

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 08/01/2023 and ending 07/31/2024	
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) _____
B	This return/report is: ☐ the first return/report ☐ the final return/report ☐ an amended return/report ☐ a short plan year return/report (less than 12 months)
C	If the plan is a collectively-bargained plan, check here.▶ ☒
D	Check box if filing under: ☒ Form 5558 ☐ automatic extension ☐ the DFVC program ☐ special extension (enter description)
E	If this is a retroactively adopted plan permitted by SECURE Act section 201, check here.▶ ☐

Part II	Basic Plan Information—enter all requested information
1a	Name of plan EMPLOYERS AND LABORERS LOCALS 100 & 397 PENSION FUND
1b	Three-digit plan number (PN) ▶ 001
1c	Effective date of plan 08/01/1967
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) EMPLOYERS AND LABORERS LOCALS 100 & 397 PENSION FUND 4940 WASHINGTON BLVD SAINT LOUIS, MO 63108-1621
2b	Employer Identification Number (EIN) 37-6085017
2c	Plan Sponsor's telephone number 314-367-6555
2d	Business code (see instructions) 237990

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.	04/28/2025	ROBERT GREEN
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	Filed with authorized/valid electronic signature.	04/29/2025	DONNA RICHTER
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

3a Plan administrator's name and address ☒ Same as Plan Sponsor	3b Administrator's EIN 3c Administrator's telephone number
4 If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report: a Sponsor's name c Plan Name	4b EIN 4d PN
5 Total number of participants at the beginning of the plan year	5 841
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) 395 6a(2) 382 6b 313 6c 91 6d 786 6e 75 6f 861 6g(1) 6g(2) 6h 26
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	7 190

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

For calendar plan year 2023 or fiscal plan year beginning 08/01/2023 and ending 07/31/2024

A Name of plan

EMPLOYERS AND LABORERS LOCALS 100 & 397 PENSION FUND

B Three-digit plan number (PN)

001

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

EMPLOYERS AND LABORERS LOCALS 100 & 397 PENSION FUND

D Employer Identification Number (EIN)

37-6085017

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.

1 Coverage Information:

(a) Name of insurance carrier

PRINCIPAL 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
42-0127290	61271	831738	0	08/01/2023	07/31/2024

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	37549

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

PRINCIPAL LIFE INSURANCE COMAPNY711 HIGH STREET
DES MOINES, IA 50392

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
	37549	ASSET MANAGEMENT FEE	0

(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	3227242

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 ▶ IMMEDIATE PARTICIPATION FUND

b Balance at the end of the previous year **7b** 3639725

c Additions: (1) Contributions deposited during the year **7c(1)**
 (2) Dividends and credits **7c(2)** -311340
 (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)** -311340**d** Total of balance and additions (add lines **7b** and **7c(6)**) **7d** 3328385**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)** 101143
 (4) Other (specify below) **7e(4)**

(5) Total deductions **7e(5)** 101143**f** Balance at the end of the current year (subtract line **7e(5)** from line **7d**) **7f** 3227242

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)	0
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)	0
(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)	0
(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 08/01/2023 and ending 07/31/2024

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 EMPLOYERS AND LABORERS LOCALS 100 & 397 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 EMPLOYERS AND LABORERS LOCALS 100 & 397 PENSION FUND	D Employer Identification Number (EIN) 37-6085017

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

1a Enter the valuation date: Month 08 Day 01 Year 2023	
b Assets	
(1) Current value of assets	1b(1) 115200617
(2) Actuarial value of assets for funding standard account	1b(2) 115200617
c (1) Accrued liability for plan using immediate gain methods	1c(1)
(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) 121462849
(c) Normal cost under entry age normal method	1c(2)(c) 1415919
(3) Accrued liability under unit credit cost method	1c(3) 110491067
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) 183739448
(b) Expected increase in current liability due to benefits accruing during the plan year	1d(2)(b) 6809812
(c) Expected release from "RPA '94" current liability for the plan year	1d(2)(c) 6902959
(3) Expected plan disbursements for the plan year	1d(3) 6902959

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	04/14/2025
Signature of actuary KEITH KOWALCZYK	Date 23-02812
Type or print name of actuary EKON BENEFITS	Most recent enrollment number 314-367-6555
Firm name 4940 WASHINGTON BLVD. ST. LOUIS, MO 63108	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	115200617
b "RPA '94" current liability/participant count breakdown:	(1) Number of participants	(2) Current liability
(1) For retired participants and beneficiaries receiving payment	390	96015572
(2) For terminated vested participants	56	16147676
(3) For active participants:		
(a) Non-vested benefits		9672024
(b) Vested benefits		61904176
(c) Total active	395	71576200
(4) Total	841	183739448
c If the percentage resulting from dividing line 2a by line 2b(4), column (2), is less than 70%, enter such percentage	2c	62.69 %

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
03/15/2024	6464180	0			
Totals ▶			3(b)	6464180	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	104.2 %
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		2.91 %
	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)	9P21	9P21
(2) Females	6c(2)	9FP21	9FP21
d Valuation liability interest rate	6d	6.75 %	6.75 %
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)	5.36 %	
g Estimated investment return on actuarial value of assets for year ending on the valuation date	6g	5.6 %	
h Estimated investment return on current value of assets for year ending on the valuation date	6h	5.6 %	
i Expense load included in normal cost reported in line 9b	6i	☐ N/A	
(1) If expense load is described as a percentage of normal cost, enter the assumed percentage	6i(1)	%	
(2) If expense load is a dollar amount that varies from year to year, enter the dollar amount included in line 9b	6i(2)	150000	
(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

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	6182665

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)		
9c(2)		
9c(3)		

d Interest as applicable on lines 9a, 9b, and 9c**9d** 417330**e** Total charges. Add lines 9a through 9d**9e** 6599995**Credits to funding standard account:****f** Prior year credit balance, if any**9f** 27176943**g** Employer contributions. Total from column (b) of line 3**9g** 6464180**h** Amortization credits as of valuation date**9h**

Outstanding balance

i Interest as applicable to end of plan year on lines 9f, 9g, and 9h**9i** 2000155**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)**9j(2)****9j(3)****k (1)** Waived funding deficiency**9k(1)****(2)** Other credits**9k(2)****l** Total credits. Add lines 9f through 9i, 9j(3), 9k(1), and 9k(2)**9l** 35641278**m** Credit balance: If line 9l is greater than line 9e, enter the difference**9m** 29041283**n** Funding deficiency: If line 9e is greater than line 9l, enter the difference**9n****o** Current year's accumulated reconciliation account:**(1)** Due to waived funding deficiency accumulated prior to the current plan year**9o(1)****(2)** Due to amortization bases extended and amortized using the interest rate under section 6621(b) of the Code:**(a)** Reconciliation outstanding balance as of valuation date**9o(2)(a)****(b)** Reconciliation amount (line 9c(3) balance minus line 9o(2)(a))**9o(2)(b)** 0**(3)** Total as of valuation date**9o(3)** 0**10** Contribution necessary to avoid an accumulated funding deficiency. (see instructions.)**10****11** Has a change been made in the actuarial assumptions for the current plan year? If "Yes," see instructions☐ Yes ☒ No

SCHEDULE 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 08/01/2023 and ending 07/31/2024

A Name of plan EMPLOYERS AND LABORERS LOCALS 100 & 397 PENSION FUND	B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 EMPLOYERS AND LABORERS LOCALS 100 & 397 PENSION FUND	D Employer Identification Number (EIN) 37-6085017

Part I

Service Provider Information (see instructions)

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

1

Information on Persons Receiving Only Eligible Indirect Compensation

- a

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

☒

Yes

☐

No
- b

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

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation	
BNYM MELLON	201 WASHINGTON STREET 15TH FLOOR BOSTON, MA 02108
25-6078093	

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation	
BPEA PRIVATE EQUITY	20 CUSTOM HOUSE STREET SUITE 610 BOSTON, MA 02110

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation	
ELMTREE FUNDS	120 S. CENTRAL AVE. SUITE 300 ST. LOUIS, MO 63105
84-4414708	

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation	
GREAT GRAY TRUST COMPANY, LLC	6725 VIA AUSI PARKWAY SUITE 260 LAS VEGAS, NV 89119

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

HARBOURVEST PARTNERS LP

ONE FINANCIAL CENTER
BOSTON, MA 02111

74-3130888

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

MESIROW INSTITUTIONAL INVST MGMT

88-0612424

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

RREEF AMERICA LLC

58-2364506

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

SEI TRUST COMPANY

1 FREEDOM VALLEY DRIVE
PO BOX 1100
OAKS, PA 02110

06-1271230

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

GLOBAL TRUST COMPANY

12 GILL STREET
SUITE 2600
WOBURN, MA 01801

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

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

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

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)

COMMERCE TRUST COMAPNY

8000 FORSYTH BLVD
6TH FLOOR
ST. LOUIS, MO 63105

48-0962626

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
19 28 33 50 59 60 63	NONE	64004	Yes ☒ No ☐	Yes ☐ No ☒	3264	Yes ☐ No ☒

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

MONETARY MANAGEMENT GROUP, INC.

13537 BARRETT PARKWAY DRIVE
SUITE 325
BALLWIN, MO 63021

43-1581414

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 51	NONE	60019	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

ULLICO INVESTMENT ADVISORS INC.

8403 COLESVILLE ROAD
13TH FLOOR
SILVER SPRING, MD 20910

52-6435649

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 51	NONE	54512	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)

EKON BENEFITS

4940 WASHINGTON BLVD
ST. LOUIS, MO 63108

43-1317863

(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 15 17 38 50	NONE	52189	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

MARQUETTE ASSOCIATES

180 NORTH LASALLE STREET
SUITE 3500
CHICAGO, IL 60601

36-3485298

(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 51	NONE	46304	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

SCHEFFEL BOYLE

143 N. KANSAS ST.
EDWARDSVILLE, IL 62025

37-1206530

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
10 50	NONE	39750	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)

PRINCIPAL LIFE INSURANCE COMPANY

42-0127290

(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?
32 51	NONE	0	Yes ☒ No ☐	Yes ☐ No ☒	37549	Yes ☐ No ☒

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

CAVANAGH & O'HARA LLP

101 W. VANDALIA STREET
SUITE 245
EDWARDSVILLE, IL 62025

37-1259635

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
29 50	NONE	31969	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
PRINCIPAL LIFE INSURANCE COMPANY	32 51	37549

(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.
PRINCIPAL LIFE INSURANCE COMPANY 42-0127290	MANAGEMENT FEE DEDUCTED FROM SEPARATE ACCOUNT ASSETS; THE TOTAL MANAGEMENT EXPENSE FEE IS 1.10%.

(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 **08/01/2023** and ending **07/31/2024**

A Name of plan EMPLOYERS AND LABORERS LOCALS 100 & 397 PENSION FUND	B Three-digit plan number (PN) ▶ 001
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C Plan or DFE sponsor's name as shown on line 2a of Form 5500 EMPLOYERS AND LABORERS LOCALS 100 & 397 PENSION FUND	D Employer Identification Number (EIN) 37-6085017
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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: **AFL-CIO BUILDING INVESTMENT TRUST**

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

c EIN-PN 52-6328901-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 1647907
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a Name of MTIA, CCT, PSA, or 103-12 IE: **MACKAY SHIELDS CORE PLUS BOND CIT**

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

c EIN-PN 47-1818241-076	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 11848224
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a Name of MTIA, CCT, PSA, or 103-12 IE: **AFL-CIO SL STOCK INDEX FUND**

b Name of sponsor of entity listed in (a): **BNYM MELLON**

c EIN-PN 25-6078093-340	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 12594064
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a Name of MTIA, CCT, PSA, or 103-12 IE: **ULLICO INFRASTRUCTURE TAX EXEMPT**

b Name of sponsor of entity listed in (a): **ULLICO INVESTMENT ADVISORS, INC.**

c EIN-PN 90-0622302-001	d Entity code E	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 2402071
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a Name of MTIA, CCT, PSA, or 103-12 IE: **HABOURVEST 2018 GLOBAL FEEDER FUND**

b Name of sponsor of entity listed in (a): **HARBOURVEST PARTNERS LLC**

c EIN-PN 98-1404503-001	d Entity code E	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 4221444
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a Name of MTIA, CCT, PSA, or 103-12 IE: **MESIROW COLLECTIVE INVST MST TRUST**

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

c EIN-PN 82-0633167-105	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 6077197
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a Name of MTIA, CCT, PSA, or 103-12 IE: **PRINCIPAL REAL ESTATE INVESTMENT**

b Name of sponsor of entity listed in (a): **PRINCIPAL LIFE INSURANCE COMPANY**

c EIN-PN 42-0127290-027	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 3227242
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a Name of MTIA, CCT, PSA, or 103-12 IE: **AFL-CIO SL MID CAP STOCK INDEX FUND**

b Name of sponsor of entity listed in (a): **BNY MELLON**

c EIN-PN 25-6078093-341	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 3904928
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a Name of MTIA, CCT, PSA, or 103-12 IE: **NEUBERGER BERMAN US EQ IND PUTWRITE**

b Name of sponsor of entity listed in (a): **NEUBERGER BERMAN INVESTMENT ADVISERS LLC**

c EIN-PN 81-4341513-001	d Entity code E	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 1101060
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a Name of MTIA, CCT, PSA, or 103-12 IE: **PARAMETRIC DEFENSIVE EQ FUND LLC**

b Name of sponsor of entity listed in (a): **PARAMETRIC PORTFOLIO ASSOCIATES LLC**

c EIN-PN 45-2531297-001	d Entity code E	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 1130133
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a Name of MTIA, CCT, PSA, or 103-12 IE: **CC&L Q EMERGING MARKETS EQUITY FUND**

b Name of sponsor of entity listed in (a): **CONNOR, CLARK & LUNN INVESTMENT MANAGEMENT LTD**

c EIN-PN 98-1299598-001	d Entity code E	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 2123084
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a Name of MTIA, CCT, PSA, or 103-12 IE:

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

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

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

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

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

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

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

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

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

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

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

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

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

a Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
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 08/01/2023 and ending 07/31/2024		
A Name of plan EMPLOYERS AND LABORERS LOCALS 100 & 397 PENSION FUND	B Three-digit plan number (PN) ▶	001
C Plan sponsor's name as shown on line 2a of Form 5500 EMPLOYERS AND LABORERS LOCALS 100 & 397 PENSION FUND	D Employer Identification Number (EIN) 37-6085017	

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	581774	524634
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	622781	595335
(2) Participant contributions	1b(2)		
(3) Other	1b(3)	280706	274180
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	4577378	1740445
(2) U.S. Government securities	1c(2)	5931414	8573879
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)	6201494	6594332
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)	12143571	13693542
(5) Partnership/joint venture interests	1c(5)	7433279	9591516
(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)	31285367	36072320
(10) Value of interest in pooled separate accounts	1c(10)	3639725	3227242
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities	1c(12)	9728623	10977792
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	32569658	33644945
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other	1c(15)	611327	490021

1d Employer-related investments:		(a) Beginning of Year	(b) End of Year
(1) Employer securities	1d(1)		
(2) Employer real property	1d(2)		
e Buildings and other property used in plan operation	1e		
f Total assets (add all amounts in lines 1a through 1e)	1f	115607097	126000183
Liabilities			
g Benefit claims payable	1g		
h Operating payables	1h	50240	43715
i Acquisition indebtedness	1i		
j Other liabilities	1j	430371	77586
k Total liabilities (add all amounts in lines 1g through 1j)	1k	480611	121301
Net Assets			
l Net assets (subtract line 1k from line 1f)	1l	115126486	125878882

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)	6388679	
(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)		6388679
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)		
(B) U.S. Government securities	2b(1)(B)		
(C) Corporate debt instruments	2b(1)(C)		
(D) Loans (other than to participants)	2b(1)(D)		
(E) Participant loans	2b(1)(E)		
(F) Other	2b(1)(F)	987411	
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		987411
(2) Dividends: (A) Preferred stock	2b(2)(A)		
(B) Common stock	2b(2)(B)	255932	
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	550878	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		806810
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)	5560563	
(B) Aggregate carrying amount (see instructions)	2b(4)(B)	4278604	
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)		1281959
(5) Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)		
(B) Other	2b(5)(B)	1267648	
(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)		3898831
(7) Net investment gain (loss) from pooled separate accounts.....	2b(7)		-311340
(8) Net investment gain (loss) from master trust investment accounts.....	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities.....	2b(9)		569620
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		3576978
c Other income	2c		1064
d Total income. Add all income amounts in column (b) and enter total	2d		18467660

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	7155028	
(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)		7155028
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions)	2g		
h Interest expense	2h		
i Administrative expenses:			
(1) Salaries and allowances	2i(1)		
(2) Contract administrator fees.....	2i(2)	35948	
(3) Recordkeeping fees.....	2i(3)		
(4) IQPA audit fees.....	2i(4)	22250	
(5) Investment advisory and investment management fees	2i(5)	339036	
(6) Bank or trust company trustee/custodial fees	2i(6)	56555	
(7) Actuarial fees	2i(7)	28750	
(8) Legal fees	2i(8)	30981	
(9) Valuation/appraisal fees	2i(9)		
(10) Other trustee fees and expenses	2i(10)	589	
(11) Other expenses	2i(11)	46127	
(12) Total administrative expenses. Add lines 2i(1) through (11)	2i(12)		560236
j Total expenses. Add all expense amounts in column (b) and enter total	2j		7715264

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		10752396
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: SCHEFFEL BOYLE

(2) EIN: 37-1206530

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?	☒		1500000
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 536503.

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 08/01/2023 and ending 07/31/2024

A Name of plan EMPLOYERS AND LABORERS LOCALS 100 & 397 PENSION FUND	B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 EMPLOYERS AND LABORERS LOCALS 100 & 397 PENSION FUND	D Employer Identification Number (EIN) 37-6085017

Part I	Distributions
--------	---------------

All references to distributions relate only to payments of benefits during the plan year.

1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions.....	1	0
2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits): EIN(s): 43-6334070 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	0

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)? If the plan is a defined benefit plan, go to line 8.	☐ Yes ☒ No ☐ N/A
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 **RCS CONSTRUCTION**

b EIN **37-0861350**

c Dollar amount contributed by employer **397224**

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 **07** 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) **11.40**

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

a Name of contributing employer **KEELEY & SONS**

b EIN **37-0628133**

c Dollar amount contributed by employer **341117**

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 **07** 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) **11.40**

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

(1) Contribution rate (in dollars and cents)

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

(1) Contribution rate (in dollars and cents)

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

(1) Contribution rate (in dollars and cents)

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

(1) Contribution rate (in dollars and cents)

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

14 Enter the number of deferred vested and retired participants (inactive participants), as of the beginning of the plan year, whose contributing employer is no longer making contributions to the plan for:		
a The current plan year. Check the box to indicate the counting method used to determine the number of inactive participants: ☒ last contributing employer ☐ alternative ☐ reasonable approximation (see instructions for required attachment)	14a	0
b The plan year immediately preceding the current plan year. ☐ Check the box if the number reported is a change from what was previously reported (see instructions for required attachment)	14b	0
c The second preceding plan year. ☐ Check the box if the number reported is a change from what was previously reported (see instructions for required attachment)	14c	0
15 Enter the ratio of the number of participants under the plan on whose behalf no employer had an obligation to make an employer contribution during the current plan year to:		
a The corresponding number for the plan year immediately preceding the current plan year	15a	0.99
b The corresponding number for the second preceding plan year	15b	0.94
16 Information with respect to any employers who withdrew from the plan during the preceding plan year:		
a Enter the number of employers who withdrew during the preceding plan year	16a	
b If line 16a is greater than 0, enter the aggregate amount of withdrawal liability assessed or estimated to be assessed against such withdrawn employers	16b	
17 If assets and liabilities from another plan have been transferred to or merged with this plan during the plan year, check box and see instructions regarding supplemental information to be included as an attachment..... ☐		

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

18 If any liabilities to participants or their beneficiaries under the plan as of the end of the plan year consist (in whole or in part) of liabilities to such participants and beneficiaries under two or more pension plans as of immediately before such plan year, check box and see instructions regarding supplemental information to be included as an attachment..... ☐

19 If the total number of participants is 1,000 or more, complete lines (a) and (b):

a Enter the percentage of plan assets held as:

Public Equity: _____% Private Equity: _____% Investment-Grade Debt and Interest Rate Hedging Assets: _____%

High-Yield Debt: _____% Real Assets: _____% Cash or Cash Equivalents: _____% Other: _____%

b Provide the average duration of the Investment-Grade Debt and Interest Rate Hedging Assets:

☐ 0-5 years ☐ 5-10 years ☐ 10-15 years ☐ 15 years or more

20 PBGC missed contribution reporting requirements. If this is a multiemployer plan or a single-employer plan that is not covered by PBGC, skip line 20.

a Is the amount of unpaid minimum required contributions for all years from Schedule SB (Form 5500) line 40 greater than zero? ☐ Yes ☐ No

b If line 20a is "Yes," has PBGC been notified as required by ERISA sections 4043(c)(5) and/or 303(k)(4)? Check the applicable box:

☐ Yes.

☐ No. Reporting was waived under 29 CFR 4043.25(c)(2) because contributions equal to or exceeding the unpaid minimum required contribution were made by the 30th day after the due date.

☐ No. The 30-day period referenced in 29 CFR 4043.25(c)(2) has not yet ended, and the sponsor intends to make a contribution equal to or exceeding the unpaid minimum required contribution by the 30th day after the due date.

☐ No. Other. Provide explanation. _____

Part VII IRS Compliance Questions

21a Does the plan satisfy the coverage and nondiscrimination tests of Code sections 410(b) and 401(a)(4) by combining this plan with any other plans under the permissive aggregation rules? ☐ Yes ☒ No

21b If this is a Code section 401(k) plan, check all boxes that apply to indicate how the plan is intended to satisfy the nondiscrimination requirements for employee deferrals and employer matching contributions (as applicable) under Code sections 401(k)(3) and 401(m)(2).

☐ Design-based safe harbor method

☐ "Prior year" ADP test

☐ "Current year" ADP test

☒ N/A

22 If the plan sponsor is an adopter of a pre-approved plan that received a favorable IRS Opinion Letter, enter the date of the Opinion Letter ____/____/____ (MM/DD/YYYY) and the Opinion Letter serial number _____.

EMPLOYERS AND LABORERS
LOCALS 100 & 397 PENSION FUND

REPORT AND FINANCIAL STATEMENTS

JULY 31, 2024

EMPLOYERS AND LABORERS LOCALS 100 & 397
PENSION FUND

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ALTON EDWARDSVILLE BELLEVILLE HIGHLAND
JERSEYVILLE COLUMBIA CARROLLTON

INDEPENDENT AUDITOR'S REPORT

To the Board of Trustees of
Employers and Laborers Local 100 & 397
Pension Fund

Opinion

We have audited the accompanying financial statements of Employers and Laborers Locals 100 & 397 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 July 31, 2024 and 2023, and the related statements of changes in net assets available for benefits for the years then ended, and the related notes to the financial statements.

In our opinion, the financial statements referred to above present fairly, in all material respects, the net assets available for benefits of Employers and Laborers Locals 100 & 397 Pension Fund as of July 31, 2024 and 2023, and the changes in its net assets available for benefits for the years then ended, in accordance with accounting principles generally accepted in the United States of America.

Basis for Opinion

We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of Employers and Laborers Locals 100 & 397 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 Employers and Laborers Locals 100 & 397 Pension Fund's ability to continue as a going concern for one year after the date the financial statements are available to be issued.

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

Auditor's Responsibility for the Audit of the Financial Statements

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

In performing an audit in accordance with generally accepted auditing standards, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of Employers and Laborers Locals 100 & 397 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 Employers and Laborers Locals 100 & 397 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 audit, significant audit findings, and certain internal control-related matters that we identified during the audit.

Supplemental Schedules Required by ERISA

Our audits were conducted for the purpose of forming an opinion on the financial statements as a whole. The supplemental schedules of administrative expenses for the years ended July 31, 2024 and 2023, are presented for purposes of additional analysis and are not a required part of the financial statements. The supplemental schedules, schedules of assets (held at end of year) as of July 31, 2024, and schedule of reportable transactions for the year ended July 31, 2024, are presented for purposes of additional analysis and are not a required part of the financial statements but are supplemental information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audits of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with generally accepted auditing standards.

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

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

Schuffel Boyl

Edwardsville, Illinois

May 5, 2025

EMPLOYERS AND LABORERS LOCALS 100 & 397
PENSION FUND
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
JULY 31, 2024 AND 2023

	<u>2024</u>	<u>2023</u>
ASSETS		
Investments at Fair Value	<u>\$ 124,594,255</u>	<u>\$ 114,110,285</u>
Receivables:		
Employer Contributions	595,335	622,781
Accrued Interest and Dividends	141,829	109,175
Reciprocals Due from Other Funds	<u>132,351</u>	<u>171,531</u>
Total Receivables	<u>869,515</u>	<u>903,487</u>
Other Assets:		
Prepaid Expenses	11,779	11,551
Cash (Non-Interest Bearing)	<u>524,634</u>	<u>581,774</u>
Total Other Assets	<u>536,413</u>	<u>593,325</u>
Total Assets	<u>126,000,183</u>	<u>115,607,097</u>
LIABILITIES		
Accounts Payable	43,715	50,240
Reciprocals Due to Other Funds	77,586	96,790
Due to Brokers	<u>-</u>	<u>333,581</u>
Total Liabilities	<u>121,301</u>	<u>480,611</u>
NET ASSETS AVAILABLE FOR BENEFITS	<u><u>\$ 125,878,882</u></u>	<u><u>\$ 115,126,486</u></u>

The accompanying notes are an integral part of these financial statements.

EMPLOYERS AND LABORERS LOCALS 100 & 397
PENSION FUND
STATEMENTS OF CHANGES IN NET ASSETS
AVAILABLE FOR BENEFITS
FOR THE YEARS ENDED JULY 31, 2024 AND 2023

	<u>2024</u>	<u>2023</u>
ADDITIONS		
Net Investment Income:		
Interest Income	\$ 987,411	\$ 604,917
Net Appreciation in Fair Value Investments	7,597,423	489,374
Dividends and Capital Gain Distributions	806,810	681,935
Gain on Sale of Investments	2,686,273	4,687,363
Other	1,064	888
Total Investment Income	<u>12,078,981</u>	<u>6,464,477</u>
Less, Investment Expenses	<u>(339,036)</u>	<u>(405,405)</u>
Net Investment Income	<u>11,739,945</u>	<u>6,059,072</u>
Contributions:		
Employers	6,080,480	5,839,357
Reciprocals In	743,500	563,985
Reciprocals Out	(429,625)	(492,373)
Refunds - Employers'	(5,676)	(342)
Total Contributions	<u>6,388,679</u>	<u>5,910,627</u>
Total Additions	<u>18,128,624</u>	<u>11,969,699</u>
DEDUCTIONS		
Benefits Paid Directly to Participants	7,155,028	6,934,703
Administrative Expenses	<u>221,200</u>	<u>219,714</u>
Total Deductions	<u>7,376,228</u>	<u>7,154,417</u>
Net Increase	10,752,396	4,815,282
Net Assets Available for Benefits,		
Beginning of Year	<u>115,126,486</u>	<u>110,311,204</u>
End of Year	<u>\$ 125,878,882</u>	<u>\$ 115,126,486</u>

The accompanying notes are an integral part of these financial statements.

EMPLOYERS AND LABORERS LOCALS 100 & 397
PENSION FUND
NOTES TO FINANCIAL STATEMENTS
JULY 31, 2024 AND 2023

NOTE 1. DESCRIPTION OF PLAN

The following description of the Employers and Laborers Locals 100 & 397 Pension Fund (the "Plan") is provided for general information purposes only. Participants should refer to the Plan agreement for more complete information.

General

The Plan is a defined benefit pension plan covering many construction industry members of Locals 100 & 397 Laborers Unions of East St. Louis and Granite City, Illinois. It is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA).

Vesting

Participants are vested in their employer contributions after 10,000 hours or five (5) years of service, where a year of service is 1,000 hours in a plan year.

Pension Benefits

A. Normal

The normal form of pension benefits provides a regular series of income payments to the participant for life, with sixty (60) monthly payments, or the equivalent thereof, payable whether or not the participant lives to receive them.

B. Options

Instead of receiving the retirement benefits under the normal form, the participant may elect to receive the monthly retirement benefit payment under one of the following optional forms which provides for a monthly retirement benefit of equivalent value to the normal form benefits. An election of an optional form must be made prior to the participant's actual retirement date and the terms and conditions of the elected form of payment may not be changed after monthly retirement benefit payments have commenced. The options available are: (1) life annuity, (2) life annuity and ten year certain option, and (3) join and survivor option.

C. Spousal Benefit

If the participant dies prior to retirement, the participant's spouse will be eligible for a monthly survivor benefit if each of the requirements set forth below has been met:

- Participant must be an employee covered by the Plan;
- Participant must have satisfied the requirement for early retirement; and
- Participant must be vested as well.

The monthly benefit payable to the spouse will be the greater of the benefits for a period of sixty (60) months or 50% of the contingent annuitant option effect.

Such benefit will be payable monthly, commencing on the first day of the month following the participant's death and terminating with the last monthly payment preceding the death of the participant's spouse.

EMPLOYERS AND LABORERS LOCALS 100 & 397
PENSION FUND
NOTES TO FINANCIAL STATEMENTS
JULY 31, 2024 AND 2023

NOTE 1. DESCRIPTION OF PLAN (CONT'D)

C. Spousal Benefit (Cont'd)

If the participant dies prior to retirement and the surviving spouse's benefit described above is not applicable, the participant's beneficiary will be entitled to receive a monthly benefit, payable for sixty (60) months, equal to the participant's death benefit.

D. Disability Benefit

The participant will be entitled to a disability benefit if all of the following conditions are fulfilled:

- The participant becomes permanently and totally disabled by bodily injury or sickness and as a result of such disability, the participant is unable to perform any and every duty of a gainful occupation for which the participant is reasonably fitted through training, education or experience; and
- Such disability will be permanent and continuous for the remainder of the participant's lifetime.

The monthly disability benefit payable shall be an amount equal to the monthly pension that the participant has accrued as of the first day of the month immediately preceding the last day the participant was actively at work.

The participant's disability payments will begin as of the date all of the conditions as shown above are fulfilled. The maximum amount of time that disability payments continue is until the participant reaches normal retirement age.

Funding Policy

The Plan's funding policy is to receive monthly contributions from employers to the Plan, so that all employees' benefits will be fully provided for by the time they retire. Effective August 1, 2023 and 2022, contributions were at a rate of \$11.40 for regular hours, \$17.10 for time and one-half and \$22.80 for double time per hour. The employer's contributions for 2024 and 2023 exceeded the minimum funding requirements of ERISA.

Although it has not expressed any intention to do so, the Employers and Trustees have the right under the Plan to discontinue their contributions at any time and to terminate the Plan subject to the provisions set forth in ERISA.

Reciprocals from (to) Other Funds

In accordance with agreements in place between Employers and Laborers Locals 100 & 397 and other Laborers' local unions, contributions earned by members of Employers and Laborers Locals 100 & 397 while working in other local union jurisdictions are remitted to the Plan and counted towards those members' eligibility in the Plan. Similarly, contributions received by the Plan for hours worked by members of other local union jurisdictions while working in the Employers and Laborers Locals 100 & 397 jurisdiction are due to the respective members' local union office. Reciprocity earned or due but not received or paid as of the financial statement date have been reported as a receivable or payable.

EMPLOYERS AND LABORERS LOCALS 100 & 397
PENSION FUND
NOTES TO FINANCIAL STATEMENTS
JULY 31, 2024 AND 2023

NOTE 2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

The following are the significant accounting policies followed by the Plan:

A. Basis of Accounting

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

B. Use of Estimates

The preparation of financial statements in accordance with accounting principles generally accepted in the United States of America requires the Plan administrator to make estimates and assumptions that affect the reported amounts of assets and liabilities and changes therein, and disclosures of contingent assets and liabilities and the actuarial present value of accumulated plan benefits at the date of the financial statements and changes therein. Accordingly, actual results may differ from those estimates.

C. Cash and Concentrations of Cash

Cash consists of two non-interest bearing demand deposit accounts. One of the cash accounts is an agency account held by Ekon Benefits, the third-party administrator, for the benefit of their plan clients. Cash held by Ekon Benefits at July 31, 2024 and 2023 was \$481,910 and \$-0-, respectively. Cash balances are secured by the Federal Deposit Insurance Corporation ("FDIC") up to \$250,000. At times, the balance in the accounts may exceed federally insured limits.

D. Investment Valuation and Income Recognition

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

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

E. Employer Contributions Receivable

Employer contributions receivable represent employer contributions due to the Plan for benefits earned by participants prior to the end of the Plan year, but not yet remitted to the Plan. Employer contributions receivable are carried at reported amounts less an estimate made for doubtful receivables based on a review of outstanding amounts. Management determines the allowance for expected credit losses by regularly evaluating individual employer receivables and considering an employer's financial condition and payment history, and current economic conditions. Employer contributions receivable are written off when deemed uncollectible. Management is of the opinion that no allowance is necessary as of July 31, 2024 and 2023.

EMPLOYERS AND LABORERS LOCALS 100 & 397
PENSION FUND
NOTES TO FINANCIAL STATEMENTS
JULY 31, 2024 AND 2023

NOTE 2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONT'D)

F. Payment of Benefits

Benefit payments to participants are recorded upon distribution.

G. Administrative Expenses

Expenses incurred in connection with the general administration of the Plan are recorded as deductions in the accompanying statements of changes in net assets available for benefits. Certain investment-related expenses are included in net appreciation in fair value of investments presented in the accompanying statements of changes in net assets available for benefits.

H. Reclassifications

Certain accounts in the prior-year financial statements have been reclassified for comparative purposes to conform with the presentation in the current-year financial statements.

NOTE 3. FAIR VALUE MEASUREMENTS

The Plan's investments are reported at fair value in the accompanying statements of net assets available for benefits. The methods used to measure fair value may produce an amount that may not be indicative of net realizable value or reflective of future fair values. Furthermore, although the Plan believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair value of certain financial instruments could result in a different fair value measurement at the reporting date.

FASB ASC 820, *Fair Value Measurements*, provides a framework for measuring fair value that requires an entity to determine fair value based on exit price in the principal market for the asset or liability being measured. Fair value is defined as the exchange price that would be received on the measurement date to sell an asset or the price paid to transfer a liability in the principal or most advantageous market available to the entity in an orderly transaction between market participants. The guidance also established a three level fair value hierarchy that describes the inputs that are used to measure assets and liabilities.

Level 1 asset and liability fair values are based on quoted prices in active markets for identical assets and liabilities.

Level 2 asset and liability fair values are based on observable inputs that include: quoted market prices for similar assets or liabilities; quoted market prices that are not in an active market; or other inputs that are observable in the market and can be corroborated by observable market data for substantially the full term of the assets or liabilities.

Level 3 assets and liabilities are financial instruments whose value is calculated by the use of pricing models and/or discounted cash flow methodologies, as well as financial instruments for which the determination of fair value requires significant judgment or estimation.

EMPLOYERS AND LABORERS LOCALS 100 & 397
PENSION FUND
NOTES TO FINANCIAL STATEMENTS
JULY 31, 2024 AND 2023

NOTE 3. FAIR VALUE MEASUREMENTS (CONT'D)

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 maximize the use of relevant observable inputs and minimize the use of unobservable inputs.

The following describes the valuation methodologies the Plan uses to measure the financial instruments at fair value. There have been no changes in the methodologies used at July 31, 2024 and 2023.

Cash and Cash Equivalents

Cash and cash equivalents are held in money market funds with a quoted Net Asset Value that represents fair value of the funds, resulting in a Level 1 classification.

Common Stocks

Common stocks are stated at fair value based on the closing price reported on the active market on which the individual securities are traded, resulting in a Level 1 classification.

Exchange Traded Funds and Mutual Funds

Exchange traded funds (ETFs) and mutual funds are stated at fair value based on the daily closing price as reported by the fund. ETFs and mutual funds held by the Plan are open-end mutual funds that are registered with the SEC. These funds are required to publish their daily net asset value (NAV) and to transact at that price. The ETFs and mutual funds are deemed to be actively traded, resulting in a Level 1 classification.

U.S. Government and Agency Securities and Municipal Bonds

U.S. government and agency securities and municipal bonds are stated at fair value based on pricing models maximizing the use of observable inputs for similar securities, resulting in a Level 2 classification.

Corporate Bonds and Mortgages

Corporate bonds and mortgages are stated at fair value based on pricing models maximizing the use of observable inputs for similar securities. This includes basing value on yields currently available on comparable securities of issuers with similar credit ratings. When quoted prices are not available for identical or similar bonds or mortgages, the bond or mortgage is valued under a discounted cash flows approach that maximizes observable inputs, such as current yields of similar instruments but includes adjustments for certain risks that may not be observable, such as credit and liquidity risks or a broker quote if available. Corporate bonds and mortgages therefore result in a Level 2 classification.

Other

Investments in collective trusts, limited partnerships, and a pooled separate account are valued as a practical expedient utilizing the net asset valuation and have not been classified in the fair value hierarchy.

EMPLOYERS AND LABORERS LOCALS 100 & 397
PENSION FUND
NOTES TO FINANCIAL STATEMENTS
JULY 31, 2024 AND 2023

NOTE 3. FAIR VALUE MEASUREMENTS (CONT'D)

Other (Cont'd)

The collective trusts and a pooled separate account are valued at the net asset value of units of participation held by the Plan at year-end based on the collective trusts and pooled separate account's underlying assets.

The limited partnerships are valued at the net asset value as determined by quarterly financial information (ending June 30th) received from the investment advisor. Any contributions or distributions that occur in the month of July are reflected in the Plan's year-end balances.

The following tables set forth, by level within the fair value hierarchy, the Plan's investments at fair value as of July 31, 2024 and 2023:

	<u>Fair Value</u>	<u>Level 1</u>	<u>Level 2</u>	<u>Level 3</u>
<u>July 31, 2024</u>				
Cash and Cash Equivalents	\$ 1,740,445	\$ 1,740,445	\$ -	\$ -
U.S. Government & Agency Securities	6,687,603	-	6,687,603	-
Corporate Bonds	6,594,332	-	6,594,332	-
Mortgages	1,886,276	-	1,886,276	-
Common Stocks	11,756,324	11,756,324	-	-
Municipal Bonds	478,242	-	478,242	-
Exchange Traded Funds	1,937,218	1,937,218	-	-
Mutual Funds	33,644,945	33,644,945	-	-
Total	64,725,385	<u>\$ 49,078,932</u>	<u>\$ 15,646,453</u>	<u>\$ -</u>
*Investments measured at NAV	59,868,870			
Investments at Fair Value	<u>\$ 124,594,255</u>			

	<u>Fair Value</u>	<u>Level 1</u>	<u>Level 2</u>	<u>Level 3</u>
<u>July 31, 2023</u>				
Cash and Cash Equivalents	\$ 4,577,378	\$ 4,577,378	\$ -	\$ -
U.S. Government & Agency Securities	5,165,797	-	5,165,797	-
Corporate Bonds	6,201,494	-	6,201,494	-
Mortgages	765,617	-	765,617	-
Common Stocks	10,386,131	10,386,131	-	-
Municipal Bonds	599,776	-	599,776	-
Exchange Traded Funds	1,757,440	1,757,440	-	-
Mutual Funds	32,569,658	32,569,658	-	-
Total	62,023,291	<u>\$ 49,290,607</u>	<u>\$ 12,732,684</u>	<u>\$ -</u>
*Investments measured at NAV	52,086,994			
Investments at Fair Value	<u>\$ 114,110,285</u>			

*Certain investments that are measured at fair value using the net asset value per share (or its equivalent) practical expedient have not been categorized in the fair value hierarchy.

EMPLOYERS AND LABORERS LOCALS 100 & 397
PENSION FUND
NOTES TO FINANCIAL STATEMENTS
JULY 31, 2024 AND 2023

NOTE 3. FAIR VALUE MEASUREMENTS (CONT'D)

Changes in Fair Value Levels

The availability of observable market data is monitored to assess the appropriate classification of financial instruments within the fair value hierarchy. Changes in economic conditions or model-based valuation techniques may require the transfer of financial instruments from one fair value level to another. In such instances, the transfer is reported at the beginning of the reporting period. For the years ended July 31, 2024 and 2023, there were no significant transfers in or out of Level 1, 2 or 3.

Fair Value of Investments That Calculate Net Asset Value (NAV)

The following table summarizes investments for which fair value is measured using the net asset value per share practical expedient as of July 31, 2024 and 2023, respectively.

<u>July 31, 2024</u>	<u>Fair Value</u>	<u>Unfunded Commitments</u>	<u>Redemption Frequency (If Currently Eligible)</u>	<u>Redemption Notice Period</u>
AFL-CIO Building Investment Trust	\$ 1,647,907	\$ -	Quarterly	30 Days
BPEA Cayman VI, L.P.	846,219	1,220,000	Closed End Fund	N/A
Bnymm AFL-CIO SI Mid Cap	3,904,928	-	Daily	1 Day
Bnymm AFL-CIO SI Stock Index	12,594,064	-	Daily	1 Day
ElmTree U.S. Net Lease Fund IV, L.P.	279,016	113,908	Closed End Fund	N/A
ElmTree U.S. Net Lease Fund V-A, L.P.	2,256,446	2,034,957	Closed End Fund	N/A
HarbourVest 2018 Global Feeder Fund L.P.	4,221,444	700,000	Closed End Fund	N/A
HarbourVest 2020 Global Feeder Fund L.P.	1,894,540	360,000	Closed End Fund	N/A
Mackay Shields Core Plus Bond CIT	11,848,224	-	Daily	1 Day
RREEF America II LP	4,315,295	-	Quarterly	45 Days
Principal Real Estate Inv				
U.S. Property Separate Acct	3,227,242	-	Quarterly	90 Days
Ullico Infrastructure Tax-Exempt Fund, L.P.	2,402,071	-	Quarterly	45 Days
Parametric Defensive Equity Fund LLC	1,130,133	-	Monthly	5 Days
Mesirow High Yield CIT CI A	6,077,197	-	Daily	1 Day
CC&L Q Emerging Markets Equity CIF Class A	2,123,084	-	Daily	1 Day
Neuberger Berman U.S. Equity Index PutWrite Fund LLC	1,101,060	-	Monthly	7 Days
	<u>\$ 59,868,870</u>			

<u>July 31, 2023</u>	<u>Fair Value</u>	<u>Unfunded Commitments</u>	<u>Redemption Frequency (If Currently Eligible)</u>	<u>Redemption Notice Period</u>
AFL-CIO Building Investment Trust	\$ 1,769,993	\$ -	Quarterly	30 Days
BPEA Cayman VI, L.P.	594,020	1,460,000	Closed End Fund	N/A
Bnymm AFL-CIO SI Mid Cap	3,419,221	-	Daily	1 Day
Bnymm AFL-CIO SI Stock Index	11,520,548	-	Daily	1 Day
ElmTree U.S. Net Lease Fund IV, L.P.	460,240	1,130,741	Closed End Fund	N/A
ElmTree U.S. Net Lease Fund V-A, L.P.	856,229	3,443,770	Closed End Fund	N/A
HarbourVest 2018 Global Feeder Fund L.P.	4,399,844	800,000	Closed End Fund	N/A
HarbourVest 2020 Global Feeder Fund L.P.	1,640,010	530,000	Closed End Fund	N/A
Mackay Shields Core Plus Bond CIT	14,575,605	-	Daily	1 Day
RREEF America II LP	5,522,790	-	Quarterly	45 Days
Principal Real Estate Inv				
U.S. Property Separate Acct	3,639,725	-	Quarterly	90 Days
Ullico Infrastructure Tax-Exempt Fund, L.P.	3,688,769	-	Quarterly	45 Days
	<u>\$ 52,086,994</u>			

EMPLOYERS AND LABORERS LOCALS 100 & 397
PENSION FUND
NOTES TO FINANCIAL STATEMENTS
JULY 31, 2024 AND 2023

NOTE 3. FAIR VALUE MEASUREMENTS (CONT'D)

Fair Value of Investments That Calculate Net Asset Value (NAV) (Cont'd)

The following summarizes the investment strategy for each of the Plan's investments in the table presented above:

AFL-CIO Building Investment Trust

The AFL-CIO Building Investment Trust represents a bank collective trust that acquires direct or indirect interests in commercial real estate and mortgage loans secured by commercial real estate. The primary objective of the Trust is to maintain a portfolio that is balanced by property type and geographic location.

BPEA Cayman VI, L.P.

BPEA Cayman VI, L.P. is a limited partnership whose purpose is to acquire, manage and dispose of investments in private equity funds that are focused primarily on making buyout and growth capital investments in companies.

BNYM Mellon AFL-CIO Funds

The BNYM Mellon AFL-CIO SL Stock Index Fund is a collective investment trust whose investment objective is to track the performance of the S&P 500 Index. The Fund will seek to match the performance of the Index by investing in a portfolio of large capitalization equity securities. The Fund is constructed to mirror the index to provide long-term capital growth.

The BNYM Mellon AFL-CIO SL Mid Cap Stock Index Fund is a collective investment trust whose investment objective is to track the performance of the S&P MidCap 400 Index. The Fund will seek to match the performance of the Index by investing in a portfolio of mid-capitalization equity securities. The Fund is constructed to mirror the index to provide long-term capital growth.

ElmTree U.S. Net Lease Funds

ElmTree U.S. Net Lease IV, L.P. and ElmTree U.S. Net Lease V-A, L.P. are limited partnerships. ElmTree's investment strategy seeks to identify opportunities in the build-to-suit, net-lease real estate market. In the pursuit of this strategy, they target the acquisition of newly constructed, mission critical and operationally significant industrial assets leased to investment grade tenants on a long-term basis.

HarbourVest Global Feeder Funds

HarbourVest 2018 Global Feeder Fund L.P. (the "Feeder Partnership") is a Cayman Islands exempt limited partnership under Cayman Islands law. The Feeder Partnership's sole purpose is to hold the investment in HarbourVest 2018 Global Fund L.P. which makes investments in limited partnerships or other pooled investment vehicles.

EMPLOYERS AND LABORERS LOCALS 100 & 397
PENSION FUND
NOTES TO FINANCIAL STATEMENTS
JULY 31, 2024 AND 2023

NOTE 3. FAIR VALUE MEASUREMENTS (CONT'D)

Fair Value of Investments That Calculate Net Asset Value (NAV) (Cont'd)

HarbourVest Global Feeder Funds (Cont'd)

HarbourVest 2020 Global Feeder Fund L.P. (the "Feeder Partnership") is a Cayman Islands exempt partnership under Cayman Islands law. The Feeder Partnership's sole purpose is to hold the investment in HarbourVest 2020 Global Fund L.P. which makes a commitment as a limited partner in HarbourVest 2020 Global Investment L.P. (the "Aggregating Partnership"). The Aggregating Partnership makes investments in partnerships or other pooled investment vehicles which, in turn, make private equity investments and invests directly in private equity transactions.

Mackay Shields Core Plus Bond CIT

Mackay Shields Core Plus Bond CIT is a collective investment trust inside of MacKay Shields Collective Investment Trust. The investment objective is to seek incremental returns by taking opportunistic exposures to asset classes. The CIT seeks to meet its investment objective by investing primarily in investment grade debt securities such as fixed income, emerging market debt and high yield debt securities. The benchmark index for the CIT is the Bloomberg U.S. Aggregate Bond Index.

RREEF America II LP

RREEF America II LP is a limited partnership whose sole purpose is facilitating a direct investment in RREEF America II Aggregator LP. (the "Aggregator"). The Aggregator indirectly invests through RREEF America II Lower REIT LLC (the "Lower REIT"). The Aggregator holds investments indirectly through its direct investment in the Lower REIT, that has elected to be taxed as a real estate investment trust. The Aggregator indirectly invests through Lower REIT in apartments, industrial, retail, office and other properties in targeted metropolitan areas. The principal investment objective of the Aggregator is to generate attractive, predictable investment returns from a target portfolio of low-risk equity investments in income-producing real estate while maximizing the total return to investors through cash dividends and appreciation.

Principal Real Estate Inv U.S. Property Separate Acct

The Principal Real Estate Inv U.S. Property Separate Account is an open-end, commingled real estate separate account sponsored by Principal Life Insurance Company and managed by Principal Real Estate Investors. The Separate Account is a diversified real estate equity portfolio consisting primarily of high quality, well-leased real estate properties in multifamily, industrial, office, retail and hotel sectors.

EMPLOYERS AND LABORERS LOCALS 100 & 397
PENSION FUND
NOTES TO FINANCIAL STATEMENTS
JULY 31, 2024 AND 2023

NOTE 3. FAIR VALUE MEASUREMENTS (CONT'D)

Fair Value of Investments That Calculate Net Asset Value (NAV) (Cont'd)

Ullico Infrastructure Tax-Exempt Fund, L.P.

Ullico Infrastructure Tax-Exempt Fund, L.P. is a limited partnership designed to permit U.S. tax-exempt investors, including principally multiemployer plans subject to the Taft-Hartley Act, to commingle a portion of their assets for investment. Substantially all of the L.P.'s assets are invested in units issued by Ullico Infrastructure Master Fund, L.P. (the "Master Fund"). The Master Fund makes investments on behalf of the L.P. with both minority and controlling interest in a diverse portfolio of quality infrastructure businesses, focusing on underserved and growing markets of the US and Canada. The Master Fund seeks to achieve risk-adjusted returns with significant annual cash yield and relatively low volatility.

Parametric Defensive Equity Fund LLC

Parametric Defensive Equity Fund LLC is a 103-12 investment entity whose investment objective is to employ an options based strategy that utilizes a fully covered option strangle (selling out-of-the-money put and call options).

Mesirow High Yield CIT CL A

Mesirow High Yield CIT CL A is a collective investment trust inside of Mesirow Collective Investment Master Trust. The investment objective is to seek a high level of current income coupled with principal preservation. The advisor attempts to achieve this investment objective by generally investing assets into a diversified portfolio of securities of corporations whose debt is rated below investment grade with an emphasis on smaller issues that are typically issued by small-to-mid capitalization companies.

CC&L Q Emerging Markets Equity CIF Class A

CC&L Q Emerging Markets Equity CIF Class A is a 103-12 investment entity inside of the Connor Clark & Lunn Collective Investment Trust. The investment objective is to seek a positive long-term return in excess of the return of the MSCI Emerging Markets Index by investing in a diversified portfolio of primarily emerging market equity securities.

Neuberger Berman U.S. Equity Index PutWrite Fund LLC

Neuberger Berman U.S. Equity Index PutWrite Fund is a 103-12 investment entity whose investment objective is to seek to provide investors with long-term capital growth through an investment strategy of writing collateralized put options on U.S. indices and exchange-traded funds and through investments in fixed income instruments.

EMPLOYERS AND LABORERS LOCALS 100 & 397
PENSION FUND
NOTES TO FINANCIAL STATEMENTS
JULY 31, 2024 AND 2023

NOTE 4. INVESTMENTS

The Plan had the following investments at July 31, 2024 and 2023, which represent 5% or more of the Plan's net assets:

<u>July 31, 2024</u>		
Description of Asset	Adjusted Cost	Market Value
Dodge & Cox Stock Fund	\$ 8,565,999	\$ 11,792,907
Bnymm AFL-CIO SI Stock Index	7,874,259	12,594,064
Mackay Shields Core Plus Bond CIT	13,825,000	11,848,224
 <u>July 31, 2023</u>		
Description of Asset	Adjusted Cost	Market Value
Dodge & Cox Stock Fund	\$ 8,501,384	\$ 10,528,060
Bnymm AFL-CIO SI Stock Index	8,803,211	11,520,548
Mackay Shields Core Plus Bond CIT	14,510,427	14,575,605

NOTE 5. ACTUARIAL INFORMATION

As of August 1, 2024 and 2023, the fund's actuary determined the following according to the respective actuarial assumptions.

Actuarial Present Value of Accumulated Plan Benefits

Accumulated plan benefits are those future periodic payments, including lump-sum distributions, that are attributable under the Plan's provisions to the service employees have rendered. Accumulated plan benefits include benefits expected to be paid to (a) retired or terminated employees or their beneficiaries, (b) beneficiaries of employees who have died, and (c) present employees or their beneficiaries.

Benefits under the Plan are based on employees' hours worked during each plan year. The accumulated plan benefits for active employees are based on their total benefits earned in each plan year, ending on the date as of which the benefit information is presented (the valuation date). Benefits payable under all circumstances – retirement, death, disability and termination of employment – are included, to the extent they are deemed attributable to employee service rendered to the valuation date.

The actuarial present value of accumulated plan benefits is determined by an independent actuary from Ekon Benefits and is that amount that 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.

EMPLOYERS AND LABORERS LOCALS 100 & 397
PENSION FUND
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JULY 31, 2024 AND 2023

NOTE 5. ACTUARIAL INFORMATION (CONT'D)

The significant actuarial assumptions used in the valuations as of August 1, 2024 and 2023, were (a) life expectancy of participants (the PRI-12 Employee Blue Collar, with projected mortality improvement based on the most recent improvement scale published (Scale MP 2021) for males and females) (b) retirement age assumptions (the assumed average retirement age was 60 for fiscal year ended 2024 and 2023), and (c) investment return.

The valuations assumed an average rate of return of 6.75% for 2024 and 2023, including a reduction of \$200,000 (\$150,000 for 2023) to reflect anticipated administrative expenses associated with providing benefits. The foregoing actuarial assumptions are based on the presumption that the Plan will continue. Were the Plan to terminate, different actuarial assumptions and other factors might be applicable in determining the actuarial present value of accumulated plan benefits.

The actuarial present value of accumulated plan benefits as of the current valuation date is shown below and is compared with the figures from the prior year.

	<u>August 1,</u>	
	<u>2024</u>	<u>2023</u>
Actuarial Present Value of Accumulated Plan Benefits		
Vested Benefits:		
Active Participants	\$ 71,300,897	\$ 66,705,648
Other Vested Benefits	45,174,869	39,550,216
	<u>116,475,766</u>	<u>106,255,864</u>
Nonvested Benefits	<u>4,805,986</u>	<u>3,679,903</u>
Total Actuarial Present Value of Accumulated Plan Benefits	<u>\$ 121,281,752</u>	<u>\$ 109,935,767</u>

The change in accumulated plan benefits is accounting for as follows:

	<u>August 1,</u>	
	<u>2024</u>	<u>2023</u>
Actuarial Present Value of Accumulated Plan Benefits, Beginning of Year	<u>\$ 109,935,767</u>	<u>\$ 106,154,701</u>
Increase (Decrease) During the Year Attributable to:		
Change in Actuarial Assumptions	-	-
Plan Amendment - Benefit Increase	7,678,201	-
Benefit Accrued	3,084,922	3,031,501
Interest for the Period	7,179,182	6,931,396
Less Benefits Distributed	(7,155,028)	(6,934,703)
(Gains)/Losses	<u>558,708</u>	<u>752,872</u>
Net Increase	<u>11,345,985</u>	<u>3,781,066</u>
Actuarial Present Value of Accumulated Plan Benefits, End Of Year	<u>\$ 121,281,752</u>	<u>\$ 109,935,767</u>

EMPLOYERS AND LABORERS LOCALS 100 & 397
PENSION FUND
NOTES TO FINANCIAL STATEMENTS
JULY 31, 2024 AND 2023

NOTE 5. ACTUARIAL INFORMATION (CONT'D)

Funding Method

Aggregate Funding Method - Under this method, the present value of future normal costs equals the present value of benefits reduced by Plan Assets. These future costs are spread as a level percentage over current and future expected hours. The portion attributable to current expected hours is the current year normal cost.

The unfunded accrued liability resulted from increases and/or decreases in liability due to plan changes and changes in actuarial assumptions. These increases and decreases caused the plan to establish amortization bases. Level annual payments are charged and/or credited to the plan until the bases are fully amortized. The type of base and the date established determine the amount of the payment and the number of years to amortize.

The present value of future normal costs includes the current year normal cost and all future normal costs for the current participant group. These future costs are spread as a level percentage of current and expected future working hours. The portion attributable to current active participants is the current year normal cost.

Experience gains and losses are included in the present value of future normal costs and therefore are spread as a level percentage over the future working hours of the current active participants.

NOTE 6. TRUST AGREEMENT

The Plan's contributions are collected through a trust agreement with Commerce Bank. All employers' remittances are deposited therein. The plan administrator, on a monthly basis, allocates the various contributions among Pension, Health & Welfare, Annuity, and any miscellaneous sub-accounts as required by the collective bargaining agreements.

NOTE 7. PLAN TERMINATION

In the event of Plan termination, the net assets of the Plan will be allocated, as prescribed by ERISA and its related regulations, generally to provide the following benefits in the order indicated.

1. Benefits that members or beneficiaries have been receiving for at least three years, or that employees eligible to retire for that three-year period would have been receiving if they had retired with benefits in the normal form of Pension under the Plan. The priority amount is limited to the lowest benefit that was payable (or would have been payable) during those three years. The amount is further limited to the lowest benefit that would be payable under the plan provisions in effect at any time during the five years preceding Plan termination.
2. Other vested benefits (if any) insured by the Pension Benefit Guaranty Corporation ("PBGC") (a U.S. government agency) up to the applicable limitations.
3. All other vested benefits (that is, vested benefits not insured by the PBGC).
4. All nonvested benefits.

EMPLOYERS AND LABORERS LOCALS 100 & 397
PENSION FUND
NOTES TO FINANCIAL STATEMENTS
JULY 31, 2024 AND 2023

NOTE 7. PLAN TERMINATION (CONT'D)

Certain benefits under the Plan are insured by the PBGC if the Plan terminates. Generally, the PBGC guarantees most vested normal age retirement benefits, early retirement benefits, and certain disability and survivor's pensions. However, the PBGC does not guarantee all types of benefits under the Plan, and the amount of benefit protection is subject to certain limitations. Vested benefits under the Plan are guaranteed at the level in effect on the date of the plan termination.

Whether all participants receive their benefits should the Plan terminate at some future time will depend on the sufficiency, at the time, of the Plan's net assets to provide those benefits and may also depend on the level of benefits guaranteed by the PBGC.

The Plan document should be consulted for the allocation procedures and other details relating to termination.

NOTE 8. TAX STATUS

The Plan obtained its latest determination letter on August 4, 2015, in which the Internal Revenue Service stated that the Plan, as then designed, was in compliance with the applicable requirements of the Internal Revenue Code. The Plan was amended and restated effective January 1, 2015. However, the Plan administrator and the Plan's tax counsel believe that the Plan is currently designed and being operated in compliance with the applicable requirements of the Internal Revenue Code.

Accounting principles generally accepted in the United States of America require the Plan to evaluate tax positions taken by the Plan and recognize a tax liability (or asset) if the Plan has taken an uncertain tax position that more likely than not would not be sustained upon examination by the U.S. federal tax authorities. The Plan has analyzed the tax positions taken or expected to be taken by the Plan and has concluded that there are no uncertain tax positions taken or expected to be taken that would require recognition of a liability (or asset) or that require disclosure in the financial statements. The Plan is subject to routine audits by the federal tax authorities; however, there are currently no audits on any tax periods in progress.

NOTE 9. RELATED PARTIES AND PARTIES IN INTEREST

The Plan is a related party to the Employers and Laborers Locals 100 & 397 Health & Welfare Fund and Annuity Plan. They share a common trust account for employer contributions. No interfund balances existed nor were there any shared expenses for the years ended July 31, 2024 and 2023.

Ekon Benefits, the third-party administrator, is also the Plan consultant and the computer programmer. Ekon Benefits also handles the same functions for Employers and Laborers Locals 100 & 397 Annuity and Health and Welfare Funds. Fees incurred by the Plan for Ekon's services amounted to \$64,698 and \$70,984 for the years ended July 31, 2024 and 2023, respectively.

Effective August 1, 2023, Ekon Benefits entered into an agency agreement with the Plan to serve as an agent for the purpose of (a) distributing and processing the payments of benefits and expenses, (b) accepting for deposit and allocating contributions received, (c) collecting any fees made available and payable from the various investments, and (4) execution of trade requests, with the Plan and among the various investment options.

EMPLOYERS AND LABORERS LOCALS 100 & 397
PENSION FUND
NOTES TO FINANCIAL STATEMENTS
JULY 31, 2024 AND 2023

NOTE 9. RELATED PARTIES AND PARTIES IN INTEREST (CONT'D)

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

The Plan paid for the following services for the years ended July 31, 2024 and 2023:

	<u>2024</u>	<u>2023</u>
Legal Fees	\$ 30,981	\$ 17,059
Audit Fees	22,250	39,750
Insurance Fees	11,781	10,922
Investment Managers	339,036	405,405
	<u>\$ 404,048</u>	<u>\$ 473,136</u>

These party-in-interest transactions are exempt from the prohibited transaction rules of ERISA.

NOTE 10. CONCENTRATIONS

For the years ended July 31, 2024 and 2023, the Plan had two and one employers, respectively, who remitted over 5 % of contributions.

	<u>2024</u>	<u>2023</u>
RCS Construction	\$ 358,108	\$ 341,712
Keeley & Sons	366,033	

NOTE 11. 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.

Plan contributions are made and the actuarial present value of accumulated plan benefits are reported based on certain assumptions pertaining to interest rates, inflation rates and participant 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.

EMPLOYERS AND LABORERS LOCALS 100 & 397
PENSION FUND
NOTES TO FINANCIAL STATEMENTS
JULY 31, 2024 AND 2023

NOTE 12. PLAN AMENDMENTS

The Plan was amended to:

- Plan Document - Section 5.8 Waiver of Suspension – section added to allow a temporary waiver of suspension of benefit rules to address a skilled labor shortage.
- Plan Document - Section 5.4 Retiree's Return to Industry - additional language was added when a retiree returns to industry.

Participants should refer to the Summary Plan Description for more complete information.

NOTE 13. SUBSEQUENT EVENTS

Plan management has evaluated subsequent events through May 5, 2025, which is the date the financial statements were available to be issued.

Effective for retirements on or after August 1, 2024, the following benefit improvements were made:

- A 12.265% increase in the past service pension rate prior to August 1, 1967 for all active participants who earned at least 500 hours on or after August 1, 2023.
- A 12.265% increase in the future service pension rate for all active participants who earned at least 500 hours on or after August 1, 2023.

In addition, retirees, disabled participants, and beneficiaries, in pay-status as of July 1, 2024, shall receive a 5.0% increase in their monthly pension benefit to begin effective with the August 1, 2024 pension payment.

SCHEDULE "1"

EMPLOYERS AND LABORERS LOCALS 100 & 397
PENSION FUND
SCHEDULES OF ADMINISTRATIVE EXPENSES
FOR THE YEARS ENDED JULY 31, 2024 AND 2023

	<u>2024</u>	<u>2023</u>
ADMINISTRATIVE FEES		
Ekon Benefits	\$ 35,948	\$ 48,584
Commerce Bank	56,555	48,571
	<u>92,503</u>	<u>97,155</u>
PROFESSIONAL FEES		
Audit - Scheffel Boyle	22,250	39,750
Actuarial and Consulting - Ekon Benefits	28,750	22,400
Legal - Kelly & Kelley, LLC	242	444
Legal - Cavanagh & O'Hara	30,739	16,615
	<u>81,981</u>	<u>79,209</u>
INSURANCE		
Fiduciary Liability	9,587	9,618
Cyber Insurance	2,194	1,304
Pension Benefit Guaranty Corporation Premium	29,435	27,232
	<u>41,216</u>	<u>38,154</u>
OFFICE AND OTHER EXPENSES		
Postage	-	659
Printing and Miscellaneous	242	219
Compliance Services	4,669	2,422
Trustee Reimbursement	589	1,896
	<u>5,500</u>	<u>5,196</u>
 TOTAL ADMINISTRATIVE EXPENSES	 <u>\$ 221,200</u>	 <u>\$ 219,714</u>

See accompanying independent auditor's report.

EMPLOYERS AND LABORERS LOCALS 100 & 397 PENSION PLAN
FEIN 37-6085017 / PLAN NUMBER: 001
SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)
CASH AND CASH EQUIVALENTS
JULY 31, 2024

	Identity of Issue, Borrower, Lessor, or Similar Party	Description of Investment Including Maturity Date, Rate of Interest Collateral Par Or, Maturity Value	Cost	Current Value
(a)	(b)	(c)	(d)	(e)
	Financial Square Tr Government	Cash and Cash Equivalent	\$ 813,862	\$ 813,862
	Financial Square Tr Government	Cash and Cash Equivalent	58,782	58,782
	Financial Square Tr Government	Cash and Cash Equivalent	44,832	44,832
	Financial Square Tr Government	Cash and Cash Equivalent	89,424	89,424
	Financial Square Tr Government	Cash and Cash Equivalent	61,224	61,224
	Financial Square Tr Government	Cash and Cash Equivalent	672,321	672,321
			<u>\$ 1,740,445</u>	<u>\$ 1,740,445</u>

Note: Column (a) is blank as there were no parties in interest.

EMPLOYERS AND LABORERS LOCALS 100 & 397 PENSION PLAN
FEIN 37-6085017 / PLAN NUMBER: 001
SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)
U.S. GOVERNMENT & AGENCY SECURITIES
JULY 31, 2024

(a)	Identity of Issue, Borrower, Lessor, or Similar Party (b)	Description of Investment Including Maturity Date, Rate of Interest Collateral, Par or Maturity Value (c)	Cost (d)	Current Value (e)
	US Treasury	75,000 Bond 3.125% due 11/15/41	\$ 76,740	\$ 63,908
	US Treasury	100,000 Bond 2.75% due 8/15/42	95,659	79,489
	US Treasury	105,000 Bond 2.25% due 8/15/46	83,664	72,450
	US Treasury	145,000 Bond 2.75% due 11/15/47	116,617	108,982
	US Treasury	195,000 Bond 3.125% due 5/15/48	165,659	156,563
	US Treasury	145,000 Bond 2.375% due 5/15/51	91,497	98,668
	US Treasury	100,000 Bond 1.75% due 8/15/41	97,145	68,557
	US Treasury	210,000 Bond 2% due 11/15/41	179,504	149,401
	US Treasury	130,000 Note 2.875% Due 05/15/32	122,611	120,255
	US Treasury	200,000 Note 3.375% due 5/15/33	180,563	190,282
	US Treasury	100,000 Note 3.875% due 8/15/33	96,977	98,713
	US Treasury	190,000 Note 4.5% due 11/15/33	193,926	196,576
	US Treasury	75,000 Note 2.25% due 2/15/27	80,010	71,634
	US Treasury	60,000 Note 1.125% due 2/28/27	60,274	55,639
	US Treasury	200,000 Note 0.625% due 5/15/30	178,848	165,860
	US Treasury	75,000 Note 2.375% due 5/15/29	86,868	69,894
	US Treasury	175,000 Note 1.5% due 2/15/30	165,462	153,802
	US Treasury	100,000 Note 1.125% due 2/29/28	99,329	90,467
	US Treasury	25,000 Note 0.5% due 2/28/26	24,650	23,513
	US Treasury	100,000 Note 0.75% due 4/30/26	100,346	93,983
	US Treasury	100,000 Note 1.625% due 5/15/31	83,458	86,196
	US Treasury	100,000 Note 1.5% due 11/30/28	95,764	90,286
	US Treasury	100,000 Note 4.125% due 9/30/27	98,657	100,276
	US Treasury	100,000 Note 4.25% due 9/30/24	99,932	99,797
	US Treasury	200,000 Note 4% due 10/31/29	201,389	200,516
	US Treasury	100,000 Note 4.125% due 10/31/27	98,567	100,286
	US Treasury	200,000 Note 4.5% due 11/15/25	198,853	199,832
	US Treasury	100,000 Note 3.5% due 1/31/30	98,817	97,774
	US Treasury	100,000 Note 3.5% due 2/15/33	96,393	96,172
	US Treasury	200,000 Note 4.625% due 3/15/26	199,704	200,668
	US Treasury	200,000 Note 4.25% due 5/31/25	198,505	198,994
	US Treasury	250,000 Note 3.75% due 6/30/30	245,918	247,295
	US Treasury	200,000 Note 4.75% due 7/31/25	199,450	200,056
	US Treasury	100,000 Note 4% due 7/31/30	99,756	100,215
	US Treasury	50,000 Note 5% due 8/31/25	49,870	50,146
	US Treasury	50,000 Note 4.5% due 11/15/33	49,432	51,731
	US Treasury	75,000 Note 4.375% due 5/15/34	73,966	76,928
	US Treasury	100,000 Note 2% due 2/15/25	99,302	98,394
	US Treasury	125,000 Note 1.625% due 2/15/26	132,324	119,820

EMPLOYERS AND LABORERS LOCALS 100 & 397 PENSION PLAN
FEIN 37-6085017 / PLAN NUMBER: 001
SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)
U.S. GOVERNMENT & AGENCY SECURITIES
JULY 31, 2024

(a)	Identity of Issue, Borrower, Lessor, or Similar Party (b)	Description of Investment Including Maturity Date, Rate of Interest Collateral, Par or Maturity Value (c)	Cost (d)	Current Value (e)
	US Treasury	100,000 Note 2.25% due 2/15/27	99,506	95,512
	US Treasury	100,000 Note 1.625% due 8/15/29	100,770	89,598
	US Treasury	150,000 Note 1.5% due 10/31/24	156,989	148,599
	US Treasury	100,000 Note 1.5% due 1/31/27	102,750	93,799
	US Treasury	100,000 Note 1.5% due 8/15/26	93,116	94,668
	US Treasury	200,000 Note 2.625% due 3/31/25	198,910	197,022
	US Treasury	150,000 Note 2.625% due 1/31/26	155,916	146,034
	US Treasury	100,000 Note 2.625% due 2/15/29	99,271	94,504
	US Treasury	200,000 Note 4% due 2/15/34	192,739	199,204
	US Treasury	79,115.50 Bonds Infl IX 2% due 1/15/26	79,116	78,265
	Federal Farm Credit Bank	150,000 Note 3.875% due 5/3/29	146,205	149,103
	Federal Home Loan Bank	100,000 Note 1% due 8/26/26	100,083	93,466
	Federal Home Loan Bank	100,000 Note 4% due 6/9/28	99,149	99,941
	Federal Home Loan Bank	100,000 Note 4% due 6/30/28	99,040	100,798
	Federal Home Loan Bank	100,000 Note 4.75% due 6/12/26	100,130	100,786
	Federal Home Loan Bank	100,000 Note 2.875% due 9/13/24	108,319	99,707
	FNMA	100,000 Note 2.625% due 9/6/24	99,245	99,715
	FNMA	100,000 Note 0.5% due 6/17/25	100,399	96,338
	FNMA	80,000 Note 0.875% due 8/5/30	79,034	66,526
			<u>\$ 6,927,093</u>	<u>\$ 6,687,603</u>

Note: Column (a) is blank as there were no parties in interest.

EMPLOYERS AND LABORERS LOCALS 100 & 397 PENSION PLAN
FEIN 37-6085017 / PLAN NUMBER: 001
SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)
CORPORATE BONDS
JULY 31, 2024

	Identity of Issue, Borrower, Lessor, or Similar Party	Description of Investment Including Maturity Date, Rate of Interest Collateral Par Or, Maturity Value	Cost	Current Value
(a)	(b)	(c)	(d)	(e)
	Abbott Laboratories	\$70,000 par, 1.15% due 1/30/28	\$ 69,933	\$ 63,047
	Amazon.Com Inc	\$100,000 par, 4.55% due 12/1/27	99,121	100,601
	Amphenol Corp	100,000 par, 4.75% due 3/30/26	99,172	99,934
	Arthur J Gallagher & Co	\$50,000 par, 2.4% due 11/09/31	49,837	41,635
	Bank of America Corp	\$100,000 par, Variable, due 11/25/25	99,675	93,441
	Bristol-Myers Squibb Co	\$50,000 par, 0.75% due 11/13/25	49,172	47,519
	Costco Wholesale Corp	\$50,000 par, 1.375% due 6/20/27	50,141	46,014
	Emerson Electric Co	\$50,000 par, 0.875% due 10/15/26	49,881	46,160
	General Dynamics Corp	\$100,000 par, 2.125% due 8/15/26	97,903	95,096
	Home Depot Inc	\$50,000 par, 0.9% due 3/15/28	49,981	44,352
	Air Lease Corp	\$50,000 par, 5.1% due 3/1/29	49,381	50,358
	Alabama Power Co	\$65,000 par, 4.3% due 1/2/46	64,567	55,554
	Amazon.Com Inc	\$90,000 par, 1.65% due 5/12/28	89,947	81,522
	Ameriprise Financial Inc	\$75,000 par, 2.875% due 9/15/26	77,459	72,257
	Amgen Inc	\$40,000 par, 5.65% due 3/2/53	39,942	40,305
	Anheuser-Busch Inbev Finance	\$60,000 par, 4.9% due 2/1/46	59,859	56,480
	Avalonbay Communities	\$100,000 par, 2.3% due 3/1/30	102,997	88,569
	Bank of America Corp	\$35,000 par, 4.45% due 3/3/26	35,000	34,703
	Bank of Montreal	\$90,000 par, 5.717% due 9/25/28	91,464	93,220
	Bank of Nova Scoti	\$90,000 par, 5.65% due 2/1/34	89,911	93,783
	Bank One Corp	\$25,000 par, 8% due 4/29/27	33,599	27,188
	Baptist Health South Florida Inc	\$50,000 par, 4.342% due 11/15/41	50,400	44,145
	BB&T Corporation	\$75,000 par, 2.85% due 10/26/24	74,939	74,445
	Bell Canada	\$50,000 par, 3.2% due 2/15/52	49,981	34,128
	Bhp Billiton Finance USA Limited	\$85,000 par, 5.25% due 9/8/33	84,283	87,003
	Boeing Co	\$55,000 par, 6.625% due 2/15/38	71,584	57,939
	BP Capital Markets America	\$70,000 par, 4.234% due 11/6/28	70,000	69,014
	BP Capital Markets America	\$100,000 par, 4.893% due 9/11/33	99,169	99,559
	Burlington North Santa Fe	\$80,000 par, 4.45% due 1/15/53	79,558	70,360
	Canadian National Railway	\$55,000 par, 6.2% due 6/1/36	72,183	60,972
	Canadian Pacific Railway	\$40,000 par, 3.125% due 6/1/26	38,392	38,721
	Canadian Pacific Rr Co	\$30,000 par, 5.75% due 1/15/42	37,250	30,306
	Charles Schwab Corporation	\$95,000 par, 1.15% due 5/13/26	94,780	88,846
	Comcast Corp	\$80,000 par, 5.5% due 11/15/32	79,494	83,535
	Conocophillips Company	\$50,000 par, 5.95% due 3/15/46	72,124	53,371
	Danaher Corp	\$70,000 par, 3.35% due 9/15/25	69,149	68,866
	Duke Energy Ohio Inc	\$80,000 par, 5.25% due 4/1/33	80,797	81,670
	Ecolab Inc	\$40,000 par, 4.8% due 3/24/30	51,158	40,613
	Evergy Kansas Central	\$75,000 par, 3.45% due 4/15/50	74,693	52,931

EMPLOYERS AND LABORERS LOCALS 100 & 397 PENSION PLAN
FEIN 37-6085017 / PLAN NUMBER: 001
SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)
CORPORATE BONDS
JULY 31, 2024

(a)	Identity of Issue, Borrower, Lessor, or Similar Party (b)	Description of Investment Including Maturity Date, Rate of Interest Collateral Par Or, Maturity Value (c)	Cost (d)	Current Value (e)
	Florida Power & Light Co	\$75,000 par, 3.125% due 12/1/25	74,878	73,394
	Gatx Corp	\$45,000 par, 3.1% due 6/1/51	43,927	29,309
	General Motors Financial Co	\$45,000 par, 5% due 4/9/27	44,950	45,076
	Goldman Sachs Group Inc	\$35,000 par, Variable, due 3/9/27	34,958	33,005
	Gonzaga University	\$35,000 par, 4.158% due 4/1/46	35,000	28,312
	Hartford Finl Svcs Grp	\$45,000 par, 6.1% due 10/1/41	45,286	47,393
	Hcp Inc	\$40,000 par, 3.25% due 7/15/26	39,962	38,753
	Hollyfrontier Corp	\$45,000 par, 5.875% due 4/1/26	51,696	45,213
	Indiana Michigan Power	\$70,000 par, 4.25% due 8/15/48	69,600	57,185
	Intuit Inc	\$75,000 par, 1.35% due 7/15/27	74,762	68,662
	John Deere Capital Corp	\$100,000 par, 2.8% due 9/8/27	101,762	95,060
	John Deere Capital Corp	\$70,000 par, 0.7% due 1/15/26	69,938	66,078
	Johnson & Johnson	\$50,000 par, 2.9% due 1/15/28	49,500	47,899
	Kimberly Clark	\$50,000 par, 6.625% due 8/1/37	67,368	58,372
	Laboratory Corporation of America	\$50,000 par, 2.7% due 6/1/31	49,826	43,536
	Lockheed Martin Corporation	\$100,000 par, 4.75% due 2/15/34	98,324	100,092
	Loews Corp	\$85,000 par, 4.125% due 5/15/43	101,412	72,445
	Mastercard Inc	\$85,000 par, 1.9% due 3/15/31	84,891	72,680
	Meta Platforms Inc	\$90,000 par, 5.6% due 5/15/53	94,099	93,830
	Metlife Inc	\$70,000 par, 3.6% due 11/13/25	69,994	68,919
	Mid-America Apartments	\$90,000 par, 4% due 11/15/25	88,393	88,810
	Mitsubishi Ufj Financial Group	\$70,000 par, 3.961% due 3/2/28	70,000	68,480
	Morgan Stanley	\$100,000 Variable due 1/16/30	100,000	101,182
	National Rural Utility Coop	\$75,000 par, 4.15% due 12/15/32	74,729	71,209
	Norfolk Southern Corporation	\$50,000 par, 5.05% due 8/01/30	49,898	50,939
	Northern Trust Corp	\$70,000 par, Variable due 5/8/32	75,074	67,068
	Nucor Corp	\$60,000 par, 6.4% due 12/1/37	63,581	66,851
	Oneok Incorporated	\$35,000 par, 5.15% due 10/15/43	40,126	32,477
	Pacificorp	\$75,000 par, 3.5% due 6/15/29	74,861	70,944
	Paypal Holdings Inc	\$85,000 par, 5.25% due 6/1/62	82,008	80,138
	Pepsico Inc	\$75,000 par, 2.75% due 4/30/25	76,872	73,744
	Pepsico Inc	\$35,000 par, 4.45% due 4/14/46	37,027	31,726
	PG & E Wildfire Recovery	\$68,770 par, 3.594% due 6/1/30	68,769	66,617
	PNC Financial Services	\$80,000 par, Variable due 1/24/34	80,000	79,142
	Prologis LP	\$40,000 par, 1.75% due 2/1/31	40,000	33,274
	Public Svc Enterprise Group Inc	\$50,000 par, 5.45% due 4/1/34	49,920	50,850
	Reinsurance Group of America	\$50,000 3.9% due 5/15/29	45,907	47,837
	Qualcomm Incorporated	\$50,000 par, 1.3% due 5/20/28	48,373	44,576
	Roper Technologies Inc	\$50,000 par, 3.85% due 12/15/25	52,217	49,315

EMPLOYERS AND LABORERS LOCALS 100 & 397 PENSION PLAN
FEIN 37-6085017 / PLAN NUMBER: 001
SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)
CORPORATE BONDS
JULY 31, 2024

	Identity of Issue, Borrower, Lessor, or Similar Party	Description of Investment Including Maturity Date, Rate of Interest Collateral Par Or, Maturity Value	Cost	Current Value
(a)	(b)	(c)	(d)	(e)
	Royal Bank of Canada	\$90,000 par, 1.15% due 6/10/25	90,655	87,073
	Sempra Energy	\$35,000 par, 6% due 10/15/39	39,967	36,494
	Ssm Health Care	\$55,000 par, 3.823% due 6/1/27	55,000	53,870
		\$100,000 par, Variable due 11/1/34		
	State Street Corp		104,594	90,406
	Stryker Corp	\$50,000 par, 1.15% due 6/15/25	50,306	48,253
	Texas Instruments Inc	\$50,000 par, 1.375% due 3/12/25	51,688	48,850
	The Coca-Cola Co	\$100,000 par, 2.125% due 9/6/29	98,960	89,881
	The Walt Disney Company	\$50,000 par, 1.85% due 7/30/26	51,483	47,317
	Transcanada Trust	\$35,000 par, Variable due 3/15/77	35,315	32,905
	Union Pacific Corp	\$50,000 par, 2.4% due 2/5/30	51,749	44,848
	Unilever Capital Corp	\$90,000 5% due 12/8/33	89,239	92,260
	Union Pacific Corp	\$55,000 par, 4.05% due 3/1/46	54,275	45,878
	Unitedhealth Group Incorporated	\$90,000 4.95% due 1/15/32	89,796	90,881
	US Bancorp	\$75,000 par, Variable due 7/22/28	71,591	74,254
	Ventas Realty LP Capital Corp	\$40,000 par, 5.7% due 9/30/43	54,255	39,316
	Verizon Communications	\$35,000 par, 4.5% due 8/10/33	34,901	33,626
	Voya Financial Inc	\$35,000 par, 3.65% due 6/15/26	34,803	34,157
	Waste Management Inc	\$100,000 par, 4.625% due 2/15/30	98,790	100,506
	Wells Fargo & Company	\$100,000 par, 3% due 4/22/26	99,336	96,918
	Wells Fargo Bank Na	\$60,000 par, 5.95% due 8/26/36	77,383	63,944
	Wisconsin Power & Light	\$100,000 par, 1.95% due 9/16/31	99,991	81,921
	Ww Grainger Inc	\$40,000 par, 4.6% due 6/15/45	43,855	36,633
		Series 2023-C4 Class A2 5.45835% due 2/15/56	82,400	80,895
	Bmo Mortgage Trust	Series 2022-4 Class A3 5.34% due 8/16/27	79,981	80,096
		Asset Backed Series 2004-1 Cl 2A2 Variable due 12/25/33	43,621	40,063
	Chase Funding Mortgage Loan	Series 2004-7 Class A2 Variable due 1/25/35	63,849	58,254
	Home Equity Asset Trust	Series 2023-A1 Class A 5.54% due 7/15/29	94,988	96,279
	Synchrony Card Issuance Trust			
			<u>\$ 7,061,535</u>	<u>\$ 6,594,332</u>

Note: Column (a) is blank as there were no parties in interest.

See accompanying independent auditor's report.

EMPLOYERS AND LABORERS LOCALS 100 & 397 PENSION PLAN
FEIN 37-6085017 / PLAN NUMBER: 001
SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)
MORTGAGES
JULY 31, 2024

Identity of Issue, Borrower, Lessor, or Similar Party		Description of Investment Including Maturity Date, Rate of Interest Collateral Par Or, Maturity Value	Cost	Current Value
(a)	(b)	(c)	(d)	(e)
	FHLMC	Gold Pool #C91787 3.5% due 10/1/34 dtd 9/1/14	\$ 11,054	\$ 10,115
	FHLMC	Umbs Pool #SD2382 3.5% due 8/1/52 dtd 2/1/23	74,159	74,092
	FHLMC	Gold Pool #G30705 3.5% due 5/1/33 dtd 1/1/15	10,612	9,710
	FHLMC	Umbs Pool #RA6127 3% due 10/25/51 dtd 3/1/24	85,304	86,559
	FHLMC	Umbs Pool #QI1647 5% due 3/1/54 dtd 3/1/24	145,879	147,108
	FHLMC	Umbs Pool #RJ0917 5% due 2/1/54 dtd 2/1/24	95,002	97,583
	FHLMC	REMIC Series 4026 Class Jg 3% due 10/15/41 dtd 4/1/12	3,985	3,766
	FHLMC	REMIC Series 4097 Class Gj 2.5% due 10/15/31 dtd 8/1/12	6,672	6,449
	FHLMC	REMIC Series 4097 Class Gt 3% due 10/15/31 dtd 8/1/12	1,744	1,617
	FHLMC	REMIC Series 4370 Class PA 3.5% due 9/15/41 dtd 7/1/14	2,542	2,503
	FHLMC	REMIC Series 4639 Class Kb variable due 4/15/53 dtd 12/1/16	21,359	20,098
	FHLMC	REMIC Series 5020 Class Kw 2% due 9/25/45 dtd 9/1/20	82,894	67,094
	FHLMC	REMIC Series 2020-5042 Class Lk 2% due 11/25/50 dtd 10/1/20	66,075	46,537
	FHLMC	REMIC Series 2021-5081 Class Qa 2% due 12/25/50 dtd 2/1/21	64,350	50,000
	FHLMC	REMIC Series 2020-5050 Class Dm 2% due 3/25/48 dtd 11/1/20	61,351	49,847
	FNMA	Umbs Pool #BY0013 6% due 4/25/53 dtd 6/1/24	147,166	147,789
	FNMA	Umbs Pool #CB3029 3% due 3/1/52 dtd 2/1/22	63,251	61,738
	FNMA	Umbs Pool #CB6308 4.5% due 5/25/53 dtd 4/1/24	184,289	187,591
	FNMA	Umbs Pool #MA3933 2.5% due 2/1/40 dtd 1/1/20	18,650	16,056
	FNMA	Umbs Pool #MA4599 3% due 5/25/52 Dtd 6/1/24	45,919	46,550
	FNMA	Umbs Pool #MA4841 5% due 12/1/52 dtd 11/1/22	100,670	101,649
	FNMA	Umbs Pool #MA5410 5.5% due 5/24/44 dtd 5/1/24	95,895	97,197
	FNMA	Umbs Pool #bs6088 4.04% due 8/1/30 dtd 7/1/22	94,547	97,746
	FNMA	Pool #CA7991 2% due 12/1/50 dtd 11/1/20	63,631	48,791
	FNMA	Pool #CA1792 4.5% due 3/1/38 dtd 5/1/18	13,661	13,566
	FNMA	Pool #MA1463 3.5% due 6/1/43 dtd 5/1/13	22,598	21,622
	FNMA	Pool #MA1491 3% due 7/1/43 dtd 6/1/13	11,612	10,327
	FNMA	Pool #MA2114 3.5% due 12/1/44 dtd 11/1/14	9,808	8,780
	FNMA	Pool #MA2841 2.5% due 12/1/36 dtd 11/1/16	12,944	12,256
	FNMA	REMIC Series 2012-46 Class CD 2.5% due 4/25/41 dtd 4/1/12	2,236	2,169
	FNMA	REMIC Series 2012-93 Class Qd 1.75% due 1/25/42 dtd 8/1/12	6,983	6,795
	FNMA	REMIC Series 2012-117 Class Ad 3.5% due 10/25/42 dtd 9/1/12	9,991	8,956
	FNMA	REMIC Series 2012-103 Class Da 3.5% due 10/25/41 dtd 8/1/12	1,051	1,034
	FNMA	REMIC Series 2022-17 Class Jg 3% due 12/25/48 dtd 7/1/24	95,510	96,088
	GNMA II	Pool #2116 7% due 11/20/25 dtd 11/1/95	148	142
	GNMA II	Pool #2360 7.5% due 1/20/27 dtd 1/1/97	342	320
	GNMA II	Pool #381333 7% due 11/20/25 dtd 11/1/95	802	755
	GNMA II	Pool #CO2900 5% due 7/20/52 dtd 7/1/22	80,749	83,235
	GNMA II	Pool #MA0068 3% due 5/20/27 dtd 5/1/12	5,588	5,312
	GNMA	REMIC Series 2020-24 Class Ac 2.35% due 2/16/61 dtd 2/1/20	69,308	56,247
	GNMA	REMIC Series 2018-67 Class Cj 3.5% due 12/20/45 dtd 5/1/18	9,681	9,700
	GNMA	REMIC Series 2018-97 Class Vd 3.5% due 5/20/37 dtd 7/1/18	68,797	68,208
	ICT	Series 2003-9f Class A1 variable rate due 7/25/33 dtd 7/30/03	1,612	1,672
	ICT	Series 2005-6 Class 2A2 variable rate due 10/25/35 dtd 9/9/05	865	907
			<u>\$ 1,971,286</u>	<u>\$ 1,886,276</u>

Note: Column (a) is blank as there were no parties in interest.

See accompanying independent auditor's report.

EMPLOYERS AND LABORERS LOCALS 100 & 397 PENSION PLAN

FEIN 37-6085017 / PLAN NUMBER: 001

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

COMMON STOCKS

JULY 31, 2024

	Identity of Issue, Borrower, Lessor, or Similar Party	Description of Investment Including Maturity Date, Rate of Interest Collateral Par Or, Maturity Value	Cost	Current Value
(a)	(b)	(c)	(d)	(e)
	Abbvie Inc	Common Stock	\$ 59,413	\$ 148,256
	Adobe Inc	Common Stock	71,164	110,330
	Advanced Micro Devices Inc	Common Stock	34,368	41,899
	Alphabet Inc Class A	Common Stock	145,347	863,704
	Amazon Com Inc	Common Stock	203,561	769,423
	America Tower Corp	Common Stock	48,908	48,488
	Amgen Inc	Common Stock	61,341	144,624
	Apple Inc	Common Stock	255,039	1,358,019
	Booking Holdings Inc	Common Stock	70,370	111,450
	Broadcom Inc	Common Stock	104,428	427,408
	Cadence Design Systems Inc	Common Stock	111,563	101,711
	Caterpillar Inc	Common Stock	30,142	48,468
	Cheniere Energy Inc	Common Stock	46,353	54,792
	Chevron Corporation	Common Stock	68,135	72,211
	Chubb LTD	Common Stock	70,250	89,589
	Cognizant Technology Solutions Corp	Common Stock	4,863	7,568
	Costco Whsl Corp	Common Stock	67,068	189,060
	Deere & Co	Common Stock	54,080	55,797
	Delta Air Lines Inc	Common Stock	58,976	75,930
	Eog Resources Incorporated	Common Stock	45,597	51,988
	Home Depot Inc	Common Stock	35,947	174,876
	Intuit	Common Stock	79,070	129,470
	Intuitive Surgical Inc	Common Stock	54,400	84,476
	JP Morgan Chase & Co	Common Stock	74,882	150,024
	Kla Corporation	Common Stock	80,140	185,191
	Lam Resh Corp	Common Stock	22,550	128,974
	Lilly Eli & Co	Common Stock	72,433	221,174
	Lockheed Martin Corp	Common Stock	55,678	67,740
	Lowes Companies Inc	Common Stock	48,560	125,210
	L3harris Technologies Inc	Common Stock	88,756	124,789
	Mastercard Incorporated Class A	Common Stock	134,914	255,041
	Meta Platforms Inc	Common Stock	231,360	427,347
	Microsoft Corp	Common Stock	357,915	1,384,739
	Netflix.Com Inc	Common Stock	49,312	106,820
	Nvidia Corp	Common Stock	107,564	1,154,987
	Oracle Corporation	Common Stock	57,789	55,780
	Oreilly Automotive Inc	Common Stock	50,490	152,056
	Palo Alto Networks Inc	Common Stock	57,827	131,516
	Parker-Hannifin CP	Common Stock	76,764	140,290
	Pepsico Inc	Common Stock	92,792	129,503

EMPLOYERS AND LABORERS LOCALS 100 & 397 PENSION PLAN
 FEIN 37-6085017 / PLAN NUMBER: 001
 SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)
 COMMON STOCKS
 JULY 31, 2024

(a)	Identity of Issue, Borrower, Lessor, or Similar Party (b)	Description of Investment Including Maturity Date, Rate of Interest Collateral Par Or, Maturity Value (c)	Cost (d)	Current Value (e)
	Qualcomm Inc	Common Stock	61,800	54,285
	Regeneron Pharmaceuticals Inc	Common Stock	70,449	124,107
	Salesforce Inc	Common Stock	56,492	51,760
	Servicenow Inc	Common Stock	17,646	89,583
	Sherwin Williams Co	Common Stock	75,495	138,566
	Stryker Corp	Common Stock	75,488	114,608
	Synopsys Inc	Common Stock	69,246	114,456
	Tesla Motors Inc	Common Stock	188,883	201,901
	Thermo Fisher Corp	Common Stock	7,710	58,267
	TJX Cos Inc	Common Stock	98,247	124,322
	Uber Technologies Inc	Common Stock	53,488	51,576
	Union Pacific Corp	Common Stock	85,257	113,496
	Unitedhealth Group Inc	Common Stock	51,447	141,159
	Vertex Pharmaceuticals Inc	Common Stock	53,348	61,965
	Visa Inc Class A Shares	Common Stock	33,815	166,044
	Zoetis Inc	Common Stock	47,836	49,511
			<u>\$4,486,756</u>	<u>\$11,756,324</u>

Note: Column (a) is blank as there were no parties in interest.

EMPLOYERS AND LABORERS LOCALS 100 & 397 PENSION PLAN
FEIN 37-6085017 / PLAN NUMBER: 001
SCHEDULE H, PAGE 4 LINE I - SCHEDULE OF INVESTMENTS HELD
MUNICIPAL BONDS
JULY 31, 2024

(a)	Identity of Issue, Borrower, Lessor, or Similar Party (b)	Description of Investment Including Maturity Date, Rate of Interest Collateral Par Or, Maturity Value (c)	Cost (d)	Current Value (e)
	Corpus Christi TX	\$100,000 par 3.954%, due 3/1/29	\$ 101,350	\$ 98,257
	ME State Governmental Facilities	\$100,000 par 0.897% due 10/1/25	100,000	95,435
	Montgomery County PA Higher Education and Health Auth	\$100,000 par 2.08% due 5/1/29	100,000	89,628
	PA State Housing Finance Agency	\$100,000 par 4.869% due 4/1/30	100,000	101,481
	San Buenaventura CA	\$100,000 par 1.31% due 10/1/26	100,000	93,441
			<u>\$ 501,350</u>	<u>\$ 478,242</u>

Note: Column (a) is blank as there were no parties in interest.

EMPLOYERS AND LABORERS LOCALS 100 & 397 PENSION PLAN
FEIN 37-6085017 / PLAN NUMBER: 001
SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)
EXCHANGE TRADED FUNDS
JULY 31, 2024

	Identity of Issue, Borrower, Lessor, or Similar Party	Description of Investment Including Maturity Date, Rate of Interest Collateral Par Or, Maturity Value	Cost	Current Value
(a)	(b)	(c)	(d)	(e)
	Vanguard Mid Cap Value Index Fund ETF	Exchange Traded Funds	<u>\$1,120,116</u>	<u>\$1,937,218</u>

Note: Column (a) is blank as there were no parties in interest.

See accompanying independent auditor's report.

EMPLOYERS AND LABORERS LOCALS 100 & 397 PENSION PLAN
FEIN 37-6085017 / PLAN NUMBER: 001
SCHEDULE H, LINE 4i- SCHEDULE OF ASSETS (HELD AT END OF YEAR)
MUTUAL FUNDS
JULY 31, 2024

	Identity of Issue, Borrower, Lessor, or Similar Party	Description of Investment Including Maturity Date, Rate of Interest Collateral Par Or, Maturity Value	Cost	Current Value
(a)	(b)	(c)	(d)	(e)
	DF Dent Midcap Growth Fund	Mutual Fund	\$ 2,019,488	\$ 1,823,933
	DFA US Small Cap Growth Portfolio	Mutual Fund	2,334,827	3,910,225
	Dodge & Cox Stock Fund	Mutual Fund	8,565,999	11,792,907
	Westwood Quality Smallcap Fund	Mutual Fund	2,888,736	3,935,337
	Fidelity International Index Fund	Mutual Fund	5,293,501	6,227,184
	Harding Loevner International Equity Portfolio	Mutual Fund	6,262,279	5,955,359
			<u>\$27,364,830</u>	<u>\$33,644,945</u>

Note: Column (a) is blank as there were no parties in interest.

See accompanying independent auditor's report.

EMPLOYERS AND LABORERS LOCALS 100 & 397 PENSION PLAN
FEIN 37-6085017 / PLAN NUMBER: 001
SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)
OTHER
JULY 31, 2024

(a)	Identity of Issue, Borrower, Lessor, or Similar Party (b)	Description of Investment Including Maturity Date, Rate of Interest Collateral Par Or, Maturity Value (c)	Cost (d)	Current Value (e)
	AFL-CIO Building Investment Trust	Collective Investment Trust	\$ 1,485,494	\$ 1,647,907
	BPEA Cayman VI, L.P.	Limited Partnership	643,658	846,219
	Bnym AFL-CIO SI Mid Cap	Collective Investment Trust	2,994,250	3,904,928
	Bnym AFL-CIO SI Stock Index	Collective Investment Trust	7,874,259	12,594,064
	ElmTree U.S. Net Lease Fund IV, L.P.	Limited Partnership	-	279,016
	ElmTree U.S. Net Lease Fund V-A, L.P.	Limited Partnership	2,141,716	2,256,446
	HarbourVest 2018 Global Feeder Fund L.P.	103-12 Investments	2,514,429	4,221,444
	HarbourVest 2020 Global Feeder Fd L.P.	Limited Partnership	1,463,248	1,894,540
	Mackay Shields Core Plus Bond CIT	Collective Investment Trust	10,325,000	11,848,224
	Principal Real Estate Inv U.S. Property Separate Acct	Pooled Separate Account	3,589,209	3,227,242
	RREEF America II LP	Limited Partnership	3,838,534	4,315,295
	Ullico Infrastructure Tax-Exempt Fund, L.P.	103-12 Investments	1,440,195	2,402,071
	Parametric Defensive Equity Fund LLC	103-12 Investments	1,200,000	1,130,133
	Mesirow High Yield CIT Class A	Collective Investment Trust	5,750,000	6,077,197
	CC&L Q Emerging Markets Equity CIF Class A	103-12 Investments	2,000,000	2,123,084
	Neuberger Berman U.S. Equity Index PutWrite Fund LLC	103-12 Investments	1,225,000	1,101,060
			<u>\$ 48,484,992</u>	<u>\$ 59,868,870</u>

Note: Column (a) is blank as there were no parties in interest.

EMPLOYERS AND LABORERS LOCALS 100 & 397 PENSION PLAN
 FEIN 37-6085017 / PLAN NUMBER: 001
 SCHEDULE H, LINE 41 - SCHEDULE OF REPORTABLE TRANSACTIONS
 JULY 31, 2024

IDENTITY OF PARTY INVOLVED (a)	DESCRIPTION OF ASSET (b)	PURCHASE PRICE (c)	SELLING PRICE (d)	LEASE RENTAL (e)	EXPENSE INCURRED WITH TRANSACTION (f)	COST OF ASSET (g)	CURRENT VALUE OF ASSET ON TRANSACTION DATE (h)	GAIN OR (LOSS) (i)
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Category 1 - Single Transaction Exceeds 5% of Value:

No transactions

Category 2 - Series of Transactions with Same Person, Involving Property Other Than Securities Exceeds 5% of Value:

No transactions

Category 3 - Series of Transactions with Same Security Exceeds 5% of Value:

Commerce Trust	Financial Square Tr Government	\$ 7,261,445	\$ -	\$ -	-	\$ 7,261,445	\$ 7,261,445	\$ -
Commerce Trust	Financial Square Tr Government	-	7,080,875	-	-	7,080,875	7,080,875	-
Commerce Trust	Financial Square Tr Government	5,534,755	-	-	-	5,534,755	5,534,755	-
Commerce Trust	Financial Square Tr Government	-	6,996,620	-	-	6,996,620	6,996,620	-

Category 4 - Single Transaction with One Broker Exceeds 5% of Value:

No transactions

See accompanying independent auditor's report.

**EMPLOYERS AND LABORERS LOCALS 100 & 397
PENSION FUND**

EIN: 37-6085017 PN: 001

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

Years of Credited Service																						
Age	< 1		0-4		5-9		10-14		15-19		20-24		25-29		30-34		35-39		40+		Total	
	No.	Avg. Ben	No.	Avg. Ben	No.	Avg. Ben	No.	Avg. Ben	No.	Avg. Ben	No.	Avg. Ben	No.	Avg. Ben	No.	Avg. Ben	No.	Avg. Ben	No.	Avg. Ben	No.	Avg. Ben
Under 25	-	-	15	260	5	710	-	-	-	-	-	-	-	-	-	-	-	-	-	20	372	
25 - 29	-	-	55	292	14	539	2	1,622	-	-	-	-	-	-	-	-	-	-	-	71	378	
30 - 34	-	-	18	383	25	552	5	1,881	3	1,361	-	-	-	-	-	-	-	-	-	51	670	
35 - 39	-	-	11	238	7	654	11	1,679	9	1,736	2	875	-	-	-	-	-	-	-	40	1,076	
40 - 44	-	-	9	360	6	937	8	1,701	21	1,150	11	2,556	2	2,368	-	-	-	-	-	57	1,394	
45 - 49	-	-	5	340	4	362	5	1,867	7	1,712	7	2,790	6	3,177	-	-	-	-	-	34	1,855	
50 - 54	-	-	6	373	4	966	8	1,313	10	2,033	12	2,321	14	2,873	5	4,377	1	4,184	-	60	2,185	
55 - 59	-	-	5	500	5	855	3	2,281	9	1,687	3	2,034	4	3,836	1	5,885	3	4,349	2	5,992	35	2,319
60 - 64	-	-	2	477	-	-	3	2,649	3	2,456	2	3,205	1	3,358	1	5,726	4	783	6	2,282	22	2,209
65 - 69	-	-	1	482	-	-	-	-	-	-	-	-	-	-	-	-	-	-	3	3,067	4	-
70 +	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	114	1	-
	-	-	127	3,705	70	5,575	45	14,992	62	12,136	37	13,782	27	15,613	7	15,988	8	9,316	12	11,455	395	12,458

**EMPLOYERS AND LABORERS LOCALS 100 & 397
PENSION FUND**

EIN: 37-6085017 PN: 001

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

Years of Credited Service																						
Age	< 1		0-4		5-9		10-14		15-19		20-24		25-29		30-34		35-39		40+		Total	
	No.	Avg. Ben	No.	Avg. Ben	No.	Avg. Ben	No.	Avg. Ben	No.	Avg. Ben	No.	Avg. Ben	No.	Avg. Ben	No.	Avg. Ben	No.	Avg. Ben	No.	Avg. Ben	No.	Avg. Ben
Under 25	-	-	15	260	5	710	-	-	-	-	-	-	-	-	-	-	-	-	-	-	20	372
25 - 29	-	-	55	292	14	539	2	1,622	-	-	-	-	-	-	-	-	-	-	-	-	71	378
30 - 34	-	-	18	383	25	552	5	1,881	3	1,361	-	-	-	-	-	-	-	-	-	-	51	670
35 - 39	-	-	11	238	7	654	11	1,679	9	1,736	2	875	-	-	-	-	-	-	-	-	40	1,076
40 - 44	-	-	9	360	6	937	8	1,701	21	1,150	11	2,556	2	2,368	-	-	-	-	-	-	57	1,394
45 - 49	-	-	5	340	4	362	5	1,867	7	1,712	7	2,790	6	3,177	-	-	-	-	-	-	34	1,855
50 - 54	-	-	6	373	4	966	8	1,313	10	2,033	12	2,321	14	2,873	5	4,377	1	4,184	-	-	60	2,185
55 - 59	-	-	5	500	5	855	3	2,281	9	1,687	3	2,034	4	3,836	1	5,885	3	4,349	2	5,992	35	2,319
60 - 64	-	-	2	477	-	-	3	2,649	3	2,456	2	3,205	1	3,358	1	5,726	4	783	6	2,282	22	2,209
65 - 69	-	-	1	482	-	-	-	-	-	-	-	-	-	-	-	-	-	-	3	3,067	4	2,421
70 +	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	114	1	114
	-	-	127	3,705	70	5,575	45	14,992	62	12,136	37	13,782	27	15,613	7	15,988	8	9,316	12	11,455	395	14,993

EMPLOYERS AND LABORERS LOCALS 100 & 397 PENSION FUND

EIN: 37-6085017 PN: 001

Schedule MB, Line 6 Statement of Actuarial Methods and Assumptions

Funding Method:

Aggregate Funding Method - Under this method, the Present Value of Future Normal Costs equals the Present Value of Benefits reduced by Plan Assets. These future costs are spread as a level percentage over current and future expected hours. The portion attributable to current expected hours is the current year Normal Cost.

Experience gains and losses are included in the Present Value of Future Normal Costs, and therefore are spread over future expected hours.

Valuation of Assets

All Assets are valued at Market Value

Mortality Rates

Pre-Retirement: Males: PRI-12 Employee Blue Collar Table for males, with projected mortality improvement based on the most recent improvement Scale published (Scale MP 2021).

Females: PRI-12 Employee Blue Collar Table for females, with projected mortality improvement based on the most recent improvement Scale published (Scale MP 2021).

Post-Retirement: Males: PRI-12 Annuitant Blue Collar Table for males, with projected mortality improvement based on the most recent improvement Scale published (Scale MP 2021).

Females: PRI-12 Annuitant Blue Collar Table for females, with projected mortality improvement based on the most recent improvement Scale published (Scale MP 2021).

Investment Earnings

Pre-Retirement: 6.75% per annum: compounded annually
Post-Retirement: 6.75% per annum: compounded annually

Current Liability

Interest Rate: 2.91% per annum: compounded annually

Salary Appreciation

Increase Rate: None Assumed

**EMPLOYERS AND LABORERS LOCALS 100 & 397
PENSION FUND**

EIN: 37-6085017 PN: 001

**Schedule MB, Line 6 Statement of Actuarial Methods and
Assumptions
(continued)**

Assumed Retirement Age

Age 60

Termination prior to Retirement other than Death

T-6 Actuaries Table

<u>Age</u>	<u>Probability of Termination</u>
20	0.07943
30	0.07403
40	0.06125
50	0.03639
60	0.00133
63 & over	0.00000

Expense Load

\$150,000 is the assumed annual expense

Amortization Methods for Contribution Alternatives

The Recommended Contribution, Minimum Required Contribution, and the Maximum Deductible Contribution are based on the Aggregate Method, under which there is no Unfunded Accrued Liability.

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 <u>08/01/2023</u> and ending <u>07/31/2024</u>	

A This return/report is for: ☒ a multiemployer plan ☐ a multiple-employer plan (Filers checking this box must provide participating employer information in accordance with the form instructions.)

☐ a single-employer plan ☐ a DFE (specify) _____

B This return/report is: ☐ the first return/report ☐ the final return/report

☐ an amended return/report ☐ a short plan year return/report (less than 12 months)

C If the plan is a collectively-bargained plan, check here: ☒

D Check box if filing under: ☒ Form 5558 ☐ automatic extension ☐ the DFVC program

☐ special extension (enter description) _____

E If this is a retroactively adopted plan permitted by SECURE Act section 201, check here: ☐

Part II Basic Plan Information —enter all requested information					
1a Name of plan EMPLOYERS AND LABORERS LOCALS 100 & 397 PENSION FUND	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%;">1b Three-digit plan number (PN) ▶</td> <td style="width: 20%; text-align: center;">001</td> </tr> <tr> <td colspan="2">1c Effective date of plan 08/01/1967</td> </tr> </table>	1b Three-digit plan number (PN) ▶	001	1c Effective date of plan 08/01/1967	
1b Three-digit plan number (PN) ▶	001				
1c Effective date of plan 08/01/1967					
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) EMPLOYERS AND LABORERS LOCALS 100 & 397 PENSION FUND 4940 WASHINGTON BLVD SAINT LOUIS MO 63108-1621	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>2b Employer Identification Number (EIN) 37-6085017</td> </tr> <tr> <td>2c Plan Sponsor's telephone number 314-367-6555</td> </tr> <tr> <td>2d Business code (see instructions) 237990</td> </tr> </table>	2b Employer Identification Number (EIN) 37-6085017	2c Plan Sponsor's telephone number 314-367-6555	2d Business code (see instructions) 237990	
2b Employer Identification Number (EIN) 37-6085017					
2c Plan Sponsor's telephone number 314-367-6555					
2d Business code (see instructions) 237990					

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

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

SIGN HERE		<u>4-28-25</u> Date	Robert Green Enter name of individual signing as plan administrator
SIGN HERE		<u>4-29-25</u> Date	Donna Richter Enter name of individual signing as employer or plan sponsor
SIGN HERE	_____ Signature of DFE	_____ Date	_____ Enter name of individual signing as DFE

3a Plan administrator's name and address ☒ Same as Plan Sponsor	3b Administrator's EIN 3c Administrator's telephone number
4 If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report: a Sponsor's name c Plan Name	4b EIN 4d PN
5 Total number of participants at the beginning of the plan year	5 841
6 Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines 6a(1) , 6a(2) , 6b , 6c , and 6d).	
a(1) Total number of active participants at the beginning of the plan year	6a(1) 395
a(2) Total number of active participants at the end of the plan year	6a(2) 382
b Retired or separated participants receiving benefits	6b 313
c Other retired or separated participants entitled to future benefits	6c 91
d Subtotal. Add lines 6a(2) , 6b , and 6c	6d 786
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits	6e 75
f Total. Add lines 6d and 6e	6f 861
g(1) Number of participants with account balances as of the beginning of the plan year (only defined contribution plans complete this item).....	6g(1)
g(2) Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item).....	6g(2)
h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested.....	6h 26
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	7 190

8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions:
 1B

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

9a Plan funding arrangement (check all that apply) (1) ☒ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor	9b Plan benefit arrangement (check all that apply) (1) ☐ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor
--	---

10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)

a Pension Schedules

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

b General Schedules

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

EMPLOYERS AND LABORERS LOCALS 100 & 397 PENSION PLAN
 FEIN 37-6085017 / PLAN NUMBER: 001
 SCHEDULE H, LINE 41 - SCHEDULE OF REPORTABLE TRANSACTIONS
 JULY 31, 2024

IDENTITY OF PARTY INVOLVED (a)	DESCRIPTION OF ASSET (b)	PURCHASE PRICE (c)	SELLING PRICE (d)	LEASE RENTAL (e)	EXPENSE INCURRED WITH TRANSACTION (f)	COST OF ASSET (g)	CURRENT VALUE OF ASSET ON TRANSACTION DATE (h)	GAIN OR (LOSS) (i)
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Category 1 - Single Transaction Exceeds 5% of Value:

No transactions

Category 2 - Series of Transactions with Same Person, Involving Property Other Than Securities Exceeds 5% of Value:

No transactions

Category 3 - Series of Transactions with Same Security Exceeds 5% of Value:

Commerce Trust	Financial Square Tr Government	\$ 7,261,445	\$ -	\$ -	-	\$ 7,261,445	\$ 7,261,445	\$ -
Commerce Trust	Financial Square Tr Government	-	7,080,875	-	-	7,080,875	7,080,875	-
Commerce Trust	Financial Square Tr Government	5,534,755	-	-	-	5,534,755	5,534,755	-
Commerce Trust	Financial Square Tr Government	-	6,996,620	-	-	6,996,620	6,996,620	-

Category 4 - Single Transaction with One Broker Exceeds 5% of Value:

No transactions

See accompanying independent auditor's report.

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 08/01/2023 and ending 07/31/2024

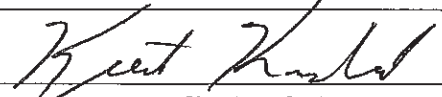
▶ **Round off amounts to nearest dollar.**

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

A Name of plan EMPLOYERS AND LABORERS LOCALS 100 & 397 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 EMPLOYERS AND LABORERS LOCALS 100 & 397 PENSION FUND	D Employer Identification Number (EIN) 37-6085017

E Type of plan: (1) ☒ Multiemployer Defined Benefit (2) ☐ Money Purchase (see instructions)	
1a Enter the valuation date: Month 08 Day 01 Year 2023	
b Assets	
(1) Current value of assets	1b(1) 115,200,617
(2) Actuarial value of assets for funding standard account.....	1b(2) 115,200,617
c (1) Accrued liability for plan using immediate gain methods	
(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) 121,462,849
(c) Normal cost under entry age normal method	1c(2)(c) 1,415,919
(3) Accrued liability under unit credit cost method.....	1c(3) 110,491,067
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) 183,739,448
(b) Expected increase in current liability due to benefits accruing during the plan year	1d(2)(b) 6,809,812
(c) Expected release from "RPA '94" current liability for the plan year	1d(2)(c) 6,902,959
(3) Expected plan disbursements for the plan year	1d(3) 6,902,959

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		04/14/2025
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KEITH KOWALCZYK	Signature of actuary	Date 2302812
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EKON BENEFITS	Type or print name of actuary	Most recent enrollment number 314-367-6555
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	Firm name	Telephone number (including area code)
--	-----------	--

4940 WASHINGTON BLVD.		
ST. LOUIS	MO	63108
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 ☐

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

Schedule MB (Form 5500) 2023
v. 230728

- 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** 2.91 %
- | | Pre-retirement | | Post-retirement | |
|--|------------------------------|---|---|--|
| | ☐ Yes | ☐ No | ☒ N/A | |
| 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) | 9P21 | 9P21 | |
| (2) Females | 6c(2) | 9FP21 | 9FP21 | |
| d Valuation liability interest rate | 6d | 6.75 % | 6.75 % | |
| 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) | 5.36 % | | |
| g Estimated investment return on actuarial value of assets for year ending on the valuation date | 6g | 5.6 % | | |
| h Estimated investment return on current value of assets for year ending on the valuation date | 6h | 5.6 % | | |
| i Expense load included in normal cost reported in line 9b | 6i | ☐ N/A | | |
| (1) If expense load is described as a percentage of normal cost, enter the assumed percentage | 6i(1) | % | | |
| (2) If expense load is a dollar amount that varies from year to year, enter the dollar amount included in line 9b | 6i(2) | 150,000 | | |
| (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

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

6,182,665

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)

Outstanding balance

(2) Funding waivers

9c(2)

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

9c(3)

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

9d

417,330

e Total charges. Add lines 9a through 9d

9e

6,599,995

Credits to funding standard account:

f Prior year credit balance, if any

9f

27,176,943

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

9g

6,464,180

h Amortization credits as of valuation date

9h

Outstanding balance

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

9i

2,000,155

j Full funding limitation (FFL) and credits:

(1) ERISA FFL (accrued liability FFL)

9j(1)

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

9j(2)

(3) FFL credit

9j(3)

k (1) Waived funding deficiency

9k(1)

(2) Other credits

9k(2)

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

9l

35,641,278

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

9m

29,041,283

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

9n

o Current year's accumulated reconciliation account:

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

9o(1)

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

(a) Reconciliation outstanding balance as of valuation date

9o(2)(a)

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

9o(2)(b)

0

(3) Total as of valuation date

9o(3)

0

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

10

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

☐ Yes ☒ No

EMPLOYERS AND LABORERS LOCALS 100 & 397
PENSION FUND
EIN: 37-6085017 PN: 001

Schedule MB, Line 6 – Summary of Plan Provisions

Year of Service

One Year of Service is credited if Employee works 1000 hours of service. For service less than 1,000 hours, service is credited as follows:

<u>Hours Worked</u>	<u>Service Credited</u>
500 - 639	1/6 year
640 - 779	2/6 year
780 - 919	3/6 year
920 - 999	4/6 year
1,000 & up	1 year

Accrued Benefit

Based on hours worked in each plan year, according to Exhibit A.

Normal Pension

- a) Eligibility requirements: Age 62
- b) Benefit: The Accrued Benefit at Normal Retirement Date (age 62)

Early Pension

- a) Eligibility requirements: Age 55 and 5 Years of Service
- b) Benefit: The Accrued Benefit payable at Normal Retirement Date. Alternatively, an active participant may elect to receive an immediate reduced benefit equal to no reduction to age 60 and 3.0% per year from age 60 to age 55.

Disability Pension

- a) Eligibility requirements: Becomes permanently and totally disabled as determined by a medical doctor or the Social Security Administration.
- b) Benefit: The Accrued Benefit payable from the date of disability. At Normal Retirement the participant may elect an optional form of benefit.

Normal Form of Benefit

The Normal Form of payment of the Normal Pension Benefit is a Life Annuity with guaranteed payments for the first five years.

Termination Pension

- a) Eligibility requirements: 10,000 hours after August 1, 1967. Hours in plan years with fewer than 500 hours

EMPLOYERS AND LABORERS LOCALS 100 & 397 PENSION FUND

EIN: 37-6085017 PN: 001

Schedule MB, Line 6 – Summary of Plan Provisions

(continued)

worked are not included.

For those participants who work at least one hour on or after August 1, 1998, they will also become vested if they have 5 years of service of 1000 hours each.

- b) Benefit: Benefit accrued for each year based on the attached Exhibit A.

Death Benefit

- a) Eligibility Requirement: Death while in service.
- b) Benefit: Present Value of Deferred Accrued Benefit, or if greater, the reserve under the Individual Level Premium Cost method, payable in monthly installments not to exceed 60. If married, the 50% Joint and Survivor Spouse's benefit is payable to the spouse.

Post-Retirement Death Benefit

- a) Eligibility Requirement: Dies on or after December 18, 2013, and is not eligible for a death benefit under the Health & Welfare Plan.
- b) Benefit: Single sum payment as listed below:

<u>Hours Worked</u>	<u>Service Credited</u>
Less than 10,000	\$8,000
10,000 - 14,999	\$8,500
15,000 - 19,999	\$10,000
20,000 - 24,999	\$10,500
25,000 - 29,999	\$11,000
30,000 or more	\$12,500

Post-Retirement Pop-Up Benefit

- a) Eligibility Requirement: Retirees receiving a benefit payable under a Joint & Survivor Annuity and their spouse dies on or after August 1, 2005.
- b) Benefit: A "Pop-Up" to the Normal Form of Benefit (5 Years Certain & Life) effective the first of the month following the spouse's death.

**EMPLOYERS AND LABORERS LOCALS 100 397
PENSION FUND**

EIN: 37-6085017 PN: 001

**Schedule MB, Line 6 – Summary of Plan Provisions
(continued)
EXHIBIT A**

EMPLOYERS AND LABORERS 100 & 397 PENSION PLAN

PAST SERVICE PENSION

FUTURE SERVICE PENSION

EFFECTIVE AUGUST 1, 2021

PAST SERVICE: \$6.44 for each Year of Credited Service prior to August 1, 1967 in which the employee was working - max. 25 years credit.

FUTURE SERVICE: Based on hours worked in each plan year as shown below:

PLAN YEAR BEGINNING:	08/01/67	08/01/75	08/01/76	08/01/77	08/01/78	08/01/79	08/01/80	08/01/85	08/01/89	08/01/91	08/01/95	08/01/05	08/01/09	08/01/13
PLAN YEAR ENDING:	07/31/75	07/31/76	07/31/77	07/31/78	07/31/79	07/31/80	07/31/85	07/31/89	07/31/91	07/31/95	07/31/05	07/31/09	7/31/2013	
<u>HOURS WORKED:</u>														
AT <u>LEAST</u>														
LESS <u>THAN</u>														
0 500	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
500 640	3.67	9.30	23.36	26.78	26.78	28.81	41.08	34.24	31.09	32.15	46.61	55.90	61.48	64.42
640 780	7.34	18.61	29.83	34.28	34.28	36.95	52.63	43.84	39.85	41.17	59.74	71.57	78.73	82.46
780 920	10.99	27.92	36.35	41.75	41.75	45.00	64.14	53.44	48.58	50.18	72.80	87.23	95.95	100.52
920 1060	14.65	37.24	42.83	49.25	49.25	53.09	75.61	63.02	57.28	59.18	85.85	102.89	113.20	118.58
1060 1200	18.35	46.55	49.37	56.81	56.81	61.13	87.14	72.61	66.01	68.21	98.95	118.57	130.43	136.62
1200 1340	22.00	55.85	55.85	64.31	64.31	69.20	98.64	82.21	74.74	77.21	111.98	134.23	147.66	154.69
1340 1480	22.00	55.85	55.85	64.31	71.80	77.29	110.11	91.81	83.42	86.20	125.02	149.89	164.88	172.73
1480 1620	22.00	55.85	55.85	64.31	79.32	85.39	121.66	101.36	92.17	95.21	138.11	165.56	182.14	190.79
1620 1760	22.00	55.85	55.85	64.31	86.80	93.43	133.14	110.95	100.86	104.23	151.16	181.24	199.34	208.85
1760 1900	22.00	55.85	55.85	64.31	94.32	101.51	144.65	120.55	109.58	113.22	164.23	196.88	216.60	226.90
1900 9999	22.00	55.85	55.85	64.31	94.32	101.51	144.65	120.55	109.58	113.22	177.30	212.58	233.83	244.96

ADOPTED ON JUNE 17, 2021 - 20% INCREASE FOR ACTIVES ONLY

(Must have earned at least 500 hours on or after 8/1/2020 to be considered active)

EMPLOYERS AND LABORERS LOCALS 100 & 397 PENSION PLAN
FEIN 37-6085017 / PLAN NUMBER: 001
SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)
CASH AND CASH EQUIVALENTS
JULY 31, 2024

	Identity of Issue, Borrower, Lessor, or Similar Party	Description of Investment Including Maturity Date, Rate of Interest Collateral Par Or, Maturity Value	Cost	Current Value
(a)	(b)	(c)	(d)	(e)
	Financial Square Tr Government	Cash and Cash Equivalent	\$ 813,862	\$ 813,862
	Financial Square Tr Government	Cash and Cash Equivalent	58,782	58,782
	Financial Square Tr Government	Cash and Cash Equivalent	44,832	44,832
	Financial Square Tr Government	Cash and Cash Equivalent	89,424	89,424
	Financial Square Tr Government	Cash and Cash Equivalent	61,224	61,224
	Financial Square Tr Government	Cash and Cash Equivalent	672,321	672,321
			<u>\$ 1,740,445</u>	<u>\$ 1,740,445</u>

Note: Column (a) is blank as there were no parties in interest.

EMPLOYERS AND LABORERS LOCALS 100 & 397 PENSION PLAN
FEIN 37-6085017 / PLAN NUMBER: 001
SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)
U.S. GOVERNMENT & AGENCY SECURITIES
JULY 31, 2024

(a)	Identity of Issue, Borrower, Lessor, or Similar Party (b)	Description of Investment Including Maturity Date, Rate of Interest Collateral, Par or Maturity Value (c)	Cost (d)	Current Value (e)
	US Treasury	75,000 Bond 3.125% due 11/15/41	\$ 76,740	\$ 63,908
	US Treasury	100,000 Bond 2.75% due 8/15/42	95,659	79,489
	US Treasury	105,000 Bond 2.25% due 8/15/46	83,664	72,450
	US Treasury	145,000 Bond 2.75% due 11/15/47	116,617	108,982
	US Treasury	195,000 Bond 3.125% due 5/15/48	165,659	156,563
	US Treasury	145,000 Bond 2.375% due 5/15/51	91,497	98,668
	US Treasury	100,000 Bond 1.75% due 8/15/41	97,145	68,557
	US Treasury	210,000 Bond 2% due 11/15/41	179,504	149,401
	US Treasury	130,000 Note 2.875% Due 05/15/32	122,611	120,255
	US Treasury	200,000 Note 3.375% due 5/15/33	180,563	190,282
	US Treasury	100,000 Note 3.875% due 8/15/33	96,977	98,713
	US Treasury	190,000 Note 4.5% due 11/15/33	193,926	196,576
	US Treasury	75,000 Note 2.25% due 2/15/27	80,010	71,634
	US Treasury	60,000 Note 1.125% due 2/28/27	60,274	55,639
	US Treasury	200,000 Note 0.625% due 5/15/30	178,848	165,860
	US Treasury	75,000 Note 2.375% due 5/15/29	86,868	69,894
	US Treasury	175,000 Note 1.5% due 2/15/30	165,462	153,802
	US Treasury	100,000 Note 1.125% due 2/29/28	99,329	90,467
	US Treasury	25,000 Note 0.5% due 2/28/26	24,650	23,513
	US Treasury	100,000 Note 0.75% due 4/30/26	100,346	93,983
	US Treasury	100,000 Note 1.625% due 5/15/31	83,458	86,196
	US Treasury	100,000 Note 1.5% due 11/30/28	95,764	90,286
	US Treasury	100,000 Note 4.125% due 9/30/27	98,657	100,276
	US Treasury	100,000 Note 4.25% due 9/30/24	99,932	99,797
	US Treasury	200,000 Note 4% due 10/31/29	201,389	200,516
	US Treasury	100,000 Note 4.125% due 10/31/27	98,567	100,286
	US Treasury	200,000 Note 4.5% due 11/15/25	198,853	199,832
	US Treasury	100,000 Note 3.5% due 1/31/30	98,817	97,774
	US Treasury	100,000 Note 3.5% due 2/15/33	96,393	96,172
	US Treasury	200,000 Note 4.625% due 3/15/26	199,704	200,668
	US Treasury	200,000 Note 4.25% due 5/31/25	198,505	198,994
	US Treasury	250,000 Note 3.75% due 6/30/30	245,918	247,295
	US Treasury	200,000 Note 4.75% due 7/31/25	199,450	200,056
	US Treasury	100,000 Note 4% due 7/31/30	99,756	100,215
	US Treasury	50,000 Note 5% due 8/31/25	49,870	50,146
	US Treasury	50,000 Note 4.5% due 11/15/33	49,432	51,731
	US Treasury	75,000 Note 4.375% due 5/15/34	73,966	76,928
	US Treasury	100,000 Note 2% due 2/15/25	99,302	98,394
	US Treasury	125,000 Note 1.625% due 2/15/26	132,324	119,820

EMPLOYERS AND LABORERS LOCALS 100 & 397 PENSION PLAN
FEIN 37-6085017 / PLAN NUMBER: 001
SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)
U.S. GOVERNMENT & AGENCY SECURITIES
JULY 31, 2024

(a)	Identity of Issue, Borrower, Lessor, or Similar Party (b)	Description of Investment Including Maturity Date, Rate of Interest Collateral, Par or Maturity Value (c)	Cost (d)	Current Value (e)
	US Treasury	100,000 Note 2.25% due 2/15/27	99,506	95,512
	US Treasury	100,000 Note 1.625% due 8/15/29	100,770	89,598
	US Treasury	150,000 Note 1.5% due 10/31/24	156,989	148,599
	US Treasury	100,000 Note 1.5% due 1/31/27	102,750	93,799
	US Treasury	100,000 Note 1.5% due 8/15/26	93,116	94,668
	US Treasury	200,000 Note 2.625% due 3/31/25	198,910	197,022
	US Treasury	150,000 Note 2.625% due 1/31/26	155,916	146,034
	US Treasury	100,000 Note 2.625% due 2/15/29	99,271	94,504
	US Treasury	200,000 Note 4% due 2/15/34	192,739	199,204
	US Treasury	79,115.50 Bonds Infl IX 2% due 1/15/26	79,116	78,265
	Federal Farm Credit Bank	150,000 Note 3.875% due 5/3/29	146,205	149,103
	Federal Home Loan Bank	100,000 Note 1% due 8/26/26	100,083	93,466
	Federal Home Loan Bank	100,000 Note 4% due 6/9/28	99,149	99,941
	Federal Home Loan Bank	100,000 Note 4% due 6/30/28	99,040	100,798
	Federal Home Loan Bank	100,000 Note 4.75% due 6/12/26	100,130	100,786
	Federal Home Loan Bank	100,000 Note 2.875% due 9/13/24	108,319	99,707
	FNMA	100,000 Note 2.625% due 9/6/24	99,245	99,715
	FNMA	100,000 Note 0.5% due 6/17/25	100,399	96,338
	FNMA	80,000 Note 0.875% due 8/5/30	79,034	66,526
			<u>\$ 6,927,093</u>	<u>\$ 6,687,603</u>

Note: Column (a) is blank as there were no parties in interest.

EMPLOYERS AND LABORERS LOCALS 100 & 397 PENSION PLAN
FEIN 37-6085017 / PLAN NUMBER: 001
SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)
CORPORATE BONDS
JULY 31, 2024

(a)	Identity of Issue, Borrower, Lessor, or Similar Party (b)	Description of Investment Including Maturity Date, Rate of Interest Collateral Par Or, Maturity Value (c)	Cost (d)	Current Value (e)
	Abbott Laboratories	\$70,000 par, 1.15% due 1/30/28	\$ 69,933	\$ 63,047
	Amazon.Com Inc	\$100,000 par, 4.55% due 12/1/27	99,121	100,601
	Amphenol Corp	100,000 par, 4.75% due 3/30/26	99,172	99,934
	Arthur J Gallagher & Co	\$50,000 par, 2.4% due 11/09/31	49,837	41,635
	Bank of America Corp	\$100,000 par, Variable, due 11/25/25	99,675	93,441
	Bristol-Myers Squibb Co	\$50,000 par, 0.75% due 11/13/25	49,172	47,519
	Costco Wholesale Corp	\$50,000 par, 1.375% due 6/20/27	50,141	46,014
	Emerson Electric Co	\$50,000 par, 0.875% due 10/15/26	49,881	46,160
	General Dynamics Corp	\$100,000 par, 2.125% due 8/15/26	97,903	95,096
	Home Depot Inc	\$50,000 par, 0.9% due 3/15/28	49,981	44,352
	Air Lease Corp	\$50,000 par, 5.1% due 3/1/29	49,381	50,358
	Alabama Power Co	\$65,000 par, 4.3% due 1/2/46	64,567	55,554
	Amazon.Com Inc	\$90,000 par, 1.65% due 5/12/28	89,947	81,522
	Ameriprise Financial Inc	\$75,000 par, 2.875% due 9/15/26	77,459	72,257
	Amgen Inc	\$40,000 par, 5.65% due 3/2/53	39,942	40,305
	Anheuser-Busch Inbev Finance	\$60,000 par, 4.9% due 2/1/46	59,859	56,480
	Avalonbay Communities	\$100,000 par, 2.3% due 3/1/30	102,997	88,569
	Bank of America Corp	\$35,000 par, 4.45% due 3/3/26	35,000	34,703
	Bank of Montreal	\$90,000 par, 5.717% due 9/25/28	91,464	93,220
	Bank of Nova Scoti	\$90,000 par, 5.65% due 2/1/34	89,911	93,783
	Bank One Corp	\$25,000 par, 8% due 4/29/27	33,599	27,188
	Baptist Health South Florida Inc	\$50,000 par, 4.342% due 11/15/41	50,400	44,145
	BB&T Corporation	\$75,000 par, 2.85% due 10/26/24	74,939	74,445
	Bell Canada	\$50,000 par, 3.2% due 2/15/52	49,981	34,128
	Bhp Billiton Finance USA Limited	\$85,000 par, 5.25% due 9/8/33	84,283	87,003
	Boeing Co	\$55,000 par, 6.625% due 2/15/38	71,584	57,939
	BP Capital Markets America	\$70,000 par, 4.234% due 11/6/28	70,000	69,014
	BP Capital Markets America	\$100,000 par, 4.893% due 9/11/33	99,169	99,559
	Burlington North Santa Fe	\$80,000 par, 4.45% due 1/15/53	79,558	70,360
	Canadian National Railway	\$55,000 par, 6.2% due 6/1/36	72,183	60,972
	Canadian Pacific Railway	\$40,000 par, 3.125% due 6/1/26	38,392	38,721
	Canadian Pacific Rr Co	\$30,000 par, 5.75% due 1/15/42	37,250	30,306
	Charles Schwab Corporation	\$95,000 par, 1.15% due 5/13/26	94,780	88,846
	Comcast Corp	\$80,000 par, 5.5% due 11/15/32	79,494	83,535
	Conocophillips Company	\$50,000 par, 5.95% due 3/15/46	72,124	53,371
	Danaher Corp	\$70,000 par, 3.35% due 9/15/25	69,149	68,866
	Duke Energy Ohio Inc	\$80,000 par, 5.25% due 4/1/33	80,797	81,670
	Ecolab Inc	\$40,000 par, 4.8% due 3/24/30	51,158	40,613
	Evergy Kansas Central	\$75,000 par, 3.45% due 4/15/50	74,693	52,931

EMPLOYERS AND LABORERS LOCALS 100 & 397 PENSION PLAN
FEIN 37-6085017 / PLAN NUMBER: 001
SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)
CORPORATE BONDS
JULY 31, 2024

(a)	Identity of Issue, Borrower, Lessor, or Similar Party (b)	Description of Investment Including Maturity Date, Rate of Interest Collateral Par Or, Maturity Value (c)	Cost (d)	Current Value (e)
	Florida Power & Light Co	\$75,000 par, 3.125% due 12/1/25	74,878	73,394
	Gatx Corp	\$45,000 par, 3.1% due 6/1/51	43,927	29,309
	General Motors Financial Co	\$45,000 par, 5% due 4/9/27	44,950	45,076
	Goldman Sachs Group Inc	\$35,000 par, Variable, due 3/9/27	34,958	33,005
	Gonzaga University	\$35,000 par, 4.158% due 4/1/46	35,000	28,312
	Hartford Finl Svcs Grp	\$45,000 par, 6.1% due 10/1/41	45,286	47,393
	Hcp Inc	\$40,000 par, 3.25% due 7/15/26	39,962	38,753
	Hollyfrontier Corp	\$45,000 par, 5.875% due 4/1/26	51,696	45,213
	Indiana Michigan Power	\$70,000 par, 4.25% due 8/15/48	69,600	57,185
	Intuit Inc	\$75,000 par, 1.35% due 7/15/27	74,762	68,662
	John Deere Capital Corp	\$100,000 par, 2.8% due 9/8/27	101,762	95,060
	John Deere Capital Corp	\$70,000 par, 0.7% due 1/15/26	69,938	66,078
	Johnson & Johnson	\$50,000 par, 2.9% due 1/15/28	49,500	47,899
	Kimberly Clark	\$50,000 par, 6.625% due 8/1/37	67,368	58,372
	Laboratory Corporation of America	\$50,000 par, 2.7% due 6/1/31	49,826	43,536
	Lockheed Martin Corporation	\$100,000 par, 4.75% due 2/15/34	98,324	100,092
	Loews Corp	\$85,000 par, 4.125% due 5/15/43	101,412	72,445
	Mastercard Inc	\$85,000 par, 1.9% due 3/15/31	84,891	72,680
	Meta Platforms Inc	\$90,000 par, 5.6% due 5/15/53	94,099	93,830
	Metlife Inc	\$70,000 par, 3.6% due 11/13/25	69,994	68,919
	Mid-America Apartments	\$90,000 par, 4% due 11/15/25	88,393	88,810
	Mitsubishi Ufj Financial Group	\$70,000 par, 3.961% due 3/2/28	70,000	68,480
	Morgan Stanley	\$100,000 Variable due 1/16/30	100,000	101,182
	National Rural Utility Coop	\$75,000 par, 4.15% due 12/15/32	74,729	71,209
	Norfolk Southern Corporation	\$50,000 par, 5.05% due 8/01/30	49,898	50,939
	Northern Trust Corp	\$70,000 par, Variable due 5/8/32	75,074	67,068
	Nucor Corp	\$60,000 par, 6.4% due 12/1/37	63,581	66,851
	Oneok Incorporated	\$35,000 par, 5.15% due 10/15/43	40,126	32,477
	Pacificorp	\$75,000 par, 3.5% due 6/15/29	74,861	70,944
	Paypal Holdings Inc	\$85,000 par, 5.25% due 6/1/62	82,008	80,138
	Pepsico Inc	\$75,000 par, 2.75% due 4/30/25	76,872	73,744
	Pepsico Inc	\$35,000 par, 4.45% due 4/14/46	37,027	31,726
	PG & E Wildfire Recovery	\$68,770 par, 3.594% due 6/1/30	68,769	66,617
	PNC Financial Services	\$80,000 par, Variable due 1/24/34	80,000	79,142
	Prologis LP	\$40,000 par, 1.75% due 2/1/31	40,000	33,274
	Public Svc Enterprise Group Inc	\$50,000 par, 5.45% due 4/1/34	49,920	50,850
	Reinsurance Group of America	\$50,000 3.9% due 5/15/29	45,907	47,837
	Qualcomm Incorporated	\$50,000 par, 1.3% due 5/20/28	48,373	44,576
	Roper Technologies Inc	\$50,000 par, 3.85% due 12/15/25	52,217	49,315

EMPLOYERS AND LABORERS LOCALS 100 & 397 PENSION PLAN
FEIN 37-6085017 / PLAN NUMBER: 001
SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)
CORPORATE BONDS
JULY 31, 2024

	Identity of Issue, Borrower, Lessor, or Similar Party	Description of Investment Including Maturity Date, Rate of Interest Collateral Par Or, Maturity Value	Cost	Current Value
(a)	(b)	(c)	(d)	(e)
	Royal Bank of Canada	\$90,000 par, 1.15% due 6/10/25	90,655	87,073
	Sempra Energy	\$35,000 par, 6% due 10/15/39	39,967	36,494
	Ssm Health Care	\$55,000 par, 3.823% due 6/1/27	55,000	53,870
		\$100,000 par, Variable due 11/1/34		
	State Street Corp		104,594	90,406
	Stryker Corp	\$50,000 par, 1.15% due 6/15/25	50,306	48,253
	Texas Instruments Inc	\$50,000 par, 1.375% due 3/12/25	51,688	48,850
	The Coca-Cola Co	\$100,000 par, 2.125% due 9/6/29	98,960	89,881
	The Walt Disney Company	\$50,000 par, 1.85% due 7/30/26	51,483	47,317
	Transcanada Trust	\$35,000 par, Variable due 3/15/77	35,315	32,905
	Union Pacific Corp	\$50,000 par, 2.4% due 2/5/30	51,749	44,848
	Unilever Capital Corp	\$90,000 5% due 12/8/33	89,239	92,260
	Union Pacific Corp	\$55,000 par, 4.05% due 3/1/46	54,275	45,878
	Unitedhealth Group Incorporated	\$90,000 4.95% due 1/15/32	89,796	90,881
	US Bancorp	\$75,000 par, Variable due 7/22/28	71,591	74,254
	Ventas Realty LP Capital Corp	\$40,000 par, 5.7% due 9/30/43	54,255	39,316
	Verizon Communications	\$35,000 par, 4.5% due 8/10/33	34,901	33,626
	Voya Financial Inc	\$35,000 par, 3.65% due 6/15/26	34,803	34,157
	Waste Management Inc	\$100,000 par, 4.625% due 2/15/30	98,790	100,506
	Wells Fargo & Company	\$100,000 par, 3% due 4/22/26	99,336	96,918
	Wells Fargo Bank Na	\$60,000 par, 5.95% due 8/26/36	77,383	63,944
	Wisconsin Power & Light	\$100,000 par, 1.95% due 9/16/31	99,991	81,921
	Ww Grainger Inc	\$40,000 par, 4.6% due 6/15/45	43,855	36,633
		Series 2023-C4 Class A2 5.45835% due 2/15/56	82,400	80,895
	Bmo Mortgage Trust	Series 2022-4 Class A3 5.34% due 8/16/27	79,981	80,096
		Asset Backed Series 2004-1 Cl 2A2 Variable due 12/25/33	43,621	40,063
	Chase Funding Mortgage Loan	Series 2004-7 Class A2 Variable due 1/25/35	63,849	58,254
	Home Equity Asset Trust	Series 2023-A1 Class A 5.54% due 7/15/29	94,988	96,279
	Synchrony Card Issuance Trust			
			<u>\$ 7,061,535</u>	<u>\$ 6,594,332</u>

Note: Column (a) is blank as there were no parties in interest.

See accompanying independent auditor's report.

EMPLOYERS AND LABORERS LOCALS 100 & 397 PENSION PLAN
FEIN 37-6085017 / PLAN NUMBER: 001
SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)
MORTGAGES
JULY 31, 2024

Identity of Issue, Borrower, Lessor, or Similar Party		Description of Investment Including Maturity Date, Rate of Interest Collateral Par Or, Maturity Value	Cost	Current Value
(a)	(b)	(c)	(d)	(e)
FHLMC		Gold Pool #C91787 3.5% due 10/1/34 dtd 9/1/14	\$ 11,054	\$ 10,115
FHLMC		Umbs Pool #SD2382 3.5% due 8/1/52 dtd 2/1/23	74,159	74,092
FHLMC		Gold Pool #G30705 3.5% due 5/1/33 dtd 1/1/15	10,612	9,710
FHLMC		Umbs Pool #RA6127 3% due 10/25/51 dtd 3/1/24	85,304	86,559
FHLMC		Umbs Pool #QI1647 5% due 3/1/54 dtd 3/1/24	145,879	147,108
FHLMC		Umbs Pool #RJ0917 5% due 2/1/54 dtd 2/1/24	95,002	97,583
FHLMC		REMIC Series 4026 Class Jg 3% due 10/15/41 dtd 4/1/12	3,985	3,766
FHLMC		REMIC Series 4097 Class Gj 2.5% due 10/15/31 dtd 8/1/12	6,672	6,449
FHLMC		REMIC Series 4097 Class Gt 3% due 10/15/31 dtd 8/1/12	1,744	1,617
FHLMC		REMIC Series 4370 Class PA 3.5% due 9/15/41 dtd 7/1/14	2,542	2,503
FHLMC		REMIC Series 4639 Class Kb variable due 4/15/53 dtd 12/1/16	21,359	20,098
FHLMC		REMIC Series 5020 Class Kw 2% due 9/25/45 dtd 9/1/20	82,894	67,094
FHLMC		REMIC Series 2020-5042 Class Lk 2% due 11/25/50 dtd 10/1/20	66,075	46,537
FHLMC		REMIC Series 2021-5081 Class Qa 2% due 12/25/50 dtd 2/1/21	64,350	50,000
FHLMC		REMIC Series 2020-5050 Class Dm 2% due 3/25/48 dtd 11/1/20	61,351	49,847
FNMA		Umbs Pool #BY0013 6% due 4/25/53 dtd 6/1/24	147,166	147,789
FNMA		Umbs Pool #CB3029 3% due 3/1/52 dtd 2/1/22	63,251	61,738
FNMA		Umbs Pool #CB6308 4.5% due 5/25/53 dtd 4/1/24	184,289	187,591
FNMA		Umbs Pool #MA3933 2.5% due 2/1/40 dtd 1/1/20	18,650	16,056
FNMA		Umbs Pool #MA4599 3% due 5/25/52 Dtd 6/1/24	45,919	46,550
FNMA		Umbs Pool #MA4841 5% due 12/1/52 dtd 11/1/22	100,670	101,649
FNMA		Umbs Pool #MA5410 5.5% due 5/24/44 dtd 5/1/24	95,895	97,197
FNMA		Umbs Pool #bs6088 4.04% due 8/1/30 dtd 7/1/22	94,547	97,746
FNMA		Pool #CA7991 2% due 12/1/50 dtd 11/1/20	63,631	48,791
FNMA		Pool #CA1792 4.5% due 3/1/38 dtd 5/1/18	13,661	13,566
FNMA		Pool #MA1463 3.5% due 6/1/43 dtd 5/1/13	22,598	21,622
FNMA		Pool #MA1491 3% due 7/1/43 dtd 6/1/13	11,612	10,327
FNMA		Pool #MA2114 3.5% due 12/1/44 dtd 11/1/14	9,808	8,780
FNMA		Pool #MA2841 2.5% due 12/1/36 dtd 11/1/16	12,944	12,256
FNMA		REMIC Series 2012-46 Class CD 2.5% due 4/25/41 dtd 4/1/12	2,236	2,169
FNMA		REMIC Series 2012-93 Class Qd 1.75% due 1/25/42 dtd 8/1/12	6,983	6,795
FNMA		REMIC Series 2012-117 Class Ad 3.5% due 10/25/42 dtd 9/1/12	9,991	8,956
FNMA		REMIC Series 2012-103 Class Da 3.5% due 10/25/41 dtd 8/1/12	1,051	1,034
FNMA		REMIC Series 2022-17 Class Jg 3% due 12/25/48 dtd 7/1/24	95,510	96,088
GNMA II		Pool #2116 7% due 11/20/25 dtd 11/1/95	148	142
GNMA II		Pool #2360 7.5% due 1/20/27 dtd 1/1/97	342	320
GNMA II		Pool #381333 7% due 11/20/25 dtd 11/1/95	802	755
GNMA II		Pool #CO2900 5% due 7/20/52 dtd 7/1/22	80,749	83,235
GNMA II		Pool #MA0068 3% due 5/20/27 dtd 5/1/12	5,588	5,312
GNMA		REMIC Series 2020-24 Class Ac 2.35% due 2/16/61 dtd 2/1/20	69,308	56,247
GNMA		REMIC Series 2018-67 Class Cj 3.5% due 12/20/45 dtd 5/1/18	9,681	9,700
GNMA		REMIC Series 2018-97 Class Vd 3.5% due 5/20/37 dtd 7/1/18	68,797	68,208
ICT		Series 2003-9f Class A1 variable rate due 7/25/33 dtd 7/30/03	1,612	1,672
ICT		Series 2005-6 Class 2A2 variable rate due 10/25/35 dtd 9/9/05	865	907
			<u>\$ 1,971,286</u>	<u>\$ 1,886,276</u>

Note: Column (a) is blank as there were no parties in interest.

See accompanying independent auditor's report.

EMPLOYERS AND LABORERS LOCALS 100 & 397 PENSION PLAN

FEIN 37-6085017 / PLAN NUMBER: 001

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

COMMON STOCKS

JULY 31, 2024

	Identity of Issue, Borrower, Lessor, or Similar Party	Description of Investment Including Maturity Date, Rate of Interest Collateral Par Or, Maturity Value	Cost	Current Value
(a)	(b)	(c)	(d)	(e)
	Abbvie Inc	Common Stock	\$ 59,413	\$ 148,256
	Adobe Inc	Common Stock	71,164	110,330
	Advanced Micro Devices Inc	Common Stock	34,368	41,899
	Alphabet Inc Class A	Common Stock	145,347	863,704
	Amazon Com Inc	Common Stock	203,561	769,423
	America Tower Corp	Common Stock	48,908	48,488
	Amgen Inc	Common Stock	61,341	144,624
	Apple Inc	Common Stock	255,039	1,358,019
	Booking Holdings Inc	Common Stock	70,370	111,450
	Broadcom Inc	Common Stock	104,428	427,408
	Cadence Design Systems Inc	Common Stock	111,563	101,711
	Caterpillar Inc	Common Stock	30,142	48,468
	Cheniere Energy Inc	Common Stock	46,353	54,792
	Chevron Corporation	Common Stock	68,135	72,211
	Chubb LTD	Common Stock	70,250	89,589
	Cognizant Technology Solutions Corp	Common Stock	4,863	7,568
	Costco Whsl Corp	Common Stock	67,068	189,060
	Deere & Co	Common Stock	54,080	55,797
	Delta Air Lines Inc	Common Stock	58,976	75,930
	Eog Resources Incorporated	Common Stock	45,597	51,988
	Home Depot Inc	Common Stock	35,947	174,876
	Intuit	Common Stock	79,070	129,470
	Intuitive Surgical Inc	Common Stock	54,400	84,476
	JP Morgan Chase & Co	Common Stock	74,882	150,024
	Kla Corporation	Common Stock	80,140	185,191
	Lam Resh Corp	Common Stock	22,550	128,974
	Lilly Eli & Co	Common Stock	72,433	221,174
	Lockheed Martin Corp	Common Stock	55,678	67,740
	Lowes Companies Inc	Common Stock	48,560	125,210
	L3harris Technologies Inc	Common Stock	88,756	124,789
	Mastercard Incorporated Class A	Common Stock	134,914	255,041
	Meta Platforms Inc	Common Stock	231,360	427,347
	Microsoft Corp	Common Stock	357,915	1,384,739
	Netflix.Com Inc	Common Stock	49,312	106,820
	Nvidia Corp	Common Stock	107,564	1,154,987
	Oracle Corporation	Common Stock	57,789	55,780
	Oreilly Automotive Inc	Common Stock	50,490	152,056
	Palo Alto Networks Inc	Common Stock	57,827	131,516
	Parker-Hannifin CP	Common Stock	76,764	140,290
	Pepsico Inc	Common Stock	92,792	129,503

EMPLOYERS AND LABORERS LOCALS 100 & 397 PENSION PLAN
FEIN 37-6085017 / PLAN NUMBER: 001
SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)
COMMON STOCKS
JULY 31, 2024

(a)	Identity of Issue, Borrower, Lessor, or Similar Party (b)	Description of Investment Including Maturity Date, Rate of Interest Collateral Par Or, Maturity Value (c)	Cost (d)	Current Value (e)
	Qualcomm Inc	Common Stock	61,800	54,285
	Regeneron Pharmaceuticals Inc	Common Stock	70,449	124,107
	Salesforce Inc	Common Stock	56,492	51,760
	Servicenow Inc	Common Stock	17,646	89,583
	Sherwin Williams Co	Common Stock	75,495	138,566
	Stryker Corp	Common Stock	75,488	114,608
	Synopsys Inc	Common Stock	69,246	114,456
	Tesla Motors Inc	Common Stock	188,883	201,901
	Thermo Fisher Corp	Common Stock	7,710	58,267
	TJX Cos Inc	Common Stock	98,247	124,322
	Uber Technologies Inc	Common Stock	53,488	51,576
	Union Pacific Corp	Common Stock	85,257	113,496
	Unitedhealth Group Inc	Common Stock	51,447	141,159
	Vertex Pharmaceuticals Inc	Common Stock	53,348	61,965
	Visa Inc Class A Shares	Common Stock	33,815	166,044
	Zoetis Inc	Common Stock	47,836	49,511
			<u>\$4,486,756</u>	<u>\$11,756,324</u>

Note: Column (a) is blank as there were no parties in interest.

EMPLOYERS AND LABORERS LOCALS 100 & 397 PENSION PLAN
FEIN 37-6085017 / PLAN NUMBER: 001
SCHEDULE H, PAGE 4 LINE I - SCHEDULE OF INVESTMENTS HELD
MUNICIPAL BONDS
JULY 31, 2024

(a)	Identity of Issue, Borrower, Lessor, or Similar Party (b)	Description of Investment Including Maturity Date, Rate of Interest Collateral Par Or, Maturity Value (c)	Cost (d)	Current Value (e)
	Corpus Christi TX	\$100,000 par 3.954%, due 3/1/29	\$ 101,350	\$ 98,257
	ME State Governmental Facilities	\$100,000 par 0.897% due 10/1/25	100,000	95,435
	Montgomery County PA Higher Education and Health Auth	\$100,000 par 2.08% due 5/1/29	100,000	89,628
	PA State Housing Finance Agency	\$100,000 par 4.869% due 4/1/30	100,000	101,481
	San Buenaventura CA	\$100,000 par 1.31% due 10/1/26	100,000	93,441
			<u>\$ 501,350</u>	<u>\$ 478,242</u>

Note: Column (a) is blank as there were no parties in interest.

See accompanying independent auditor's report.

EMPLOYERS AND LABORERS LOCALS 100 & 397 PENSION PLAN
FEIN 37-6085017 / PLAN NUMBER: 001
SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)
EXCHANGE TRADED FUNDS
JULY 31, 2024

	Identity of Issue, Borrower, Lessor, or Similar Party	Description of Investment Including Maturity Date, Rate of Interest Collateral Par Or, Maturity Value	Cost	Current Value
(a)	(b)	(c)	(d)	(e)
	Vanguard Mid Cap Value Index Fund ETF	Exchange Traded Funds	<u>\$1,120,116</u>	<u>\$1,937,218</u>

Note: Column (a) is blank as there were no parties in interest.

EMPLOYERS AND LABORERS LOCALS 100 & 397 PENSION PLAN
FEIN 37-6085017 / PLAN NUMBER: 001
SCHEDULE H, LINE 4i- SCHEDULE OF ASSETS (HELD AT END OF YEAR)
MUTUAL FUNDS
JULY 31, 2024

	Identity of Issue, Borrower, Lessor, or Similar Party	Description of Investment Including Maturity Date, Rate of Interest Collateral Par Or, Maturity Value	Cost	Current Value
(a)	(b)	(c)	(d)	(e)
	DF Dent Midcap Growth Fund	Mutual Fund	\$ 2,019,488	\$ 1,823,933
	DFA US Small Cap Growth Portfolio	Mutual Fund	2,334,827	3,910,225
	Dodge & Cox Stock Fund	Mutual Fund	8,565,999	11,792,907
	Westwood Quality Smallcap Fund	Mutual Fund	2,888,736	3,935,337
	Fidelity International Index Fund	Mutual Fund	5,293,501	6,227,184
	Harding Loevner International Equity Portfolio	Mutual Fund	6,262,279	5,955,359
			<u>\$27,364,830</u>	<u>\$33,644,945</u>

Note: Column (a) is blank as there were no parties in interest.

See accompanying independent auditor's report.

EMPLOYERS AND LABORERS LOCALS 100 & 397 PENSION PLAN
FEIN 37-6085017 / PLAN NUMBER: 001
SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)
OTHER
JULY 31, 2024

(a)	Identity of Issue, Borrower, Lessor, or Similar Party (b)	Description of Investment Including Maturity Date, Rate of Interest Collateral Par Or, Maturity Value (c)	Cost (d)	Current Value (e)
	AFL-CIO Building Investment Trust	Collective Investment Trust	\$ 1,485,494	\$ 1,647,907
	BPEA Cayman VI, L.P.	Limited Partnership	643,658	846,219
	Bnym AFL-CIO SI Mid Cap	Collective Investment Trust	2,994,250	3,904,928
	Bnym AFL-CIO SI Stock Index	Collective Investment Trust	7,874,259	12,594,064
	ElmTree U.S. Net Lease Fund IV, L.P.	Limited Partnership	-	279,016
	ElmTree U.S. Net Lease Fund V-A, L.P.	Limited Partnership	2,141,716	2,256,446
	HarbourVest 2018 Global Feeder Fund L.P.	103-12 Investments	2,514,429	4,221,444
	HarbourVest 2020 Global Feeder Fd L.P.	Limited Partnership	1,463,248	1,894,540
	Mackay Shields Core Plus Bond CIT	Collective Investment Trust	10,325,000	11,848,224
	Principal Real Estate Inv U.S. Property Separate Acct	Pooled Separate Account	3,589,209	3,227,242
	RREEF America II LP	Limited Partnership	3,838,534	4,315,295
	Ullico Infrastructure Tax-Exempt Fund, L.P.	103-12 Investments	1,440,195	2,402,071
	Parametric Defensive Equity Fund LLC	103-12 Investments	1,200,000	1,130,133
	Mesirow High Yield CIT Class A	Collective Investment Trust	5,750,000	6,077,197
	CC&L Q Emerging Markets Equity CIF Class A	103-12 Investments	2,000,000	2,123,084
	Neuberger Berman U.S. Equity Index PutWrite Fund LLC	103-12 Investments	1,225,000	1,101,060
			<u>\$ 48,484,992</u>	<u>\$ 59,868,870</u>

Note: Column (a) is blank as there were no parties in interest.