or a class ruling letter, does the plan sponsor or plan administrator agree with the change? ☐ Yes ☒ No ☐ N/A		
Part III	Amendments	
9 If this is a defined benefit pension plan, were any amendments adopted during this plan year that increased or decreased the value of benefits? If yes, check the appropriate box. If no, check the "No" box. ☐ Increase ☐ Decrease ☐ Both ☒ No		
Part IV	ESOPs (see instructions). If this is not a plan described under section 409(a) or 4975(e)(7) of the Internal Revenue Code, skip this Part.	
10 Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan?..... ☐ Yes ☐ No		
11 a Does the ESOP hold any preferred stock? ☐ Yes ☐ No		
b If the ESOP has an outstanding exempt loan with the employer as lender, is such loan part of a "back-to-back" loan? (See instructions for definition of "back-to-back" loan.) ☐ Yes ☐ No		
12 Does the ESOP hold any stock that is not readily tradable on an established securities market? ☐ Yes ☐ No		
For Paperwork Reduction Act Notice, see the Instructions for Form 5500.		
Schedule R (Form 5500) 2023 v. 230707		

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

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

a Name of contributing employer **JETT INDUSTRIES INC.**

b EIN **26-2044047**

c Dollar amount contributed by employer **892807**

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month **03** Day **31** Year **2025**

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

(1) Contribution rate (in dollars and cents) **13.66**

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

a Name of contributing employer **KIEWIT POWER CONSTRUCTORS**

b EIN **47-0642263**

c Dollar amount contributed by employer **712588**

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month **03** Day **31** Year **2025**

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

(1) Contribution rate (in dollars and cents) **13.66**

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

a Name of contributing employer **CALLANAN INDUSTRIES, INC.**

b EIN **14-1539261**

c Dollar amount contributed by employer **483892**

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month **03** Day **31** Year **2025**

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

(1) Contribution rate (in dollars and cents) **13.66**

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

a Name of contributing employer **JAMES H. MALOY, INC.**

b EIN **14-0857690**

c Dollar amount contributed by employer **427548**

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

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

(1) Contribution rate (in dollars and cents)

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

a Name of contributing employer **REACTION CONSTRUCTION CORP**

b EIN **14-1832255**

c Dollar amount contributed by employer **420749**

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

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

(1) Contribution rate (in dollars and cents)

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

a Name of contributing employer **NEWPORT NEWS SHIPBUILDING**

b EIN **54-0318880**

c Dollar amount contributed by employer **389661**

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month **04** Day **30** Year **2025**

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

(1) Contribution rate (in dollars and cents) **11.25**

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

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

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

a Name of contributing employer **KJJ INDUSTRIES, LLC**

b EIN **14-1829498**

c Dollar amount contributed by employer **348777**

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☒ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month **03** Day **31** Year **2025**

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

(1) Contribution rate (in dollars and cents)

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

a Name of contributing employer **A & K SLIPFORMING INC.**

b EIN **16-1517098**

c Dollar amount contributed by employer **303850**

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month **03** Day **31** Year **2025**

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

(1) Contribution rate (in dollars and cents) **13.66**

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

a Name of contributing employer **SUPREME INDUSTRIES, INC.**

b EIN **20-3957828**

c Dollar amount contributed by employer **297330**

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month **03** Day **31** Year **2025**

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

(1) Contribution rate (in dollars and cents) **13.66**

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

a Name of contributing employer **D.A. COLLINS CONSTRUCTION**

b EIN **14-1403204**

c Dollar amount contributed by employer **294940**

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month **03** Day **31** Year **2025**

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

(1) Contribution rate (in dollars and cents) **13.66**

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

(1) Contribution rate (in dollars and cents)

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

(1) Contribution rate (in dollars and cents)

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

14 Enter the number of deferred vested and retired participants (inactive participants), as of the beginning of the plan year, whose contributing employer is no longer making contributions to the plan for:		
a The current plan year. Check the box to indicate the counting method used to determine the number of inactive participants: ☐ last contributing employer ☐ alternative ☐ reasonable approximation (see instructions for required attachment)	14a	
b The plan year immediately preceding the current plan year. ☐ Check the box if the number reported is a change from what was previously reported (see instructions for required attachment)	14b	
c The second preceding plan year. ☐ Check the box if the number reported is a change from what was previously reported (see instructions for required attachment)	14c	
15 Enter the ratio of the number of participants under the plan on whose behalf no employer had an obligation to make an employer contribution during the current plan year to:		
a The corresponding number for the plan year immediately preceding the current plan year	15a	102.98
b The corresponding number for the second preceding plan year	15b	106.96
16 Information with respect to any employers who withdrew from the plan during the preceding plan year:		
a Enter the number of employers who withdrew during the preceding plan year	16a	
b If line 16a is greater than 0, enter the aggregate amount of withdrawal liability assessed or estimated to be assessed against such withdrawn employers	16b	
17 If assets and liabilities from another plan have been transferred to or merged with this plan during the plan year, check box and see instructions regarding supplemental information to be included as an attachment..... ☐		

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

18 If any liabilities to participants or their beneficiaries under the plan as of the end of the plan year consist (in whole or in part) of liabilities to such participants and beneficiaries under two or more pension plans as of immediately before such plan year, check box and see instructions regarding supplemental information to be included as an attachment..... ☐	
19 If the total number of participants is 1,000 or more, complete lines (a) and (b):	
a Enter the percentage of plan assets held as:	
Public Equity: <u>52.5</u> % Private Equity: <u>13.1</u> % Investment-Grade Debt and Interest Rate Hedging Assets: <u>18.0</u> %	
High-Yield Debt: <u>4.8</u> % Real Assets: <u>7.2</u> % Cash or Cash Equivalents: <u>2.9</u> % Other: <u>1.5</u> %	
b Provide the average duration of the Investment-Grade Debt and Interest Rate Hedging Assets:	
☒ 0-5 years ☐ 5-10 years ☐ 10-15 years ☐ 15 years or more	
20 PBGC missed contribution reporting requirements. If this is a multiemployer plan or a single-employer plan that is not covered by PBGC, skip line 20.	
a Is the amount of unpaid minimum required contributions for all years from Schedule SB (Form 5500) line 40 greater than zero? ☐ Yes ☐ No	
b If line 20a is "Yes," has PBGC been notified as required by ERISA sections 4043(c)(5) and/or 303(k)(4)? Check the applicable box:	
☐ Yes.	
☐ No. Reporting was waived under 29 CFR 4043.25(c)(2) because contributions equal to or exceeding the unpaid minimum required contribution were made by the 30th day after the due date.	
☐ No. The 30-day period referenced in 29 CFR 4043.25(c)(2) has not yet ended, and the sponsor intends to make a contribution equal to or exceeding the unpaid minimum required contribution by the 30th day after the due date.	
☐ No. Other. Provide explanation. _____	

Part VII IRS Compliance Questions

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

***LABORERS' LOCAL #157
PENSION FUND***

FINANCIAL STATEMENTS

JUNE 30, 2024 AND 2023



Teal, Becker & Chiaramonte™
CERTIFIED PUBLIC ACCOUNTANTS & ADVISORS

A Higher Standard of Excellence

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	<u>Schedule Number</u>
Schedules Of Administrative Expenses	I
Schedule H, Line 4i - Schedule Of Assets (Held At End Of Year)	II
Schedule H, Line 4j - Schedule Of Reportable Transactions	III



Teal, Becker & Chiaramonte™
CERTIFIED PUBLIC ACCOUNTANTS & ADVISORS

To The Board Of Trustees
Laborers' Local #157 Pension Fund
Schenectady, New York

Independent Auditors' Report

Opinion

We have audited the financial statements of Laborers' Local #157 Pension Fund (the Plan), an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (ERISA), which comprise the statements of net assets available for benefits as of June 30, 2024 and 2023, and the related statements of changes in net assets available for benefits for the years ended June 30, 2024 and 2023, and the related notes to the financial statements.

In our opinion, the accompanying financial statements present fairly, in all material respects, the net assets available for benefits of Laborers' Local #157 Pension Fund as of June 30, 2024 and 2023, and the changes in net assets available for benefits for the years ended June 30, 2024 and 2023 in accordance with accounting principles generally accepted in the United States of America.

Basis for Opinion

We conducted our audits in accordance with auditing standards generally accepted in the United States of America (GAAS). Our responsibilities under those standards are further described in the Auditors' Responsibilities for the Audits of the Financial Statements section of our report. We are required to be independent of Laborers' Local #157 Pension 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 Laborers' Local #157 Pension Fund's ability to continue as a going concern for one year after the date that the financial statements are issued.

Responsibilities of Management for the Financial Statements (Continued)

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

Auditors' Responsibilities for the Audits of the Financial Statements

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

In performing an audit in accordance with GAAS, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of Laborers' Local #157 Pension 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 Laborers' Local #157 Pension 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 audits, significant audit findings, and certain internal control-related matters that we identified during the audits.

Supplementary Schedules Required by ERISA

Our audits were conducted for the purpose of forming an opinion on the financial statements as a whole. The supplementary Schedule H, Line 4i - Schedule of Assets (Held at End of Year) as of June 30, 2024 and Schedule H, Line 4j - Schedule Of Reportable Transactions for the year ended June 30, 2024 are presented for purposes of additional analysis and are not a required part of the financial statements but is supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audits of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with GAAS.

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

Other Supplementary Information

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

Paul Becker & Charamonte CPAs PC

Albany, New York
April 11, 2025

LABORERS' LOCAL #157 PENSION FUND

Statements Of Net Assets Available For Benefits

June 30

	<u>2024</u>	<u>2023</u>
Assets:		
Investments at fair value: (Note 3)		
Mutual and exchange-traded funds	\$ 26,699,596	\$ 21,057,111
Common stocks	22,087,228	25,756,728
Alternatives (Note 4)	18,375,009	15,996,042
Corporate bonds	12,247,960	8,216,232
Investment entity (Note 4)	4,703,561	3,373,603
Common collective trusts (Note 4)	2,737,165	3,068,836
Group Annuity Contract (Note 4)	2,109,192	2,018,420
Cash equivalents	1,300,945	2,255,291
Government security	-	40,667
	<u>90,260,656</u>	<u>81,782,930</u>
 Total investments at fair value		
	<u>90,260,656</u>	<u>81,782,930</u>
 Receivables and other assets:		
Employers' contributions	1,240,216	1,144,020
Investment income	127,684	88,142
Other assets	7,344	11,035
	<u>1,375,244</u>	<u>1,243,197</u>
 Total receivables and other assets		
	<u>1,375,244</u>	<u>1,243,197</u>
 Cash	<u>1,362,070</u>	<u>1,072,359</u>
 Total assets	<u>92,997,970</u>	<u>84,098,486</u>
 Liabilities:		
Accounts and reciprocities payable	85,203	30,725
Due to affiliated fund (Note 5)	19,107	17,018
	<u>104,310</u>	<u>47,743</u>
 Total liabilities	<u>104,310</u>	<u>47,743</u>
 Net Assets Available For Benefits	<u>\$ 92,893,660</u>	<u>\$ 84,050,743</u>

The accompanying notes are an integral part of these financial statements

LABORERS' LOCAL #157 PENSION FUND

Statements Of Changes In Net Assets Available For Benefits

For The Years Ended June 30

	<u>2024</u>	<u>2023</u>
Additions to net assets:		
Investment income:		
Net appreciation in fair value of investments	\$ 4,666,274	\$ 4,392,526
Interest and dividends	<u>1,845,475</u>	<u>1,814,020</u>
Total investment income	6,511,749	6,206,546
Less: investment fees	<u>(509,070)</u>	<u>(376,313)</u>
Net investment income	<u>6,002,679</u>	<u>5,830,233</u>
Contributions:		
Employers' contributions	9,102,969	7,263,825
Less: transfers under reciprocal agreements	<u>(543,801)</u>	<u>(257,511)</u>
Net employers' contributions	<u>8,559,168</u>	<u>7,006,314</u>
Total additions to net assets	<u>14,561,847</u>	<u>12,836,547</u>
Deductions from net assets:		
Benefits paid directly to participants	5,431,235	5,722,996
Administrative expenses	<u>287,695</u>	<u>287,842</u>
Total deductions from net assets	<u>5,718,930</u>	<u>6,010,838</u>
Net increase in net assets available for benefits	8,842,917	6,825,709
Net assets available for benefits - beginning	<u>84,050,743</u>	<u>77,225,034</u>
Net Assets Available For Benefits - Ending	<u>\$ 92,893,660</u>	<u>\$ 84,050,743</u>

The accompanying notes are an integral part of these financial statements

LABORERS' LOCAL #157 PENSION FUND

Notes To Financial Statements

Note 1: Description Of Plan

Background information - The Laborers' Local #157 Pension Fund (the Plan) was formed in July 1963 to provide members with a monthly income upon retirement from active employment in the jurisdiction of the Local #157 Laborers' International Union of North America.

Plan description - The Plan is a defined benefit (unit benefit) plan which provides for benefits on a per year of credited service basis. There are four different pension benefits provided under the Plan: normal, early retirement, disability, and deferred vested. Eligibility is established by accumulating pension credits for the past and/or future years of service as defined by the Plan. A Plan Agreement providing vesting, benefits, and other provisions in more detail is available to all plan participants. A summary of the Plan's actuarial present value of accumulated plan benefits was determined by the Plan's actuary, as of the date of their last valuation on July 1, 2023. This information is detailed in Note 7 to the financial statements.

Funding policy - The Plan is funded by contributions from employers pursuant to collective bargaining agreements. Contributions to the Plan are currently made under separate agreements with the Labor Relations Division of the Associated General Contractors of New York State, LLC (previously Associated General Contractors of America, New York State Chapter, Inc.) (Heavy & Highway Agreement), the Eastern Contractors Association, Inc. (Building Agreement) and the Construction Industry Council of Westchester and Hudson Valley, Inc. (Shaft and Tunnel Agreement). These agreements cover work performed by contractors utilizing union labor in Schenectady and Schoharie Counties, and various townships in Montgomery, Fulton, and Saratoga Counties.

Contributions from employers are based upon hours worked during the year by covered employees. All contributions are paid directly by employers to the Plan. Contribution rates per hour in effect for the years ended June 30, 2024 and 2023 were as follows:

	<u>Building Agreement</u>	<u>Other Agreements</u>
July 1, 2022 - June 30, 2023	\$ 11.20	\$ 13.05
July 1, 2023- June 30, 2024	\$ 11.25	\$ 13.66

Plan termination - In the event the Plan terminates, the net assets available for benefits will be allocated as prescribed by the Employee Retirement Income Security Act of 1974 (ERISA) and its related regulations. Whether a particular participant's accumulated plan benefits will be paid depends on both the priority of those benefits and the level of benefits guaranteed by the Pension Benefit Guaranty Corporation (PBGC) at that time.

Cash equivalents - Cash equivalents consist of cash and money market funds held by the Plan's brokers. The Plan has adopted the policy of treating these accounts as investments rather than cash equivalents.

LABORERS' LOCAL #157 PENSION FUND

Notes To Financial Statements

Note 2: Summary Of Significant Accounting Policies

Receivables - Substantially all of the receivables are considered collectible. Accordingly, no allowance for credit losses is required. If it is probable accounts are uncollectible, they are charged to operations and an allowance is established when that determination is made.

Investment valuation - Accounting principles generally accepted in the United States of America establish a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. This hierarchy consists of three broad levels: Level 1 inputs consist of unadjusted quoted prices in active markets for identical assets and have the highest priority, and Level 3 inputs have the lowest priority. The Plan uses appropriate valuation techniques based on the available inputs to measure the fair value of its investments. When available, the Plan measures fair value using Level 1 inputs because they generally provide the most reliable evidence of fair value. Level 3 inputs are used only when Level 1 or Level 2 inputs are not available. The three levels of the fair value hierarchy in accordance with accounting principles generally accepted in the United States of America are described below:

Level 1: Unadjusted quoted prices in active markets for identical, unrestricted assets, or liabilities that the Plan has the ability to access at the measurement date;

Level 2: Quoted prices which are not active, quoted prices for similar assets or liabilities in active markets, or inputs other than quoted prices that are observable (either directly or indirectly) for substantially the full term of the asset or liability; and

Level 3: Significant unobservable prices or inputs (including the Plan's own assumptions in determining the fair value of investments) where there is little or no market activity for the asset or liability at the measurement date.

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.

Dividend income is recorded on the ex-dividend date, whereas interest income is recorded as earned on the accrual basis. Purchases and sales of securities are reflected on a trade-date basis and gains or losses on sales of securities are based on the actual cost of the specific security. Unrealized gains and losses are included in the change in net assets available for benefits in the accompanying statements of changes in net assets available for benefits.

Leases - Leases that have a term of twelve months or less upon commencement date are considered short-term in nature. The Plan elected the ongoing practical expedient to not recognize operating lease right-of-use assets and operating lease liabilities related to short-term leases. Accordingly, short-term leases are not included on the statements of net assets available for benefits and are expensed on a straight-line basis over the lease term, which commences on the date the Plan has the right to control the property.

LABORERS' LOCAL #157 PENSION FUND

Notes To Financial Statements

Note 2: Summary Of Significant Accounting Policies (Continued)

Estimates - The preparation of financial statements in accordance with accounting principles generally accepted in the United States of America requires the Plan Administrator to make estimates and assumptions that affect certain reported amounts and disclosures. The application of these accounting principles involves the exercise of judgment and use of assumptions as to future uncertainties and, as a result, actual results could differ from these estimates. The Plan Administrator periodically evaluates estimates and assumptions used in the preparation of the financial statements and makes changes on a prospective basis when adjustments are necessary. Significant estimates made by the Plan in the accompanying financial statements include certain assumptions related to the valuation of investments and to the actuarial present value of accumulated plan benefits. Actual results could differ from these estimates.

Tax status - The Plan is exempt from federal income tax as a qualified trust under Section 501(a) of the Internal Revenue Code. Tax positions are evaluated and recognized in the financial statements when it is more-likely-than-not the position will be sustained upon examination by the tax authorities.

The Plan obtained its latest determination letter on December 4, 2015, in which the Internal Revenue Service stated that the Plan, as designed was in compliance with the applicable requirements of the Internal Revenue Code. The Plan Administrator and the Plan's tax counsel believe that the Plan is currently designed and being operated in compliance with the applicable requirements of the Internal Revenue Code. Therefore, they believe that the Plan was qualified and the related trust was tax-exempt as of the financial statement date.

Presentation - Certain reclassifications, when applicable, are made to the prior year financial statement presentation to correspond to the current year's format. Reclassifications, when made, have no effect on total net assets available for benefits or changes in net assets available for benefits.

LABORERS' LOCAL #157 PENSION FUND

Notes To Financial Statements

Note 3: Fair Value Measurements

The following is a description of the valuation methodologies used for assets at fair value at June 30, 2024 and 2023:

Mutual and exchange-traded funds: Valued at quoted market prices on active markets.

Common stocks: Valued at the closing price reported on a national exchange.

Corporate bonds and government security: Valued at the most recent bid price of the equivalent quoted yield for such security or those of comparable maturity, quality, and type.

Cash equivalents: Valued at a constant \$1 per share.

Alternatives, investment entity, and common collective trusts: Valued at net asset value (NAV) of units held by the Plan at the reporting date when available. If the investment does not calculate NAV or a NAV is unavailable, the Plan uses its percentage ownership of the investment based on audited financial statements to value the investment. The NAV is used as a practical expedient to estimate fair value.

Group annuity contract: Valued at net asset value as determined by the net present value of future mortgage payments.

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

The Level 2 investments have been valued using the market approach. There were no changes in the valuation techniques during the current year.

LABORERS' LOCAL #157 PENSION FUND

Notes To Financial Statements

Note 3: Fair Value Measurements (Continued)

In accordance with accounting principles generally accepted in the United States of America, certain investments that were measured at net asset value per share (or its equivalent) have not been classified in the fair value hierarchy. The fair value amounts presented in this table are intended to permit the reconciliation of the fair value hierarchy to the line items presented in the statements of net assets available for benefits.

Fair Value of Measurements at Reporting Date Using:

	Quoted Prices In Active Markets For Identical Assets (Level 1)	Significant Other Observable Inputs (Level 2)	Significant Unobservable Inputs (Level 3)	Total Fair Value
<u>June 30, 2024</u>				
Mutual and exchange-traded funds	\$ 26,699,596	\$ -	\$ -	\$ 26,699,596
Common stocks	22,087,228	-	-	22,087,228
Corporate bonds	-	12,247,960	-	12,247,960
Cash equivalents	<u>1,300,945</u>	<u>-</u>	<u>-</u>	<u>1,300,945</u>
 Total Investments In The Fair Value Hierarchy	 <u>\$ 50,087,769</u>	 <u>\$ 12,247,960</u>	 <u>\$ -</u>	 62,335,729
 Investments measured at net asset value:				
Alternatives				18,375,009
Investment entity				4,703,561
Common collective trusts				2,737,165
Group Annuity Contract				<u>2,109,192</u>
 Total Investments At Fair Value				 <u>\$ 90,260,656</u>

LABORERS' LOCAL #157 PENSION FUND

Notes To Financial Statements

Note 3: Fair Value Measurements (Continued)

	Quoted Prices In Active Markets For Identical Assets (Level 1)	Significant Other Observable Inputs (Level 2)	Significant Unobservable Inputs (Level 3)	Total Fair Value
June 30, 2023				
Common stocks	\$ 25,756,728	\$ -	\$ -	\$ 25,756,728
Mutual and exchange-traded funds	21,057,111	-	-	21,057,111
Corporate bonds	-	8,216,232	-	8,216,232
Cash equivalents	2,255,291	-	-	2,255,291
Government security	-	40,667	-	40,667
Total Investments In The Fair Value Hierarchy	\$ 49,069,130	\$ 8,256,899	\$ -	57,326,029
Investments measured at net asset value:				
Alternatives				15,996,042
Common collective trusts				3,068,836
Investment entity				3,373,603
Group Annuity Contract				2,018,420
Total Investments At Fair Value				\$ 81,782,930

Note 4: Investments Measured At Net Asset Value

ASB Allegiance Real Estate Fund

The Plan holds an investment in ASB Allegiance Real Estate Fund (ASB), which is an open-ended, commingled collective investment fund established in 1984 and represents 1.4% of the Plan's total investment holdings at June 30, 2024. ASB invests in major urban markets across the United States, concentrating in office, multi-family, retail and industrial properties. Any outstanding withdrawals are honored on a pro rata basis with available liquid assets as determined by the Trustee of ASB and, will be made as soon as practicable on a valuation date following the Trustee's receipt of written notice. The Plan has committed \$1,400,000 to ASB, which has been fully funded as of June 30, 2024.

LABORERS' LOCAL #157 PENSION FUND

Notes To Financial Statements

Note 4: Investments Measured At Net Asset Value (Continued)

CPG Focused Access Fund, LLC

The Plan holds an investment interest in CPG Focused Access Fund, LLC (CPG), which is a Delaware limited liability company and represents 6.2% of the Plan's total investment holdings at June 30, 2024. CPG is registered under the Investment Company Act of 1940, as a closed-end, non-diversified management investment company. CPG's investment objective is to seek attractive, long-term, risk-adjusted returns by allocating assets among a concentrated, select group of third-party alternative asset managers and the unregistered investment vehicles they operate that are represented on the Morgan Stanley Smith Barney LLC (MS) platform. MS is not a sponsor, promoter, adviser or affiliate of CPG. CPG's Valuation Committee oversees the valuation process of the Fund's investments. The NAV of CPG is determined by, or at the direction of, the Adviser as of the close of business at the end of any fiscal period. Investments held by CPG are carried at fair value which generally represents CPG's pro-rata interest in the net assets of each Investment Fund as reported by the administrators and/or investment managers of the underlying Investment Funds. The fair value relating to certain underlying investments of Investment Funds, for which there is no ready market, has been estimated by the respective Investment Funds' management and is based upon available information in the absence of readily ascertainable fair values and does not necessarily represent amounts that might ultimately be realized. Redemptions are permitted quarterly with 90 days' written notice.

EnTrust Special Opportunities Fund III Ltd.

The Plan holds an investment in EnTrust Special Opportunities Fund III Ltd. (ESOF), which is an exempted company formed under the laws of the Cayman Islands and represents 0.8% of the Plan's total investment holdings at June 30, 2024. ESOF invests substantially all of its assets through EnTrust Special Opportunities Master Fund III LP (the Master Fund), which is an exempt limited partnership formed under the laws of the Cayman Islands. The Master Fund invests in a broad range of investments including, but not limited to, global distressed corporate securities, activist equities, value equities, reorganization equities, municipal and high yield bonds, leveraged loans, unsecured debt, collateralized debt obligations, mortgage backed securities, direct lending and sovereign debt, real estate, venture capital, and private equity structures. The Administrator calculates the value of the assets of the Fund in U.S. dollars as of the last business day of each quarter. The Plan is subject to liquidity restrictions in the form of a five year lock on each underlying capital call and the Plan must provide 90 days' prior written notice for any redemption requests. The Plan has committed \$2,000,000 to ESOF and it has been fully called as of June 30, 2024. The Plan has received approximately \$1.3 million in distributions from ESOF since first investing in ESOF.

LABORERS' LOCAL #157 PENSION FUND

Notes To Financial Statements

Note 4: Investments Measured At Net Asset Value (Continued)

Intercontinental U.S. Real Estate Investment Fund, LLC

The Plan holds an investment in the Intercontinental U.S. Real Estate Investment Fund, LLC (REIF) which is a limited liability company organized under the laws of Delaware and represents 1.8% of the Plan's total investment holdings at June 30, 2024. The REIF's main objective is to invest in a pool of real estate assets that are diversified by geography and property type, with a focus on yield-driven investments and, to a lesser extent, on value-added investments. 95% of the REIF's net assets are comprised of real estate investments and adjusted quarterly based on appraisals by independent third parties net of mortgage loan payables valued by independent appraisers based on the present value of expected debt service cash flows, discounted at market interest rate that takes into account various factors. REIF may either call the entire unfunded capital commitment before calling any portion of a subsequently accepted capital commitment or call the unfunded capital commitments from Members that made capital commitments within the same calendar quarter on a pro rata basis. Each investor may request redemption of its interests quarterly, provided the investor has no unfunded commitments outstanding. The Plan has committed \$1,400,000 to REIF, which has been fully funded as of June 30, 2024.

Ironwood Institutional Multi-Strategy Fund, LLC

The Plan holds an investment interest in Ironwood Institutional Multi-Strategy Fund, LLC (IIMSF) which is a Delaware limited liability company and represents 3.9% of the Plan's total investment holdings at June 30, 2024. Ironwood is registered under the Investment Company Act of 1940, as a closed-end, non-diversified management investment company. IIMSF's investment objective is capital appreciation with limited variability of returns by allocating capital among a number of pooled investment vehicles within four sectors: relative value, market neutral and hedged equity, event-driven and distressed and credit securities. The NAV of IIMSF is determined as of the close of business at the end of any fiscal period, generally monthly, in accordance with the valuation principles set forth below or as determined pursuant to policies established by the Board. Investments held by IIMSF are carried at fair value which generally represent IIMSF's pro-rata interest in the net assets of each Investment Fund as reported by the administrators and investment managers of the underlying investment funds. The investment funds hold positions in readily marketable investments and derivatives that are valued at quoted market values and less liquid non-marketable investments and derivatives that are valued at estimated fair value. The Board, in its sole and absolute discretion, may authorize IIMSF to make a tender offer to repurchase Members' units (an "Offer"). In determining whether IIMSF should make an Offer to repurchase units from Members, the Board will consider, among other things, the recommendation of Ironwood Capital Management (the Adviser). The Adviser expects that it will recommend to the Board that IIMSF make an Offer to repurchase units from Members semi-annually on June 30 and December 31. While there can be no guarantee that it will continue this practice, to date, IIMSF has offered to repurchase 10 to 20% of its units at each of its June 30 and December 31 offers.

LABORERS' LOCAL #157 PENSION FUND

Notes To Financial Statements

Note 4: Investments Measured At Net Asset Value (Continued)

NB Crossroads Private Markets Fund V, LP

The Plan holds an investment in the NB Crossroads Private Markets Fund, V LP (NBCPM). NBCPM is a non-diversified, closed-end management investment company registered under the Investment Company Act of 1940 and represents 3.6% of the Plan's total investment holdings at June 30, 2024. NBCPM's main objective is to provide long-term returns. NBCPM commenced operations on May 18, 2018 and will continue until December 31, 2028, subject to two one-year extensions which may be approved by the Board of Directors of the NBCPM. NBCPM computes its NAV as of the last business day of each fiscal quarter and at such other times as deemed appropriate in accordance with valuation principles established by the Board of Directors of NBCPM. The net profits or net losses of NBCPM are allocated to Partners in a manner that takes into account the amount of cash that would be distributed based upon a hypothetical liquidation, such that it would follow the distributions. Distributions shall be made of available cash (net of reserves that the Board deems reasonable) or other net investment proceeds to Partners at such times and in such amounts as determined by the Board of Directors of NBCPM in its sole discretion and in accordance with Partners' respective percentage interests, as defined in the NBCPM's Partnership Agreement. The Plan has committed \$2,800,000 to NBCPM. As of June 30, 2024, \$1,960,000 has been called. The Plan has received \$140,000 in distributions from NBCPM since first investing in NBCPM.

ProLoan Bond Fund, LLC

The Plan holds an investment interest in ProLoan Bond Fund, LLC (PBF), which is a Delaware limited liability company and represents 5.2% of the Plan's total investment holdings at June 30, 2024. PBF is designed to provide institutional investors with the opportunity to invest in a core-plus bond portfolio expected to provide current income with high overall credit quality while also promoting employment for union members in construction and related trades in the residential and commercial housing construction related industries through the ProLoan program. PBF is primarily invested in U.S. Government mortgage-backed securities, investment grade corporate bonds, U.S. Federal agency mortgage-backed securities, and U.S. Government obligations. The Net Asset Value (NAV) of the Fund is determined as of the close of business at the end of each month. Redemptions are permitted monthly.

Rainier International Small Cap Equity Collective Trust Fund

The Plan holds an investment in Rainier International Small Cap Equity Collective Trust Fund (RISCECT), which is a collective investment trust that commenced operations on June 26, 2013 and represents 1.7% of the Plan's total investment holdings at June 30, 2024. The investment objective of RISCECT is to meet or exceed the return of the MSCI AC ex-U.S. International Small Cap Index with a level of risk which is comparable to risk associated with the benchmark. RISCECT seeks to achieve this investment objective by investing in a diversified portfolio of predominantly non-U.S. common stocks located in both developed and emerging markets. Unit issuances and redemptions are based on the NAV determined at the end of the day.

LABORERS' LOCAL #157 PENSION FUND

Notes To Financial Statements

Note 4: Investments Measured At Net Asset Value (Continued)

Siguler Guff Limited Partnership Investments (LPs)

The Plan holds an investment in Siguler Guff Distressed Real Estate Opportunities Fund II (E), LP (DREOF), Siguler Guff Small Buyout Opportunities Fund III, LP (SGBOF) and Siguler Guff Small Buyout Opportunities Fund V, LP (SGBOFV) which are limited partnerships organized under the laws of Delaware and represent approximately 0.4%, 2.4% and 1.3%, respectively of the Plan's total investment holdings at June 30, 2024.

DREOF invests in pooled investment vehicles managed by investment managers and direct investments. These investments typically involve direct or indirect equity interest in commercial mortgages and commercial mortgage-backed securities, as well as debt and equity securities of real estate operating companies and real estate investment trusts. SGBOF and SGBOFV invest in pooled investment vehicles managed by investment managers and direct investments primarily focused on buyout, recapitalization, and growth equity transactions. These investments typically involve direct or indirect securities of private companies doing business in the United States and Canada with less than \$150 million of revenue.

The LP's investments are valued by the General Partner of the LP using valuations provided by the portfolio managers and generally represent the LP's share in the net assets of the portfolio funds. The Plan does not have the right to demand the return of capital or the balance of its capital account in each LP. Upon dissolution of the LPs, each partner's capital account will be liquidated. DREOF, SGBOF and SGBOFV are set to continue until August 30, 2025, January 29, 2028 and January 31, 2034, respectively and may be extended for up to three additional years. The Plan has committed to DREOF, SGBOF and SGBOFV \$1 million, \$3 million and \$2.5 million, respectively. As of June 30, 2024, \$879,000, \$2.7 million and \$1,095,000, respectively have been called. The Plan has received approximately \$836,000, \$3 million and \$114,000, respectively in distributions since first investing in the LPs.

ULLICO Separate Account J

A group annuity contract with Union Labor Life Insurance Company (ULLICO), which represents 2.3% of the Plan's total investment holdings at June 30, 2024, provides for several investment alternatives in which the Plan has selected a pooled fixed income Separate Account J. This account invests primarily in first mortgages on union-constructed commercial properties which are valued by ULLICO at the present value of future mortgage payments. The Plan has the option to convert this investment into an annuity program. The contract contains no withdrawal penalty provisions and is valued as of the close of business on the last business day of each month. ULLICO's Separate Account J's return, net of fees, for the years ended June 30, 2024 and 2023, was approximately 4.5% and 2.4%, respectively. The Plan is subject to redemption restrictions. Redemption requests are put into a queue, which are satisfied in order of the request quarterly based on the liquidity of the pooled separate account.

LABORERS' LOCAL #157 PENSION FUND

Notes To Financial Statements

Note 5: Related Party Transactions

The Laborers' Local #157 Pension Fund shares office space, personnel, and administrative expenses with the Laborers' Local #157 Health Benefits and Annuity Funds. The allocation percentages for the majority of the costs are 48% for the Health Benefits Fund, 27% for the Pension Fund, and 25% for the Annuity Fund. In addition, shared income is deposited into the Health Benefits Fund and then remitted to the appropriate funds.

	<u>2024</u>	<u>2023</u>
<u>Due To Related Party</u>		
Due To Affiliated Fund - Net reimbursements owed to the Health Benefits Fund.	\$ <u>19,107</u>	\$ <u>17,018</u>
<u>Expenses</u>		
Shared Administrative Costs - See Above	\$ <u>130,573</u>	\$ <u>126,296</u>
Lease Expense - The Plan with its affiliated funds, leases office space from Laborer's Local 157 Building Corporation on a month-to-month basis. Effective October 1, 2023, the Plan entered into a new lease with the same payment terms that shall renew annually unless terminated by either the Plan or Local #157 Laborers' Building Corporation.	\$ <u>5,022</u>	\$ <u>5,022</u>

Note 6: Employee Benefits

Employee benefits include participation with other entities in the affiliated Laborers' Local #157 Health Benefits Fund, the Laborers' Local #157 Pension Fund, a defined benefit (unit benefit) plan, and the affiliated Laborers' Local #157 Annuity Fund. These employee benefit expenses are shared between the three Funds based on the percentages in Note 5. Laborers' Local #157 Pension Fund's contributions to these funds, calculated at the Building Agreement Rates, for the years ended June 30 were:

	<u>2024</u>	<u>2023</u>
Local #157 Pension Fund	\$ 9,051	\$ 9,295
Local #157 Annuity Fund	5,877	5,423
Local #157 Health Benefits Fund	<u>5,709</u>	<u>5,857</u>
Total	<u>\$ 20,637</u>	<u>\$ 20,575</u>

LABORERS' LOCAL #157 PENSION FUND

Notes To Financial Statements

Note 6: Employee Benefits (Continued)

The risks of participating in defined benefit pension multi-employer plans are different from single employer plans in the following aspects:

- Assets contributed to a multi-employer plan by one organization may be used to provide benefits to employees of other participating organizations.
- If a participating organization stops contributing to a plan, the unfunded obligations of a plan may be borne by the remaining participating organizations.
- If the Plan stops participating in some or all of its multi-employer plans, and continues in business, the Plan could be required to pay an amount, referred to as a withdrawal liability, based on the unfunded status of the Plan. The Plan has no intention of stopping its participation in any multi-employer plans.

Note 7: Accumulated Plan Benefits

The Plan's actuary determines the actuarial present value of accumulated plan benefits using the Entry Age Normal Cost Actuarial Method. This amount results from applying actuarial assumptions to adjust the accumulated plan benefits to reflect the time value of money (through discounts for interest) and the probability of payment (by means of decrements such as for death, disability, withdrawal, or retirement) between the valuation date and the expected date of payment. It has been determined by the Plan's actuary that minimum funding standards have been met.

The accumulated plan benefit information as of July 1 was as follows (latest valuation dates available), July 1, 2022 was restated to reflect the change in investment return assumption from 6.75% to 6.25%:

	<u>2023</u>	<u>Restated 2022</u>
Actuarial present value of accumulated plan benefits:		
Vested benefits:		
Retired employees and beneficiaries	\$ 48,391,393	\$ 48,581,679
Active participants	27,273,266	26,952,061
Separated vested participants	<u>8,537,326</u>	<u>8,958,709</u>
Total vested benefits	84,201,985	84,492,449
Nonvested benefits	<u>2,592,400</u>	<u>3,078,721</u>
Total actuarial present value of accumulated plan benefits	86,794,385	87,571,170
Net assets available for benefits	<u>84,050,743</u>	<u>77,225,034</u>
Deficit Of Net Assets Available For Benefits Over		
Actuarial Present Value Of Accumulated Plan Benefits	<u>\$ 2,743,642</u>	<u>\$ 10,346,136</u>

LABORERS' LOCAL #157 PENSION FUND

Notes To Financial Statements

Note 7: Accumulated Plan Benefits (Continued)

The change in the present value of accumulated plan benefits is shown below:

	<u>2023</u>	<u>Restated 2022</u>
Actuarial present value of accumulated plan benefits at beginning of year	<u>\$ 87,571,170</u>	<u>\$ 81,089,519</u>
Increase (decrease) attributable to:		
Reduction in discount period	4,898,319	5,296,710
Benefits accumulated net of the effect of non-investment experience	47,892	87,870
Change in assumptions	-	6,336,562
Benefits paid	<u>(5,722,996)</u>	<u>(5,239,491)</u>
Net change	<u>(776,785)</u>	<u>6,481,651</u>
Actuarial Present Value Of Accumulated Plan Benefits At End Of Year	<u>\$ 86,794,385</u>	<u>\$ 87,571,170</u>

Significant assumptions underlying the actuarial computations as of July 1, 2023 and 2022 are as follows:

Mortality Rates - RP 2000M Mortality Table with projection Scale AA.

Investment Return - 6.25% per annum, compounded annually.

Turnover - Assumed no termination of employment, other than death, disability, or pension.

Disability Rates - 1973 Disability Model, Transactions of Society of Actuaries, XXVI.

Future Work Year - Each active participant will work 1,200 hours per year in the future.

Retirement Rates - Each active and separated vested participant will elect pension at age 57 and 60, respectively, or when eligible if later.

Administrative Expenses - \$275,000 will be the annual cost of administration.

Number of Active Participants - Remain constant from here forward with replacements being made immediately upon pension or death.

Asset Valuation Method - Five year smoothing of future investment gains and losses.

Funding Method - Entry Age Normal

LABORERS' LOCAL #157 PENSION FUND

Notes To Financial Statements

Note 8: Concentrations Of Credit Risk

Financial instruments that potentially subject the Laborers' Local #157 Pension Fund to concentrations of credit risk consist principally of cash in financial institutions. Accounts at each institution are insured up to the Federal Deposit Insurance Corporation (FDIC) limits.

The Plan maintains accounts with several stock brokerage firms. The accounts contain cash and securities. Balances are insured up to the Securities Investor Protection Corporation limits for securities and FDIC limits for cash.

Note 9: Risks And Uncertainties

The Plan invests in various investment securities. Investment securities are exposed to various risks such as interest rate, market, and credit risks. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in the values of investment securities will occur in the near term and that such changes could materially affect the amounts reported in the statements of net assets available for benefits. The Plan's real estate investments expose the Plan to additional risk based on the risk of default due to the unwillingness or inability to make contractually required payments and the risk of changes to the valuation of real estate investments held by the Trusts.

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

Note 10: Commitments And Contingencies

The Plan follows the guidance for uncertainty in income taxes. As of June 30, 2024, the Plan believes that it has appropriate support for the income tax positions taken and to be taken on its returns based on an assessment of many factors including experience and interpretations of tax laws applied to the facts of each matter. The Plan has concluded that there are no significant uncertain tax positions requiring disclosure, and there are no material amounts of unrecognized tax benefits.

Note 11: Subsequent Events

Subsequent events have been evaluated through April 11, 2025, which is the date the financial statements were available to be issued.

SUPPLEMENTARY INFORMATION

LABORERS' LOCAL #157 PENSION FUND

Schedules Of Administrative Expenses

For The Years Ended June 30

	<u>2024</u>	<u>2023</u>
Administrative expenses:		
Professional fees:		
Accounting	\$ 47,753	\$ 45,905
Actuarial	40,000	39,000
Legal	13,378	18,888
Administrative salaries and payroll taxes	76,830	74,691
Insurance	47,278	43,396
Employee benefits	20,637	20,575
Bank charges	16,368	18,419
Office supplies and computer maintenance	6,067	4,020
Lease	5,022	5,022
Postage and printing	5,018	5,026
Miscellaneous	4,446	4,486
Travel, conventions, and meetings	3,789	7,108
Telephone	<u>1,109</u>	<u>1,306</u>
 Total Administrative Expenses	 <u><u>\$ 287,695</u></u>	 <u><u>\$ 287,842</u></u>

LABORERS' LOCAL #157 PENSION FUND

EIN: 14-6076460 PLAN #001

Schedule H, Line 4i - Schedule Of Assets (Held At End Of Year)

June 30, 2024

(a)	(b) & (c)		(d)	(e)
	Identity & Description Of Investment	Quantity	Cost	Current Value
	MUTUAL AND EXCHANGE-TRADED FUNDS:			
	ANGEL OAK FINL STRATEGIES INCM	23,625	\$ 287,608	\$ 292,241
	BLACKROCK CREDIT ALL INC TR IV	6,250	65,937	66,938
	FIRST TR ABRDN GBL OPP INCM FD	12,500	72,511	79,250
	FIRST TR INTERM DUR PRF&INC FD	6,000	103,132	110,220
	ISHARES CORE DIVIDEND GROWTH	35,450	1,894,510	2,042,275
	ISHARES 20+ YR TREASU BOND ETF	21,281	1,933,663	1,953,170
	MFS INTERMEDIATE INCOME TR SBI	74,500	197,383	198,170
	PIONEER DIVERSIFIED HIGH INC	14,025	139,972	163,798
	PUTNAM PREMIER INCOME TR SBI	14,450	57,367	51,731
	VANGUARD INTL EQUITY INDEX FD	36,773	1,788,650	2,156,369
	VANGUARD LONG TERM BND	12,725	1,127,543	894,440
	VANGUARD TOTAL BOND MARKET	10,975	824,982	790,749
	WESTERN ASST INFLTN LKD INM FD	48,000	424,055	384,480
	FEDERATED HERMES GOVT OBL PRM	3,729,911	3,729,911	3,729,911
	AMER BEACON AHL MNGD FUT STR Y	66,681	724,621	706,823
	DOUBLELINE TOTAL RETURN I	495,750	4,478,260	4,288,238
	KKR CREDIT OPPORTUNITIES I	70,348	1,903,041	1,701,006
	LM MARTIN CURRIE SMASH SER EM	192,442	1,893,836	1,985,999
	LOCORR MARKET TREND I	60,442	721,389	763,990
	NEUBERGER BERMAN LG SH INST	157,755	2,671,934	2,834,864
	TORTOISE ENRGY INFR TOT RET I	91,264	1,138,344	1,504,934
	TOTAL MUTUAL AND EXCHANGE-TRADED FUNDS		<u>26,178,649</u>	<u>26,699,596</u>
	COMMON STOCKS:			
	AAON INC	434	25,525	37,862
	ABBOTT LABORATORIES	1,955	182,264	203,144
	ACADEMY SPORTS & OUTDOORS INC	543	30,809	28,915
	ACADIA HEALTHCARE COMPANY INC	511	36,982	34,513
	ACCENTURE PLC IRELAND CL A	565	119,896	171,427
	ADIDAS AG	948	121,541	113,287
	ADOBE INC	317	35,837	176,106
	ADOBE INC	341	104,339	189,439
	AGNC INVESTMENT CORP	3,240	26,941	30,910
	AIA GROUP LTD SPON ADR	2,399	95,149	65,142
	AIA GROUP LTD SPON ADR	2,910	120,792	79,018
	AIMEI HEALTH TECHNOLOGY CO LTD	28,500	289,812	294,975
	AIR LIQUIDE ADR	4,658	125,900	161,032
	AIRBNB INC CL A	1,411	171,041	213,950
	ALAMO GROUP INC	237	29,192	41,001
	ALCON INC	1,385	74,006	123,376
	ALIBABA GROUP HLDG LTD	1,666	149,600	119,952
	ALPHABET INC CL A	890	59,641	162,114
	ALPHABET INC CL C	1,641	116,861	300,992
	ALPHAVEST ACQUISITION CORP	10,500	108,150	115,710
	AMADEUS IT GROUP S.A ADR	1,679	102,649	111,820

LABORERS' LOCAL #157 PENSION FUND

EIN: 14-6076460 PLAN #001

Schedule H, Line 4i - Schedule Of Assets (Held At End Of Year)

June 30, 2024

(a)	(b) & (c) Identity & Description Of Investment	Quantity	(d) Cost	(e) Current Value
	COMMON STOCKS (CONTINUED):			
	AMAZON COM INC	4,487	470,408	867,113
	AMER INTL GP INC NEW	855	63,850	63,475
	AMERICAN WATER WORKS CO	786	106,320	101,520
	AMERIPRISE FINCL INC	404	47,639	172,585
	AMGEN INC	523	83,631	163,411
	AMN HEALTHCARE SVCS INC	620	36,649	31,763
	ANSYS INC	461	57,244	148,212
	ANTERO RES CORP COM	722	11,877	23,559
	ARTISAN PARTNERS ASSET MGMT	959	33,763	39,578
	ASGN INC	386	33,285	34,034
	ASM INTERNATIONAL NV	151	45,155	115,194
	ASML HOLDING NV NY REG NEW	231	85,412	236,251
	ATKORE INC	90	15,729	12,108
	ATLAS COPCO AB SP ADR B SP ADR	8,507	87,346	137,482
	ATMOS ENERGY CP	1,059	115,911	123,532
	AUTODESK INC DELAWARE	504	97,342	124,715
	AXALTA COATING SYSTEMS LTD.	1,146	31,984	39,159
	BANK RAKYAT INDONESIA ADR	4,581	71,538	64,345
	BEACON ROOFING SUPPLY INC	542	29,260	49,051
	BLACKSTONE INC	796	94,362	98,545
	BWX TECHNOLOGIES INC COM	313	23,795	29,735
	CADENCE BANK	1,250	28,802	35,350
	CANADIAN NATL RAILWAY CO	919	101,896	108,561
	CAPITAL ONE FINANCIAL CORP	978	81,062	135,404
	CAPITEC BANK HOLDINGS LTD ADR	901	37,727	64,861
	CHEMOURS CO COM	1,899	43,148	42,860
	CHINA MERCHANTS BK CO LTD UNSP	3,519	102,910	79,892
	CHORD ENERGY CORPORATION NEW	193	28,987	32,362
	CLP HOLDINGS LTD SP ADR	6,371	63,402	51,490
	COCA COLA CO	2,181	90,967	138,821
	COCA COLA CONSOLIDATED INC	43	28,850	46,172
	COLISEUM ACQUISIT CORP CLASS A	16,000	171,200	175,360
	COLOPLAST AS SPONSERED ADR	10,006	124,797	120,302
	COMERICA INC	961	44,645	49,049
	COMMERCE BANCSHARES	1,142	51,603	63,701
	COMPASS GROUP PLC SPD ADR	5,021	116,258	137,093
	CONCORD ACQ CORP II CL A	30,250	314,873	319,138
	CONSTELLATION BRANDS INC CL A	396	93,798	101,883
	CORE & MAIN INC CL A	741	15,211	36,265
	CORTEVA INC	2,556	66,028	137,871
	COSAN S A ADR	3,179	54,354	30,963
	COTERRA ENERGY INC	5,190	89,528	138,417
	COTY INC COM CL A	2,675	20,860	26,804
	CREDICORP LTD	203	28,107	32,750
	CSL LTD	1,099	102,091	108,337

LABORERS' LOCAL #157 PENSION FUND

EIN: 14-6076460 PLAN #001

Schedule H, Line 4i - Schedule Of Assets (Held At End Of Year)

June 30, 2024

(a)	(b) & (c)	(d)	(e)	
	Identity & Description Of Investment	Quantity	Cost	Current Value
	COMMON STOCKS (CONTINUED):			
	CULLEN FROST BANKERS INC	732	63,787	74,393
	CUSHMAN & WAKEFIELD PLC	3,988	40,087	41,475
	DAIKIN INDS LTD UNSPON ADR	5,321	88,036	73,999
	DANAHER CORPORATION	516	37,525	128,923
	DASSAULT SYSTEMS SA ADS	3,065	112,854	115,958
	DIAGEO PLC SPON ADR NEW	610	106,342	76,909
	ECOLAB INC	547	114,535	130,186
	ELEMENT SOLUTIONS INC	3,269	57,396	88,655
	ELI LILLY & CO	102	61,096	92,349
	EPAM SYSTEMS	113	33,748	21,256
	EQUITY LIFESTYLE PROPERTIES	1,403	77,890	91,377
	ESH ACQUISITION CORP	9,375	94,530	97,688
	EVERCORE INC CLASS A	211	38,024	43,979
	EXPERIAN GP LTD ADR	2,436	85,194	113,505
	FABRINET	182	15,237	44,552
	FANUC CORPORATION UNSP ADR	3,937	77,029	53,957
	FEDERAL SIGNAL CORP	274	9,558	22,926
	FERRARI N V	416	92,241	169,882
	FIRST AMERICAN FINL CORP	954	52,381	51,468
	FRANKLIN ELECTRIC CO	243	17,284	23,406
	GARTNER INC	295	47,037	132,473
	GATX CORP	234	21,184	30,972
	GENL DYNAMICS CORP	400	72,073	116,056
	GILDAN ACTIVEWEAR INC	1,061	36,738	40,233
	GLOBANT S.A	385	74,129	68,630
	GLOBUS MEDICAL INC A	738	36,391	50,546
	GRUPO FINANCIERO BANORTE SAB	1,854	71,196	72,182
	HDFC BANK LTD ADR	2,582	156,187	166,100
	HEALTH EQUITY INC COM	434	32,559	37,411
	HERMES INTL SCA UNSPON ADR	766	85,357	175,686
	HONEYWELL INTL INC	641	144,810	136,879
	HOYA CORP SPONS ADR	834	95,753	96,978
	ICICI BANK LTD	5,088	98,164	146,585
	INDUSTRIA DE DISENO TEXTIL IND	5,739	88,981	142,574
	INFINEON TECHNOLOGIES AG	1,614	59,915	59,342
	INSIGHT ENTERPRISES INC	236	18,857	46,813
	INSTALLED BLDG PRODS INC	198	17,413	40,725
	JANUS INTERNATIONAL GROUP INC	3,913	41,778	49,421
	JARDINE MATHESON HLDGS LTD ADR	1,343	77,046	47,515
	JD COM INC SPON ADR CL A	1,291	76,631	33,359
	JELD WEN HLD INC	1,253	25,958	16,878
	KFORCE INC	508	29,703	31,562
	KIRBY CP	425	26,846	50,885
	KONE OYJ ADR	3,387	106,211	83,656
	LOREAL CO ADR	1,876	125,053	164,891

LABORERS' LOCAL #157 PENSION FUND

EIN: 14-6076460 PLAN #001

Schedule H, Line 4i - Schedule Of Assets (Held At End Of Year)

June 30, 2024

(a)	(b) & (c)		(d)	(e)
	Identity & Description Of Investment	Quantity	Cost	Current Value
	COMMON STOCKS (CONTINUED):			
	LEGATO MERGER CORP III	25,500	257,445	257,889
	LENNAR CORPORATION	1,212	53,474	181,642
	LONZA GROUP AG ZUERICH ADR	1,156	72,360	63,088
	LOWES COMPANIES INC	472	99,236	104,057
	LVMH MOET HENNESSY LOUIS VUITT	1,065	109,454	162,903
	MARTIN MARIETTA MATERIALS	291	66,304	157,664
	MASTERCARD INC CL A	565	167,531	249,255
	MATADOR RES CO	428	24,850	25,509
	MATERION CORP COM	360	36,321	38,927
	MATIV HOLDINGS INC	1,441	29,009	24,439
	MCGRATH RENT CP	327	33,717	34,842
	MEDTRONIC PLC SHS	1,008	76,206	79,340
	MEITUAN ADR	2,728	102,869	77,639
	MERCK & CO INC NEW COM	1,056	98,765	130,733
	MERCK KGAA SPD ADR	2,860	107,163	94,869
	MFA FINL INC	2,266	23,693	24,110
	MICHELIN COMPAGNIE GENERALE DE	5,757	82,958	111,404
	MICROCHIP TECHNOLOGY INC	2,049	70,281	187,484
	MICROSOFT CORP	491	21,633	219,452
	MICROSOFT CORP	1,268	281,034	566,733
	MINTH GROUP LTD	1,501	60,436	46,955
	MITSUBISHI UFJ FINCL GRP ADS	8,979	53,947	96,973
	MSCI INC COM	222	113,248	106,949
	MURATA MANUFACTURING CO LTD	7,138	72,445	73,707
	MURPHY OIL CORP	627	23,581	25,857
	NAPCO SECURITY TECHNOLOGIE INC	567	24,225	29,456
	NESTLE SPON ADR REP REG SHR	1,072	120,252	109,419
	NETFLIX INC	312	62,144	210,563
	NIKE INC B	1,277	131,113	96,247
	NNN REIT INC	954	35,401	40,640
	NOVARTIS AG ADR	1,213	101,346	129,136
	NOVO NORDISK A/S ADR	991	92,054	141,455
	NOVO NORDISK A/S ADR	1,691	47,781	241,373
	OCA ACQUISITION CORP CL A	12,525	123,998	140,280
	ONTO INNOVATION INC	137	23,948	30,080
	OSHKOSH CORP	730	80,186	78,986
	PARKER HANNIFIN CORP	369	60,490	186,644
	PATTERSON -UTI ENERGY INC	2,175	30,449	22,533
	PAYCOM SOFTWARE INC	300	61,813	42,912
	PERMIAN RESOURCES CP CL A	2,270	22,351	36,661
	PING AN INSURANCE ADR	6,673	77,546	60,511
	PNC FINL SVCS GP	688	78,784	106,970
	PORTLAND GENERAL ELEC CO	586	25,086	25,339
	PROCTER & GAMBLE	682	91,211	112,475
	PROSPERITY BANCSHARES	555	29,720	33,933

LABORERS' LOCAL #157 PENSION FUND

EIN: 14-6076460 PLAN #001

Schedule H, Line 4i - Schedule Of Assets (Held At End Of Year)

June 30, 2024

(a)	(b) & (c)		(d)	(e)
	Identity & Description Of Investment	Quantity	Cost	Current Value
	COMMON STOCKS (CONTINUED):			
	PRUDENTIAL PLC ADR	3,187	117,861	58,386
	PT BK NEGARA INDONESIA UN ADR	2,377	36,635	33,822
	PT TELEKOMUNIKASI INDONESIA	2,377	48,636	32,650
	QUALCOMM INC	867	63,230	172,689
	R P M INC	1,107	65,596	119,202
	RAMBUS INC	714	16,060	41,955
	RED ROCK RESORTS INC CL A	823	35,267	45,207
	ROCHE HOLDINGS ADR	2,919	120,715	101,202
	RUSH ENTERPRISES INC CL A	706	20,551	29,560
	RXO INC	1,282	27,601	33,524
	SAGE GROUP PLC ADR NEW	1,038	56,406	57,130
	SAIA INC	85	20,757	40,424
	SALESFORCE INC	986	156,655	253,501
	SAP AG	541	67,185	109,125
	SELECTIVE INSURANCE GROUP	394	18,165	36,969
	SERVICENOW INC	354	107,811	278,481
	SGS SA ADR	10,285	103,828	91,567
	SHIN ETSU CHEM CO LTD ADR	6,125	67,935	118,764
	SHOPIFY INC	1,887	117,538	124,636
	SIGNET JEWELERS LIMITED	353	25,539	31,622
	SILVERBOX CORP III CL A	15,000	151,800	159,000
	SKYLINE CORP	542	35,298	36,721
	SMC CORP JAPAN SPONSORED ADR	6,038	147,277	143,276
	SONY GROUP CORPORATION ADR	1,489	70,548	126,491
	STAG INDL INC COM	1,140	36,064	41,108
	STRIDE INC	415	28,472	29,258
	SYSMEX CORP UNSPON ADR	5,334	122,990	85,915
	TAIWAN SMCNDCTR MFG CO LTD ADR	2,297	140,206	397,503
	TAIWAN SMCNDCTR MFG CO LTD ADR	1,336	87,635	232,210
	TELEDYNE TECH INC	284	115,295	110,186
	TENCENT HLDGS LTD UNSPON ADR	6,312	256,779	298,936
	TERUMO CORP ADR UNSPONS ADR	3,206	55,543	52,877
	THERMO FISHER SCIENTIFIC	437	243,495	241,661
	TOTALENERGIES SE SPONSORED ADS	1,755	111,250	117,023
	TOTALENERGIES SE SPONSORED ADS	1,486	81,078	99,086
	TRANSMEDICS GROUP INC	249	19,771	37,504
	TRIP COM GROUP LTD ADR	505	26,511	23,735
	TRISTAR ACQUISITION I CP CL A	9,500	100,035	105,925
	U S BANCORP COM NEW	3,354	111,353	133,154
	ULTRA CLEAN HOLDINGS INC	578	18,421	28,322
	UNITED BANKSHARES INC W VA	937	27,884	30,396
	UNITEDHEALTH GP INC	318	104,983	161,945
	UNIVERSAL MUSIC GROUP NV ADR	4,920	62,298	73,244
	VALMONT INDUSTRIES	124	28,280	34,032
	VALVOLINE INC COM	757	26,509	32,702

LABORERS' LOCAL #157 PENSION FUND

EIN: 14-6076460 PLAN #001

Schedule H, Line 4i - Schedule Of Assets (Held At End Of Year)

June 30, 2024

(a)	(b) & (c) Identity & Description Of Investment	Quantity	(d) Cost	(e) Current Value
	COMMON STOCKS (CONTINUED):			
	VISA INC CL A	1,079	218,375	283,205
	WAL-MART DE MEXICO SA SPON ADR	1,767	66,080	60,387
	WARBY PARKER INC CL A	1,907	24,862	30,626
	WEG S.A. SPONSORED ADR	9,341	51,415	70,870
	WESTERN ALLIANCE BANCORP	844	41,481	53,020
	WOLTERS KLUWER NV SPON ADR	681	84,344	112,983
	WORKDAY INC CL A	422	95,322	94,342
	XCEL ENERGY INC	1,890	125,602	100,945
	XINYI SOLAR HLDGS LTD ADR	2,126	52,916	21,795
	XYLEM INC COM	953	78,344	129,255
	ZIONS BANCORPORATION N A	1,057	37,470	45,842
	ZOETIS INC CLASS-A	948	137,206	164,346
	TOTAL COMMON STOCKS		<u>16,586,296</u>	<u>22,087,228</u>
	CORPORATE BONDS:			
	AECOM 5.13% Matures 3/15/2027	117,000	114,233	115,065
	ALLEGION PLC 3.50% Matures 10/1/2029	21,000	18,096	19,391
	ALLEGION US HOLDING CO INC 5.41% Matures 7/1/2032	26,000	25,329	25,986
	ALLEGION US HOLDING CO INC 3.20% Matures 10/1/2024	71,000	68,888	70,494
	ALLEGION US HOLDING CO INC 3.55% Matures 10/1/2027	21,000	22,286	19,901
	ALTRIA GROUP INC 3.40% Matures 5/6/2030	110,000	97,770	99,495
	ALTRIA GROUP INC 6.88% Matures 11/1/2033	18,000	19,410	19,482
	AMERICAN TOWER CORP 3.80% Matures 8/15/2029	17,000	18,233	15,830
	AMERICAN TOWER CORP 3.38% Matures 10/15/2026	88,000	93,249	84,121
	AT&T INC 4.10% Matures 2/15/2028	12,000	11,598	11,590
	AT&T INC 4.35% Matures 3/1/2029	23,000	21,979	22,318
	AT&T INC 2.55% Matures 12/1/2033	109,000	87,956	86,993
	BAT CAPITAL CORP 4.91% Matures 4/2/2030	20,000	19,313	19,524
	BAT CAPITAL CORP 6.42% Matures 8/2/2033	23,000	24,031	24,088
	BATH & BODY WORKS INC 7.50% Matures 6/15/2029	132,000	134,180	136,328
	BERRY GLOBAL INC 1.57% Matures 1/15/2026	111,000	99,242	104,255
	BLOCK FINANCIAL LLC 3.88% Matures 8/15/2030	38,000	33,712	34,882
	BLOCK FINANCIAL LLC 2.50% Matures 7/15/2028	100,000	101,713	89,678
	BOYD GAMING CORP 4.75% Matures 12/1/2027	122,000	114,945	117,276
	BOYD GAMING CORP 4.75% Matures 12/1/2027	48,000	47,385	46,141
	BROADCOM CORP / BROADCOM CAYMAN 3.875% Matures 01/15/2027	92,000	94,811	89,001
	BROADCOM INC 4.15% 11/15/2030	11,000	10,054	10,386
	CARLISLE COS INC 3.75% Matures 12/1/2027	92,000	103,573	87,682
	CARLISLE COS INC 2.75% Matures 3/1/2030	25,000	20,278	22,038
	CARPENTER TECHNOLOGY CORP 6.38% Matures 7/15/2028	132,000	131,448	132,094
	CDW LLC / CDW FINANCE CORP 4.13% Matures 5/1/2025	115,000	112,288	113,172
	CDW LLC / CDW FINANCE CORP 4.13% Matures 5/1/2025	49,000	51,269	48,221
	CDW LLC / CDW FINANCE CORP 3.25% Matures 2/15/2029	49,000	50,225	44,231
	CDW LLC / CDW FINANCE CORP 4.25% Matures 4/1/2028	31,000	28,678	29,599
	CENTENE CORP 4.25% Matures 12/15/2027	129,000	119,243	122,963

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Schedule H, Line 4i - Schedule Of Assets (Held At End Of Year)

June 30, 2024

(a)	(b) & (c) Identity & Description Of Investment	Quantity	(d) Cost	(e) Current Value
	CORPORATE BONDS: (CONTINUED)			
	CENTURY COMMUNITIES INC 6.75% Matures 6/1/2027	129,000	129,178	129,577
	CHARTER COMMUNICATIONS OPERATING 4.908% Matures 07/23/2025	117,000	118,342	115,701
	CONAGRA BRANDS INC 4.85% Matures 11/1/2028	32,000	30,941	31,466
	CONAGRA BRANDS INC 4.60% Matures 11/1/2025	47,000	53,063	46,451
	CROWN AMERICAS LLC / CROWN 4.750% Matures 02/01/2026	124,000	124,696	121,483
	CROWN CASTLE INC 5.60% Matures 6/1/2029	41,000	41,462	41,378
	DCP MIDSTREAM OPERATING LP 5.38% Matures 7/15/2025	53,000	55,421	52,803
	DICK'S SPORTING GOODS INC 3.15% Matures 1/15/2032	154,000	120,916	131,198
	DISCOVERY COMMUNICATIONS LLC 3.95% Matures 3/20/2028	106,000	109,663	99,386
	DOLLAR TREE INC 4.00% Matures 5/15/2025	52,000	51,180	51,249
	DOLLAR TREE INC 4.20% Matures 5/15/2028	89,000	100,767	85,400
	EAGLE MATERIALS INC 2.50% Matures 7/1/2031	162,000	134,664	136,553
	ENCOMPASS HEALTH CORP 4.50% Matures 2/1/2028	16,000	16,380	15,243
	ENERGY TRANSFER LP 5.75% Matures 4/1/2025	118,000	115,980	117,799
	ENLINK MIDSTREAM PARTNERS LP 4.15% Matures 6/1/2025	118,000	113,168	116,064
	EXPEDIA GROUP INC 4.63% Matures 8/1/2027	86,000	81,551	84,366
	EXPEDIA INC 3.80% Matures 2/15/2028	38,000	35,733	36,191
	FISERV INC 5.63% Matures 8/21/2033	134,000	138,202	135,428
	FLEX LTD 6.00% Matures 1/15/2028	116,000	117,427	117,491
	FORD MOTOR CO 4.35% Matures 12/8/2026	125,000	128,492	121,444
	FORTUNE BRANDS INNOVATIONS INC 4.00% Matures 6/15/2025	97,000	104,426	95,391
	FORTUNE BRANDS INNOVATIONS INC 4.00% Matures 3/25/2032	43,000	38,688	39,118
	GENUINE PARTS CO 6.88% Matures 11/1/2033	23,000	25,419	25,295
	GENUINE PARTS CO 6.50% Matures 11/1/2028	105,000	110,081	110,234
	GLOBAL PAYMENTS INC 4.80% Matures 4/1/2026	89,000	96,053	87,919
	GLOBAL PAYMENTS INC 2.90% Matures 5/15/2030	39,000	33,033	34,007
	GLP CAPITAL LP / GLP FINANCING II INC 5.250% Matures 06/01/2025	37,000	36,202	36,741
	GLP CAPITAL LP / GLP FINANCING II INC 3.350% Matures 09/01/2024	80,000	75,532	79,536
	HCA INC 5.38% Matures 2/1/2025	79,000	80,727	78,739
	HCA INC 5.63% Matures 9/1/2028	84,000	98,213	84,788
	HCA INC 3.50% Matures 9/1/2030	40,000	35,031	36,088
	HILLENBRAND INC 5.00% Matures 9/15/2026	126,000	124,357	123,985
	HILTON WORLDWIDE FINANCE LLC 4.875% Matures 04/01/2027	125,000	126,377	122,943
	HOWMET AEROSPACE INC 6.88% Matures 5/1/2025	112,000	125,238	112,887
	HP INC 5.50% Matures 1/15/2033	22,000	22,535	22,204
	HP INC 3.00% Matures 6/17/2027	95,000	97,588	89,392
	ICAHN ENTERPRISES LP / ICAHN 6.250% Matures 05/15/2026	125,000	123,828	124,126
	KRAFT HEINZ FOODS CO 3.88% Matures 5/15/2027	92,000	99,635	88,946
	LAMAR MEDIA CORP 3.75% Matures 2/15/2028	132,000	119,371	123,776
	LKQ CORP 6.25% Matures 6/15/2033	107,000	109,581	110,121
	LKQ CORP 5.75% Matures 6/15/2028	23,000	23,466	23,220
	LOWE'S COS INC 5.15% Matures 7/1/2033	135,000	136,227	134,604
	MARRIOTT INTERNATIONAL INC/MD 4.63% Matures 6/15/2030	71,000	68,319	68,820
	MICROCHIP TECHNOLOGY INC 5.05% Matures 3/15/2029	27,000	27,021	26,786
	MICROCHIP TECHNOLOGY INC 4.25% Matures 9/1/2025	94,000	98,486	92,569

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Schedule H, Line 4i - Schedule Of Assets (Held At End Of Year)

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(a)	(b) & (c) Identity & Description Of Investment	Quantity	(d) Cost	(e) Current Value
	CORPORATE BONDS: (CONTINUED)			
	MOLSON COORS BEVERAGE CO 3.00% Matures 7/15/2026	107,000	114,052	102,460
	MOTOROLA SOLUTIONS INC 4.60% Matures 5/23/2029	36,000	35,038	35,094
	MOTOROLA SOLUTIONS INC 4.60% Matures 2/23/2028	87,000	96,189	85,524
	OLIN CORP 5.63% Matures 8/1/2029	123,000	117,158	120,653
	ONEMAIN FINANCE CORP 7.13% Matures 3/15/2026	121,000	123,441	123,155
	ORACLE CORP 6.25% Matures 11/9/2032	126,000	130,704	133,668
	PENSKE AUTOMOTIVE GROUP INC 3.50% Matures 9/1/2025	117,000	116,901	113,986
	PHILIP MORRIS INTERNATIONAL INC 5.38% Matures 2/15/2033	135,000	135,793	134,392
	QORVO INC 4.38% Matures 10/15/2029	134,000	137,146	126,446
	QUANTA SERVICES INC 2.90% Matures 10/1/2030	131,000	114,452	115,458
	QVC INC 4.75% Matures 2/15/2027	133,000	117,454	111,963
	QVC INC 4.45% Matures 2/15/2025	63,000	59,997	61,961
	REYNOLDS AMERICAN INC 4.45% Matures 6/12/2025	91,000	101,130	89,937
	SABRA HEALTH CARE LP 5.13% Matures 8/15/2026	118,000	111,785	116,130
	SBA COMMUNICATIONS CORP 3.88% Matures 2/15/2027	123,000	123,684	117,231
	SBA COMMUNICATIONS CORP 3.88% Matures 2/15/2027	104,000	107,698	99,122
	SBA COMMUNICATIONS CORP 3.13% Matures 2/1/2029	62,000	53,230	55,268
	SERVICE CORP INTERNATIONAL/US 5.13% Matures 6/1/2029	113,000	122,816	109,924
	SERVICE CORP INTERNATIONAL/US 4.63% Matures 12/15/2027	128,000	120,687	124,127
	SERVICE CORP INTERNATIONAL/US 3.38% Matures 8/15/2030	77,000	65,450	67,104
	SILGAN HOLDINGS INC 4.13% Matures 2/1/2028	124,000	112,428	116,709
	SLM CORP 4.20% Matures 10/29/2025	25,000	25,000	24,321
	SLM CORP 3.13% Matures 11/2/2026	104,000	98,593	96,879
	STARWOOD PROPERTY TRUST INC 4.75% Matures 3/15/2025	118,000	120,294	116,674
	STEEL DYNAMICS INC 5.00% Matures 12/15/2026	123,000	122,282	122,075
	SUNOCO LP / SUNOCO FINANCE CORP 6.00% Matures 4/15/2027	84,000	87,825	83,891
	TEGNA INC 4.63% Matures 3/15/2028	144,000	129,483	130,833
	TEGNA INC 4.63% Matures 3/15/2028	150,000	148,343	136,285
	TELEDYNE TECHNOLOGIES INC 2.75% Matures 4/1/2031	161,000	134,765	137,792
	TELEFLEX INC 4.63% Matures 11/15/2027	126,000	120,258	121,650
	TENET HEALTHCARE CORP 4.25% Matures 6/1/2029	131,000	121,660	121,909
	TENET HEALTHCARE CORP 6.13% Matures 10/1/2028	151,000	139,925	149,717
	TEVA PHARMACEUTICAL FINANCE 3.150% Matures 10/01/2026	125,000	111,078	117,446
	TRANSDIGM INC 5.50% Matures 11/15/2027	132,000	125,764	129,770
	TRAVEL + LEISURE CO 6.00% Matures 4/1/2027	116,000	112,493	115,635
	TRIMBLE INC 4.90% Matures 6/15/2028	111,000	117,895	109,519
	TRIMBLE INC 6.10% Matures 3/15/2033	23,000	23,506	23,825
	UNDER ARMOUR INC 3.25% Matures 6/15/2026	130,000	130,054	123,419
	UNITED RENTALS NORTH AMERICA INC 5.50% Matures 5/15/2027	113,000	114,368	112,120
	UNITED RENTALS NORTH AMERICA INC 5.50% Matures 5/15/2027	41,000	43,821	40,681
	UNITED RENTALS NORTH AMERICA INC 4.00% Matures 7/15/2030	150,000	133,833	135,796
	VERIZON COMMUNICATIONS INC 4.13% Matures 3/16/2027	89,000	103,105	86,775
	VERIZON COMMUNICATIONS INC 4.33% Matures 9/21/2028	34,000	32,924	33,048
	VICI PROPERTIES LP 4.75% Matures 2/15/2028	125,000	121,981	122,082
	WARNERMEDIA HOLDINGS INC 4.28% Matures 3/15/2032	41,000	35,511	35,715

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Schedule H, Line 4i - Schedule Of Assets (Held At End Of Year)

June 30, 2024

(a)	(b) & (c) Identity & Description Of Investment	Quantity	(d) Cost	(e) Current Value
CORPORATE BONDS: (CONTINUED)				
	WESTERN DIGITAL CORP 4.75% Matures 2/15/2026	117,000	121,099	114,568
	WESTERN MIDSTREAM OPERATING LP 3.10% Matures 2/1/2025	81,000	78,500	79,661
	WESTINGHOUSE AIR BRAKE TECH 4.700% Matures 09//15/2028	76,000	83,517	74,567
	WILLIS NORTH AMERICA INC 2.95% Matures 9/15/2029	58,000	50,248	51,944
	WILLIS NORTH AMERICA INC 4.50% Matures 9/15/2028	26,000	30,085	25,252
	WILLIS NORTH AMERICA INC 5.35% Matures 5/15/2033	17,000	16,972	16,665
	WILLIS NORTH AMERICA INC 4.65% Matures 6/15/2027	30,000	29,247	29,461
	ZIMMER BIOMET HOLDINGS INC 5.35% Matures 12/1/2028	78,000	78,003	78,530
	ZIMMER BIOMET HOLDINGS INC 3.05% Matures 1/15/2026	57,000	61,019	55,032
	CARLYLE CREDIT INCOME FUND 8.75% (CCIA) Matures 10/31/2028	7,500	184,500	193,050
	CRESCENT CAP BDC INC NT CAL 26 5% (FCRX) Matures 05/25/2026	4,500	104,473	108,225
	EAGLE POINT INCOME CO INC NT 7.75% (EICB) Matures 07/31/2028	7,650	189,506	189,858
	EAGLE PT INCOME CO INC 8% SER-C (EICC) Matures 4/30/2029	5,000	123,750	124,900
	GREAT ELM CAPITA 5.875% (GECCO) Matures 6/30/2026	3,500	86,800	84,175
	GREAT ELM CAPITAL CORP 6.75% (GECCM) Matures 01/31/2025	7,500	152,126	187,276
	NEWTEKONE INC 5.50% NT 2026 (NEWTZ) Matures 02/01/2026	2,800	69,720	67,872
	OXFORD LANE CAP CORP 6.25% NT 27 (OXLCP) Matures 02/28/2027	11,000	253,423	258,390
	OXFORD LANE CAPITAL CORP 5.00% (OCLCP) Matures 01/31/2027	5,750	142,600	133,400
	PRIORIT INCOME FUND 6.25% SER-G (PRIF.G) Matures 06/30/2026	3,425	84,940	81,515
	TERRA INCOME FUND 6 LLC 7% NT 26 (TFSA) Matures 03/31/2026	3,500	86,800	84,319
	TOTAL CORPORATE BONDS		<u>12,447,397</u>	<u>12,247,960</u>
ALTERNATIVES:				
	CPG FOCUSED ACCESS FUND, LLC	209,796	4,594,963	5,594,222
	ENTRUST SPECIAL OPPORTUNITIES FUND III LTD.		792,976	731,241
	INTERCONTINENTAL U.S. REAL ESTATE INVESTMENT FUND, LLC	1,361	1,400,000	1,609,239
	IRONWOOD INSTITUTIONAL MULTI-STRATEGY FUND, LLC	2,915	3,407,047	3,471,259
	NB CROSSROADS PRIVATE MARKETS FUND V, LP		1,828,624	3,265,070
	SIGULER GUFF DISTRESSED RE OPPORTUNITIES FUND II (E), LP		260,876	350,228
	SIGULER GUFF SMALL BUYOUT OPPORTUNITIES FUND III, LP		1,064,406	2,160,742
	SIGULER GUFF SMALL BUYOUT OPPORTUNITIES FUND V, LP		993,889	1,193,008
	TOTAL ALTERNATIVES		<u>14,342,781</u>	<u>18,375,009</u>
INVESTMENT ENTITY:				
	PROLOAN BOND FUND, LLC	2,763	4,640,515	4,703,561
	TOTAL INVESTMENT ENTITY		<u>4,640,515</u>	<u>4,703,561</u>
COMMON COLLECTIVE TRUSTS:				
	ASB ALLEGIANCE REAL ESTATE FUND	873	1,309,645	1,241,083
	RAINIER INT'L SMALL CAP EQUITY COLLECTIVE TRUST FUND	61,214	1,250,000	1,496,082
	TOTAL COMMON COLLECTIVE TRUSTS		<u>2,559,645</u>	<u>2,737,165</u>

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Schedule H, Line 4i - Schedule Of Assets (Held At End Of Year)

June 30, 2024

(a)	(b) & (c)		(d)	(e)
	Identity & Description Of Investment	Quantity	Cost	Current Value
	GROUP ANNUITY CONTRACT:			
	ULLICO SEPARATE ACCOUNT J	115,535	<u>1,709,591</u>	<u>2,109,192</u>
	TOTAL GROUP ANNUITY CONTRACT		<u>1,709,591</u>	<u>2,109,192</u>
	CASH EQUIVALENTS:			
	*MORGAN STANLEY BANK N.A.	1,300,945	<u>1,300,945</u>	<u>1,300,945</u>
	TOTAL CASH EQUIVALENTS		<u>1,300,945</u>	<u>1,300,945</u>
	GRAND TOTAL		<u>\$ 79,765,819</u>	<u>\$ 90,260,656</u>

*Party-In-Interest

LABORERS' LOCAL #157 PENSION FUND

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Schedule H, Line 4j - Schedule Of Reportable Transactions

June 30, 2024

(a)	(b)	(c)	(d)	(g)	(h)	(i)
PARTY INVOLVED	DESCRIPTION OF ASSETS	PURCHASE PRICE	SELLING PRICE	COST OF ASSET	CURRENT VALUE OF ASSET ON TRANSACTION DATE	NET GAIN (LOSS)
	FEDERATED HERMES GOVT OBL PRM	\$ 1,279,557	\$ -	\$ -	\$ 1,279,557	\$ -
	FEDERATED HERMES GOVT OBL PRM	-	3,308,750	3,308,750	3,308,750	-
		<u>\$ 1,279,557</u>	<u>\$ 3,308,750</u>	<u>\$ 3,308,750</u>	<u>\$ 4,588,307</u>	<u>\$ -</u>

SECTION 2. PLAN DESCRIPTION

IN GENERAL

The plan is funded through employer contributions and investment yield on the plan funds. Coverage is afforded employees working in the Local's jurisdiction for employers with collective bargaining agreements providing for contributions to the plan.

PLAN PROVISIONS

An outline of the major plan provisions in effect as of 7/1/2023 is contained in Table 1.

TABLE 1.
PLAN PROVISIONS

ELIGIBILITY SERVICE:	
Time Period	Years of Eligibility Service Earned
Currently	one year for each plan year in which at least 400 hours of service is earned in covered employment (1,000 hours in the initial computation period)

ELIGIBILITY FOR BENEFITS:		
Type of Benefit	Age Requirement	Service Requirement
Normal Pension	62	Five years of vesting service or five years of continuous plan participation
Early Pension	55	15 years of Qualifying Service (Post and Basic Future). Unreduced with 30 or more years of pension credits (minimum of age 55 if hired after July 1, 2007)
Disability Pension	45	Plan A - 15 Years of Service Credit and receiving a Social Security Disability Benefit * Plan B – No age requirement. 10 years of Service Credit and receiving a Social Security Disability Benefit *
Pre-Pension Surviving Spouse Pension	None	Vested and married for one year
Vesting	None	5 years of vesting service

* Participant must also have worked in Covered Employment for at least 400 hours in one Plan Year within the 3-year period that includes the Plan Year in which he became disabled and the 2 immediately preceding Plan Years.

SECTION 2. PLAN DESCRIPTION (CONT'D)

BENEFITS:		
Type	Amount	Duration
Normal Pension	\$60 per year of Basic, Future and Additional Service Credit after 6/30/2022, \$56 per year of Basic, Future and Additional Service Credit 7/1/2007-6/30/2022, \$50 per year of Basic, Future and Additional Service Credit 7/1/2000-7/1/2007, \$60 per year of Basic, Future and Additional Service Credit earned prior to 7/1/2000, \$60 each year of Past Service Credit.	5 Year Certain and Life
Early Pension	If hired before 7/1/2015, same as normal but reduced 1/8 of 1% for each month prior to age 62. If hired after 6/30/2015, same as normal but reduced 1/2 of 1% for each month prior to age 62. No reduction for participants with at least 30 years of Basic Service Credit.	5 Year Certain and Life
Disability	Accrued benefit reduced by \$1.00 for participants who qualify under Plan A. Plan B - Same as Plan A but reduced ¼ of 1% for each month prior to age 62 to a maximum reduction of 50%.	5 Year Certain and Life
Pre-Pension Surviving Spouse Pension	Payable in married couple form when a participant would have attained earliest pension age	Life
Post-Pension Surviving Spouse Pension	Married couple benefit	Life

OPTIONS AT NORMAL AND EARLY PENSION AGE:		
Type	Amount	Duration
5 Year Certain & Life Annuity	Same as normal	5 Year Certain and Life
Married Couple	Actuarially reduced with either 50%, 75% or 100% of the pension payable to surviving spouse	Life of both pensioner and spouse

LABORERS' LOCAL #157 PENSION FUND

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Schedule H, Line 4i - Schedule Of Assets (Held At End Of Year)

June 30, 2024

(a)	(b) & (c)		(d)	(e)
	Identity & Description Of Investment	Quantity	Cost	Current Value
	MUTUAL AND EXCHANGE-TRADED FUNDS:			
	ANGEL OAK FINL STRATEGIES INCM	23,625	\$ 287,608	\$ 292,241
	BLACKROCK CREDIT ALL INC TR IV	6,250	65,937	66,938
	FIRST TR ABRDN GBL OPP INCM FD	12,500	72,511	79,250
	FIRST TR INTERM DUR PRF&INC FD	6,000	103,132	110,220
	ISHARES CORE DIVIDEND GROWTH	35,450	1,894,510	2,042,275
	ISHARES 20+ YR TREASU BOND ETF	21,281	1,933,663	1,953,170
	MFS INTERMEDIATE INCOME TR SBI	74,500	197,383	198,170
	PIONEER DIVERSIFIED HIGH INC	14,025	139,972	163,798
	PUTNAM PREMIER INCOME TR SBI	14,450	57,367	51,731
	VANGUARD INTL EQUITY INDEX FD	36,773	1,788,650	2,156,369
	VANGUARD LONG TERM BND	12,725	1,127,543	894,440
	VANGUARD TOTAL BOND MARKET	10,975	824,982	790,749
	WESTERN ASST INFLTN LKD INM FD	48,000	424,055	384,480
	FEDERATED HERMES GOVT OBL PRM	3,729,911	3,729,911	3,729,911
	AMER BEACON AHL MNGD FUT STR Y	66,681	724,621	706,823
	DOUBLELINE TOTAL RETURN I	495,750	4,478,260	4,288,238
	KKR CREDIT OPPORTUNITIES I	70,348	1,903,041	1,701,006
	LM MARTIN CURRIE SMASH SER EM	192,442	1,893,836	1,985,999
	LOCORR MARKET TREND I	60,442	721,389	763,990
	NEUBERGER BERMAN LG SH INST	157,755	2,671,934	2,834,864
	TORTOISE ENRGY INFR TOT RET I	91,264	1,138,344	1,504,934
	TOTAL MUTUAL AND EXCHANGE-TRADED FUNDS		<u>26,178,649</u>	<u>26,699,596</u>
	COMMON STOCKS:			
	AAON INC	434	25,525	37,862
	ABBOTT LABORATORIES	1,955	182,264	203,144
	ACADEMY SPORTS & OUTDOORS INC	543	30,809	28,915
	ACADIA HEALTHCARE COMPANY INC	511	36,982	34,513
	ACCENTURE PLC IRELAND CL A	565	119,896	171,427
	ADIDAS AG	948	121,541	113,287
	ADOBE INC	317	35,837	176,106
	ADOBE INC	341	104,339	189,439
	AGNC INVESTMENT CORP	3,240	26,941	30,910
	AIA GROUP LTD SPON ADR	2,399	95,149	65,142
	AIA GROUP LTD SPON ADR	2,910	120,792	79,018
	AIMEI HEALTH TECHNOLOGY CO LTD	28,500	289,812	294,975
	AIR LIQUIDE ADR	4,658	125,900	161,032
	AIRBNB INC CL A	1,411	171,041	213,950
	ALAMO GROUP INC	237	29,192	41,001
	ALCON INC	1,385	74,006	123,376
	ALIBABA GROUP HLDG LTD	1,666	149,600	119,952
	ALPHABET INC CL A	890	59,641	162,114
	ALPHABET INC CL C	1,641	116,861	300,992
	ALPHAVEST ACQUISITION CORP	10,500	108,150	115,710
	AMADEUS IT GROUP S.A ADR	1,679	102,649	111,820

LABORERS' LOCAL #157 PENSION FUND

EIN: 14-6076460 PLAN #001

Schedule H, Line 4i - Schedule Of Assets (Held At End Of Year)

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(a)	(b) & (c) Identity & Description Of Investment	Quantity	(d) Cost	(e) Current Value
	COMMON STOCKS (CONTINUED):			
	AMAZON COM INC	4,487	470,408	867,113
	AMER INTL GP INC NEW	855	63,850	63,475
	AMERICAN WATER WORKS CO	786	106,320	101,520
	AMERIPRISE FINCL INC	404	47,639	172,585
	AMGEN INC	523	83,631	163,411
	AMN HEALTHCARE SVCS INC	620	36,649	31,763
	ANSYS INC	461	57,244	148,212
	ANTERO RES CORP COM	722	11,877	23,559
	ARTISAN PARTNERS ASSET MGMT	959	33,763	39,578
	ASGN INC	386	33,285	34,034
	ASM INTERNATIONAL NV	151	45,155	115,194
	ASML HOLDING NV NY REG NEW	231	85,412	236,251
	ATKORE INC	90	15,729	12,108
	ATLAS COPCO AB SP ADR B SP ADR	8,507	87,346	137,482
	ATMOS ENERGY CP	1,059	115,911	123,532
	AUTODESK INC DELAWARE	504	97,342	124,715
	AXALTA COATING SYSTEMS LTD.	1,146	31,984	39,159
	BANK RAKYAT INDONESIA ADR	4,581	71,538	64,345
	BEACON ROOFING SUPPLY INC	542	29,260	49,051
	BLACKSTONE INC	796	94,362	98,545
	BWX TECHNOLOGIES INC COM	313	23,795	29,735
	CADENCE BANK	1,250	28,802	35,350
	CANADIAN NATL RAILWAY CO	919	101,896	108,561
	CAPITAL ONE FINANCIAL CORP	978	81,062	135,404
	CAPITEC BANK HOLDINGS LTD ADR	901	37,727	64,861
	CHEMOURS CO COM	1,899	43,148	42,860
	CHINA MERCHANTS BK CO LTD UNSP	3,519	102,910	79,892
	CHORD ENERGY CORPORATION NEW	193	28,987	32,362
	CLP HOLDINGS LTD SP ADR	6,371	63,402	51,490
	COCA COLA CO	2,181	90,967	138,821
	COCA COLA CONSOLIDATED INC	43	28,850	46,172
	COLISEUM ACQUISIT CORP CLASS A	16,000	171,200	175,360
	COLOPLAST AS SPONSERED ADR	10,006	124,797	120,302
	COMERICA INC	961	44,645	49,049
	COMMERCE BANCSHARES	1,142	51,603	63,701
	COMPASS GROUP PLC SPD ADR	5,021	116,258	137,093
	CONCORD ACQ CORP II CL A	30,250	314,873	319,138
	CONSTELLATION BRANDS INC CL A	396	93,798	101,883
	CORE & MAIN INC CL A	741	15,211	36,265
	CORTEVA INC	2,556	66,028	137,871
	COSAN S A ADR	3,179	54,354	30,963
	COTERRA ENERGY INC	5,190	89,528	138,417
	COTY INC COM CL A	2,675	20,860	26,804
	CREDICORP LTD	203	28,107	32,750
	CSL LTD	1,099	102,091	108,337

LABORERS' LOCAL #157 PENSION FUND

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(a)	(b) & (c)	(d)	(e)	
	Identity & Description Of Investment	Quantity	Cost	Current Value
	COMMON STOCKS (CONTINUED):			
	CULLEN FROST BANKERS INC	732	63,787	74,393
	CUSHMAN & WAKEFIELD PLC	3,988	40,087	41,475
	DAIKIN INDS LTD UNSPON ADR	5,321	88,036	73,999
	DANAHER CORPORATION	516	37,525	128,923
	DASSAULT SYSTEMS SA ADS	3,065	112,854	115,958
	DIAGEO PLC SPON ADR NEW	610	106,342	76,909
	ECOLAB INC	547	114,535	130,186
	ELEMENT SOLUTIONS INC	3,269	57,396	88,655
	ELI LILLY & CO	102	61,096	92,349
	EPAM SYSTEMS	113	33,748	21,256
	EQUITY LIFESTYLE PROPERTIES	1,403	77,890	91,377
	ESH ACQUISITION CORP	9,375	94,530	97,688
	EVERCORE INC CLASS A	211	38,024	43,979
	EXPERIAN GP LTD ADR	2,436	85,194	113,505
	FABRINET	182	15,237	44,552
	FANUC CORPORATION UNSP ADR	3,937	77,029	53,957
	FEDERAL SIGNAL CORP	274	9,558	22,926
	FERRARI N V	416	92,241	169,882
	FIRST AMERICAN FINL CORP	954	52,381	51,468
	FRANKLIN ELECTRIC CO	243	17,284	23,406
	GARTNER INC	295	47,037	132,473
	GATX CORP	234	21,184	30,972
	GENL DYNAMICS CORP	400	72,073	116,056
	GILDAN ACTIVEWEAR INC	1,061	36,738	40,233
	GLOBANT S.A	385	74,129	68,630
	GLOBUS MEDICAL INC A	738	36,391	50,546
	GRUPO FINANCIERO BANORTE SAB	1,854	71,196	72,182
	HDFC BANK LTD ADR	2,582	156,187	166,100
	HEALTH EQUITY INC COM	434	32,559	37,411
	HERMES INTL SCA UNSPON ADR	766	85,357	175,686
	HONEYWELL INTL INC	641	144,810	136,879
	HOYA CORP SPONS ADR	834	95,753	96,978
	ICICI BANK LTD	5,088	98,164	146,585
	INDUSTRIA DE DISENO TEXTIL IND	5,739	88,981	142,574
	INFINEON TECHNOLOGIES AG	1,614	59,915	59,342
	INSIGHT ENTERPRISES INC	236	18,857	46,813
	INSTALLED BLDG PRODS INC	198	17,413	40,725
	JANUS INTERNATIONAL GROUP INC	3,913	41,778	49,421
	JARDINE MATHESON HLDGS LTD ADR	1,343	77,046	47,515
	JD COM INC SPON ADR CL A	1,291	76,631	33,359
	JELD WEN HLD INC	1,253	25,958	16,878
	KFORCE INC	508	29,703	31,562
	KIRBY CP	425	26,846	50,885
	KONE OYJ ADR	3,387	106,211	83,656
	LOREAL CO ADR	1,876	125,053	164,891

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Schedule H, Line 4i - Schedule Of Assets (Held At End Of Year)

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(a)	(b) & (c)		(d)	(e)
	Identity & Description Of Investment	Quantity	Cost	Current Value
	COMMON STOCKS (CONTINUED):			
	LEGATO MERGER CORP III	25,500	257,445	257,889
	LENNAR CORPORATION	1,212	53,474	181,642
	LONZA GROUP AG ZUERICH ADR	1,156	72,360	63,088
	LOWES COMPANIES INC	472	99,236	104,057
	LVMH MOET HENNESSY LOUIS VUITT	1,065	109,454	162,903
	MARTIN MARIETTA MATERIALS	291	66,304	157,664
	MASTERCARD INC CL A	565	167,531	249,255
	MATADOR RES CO	428	24,850	25,509
	MATERION CORP COM	360	36,321	38,927
	MATIV HOLDINGS INC	1,441	29,009	24,439
	MCGRATH RENT CP	327	33,717	34,842
	MEDTRONIC PLC SHS	1,008	76,206	79,340
	MEITUAN ADR	2,728	102,869	77,639
	MERCK & CO INC NEW COM	1,056	98,765	130,733
	MERCK KGAA SPD ADR	2,860	107,163	94,869
	MFA FINL INC	2,266	23,693	24,110
	MICHELIN COMPAGNIE GENERALE DE	5,757	82,958	111,404
	MICROCHIP TECHNOLOGY INC	2,049	70,281	187,484
	MICROSOFT CORP	491	21,633	219,452
	MICROSOFT CORP	1,268	281,034	566,733
	MINTH GROUP LTD	1,501	60,436	46,955
	MITSUBISHI UFJ FINCL GRP ADS	8,979	53,947	96,973
	MSCI INC COM	222	113,248	106,949
	MURATA MANUFACTURING CO LTD	7,138	72,445	73,707
	MURPHY OIL CORP	627	23,581	25,857
	NAPCO SECURITY TECHNOLOGIE INC	567	24,225	29,456
	NESTLE SPON ADR REP REG SHR	1,072	120,252	109,419
	NETFLIX INC	312	62,144	210,563
	NIKE INC B	1,277	131,113	96,247
	NNN REIT INC	954	35,401	40,640
	NOVARTIS AG ADR	1,213	101,346	129,136
	NOVO NORDISK A/S ADR	991	92,054	141,455
	NOVO NORDISK A/S ADR	1,691	47,781	241,373
	OCA ACQUISITION CORP CL A	12,525	123,998	140,280
	ONTO INNOVATION INC	137	23,948	30,080
	OSHKOSH CORP	730	80,186	78,986
	PARKER HANNIFIN CORP	369	60,490	186,644
	PATTERSON -UTI ENERGY INC	2,175	30,449	22,533
	PAYCOM SOFTWARE INC	300	61,813	42,912
	PERMIAN RESOURCES CP CL A	2,270	22,351	36,661
	PING AN INSURANCE ADR	6,673	77,546	60,511
	PNC FINL SVCS GP	688	78,784	106,970
	PORTLAND GENERAL ELEC CO	586	25,086	25,339
	PROCTER & GAMBLE	682	91,211	112,475
	PROSPERITY BANCSHARES	555	29,720	33,933

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(a)	(b) & (c) Identity & Description Of Investment	Quantity	(d) Cost	(e) Current Value
	COMMON STOCKS (CONTINUED):			
	PRUDENTIAL PLC ADR	3,187	117,861	58,386
	PT BK NEGARA INDONESIA UN ADR	2,377	36,635	33,822
	PT TELEKOMUNIKASI INDONESIA	2,377	48,636	32,650
	QUALCOMM INC	867	63,230	172,689
	R P M INC	1,107	65,596	119,202
	RAMBUS INC	714	16,060	41,955
	RED ROCK RESORTS INC CL A	823	35,267	45,207
	ROCHE HOLDINGS ADR	2,919	120,715	101,202
	RUSH ENTERPRISES INC CL A	706	20,551	29,560
	RXO INC	1,282	27,601	33,524
	SAGE GROUP PLC ADR NEW	1,038	56,406	57,130
	SAIA INC	85	20,757	40,424
	SALESFORCE INC	986	156,655	253,501
	SAP AG	541	67,185	109,125
	SELECTIVE INSURANCE GROUP	394	18,165	36,969
	SERVICENOW INC	354	107,811	278,481
	SGS SA ADR	10,285	103,828	91,567
	SHIN ETSU CHEM CO LTD ADR	6,125	67,935	118,764
	SHOPIFY INC	1,887	117,538	124,636
	SIGNET JEWELERS LIMITED	353	25,539	31,622
	SILVERBOX CORP III CL A	15,000	151,800	159,000
	SKYLINE CORP	542	35,298	36,721
	SMC CORP JAPAN SPONSORED ADR	6,038	147,277	143,276
	SONY GROUP CORPORATION ADR	1,489	70,548	126,491
	STAG INDL INC COM	1,140	36,064	41,108
	STRIDE INC	415	28,472	29,258
	SYSMEX CORP UNSPON ADR	5,334	122,990	85,915
	TAIWAN SMCNDCTR MFG CO LTD ADR	2,297	140,206	397,503
	TAIWAN SMCNDCTR MFG CO LTD ADR	1,336	87,635	232,210
	TELEDYNE TECH INC	284	115,295	110,186
	TENCENT HLDGS LTD UNSPON ADR	6,312	256,779	298,936
	TERUMO CORP ADR UNSPONS ADR	3,206	55,543	52,877
	THERMO FISHER SCIENTIFIC	437	243,495	241,661
	TOTALENERGIES SE SPONSORED ADS	1,755	111,250	117,023
	TOTALENERGIES SE SPONSORED ADS	1,486	81,078	99,086
	TRANSMEDICS GROUP INC	249	19,771	37,504
	TRIP COM GROUP LTD ADR	505	26,511	23,735
	TRISTAR ACQUISITION I CP CL A	9,500	100,035	105,925
	U S BANCORP COM NEW	3,354	111,353	133,154
	ULTRA CLEAN HOLDINGS INC	578	18,421	28,322
	UNITED BANKSHARES INC W VA	937	27,884	30,396
	UNITEDHEALTH GP INC	318	104,983	161,945
	UNIVERSAL MUSIC GROUP NV ADR	4,920	62,298	73,244
	VALMONT INDUSTRIES	124	28,280	34,032
	VALVOLINE INC COM	757	26,509	32,702

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(a)	(b) & (c) Identity & Description Of Investment	Quantity	(d) Cost	(e) Current Value
	COMMON STOCKS (CONTINUED):			
	VISA INC CL A	1,079	218,375	283,205
	WAL-MART DE MEXICO SA SPON ADR	1,767	66,080	60,387
	WARBY PARKER INC CL A	1,907	24,862	30,626
	WEG S.A. SPONSORED ADR	9,341	51,415	70,870
	WESTERN ALLIANCE BANCORP	844	41,481	53,020
	WOLTERS KLUWER NV SPON ADR	681	84,344	112,983
	WORKDAY INC CL A	422	95,322	94,342
	XCEL ENERGY INC	1,890	125,602	100,945
	XINYI SOLAR HLDGS LTD ADR	2,126	52,916	21,795
	XYLEM INC COM	953	78,344	129,255
	ZIONS BANCORPORATION N A	1,057	37,470	45,842
	ZOETIS INC CLASS-A	948	137,206	164,346
	TOTAL COMMON STOCKS		<u>16,586,296</u>	<u>22,087,228</u>
	CORPORATE BONDS:			
	AECOM 5.13% Matures 3/15/2027	117,000	114,233	115,065
	ALLEGION PLC 3.50% Matures 10/1/2029	21,000	18,096	19,391
	ALLEGION US HOLDING CO INC 5.41% Matures 7/1/2032	26,000	25,329	25,986
	ALLEGION US HOLDING CO INC 3.20% Matures 10/1/2024	71,000	68,888	70,494
	ALLEGION US HOLDING CO INC 3.55% Matures 10/1/2027	21,000	22,286	19,901
	ALTRIA GROUP INC 3.40% Matures 5/6/2030	110,000	97,770	99,495
	ALTRIA GROUP INC 6.88% Matures 11/1/2033	18,000	19,410	19,482
	AMERICAN TOWER CORP 3.80% Matures 8/15/2029	17,000	18,233	15,830
	AMERICAN TOWER CORP 3.38% Matures 10/15/2026	88,000	93,249	84,121
	AT&T INC 4.10% Matures 2/15/2028	12,000	11,598	11,590
	AT&T INC 4.35% Matures 3/1/2029	23,000	21,979	22,318
	AT&T INC 2.55% Matures 12/1/2033	109,000	87,956	86,993
	BAT CAPITAL CORP 4.91% Matures 4/2/2030	20,000	19,313	19,524
	BAT CAPITAL CORP 6.42% Matures 8/2/2033	23,000	24,031	24,088
	BATH & BODY WORKS INC 7.50% Matures 6/15/2029	132,000	134,180	136,328
	BERRY GLOBAL INC 1.57% Matures 1/15/2026	111,000	99,242	104,255
	BLOCK FINANCIAL LLC 3.88% Matures 8/15/2030	38,000	33,712	34,882
	BLOCK FINANCIAL LLC 2.50% Matures 7/15/2028	100,000	101,713	89,678
	BOYD GAMING CORP 4.75% Matures 12/1/2027	122,000	114,945	117,276
	BOYD GAMING CORP 4.75% Matures 12/1/2027	48,000	47,385	46,141
	BROADCOM CORP / BROADCOM CAYMAN 3.875% Matures 01/15/2027	92,000	94,811	89,001
	BROADCOM INC 4.15% 11/15/2030	11,000	10,054	10,386
	CARLISLE COS INC 3.75% Matures 12/1/2027	92,000	103,573	87,682
	CARLISLE COS INC 2.75% Matures 3/1/2030	25,000	20,278	22,038
	CARPENTER TECHNOLOGY CORP 6.38% Matures 7/15/2028	132,000	131,448	132,094
	CDW LLC / CDW FINANCE CORP 4.13% Matures 5/1/2025	115,000	112,288	113,172
	CDW LLC / CDW FINANCE CORP 4.13% Matures 5/1/2025	49,000	51,269	48,221
	CDW LLC / CDW FINANCE CORP 3.25% Matures 2/15/2029	49,000	50,225	44,231
	CDW LLC / CDW FINANCE CORP 4.25% Matures 4/1/2028	31,000	28,678	29,599
	CENTENE CORP 4.25% Matures 12/15/2027	129,000	119,243	122,963

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(a)	(b) & (c) Identity & Description Of Investment	Quantity	(d) Cost	(e) Current Value
	CORPORATE BONDS: (CONTINUED)			
	CENTURY COMMUNITIES INC 6.75% Matures 6/1/2027	129,000	129,178	129,577
	CHARTER COMMUNICATIONS OPERATING 4.908% Matures 07/23/2025	117,000	118,342	115,701
	CONAGRA BRANDS INC 4.85% Matures 11/1/2028	32,000	30,941	31,466
	CONAGRA BRANDS INC 4.60% Matures 11/1/2025	47,000	53,063	46,451
	CROWN AMERICAS LLC / CROWN 4.750% Matures 02/01/2026	124,000	124,696	121,483
	CROWN CASTLE INC 5.60% Matures 6/1/2029	41,000	41,462	41,378
	DCP MIDSTREAM OPERATING LP 5.38% Matures 7/15/2025	53,000	55,421	52,803
	DICK'S SPORTING GOODS INC 3.15% Matures 1/15/2032	154,000	120,916	131,198
	DISCOVERY COMMUNICATIONS LLC 3.95% Matures 3/20/2028	106,000	109,663	99,386
	DOLLAR TREE INC 4.00% Matures 5/15/2025	52,000	51,180	51,249
	DOLLAR TREE INC 4.20% Matures 5/15/2028	89,000	100,767	85,400
	EAGLE MATERIALS INC 2.50% Matures 7/1/2031	162,000	134,664	136,553
	ENCOMPASS HEALTH CORP 4.50% Matures 2/1/2028	16,000	16,380	15,243
	ENERGY TRANSFER LP 5.75% Matures 4/1/2025	118,000	115,980	117,799
	ENLINK MIDSTREAM PARTNERS LP 4.15% Matures 6/1/2025	118,000	113,168	116,064
	EXPEDIA GROUP INC 4.63% Matures 8/1/2027	86,000	81,551	84,366
	EXPEDIA INC 3.80% Matures 2/15/2028	38,000	35,733	36,191
	FISERV INC 5.63% Matures 8/21/2033	134,000	138,202	135,428
	FLEX LTD 6.00% Matures 1/15/2028	116,000	117,427	117,491
	FORD MOTOR CO 4.35% Matures 12/8/2026	125,000	128,492	121,444
	FORTUNE BRANDS INNOVATIONS INC 4.00% Matures 6/15/2025	97,000	104,426	95,391
	FORTUNE BRANDS INNOVATIONS INC 4.00% Matures 3/25/2032	43,000	38,688	39,118
	GENUINE PARTS CO 6.88% Matures 11/1/2033	23,000	25,419	25,295
	GENUINE PARTS CO 6.50% Matures 11/1/2028	105,000	110,081	110,234
	GLOBAL PAYMENTS INC 4.80% Matures 4/1/2026	89,000	96,053	87,919
	GLOBAL PAYMENTS INC 2.90% Matures 5/15/2030	39,000	33,033	34,007
	GLP CAPITAL LP / GLP FINANCING II INC 5.250% Matures 06/01/2025	37,000	36,202	36,741
	GLP CAPITAL LP / GLP FINANCING II INC 3.350% Matures 09/01/2024	80,000	75,532	79,536
	HCA INC 5.38% Matures 2/1/2025	79,000	80,727	78,739
	HCA INC 5.63% Matures 9/1/2028	84,000	98,213	84,788
	HCA INC 3.50% Matures 9/1/2030	40,000	35,031	36,088
	HILLENBRAND INC 5.00% Matures 9/15/2026	126,000	124,357	123,985
	HILTON WORLDWIDE FINANCE LLC 4.875% Matures 04/01/2027	125,000	126,377	122,943
	HOWMET AEROSPACE INC 6.88% Matures 5/1/2025	112,000	125,238	112,887
	HP INC 5.50% Matures 1/15/2033	22,000	22,535	22,204
	HP INC 3.00% Matures 6/17/2027	95,000	97,588	89,392
	ICAHN ENTERPRISES LP / ICAHN 6.250% Matures 05/15/2026	125,000	123,828	124,126
	KRAFT HEINZ FOODS CO 3.88% Matures 5/15/2027	92,000	99,635	88,946
	LAMAR MEDIA CORP 3.75% Matures 2/15/2028	132,000	119,371	123,776
	LKQ CORP 6.25% Matures 6/15/2033	107,000	109,581	110,121
	LKQ CORP 5.75% Matures 6/15/2028	23,000	23,466	23,220
	LOWE'S COS INC 5.15% Matures 7/1/2033	135,000	136,227	134,604
	MARRIOTT INTERNATIONAL INC/MD 4.63% Matures 6/15/2030	71,000	68,319	68,820
	MICROCHIP TECHNOLOGY INC 5.05% Matures 3/15/2029	27,000	27,021	26,786
	MICROCHIP TECHNOLOGY INC 4.25% Matures 9/1/2025	94,000	98,486	92,569

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(a)	(b) & (c) Identity & Description Of Investment	Quantity	(d) Cost	(e) Current Value
	CORPORATE BONDS: (CONTINUED)			
	MOLSON COORS BEVERAGE CO 3.00% Matures 7/15/2026	107,000	114,052	102,460
	MOTOROLA SOLUTIONS INC 4.60% Matures 5/23/2029	36,000	35,038	35,094
	MOTOROLA SOLUTIONS INC 4.60% Matures 2/23/2028	87,000	96,189	85,524
	OLIN CORP 5.63% Matures 8/1/2029	123,000	117,158	120,653
	ONEMAIN FINANCE CORP 7.13% Matures 3/15/2026	121,000	123,441	123,155
	ORACLE CORP 6.25% Matures 11/9/2032	126,000	130,704	133,668
	PENSKE AUTOMOTIVE GROUP INC 3.50% Matures 9/1/2025	117,000	116,901	113,986
	PHILIP MORRIS INTERNATIONAL INC 5.38% Matures 2/15/2033	135,000	135,793	134,392
	QORVO INC 4.38% Matures 10/15/2029	134,000	137,146	126,446
	QUANTA SERVICES INC 2.90% Matures 10/1/2030	131,000	114,452	115,458
	QVC INC 4.75% Matures 2/15/2027	133,000	117,454	111,963
	QVC INC 4.45% Matures 2/15/2025	63,000	59,997	61,961
	REYNOLDS AMERICAN INC 4.45% Matures 6/12/2025	91,000	101,130	89,937
	SABRA HEALTH CARE LP 5.13% Matures 8/15/2026	118,000	111,785	116,130
	SBA COMMUNICATIONS CORP 3.88% Matures 2/15/2027	123,000	123,684	117,231
	SBA COMMUNICATIONS CORP 3.88% Matures 2/15/2027	104,000	107,698	99,122
	SBA COMMUNICATIONS CORP 3.13% Matures 2/1/2029	62,000	53,230	55,268
	SERVICE CORP INTERNATIONAL/US 5.13% Matures 6/1/2029	113,000	122,816	109,924
	SERVICE CORP INTERNATIONAL/US 4.63% Matures 12/15/2027	128,000	120,687	124,127
	SERVICE CORP INTERNATIONAL/US 3.38% Matures 8/15/2030	77,000	65,450	67,104
	SILGAN HOLDINGS INC 4.13% Matures 2/1/2028	124,000	112,428	116,709
	SLM CORP 4.20% Matures 10/29/2025	25,000	25,000	24,321
	SLM CORP 3.13% Matures 11/2/2026	104,000	98,593	96,879
	STARWOOD PROPERTY TRUST INC 4.75% Matures 3/15/2025	118,000	120,294	116,674
	STEEL DYNAMICS INC 5.00% Matures 12/15/2026	123,000	122,282	122,075
	SUNOCO LP / SUNOCO FINANCE CORP 6.00% Matures 4/15/2027	84,000	87,825	83,891
	TEGNA INC 4.63% Matures 3/15/2028	144,000	129,483	130,833
	TEGNA INC 4.63% Matures 3/15/2028	150,000	148,343	136,285
	TELEDYNE TECHNOLOGIES INC 2.75% Matures 4/1/2031	161,000	134,765	137,792
	TELEFLEX INC 4.63% Matures 11/15/2027	126,000	120,258	121,650
	TENET HEALTHCARE CORP 4.25% Matures 6/1/2029	131,000	121,660	121,909
	TENET HEALTHCARE CORP 6.13% Matures 10/1/2028	151,000	139,925	149,717
	TEVA PHARMACEUTICAL FINANCE 3.150% Matures 10/01/2026	125,000	111,078	117,446
	TRANSDIGM INC 5.50% Matures 11/15/2027	132,000	125,764	129,770
	TRAVEL + LEISURE CO 6.00% Matures 4/1/2027	116,000	112,493	115,635
	TRIMBLE INC 4.90% Matures 6/15/2028	111,000	117,895	109,519
	TRIMBLE INC 6.10% Matures 3/15/2033	23,000	23,506	23,825
	UNDER ARMOUR INC 3.25% Matures 6/15/2026	130,000	130,054	123,419
	UNITED RENTALS NORTH AMERICA INC 5.50% Matures 5/15/2027	113,000	114,368	112,120
	UNITED RENTALS NORTH AMERICA INC 5.50% Matures 5/15/2027	41,000	43,821	40,681
	UNITED RENTALS NORTH AMERICA INC 4.00% Matures 7/15/2030	150,000	133,833	135,796
	VERIZON COMMUNICATIONS INC 4.13% Matures 3/16/2027	89,000	103,105	86,775
	VERIZON COMMUNICATIONS INC 4.33% Matures 9/21/2028	34,000	32,924	33,048
	VICI PROPERTIES LP 4.75% Matures 2/15/2028	125,000	121,981	122,082
	WARNERMEDIA HOLDINGS INC 4.28% Matures 3/15/2032	41,000	35,511	35,715

LABORERS' LOCAL #157 PENSION FUND

EIN: 14-6076460 PLAN #001

Schedule H, Line 4i - Schedule Of Assets (Held At End Of Year)

June 30, 2024

(a)	(b) & (c) Identity & Description Of Investment	Quantity	(d) Cost	(e) Current Value
CORPORATE BONDS: (CONTINUED)				
	WESTERN DIGITAL CORP 4.75% Matures 2/15/2026	117,000	121,099	114,568
	WESTERN MIDSTREAM OPERATING LP 3.10% Matures 2/1/2025	81,000	78,500	79,661
	WESTINGHOUSE AIR BRAKE TECH 4.700% Matures 09//15/2028	76,000	83,517	74,567
	WILLIS NORTH AMERICA INC 2.95% Matures 9/15/2029	58,000	50,248	51,944
	WILLIS NORTH AMERICA INC 4.50% Matures 9/15/2028	26,000	30,085	25,252
	WILLIS NORTH AMERICA INC 5.35% Matures 5/15/2033	17,000	16,972	16,665
	WILLIS NORTH AMERICA INC 4.65% Matures 6/15/2027	30,000	29,247	29,461
	ZIMMER BIOMET HOLDINGS INC 5.35% Matures 12/1/2028	78,000	78,003	78,530
	ZIMMER BIOMET HOLDINGS INC 3.05% Matures 1/15/2026	57,000	61,019	55,032
	CARLYLE CREDIT INCOME FUND 8.75% (CCIA) Matures 10/31/2028	7,500	184,500	193,050
	CRESCENT CAP BDC INC NT CAL 26 5% (FCRX) Matures 05/25/2026	4,500	104,473	108,225
	EAGLE POINT INCOME CO INC NT 7.75% (EICB) Matures 07/31/2028	7,650	189,506	189,858
	EAGLE PT INCOME CO INC 8% SER-C (EICC) Matures 4/30/2029	5,000	123,750	124,900
	GREAT ELM CAPITA 5.875% (GECCO) Matures 6/30/2026	3,500	86,800	84,175
	GREAT ELM CAPITAL CORP 6.75% (GECCM) Matures 01/31/2025	7,500	152,126	187,276
	NEWTEKONE INC 5.50% NT 2026 (NEWTZ) Matures 02/01/2026	2,800	69,720	67,872
	OXFORD LANE CAP CORP 6.25% NT 27 (OXLCP) Matures 02/28/2027	11,000	253,423	258,390
	OXFORD LANE CAPITAL CORP 5.00% (OCLCP) Matures 01/31/2027	5,750	142,600	133,400
	PRIORIT INCOME FUND 6.25% SER-G (PRIF.G) Matures 06/30/2026	3,425	84,940	81,515
	TERRA INCOME FUND 6 LLC 7% NT 26 (TFSA) Matures 03/31/2026	3,500	86,800	84,319
	TOTAL CORPORATE BONDS		<u>12,447,397</u>	<u>12,247,960</u>
ALTERNATIVES:				
	CPG FOCUSED ACCESS FUND, LLC	209,796	4,594,963	5,594,222
	ENTRUST SPECIAL OPPORTUNITIES FUND III LTD.		792,976	731,241
	INTERCONTINENTAL U.S. REAL ESTATE INVESTMENT FUND, LLC	1,361	1,400,000	1,609,239
	IRONWOOD INSTITUTIONAL MULTI-STRATEGY FUND, LLC	2,915	3,407,047	3,471,259
	NB CROSSROADS PRIVATE MARKETS FUND V, LP		1,828,624	3,265,070
	SIGULER GUFF DISTRESSED RE OPPORTUNITIES FUND II (E), LP		260,876	350,228
	SIGULER GUFF SMALL BUYOUT OPPORTUNITIES FUND III, LP		1,064,406	2,160,742
	SIGULER GUFF SMALL BUYOUT OPPORTUNITIES FUND V, LP		993,889	1,193,008
	TOTAL ALTERNATIVES		<u>14,342,781</u>	<u>18,375,009</u>
INVESTMENT ENTITY:				
	PROLOAN BOND FUND, LLC	2,763	4,640,515	4,703,561
	TOTAL INVESTMENT ENTITY		<u>4,640,515</u>	<u>4,703,561</u>
COMMON COLLECTIVE TRUSTS:				
	ASB ALLEGIANCE REAL ESTATE FUND	873	1,309,645	1,241,083
	RAINIER INT'L SMALL CAP EQUITY COLLECTIVE TRUST FUND	61,214	1,250,000	1,496,082
	TOTAL COMMON COLLECTIVE TRUSTS		<u>2,559,645</u>	<u>2,737,165</u>

LABORERS' LOCAL #157 PENSION FUND

EIN: 14-6076460 PLAN #001

Schedule H, Line 4i - Schedule Of Assets (Held At End Of Year)

June 30, 2024

(a)	(b) & (c)		(d)	(e)
	Identity & Description Of Investment	Quantity	Cost	Current Value
	GROUP ANNUITY CONTRACT:			
	ULLICO SEPARATE ACCOUNT J	115,535	<u>1,709,591</u>	<u>2,109,192</u>
	TOTAL GROUP ANNUITY CONTRACT		<u>1,709,591</u>	<u>2,109,192</u>
	CASH EQUIVALENTS:			
	*MORGAN STANLEY BANK N.A.	1,300,945	<u>1,300,945</u>	<u>1,300,945</u>
	TOTAL CASH EQUIVALENTS		<u>1,300,945</u>	<u>1,300,945</u>
	GRAND TOTAL		<u>\$ 79,765,819</u>	<u>\$ 90,260,656</u>

*Party-In-Interest

SECTION 2. PLAN DESCRIPTION (CONT'D)

CENSUS OF ACTIVE PARTICIPANTS

Table 2. depicts the active participants as of 7/1/2023.

TABLE 2A.
CENSUS OF ACTIVE PARTICIPANTS

AGE	YEARS OF PENSION SERVICE TO 7/1/2023											TOTAL
	0-4	5-9	10-14	15-19	20-24	25-29	30-34	35-39	40-44	45-49	50&OVER	
20-24	24	4	1	0	0	0	0	0	0	0	0	29
25-29	47	19	2	2	0	0	0	0	0	0	0	70
30-34	28	18	15	11	4	0	0	0	0	0	0	76
35-39	21	13	14	16	10	1	1	0	0	0	0	76
40-44	23	4	8	12	5	11	1	1	2	0	1	68
45-49	16	11	8	7	6	8	10	7	2	1	1	77
50-54	24	8	10	9	5	2	6	3	2	2	1	72
55-59	6	4	5	4	4	4	2	2	1	0	1	33
60-64	3	3	4	1	0	1	2	0	0	0	0	14
65-69	1	0	0	0	0	0	0	0	0	0	0	1
70-74	0	0	0	0	0	0	0	0	0	0	0	0
75+	0	0	0	0	0	0	0	0	0	0	0	0
TOTAL	193	84	67	62	34	27	22	13	7	3	4	516

The average age of the active participant is age 40. The average years of pension service is 11 years.

Attachment to 2023 Form 5500

Schedule MB, line 4a - Illustration Supporting Actuarial Certification of Status

Plan Name Laborers Local #157 Pension Fund **EIN:** 14-6076460

Plan Sponsor's Name Laborers Local 157 Pension Fund **PN:** 001

Illustrate the details providing the actuarial certification of status.

The Plan is neither in endangered nor critical status. The Pension Fund is approximately 101.4% funded based upon actuarial value of assets.

SCHEDULE B ATTACHMENT
CONSTRUCTION AND COMMON LABORERS LOCAL 157 PENSION FUND
E.I.N. 14-6076460 PLAN NUMBER 001
AMORTIZATION RECORD IN SUPPORT OF FUNDING STANDARD ACCOUNT FOR 2023

AMORTIZATION CHARGES	DATE OF FIRST CHARGE OR CREDIT	YEARS REMAINING	OUTSTANDING BALANCE BEGINNING OF YEAR	AMORTIZATION CHARGE OR CREDIT
Plan Amendment	07/01/1996	3	137,639	48,687
Assumption Change	07/01/1996	3	132,488	46,865
Plan Amendment	07/01/1997	4	61,036	16,673
Assumption Change	07/01/1997	4	328,987	89,870
Plan Amendment	07/01/1998	5	344,254	77,441
Assumption Change	07/01/1998	5	485,641	109,247
Plan Amendment	07/01/1999	6	532,534	102,729
Plan Amendment	07/01/2000	7	1,507,341	256,397
Assumption Change	07/01/2000	7	1,852,371	315,086
Plan Amendment	07/01/2001	8	75,600	11,572
Assumption Change	07/01/2003	10	343,711	44,474
Plan Amendment	07/01/2007	14	1,446,700	148,764
Assumption Change	07/01/2007	14	2,185,454	224,730
Actuarial Loss	07/01/2009	1	671,505	671,505
Actuarial Loss	07/01/2012	4	439,384	120,028
Actuarial Loss	07/01/2013	5	197,630	44,457
Actuarial Loss	07/01/2016	8	2,230,422	341,402
Actuarial Loss	07/01/2017	9	536,042	74,983
Actuarial Loss	07/01/2018	10	1,913,846	247,641
Assumption Change	07/01/2019	11	6,287,989	759,998
Actuarial Loss	07/01/2020	12	3,817,393	434,436
Actuarial Loss	07/01/2022	14	94,541	9,722
Assumption Change	07/01/2022	14	6,149,207	632,321
Total Charges			31,771,713	4,829,029
AMORTIZATION CREDITS				
Assumption Change	07/01/1994	1	82,388	82,388
Method Change	07/01/1996	3	2,508	887
Plan Amendment	07/01/2003	10	49,453	6,399
Assumption Change	07/01/2009	1	245,366	245,366
Actuarial Gain	07/01/2010	2	205,096	105,656
Actuarial Gain	07/01/2011	3	637,196	225,397
Actuarial Gain	07/01/2014	6	190,284	36,707
Actuarial Gain	07/01/2015	7	22,516	3,830
Actuarial Gain	07/01/2019	11	1,125,462	136,029
Assumption Change	07/01/2020	12	2,015,825	229,410
Actuarial Gain	07/01/2021	13	1,107,477	119,467
Actuarial Gain	07/01/2023	15	2,052,040	202,116
Total Credits			7,735,613	1,393,653

ASSUMPTIONS

ASSUMPTIONS

We suggest and have used in this valuation the following assumptions:

1. MORTALITY. The mortality table we have employed in this valuation is the RP 2000M Mortality Table with projection Scale AA.
2. INVESTMENT YIELD FOR VALUATION PURPOSES. We have assumed that the plan funds will earn 6.25% annual compound interest in the future.
3. INVESTMENT YIELD FOR THE PURPOSES OF ACCUMULATED PLAN BENEFITS AND EMPLOYER WITHDRAWAL LIABILITY. Same as the investment yield utilized for valuation purposes, 6.25%.
4. TURNOVER. We have assumed that no terminations of employment, other than death, disability or pension, will occur in the future.
5. DISABILITY. We have employed the 1973 Disability Model, Transactions of Society of Actuaries, XXVI, in assuming the rate of disability in the future.
6. FUTURE WORK YEAR. We have assumed that each active participant will work 1,200 hours per year in the future. Prior to 7/1/2020, we had assumed that each active participant will work 1,500 hours per year in the future.
7. AGE AT PENSION. We have assumed that each active will elect pension at age 57, or when eligible if later. We have assumed separated vested participant will elect pension at age 60, or when eligible, if later.
8. ADMINISTRATION EXPENSES. We have assumed \$275,000 will be the annual cost of administration.
9. NUMBER OF ACTIVE PARTICIPANTS. We have assumed that the number of active participants will remain constant from here forward with replacements being made immediately upon pension or death
10. ASSET VALUATION METHOD. Five-year smoothing of future investment gains and losses.
11. FUNDING METHOD. Entry Age Normal.

Schedule R, line 13d - Collective Bargaining Agreement Expiration Date

Laborers' Local #157 Pension Fund

EIN: 14-6076460

PN: 001

The Laborers' Local #157 Pension Fund was covered by four Collective Bargaining Agreements which expire on March 31, 2025, April 30, 2025, December 31, 2025 and April 30, 2027.

Schedule R, line 13e - Information on Contribution Rates and Base Units

Laborers' Local #157 Pension Fund

EIN: 14-6076460

PN: 001

The Laborers' Local #157 Pension Fund's hourly contribution rates was \$11.25 per hour based on work under the Building agreement and \$13.66 per hour based on work under the Highway & Heavy Construction, Renewable Energy and the Shaft and Tunnel agreements.

LABORERS' LOCAL #157 PENSION FUND

EIN: 14-6076460 PN#001

Schedule H, Line 4j - Schedule Of Reportable Transactions

June 30, 2024

(a)	(b)	(c)	(d)	(g)	(h)	(i)
PARTY INVOLVED	DESCRIPTION OF ASSETS	PURCHASE PRICE	SELLING PRICE	COST OF ASSET	CURRENT VALUE OF ASSET ON TRANSACTION DATE	NET GAIN (LOSS)
	FEDERATED HERMES GOVT OBL PRM	\$ 1,279,557	\$ -	\$ -	\$ 1,279,557	\$ -
	FEDERATED HERMES GOVT OBL PRM	-	3,308,750	3,308,750	3,308,750	-
		<u>\$ 1,279,557</u>	<u>\$ 3,308,750</u>	<u>\$ 3,308,750</u>	<u>\$ 4,588,307</u>	<u>\$ -</u>

**SCHEDULE MB
(Form 5500)**Department of the Treasury
Internal Revenue ServiceDepartment of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

**Multiemployer Defined Benefit Plan and Certain
Money Purchase Plan Actuarial Information**This schedule is required to be filed under section 104 of the Employee
Retirement Income Security Act of 1974 (ERISA) and section 6059 of the
Internal Revenue Code (the Code).▶ **File as an attachment to Form 5500 or 5500-SF.**

OMB No. 1210-0110

2023**This Form is Open to Public
Inspection**

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

▶ **Round off amounts to nearest dollar.**▶ **Caution:** A penalty of \$1,000 will be assessed for late filing of this report unless reasonable cause is established.

A Name of plan LABORERS' LOCAL #157 PENSION FUND	B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF LABORERS LOCAL 157 PENSION FUND	D Employer Identification Number (EIN) 14-6076460

E Type of plan: (1) ☒ Multiemployer Defined Benefit (2) ☐ Money Purchase (see instructions)**1a** Enter the valuation date: Month 07 Day 01 Year 2023**b** Assets

(1) Current value of assets	1b(1)	84,050,743
(2) Actuarial value of assets for funding standard account.....	1b(2)	88,080,647
c (1) Accrued liability for plan using immediate gain methods	1c(1)	90,922,429
(2) Information for plans using spread gain methods:		
(a) Unfunded liability for methods with bases	1c(2)(a)	0
(b) Accrued liability under entry age normal method.....	1c(2)(b)	0
(c) Normal cost under entry age normal method	1c(2)(c)	0
(3) Accrued liability under unit credit cost method.....	1c(3)	86,794,385
d Information on current liabilities of the plan:		
(1) Amount excluded from current liability attributable to pre-participation service (see instructions).....	1d(1)	0
(2) "RPA '94" information:		
(a) Current liability	1d(2)(a)	172,284,727
(b) Expected increase in current liability due to benefits accruing during the plan year	1d(2)(b)	6,446,555
(c) Expected release from "RPA '94" current liability for the plan year	1d(2)(c)	0
(3) Expected plan disbursements for the plan year.....	1d(3)	5,431,235

Statement by Enrolled Actuary

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

**SIGN
HERE**

Signature of actuary

FRANK IANNUCCI

Type or print name of actuary

SUMMIT ACTUARIAL SERVICES, LLC

Firm name

03/31/2025

Date

2305241

Most recent enrollment number

845-567-6090

Telephone number (including area code)

11 RACQUET ROAD
NEWBURGH NY 12550
Address of the firmIf the actuary has not fully reflected any regulation or ruling promulgated under the statute in completing this schedule, check the box and see instructions ☐

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

Schedule MB (Form 5500) 2023
v. 230728

2 Operational information as of beginning of this plan year:

a Current value of assets (see instructions)	2a	84,050,743
b "RPA '94" current liability/participant count breakdown:	(1) Number of participants	(2) Current liability
(1) For retired participants and beneficiaries receiving payment	375	70,144,773
(2) For terminated vested participants	149	20,379,707
(3) For active participants:		
(a) Non-vested benefits		7,096,954
(b) Vested benefits		74,663,293
(c) Total active	516	81,760,247
(4) Total	1,040	172,284,727
c If the percentage resulting from dividing line 2a by line 2b(4), column (2), is less than 70%, enter such percentage	2c	48.78 %

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

(a) Date (MM/DD/YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM/DD/YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees
01/31/2024	7,862,753	0			
07/31/2024	1,240,216	0			
Totals ▶			3(b)	9,102,969	3(c)
					0
(d) Total withdrawal liability amounts included in line 3(b) total					3(d)
					0

4 Information on plan status:

a Funded percentage for monitoring plan's status (line 1b(2) divided by line 1c(3))	4a	101.4 %
b Enter code to indicate plan's status (see instructions for attachment of supporting evidence of plan's status). If entered code is "N," go to line 5	4b	N
c Is the plan making the scheduled progress under any applicable funding improvement or rehabilitation plan?		☐ Yes ☐ No
d If the plan is in critical status or critical and declining status, does line 1(c) reflect any benefit reductions for the first time (see instructions)?		☐ Yes ☐ No
e If line d is "Yes," enter the reduction in liability resulting from the reduction in benefits (see instructions), measured as of the valuation date	4e	
f If the plan is in critical status or critical and declining status, and is:	4f	
• Projected to emerge from critical status within 30 years, enter the plan year in which it is projected to emerge;		
• Projected to become insolvent within 30 years, enter the plan year in which insolvency is expected and check here		
• Neither projected to emerge from critical status nor become insolvent within 30 years, enter "9999."		

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

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

j If box h is checked, enter period of use of shortfall method

	5j	
--	-----------	--

k Has a change been made in funding method for this plan year? ☐ Yes ☒ No

l If line k is "Yes," was the change made pursuant to Revenue Procedure 2000-40 or other automatic approval? ☐ Yes ☐ No

m If line k is "Yes," and line l is "No," enter the date (MM/DD/YYYY) of the ruling letter (individual or class) approving the change in funding method

5m

6 Checklist of certain actuarial assumptions:

a Interest rate for "RPA '94" current liability. **6a** 2.85 %

b Rates specified in insurance or annuity contracts

Pre-retirement

Post-retirement

☐ Yes ☒ No ☐ N/A☐ Yes ☒ No ☐ N/A

c Mortality table code for valuation purposes:

(1) Males

6c(1)

A

A

(2) Females

6c(2)

A

A

d Valuation liability interest rate

6d

6.25 %

6.25 %

e Salary scale

6e

0.00 %

☐ N/A

f Withdrawal liability interest rate:

(1) Type of interest rate

6f(1)☒ Single rate☐ ERISA 4044☐ Other☐ N/A

(2) If "Single rate" is checked in (1), enter applicable single rate

6f(2)

6.25 %

g Estimated investment return on actuarial value of assets for year ending on the valuation date

6g

7.5 %

h Estimated investment return on current value of assets for year ending on the valuation date

6h

6.9 %

i Expense load included in normal cost reported in line 9b

6i☐ N/A

(1) If expense load is described as a percentage of normal cost, enter the assumed percentage

6i(1)

%

(2) If expense load is a dollar amount that varies from year to year, enter the dollar amount included in line 9b

6i(2)

275,000

(3) If neither (1) nor (2) describes the expense load, check the box

6i(3)☐**7** New amortization bases established in the current plan year:

(1) Type of base	(2) Initial balance	(3) Amortization Charge/Credit
1	-2,052,040	-202,116

8 Miscellaneous information:

a If a waiver of a funding deficiency has been approved for this plan year, enter the date (MM/DD/YYYY) of the ruling letter granting the approval

8a

b Demographic, benefit, and contribution information

(1) Is the plan required to provide a projection of expected benefit payments? (See instructions) If "Yes," see instructions for required attachment.

☐ Yes ☒ No

(2) Is the plan required to provide a Schedule of Active Participant Data? (See instructions).

☒ Yes ☐ No

(3) Is the plan required to provide a projection of employer contributions and withdrawal liability payments? (See instructions) If "Yes," attach a schedule.

☐ Yes ☒ No

c Are any of the plan's amortization bases operating under an extension of time under section 412(e) (as in effect prior to 2008) or section 431(d) of the Code?

☐ Yes ☒ No

d If line c is "Yes," provide the following additional information:

(1) Was an extension granted automatic approval under section 431(d)(1) of the Code?

☐ Yes ☐ No

(2) If line 8d(1) is "Yes," enter the number of years by which the amortization period was extended.

8d(2)

(3) Was an extension approved by the Internal Revenue Service under section 412(e) (as in effect prior to 2008) or 431(d)(2) of the Code?

☐ Yes ☐ No

(4) If line 8d(3) is "Yes," enter number of years by which the amortization period was extended (not including the number of years in line (2)).

8d(4)

(5) If line 8d(3) is "Yes," enter the date of the ruling letter approving the extension

8d(5)

(6) If line 8d(3) is "Yes," is the amortization base eligible for amortization using interest rates applicable under section 6621(b) of the Code for years beginning after 2007?

☐ Yes ☐ No

e If box 5h is checked or line 8c is "Yes," enter the difference between the minimum required contribution for the year and the minimum that would have been required without using the shortfall method or extending the amortization base(s)

8e

9 Funding standard account statement for this plan year:

Charges to funding standard account:

a Prior year funding deficiency, if any.....

9a

0

b Employer's normal cost for plan year as of valuation date

9b

2,629,820

c Amortization charges as of valuation date:

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

9c(1)

31,771,713

4,829,029

(2) Funding waivers

9c(2)

0

0

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

9c(3)

0

0

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

9d

457,584

e Total charges. Add lines 9a through 9d.....

9e

7,916,433

Credits to funding standard account:

f Prior year credit balance, if any

9f

21,194,318

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

9g

9,102,969

h Amortization credits as of valuation date

9h

7,735,613

1,393,653

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

9i

1,657,459

j Full funding limitation (FFL) and credits:

(1) ERISA FFL (accrued liability FFL).....

9j(1)

10,095,350

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

9j(2)

71,829,154

(3) FFL credit

9j(3)

0

k (1) Waived funding deficiency.....

9k(1)

0

(2) Other credits

9k(2)

0

l Total credits. Add lines 9f through 9i, 9j(3), 9k(1), and 9k(2)

9l

33,348,399

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

9m

25,431,966

n Funding deficiency: If line 9e is greater than line 9l, enter the difference

9n

o Current year's accumulated reconciliation account:

(1) Due to waived funding deficiency accumulated prior to the current plan year

9o(1)

0

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

(a) Reconciliation outstanding balance as of valuation date

9o(2)(a)

0

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

9o(2)(b)

0

(3) Total as of valuation date

9o(3)

0

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

10

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

☐ Yes ☒ No