

<p style="text-align: center;"><b>Form 5500</b></p> <p style="font-size: small;">Department of the Treasury Internal Revenue Service</p> <hr/> <p style="font-size: small;">Department of Labor Employee Benefits Security Administration</p> <hr/> <p style="font-size: x-small;">Pension Benefit Guaranty Corporation</p>	<p><b>Annual Return/Report of Employee Benefit Plan</b></p> <p style="font-size: x-small;">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).</p> <p style="text-align: center;"><b>▶ Complete all entries in accordance with the instructions to the Form 5500.</b></p>	<p style="font-size: x-small;">OMB Nos. 1210-0110 1210-0089</p> <hr/> <p style="font-size: large; font-weight: bold; text-align: center;">2023</p> <hr/> <p style="text-align: center; font-weight: bold;">This Form is Open to Public Inspection</p>
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**Part I Annual Report Identification Information**  
 For calendar plan year 2023 or fiscal plan year beginning 10/01/2023 and ending 09/30/2024

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

a single-employer plan  a DFE (specify) \_\_\_\_\_

**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**

<p><b>1a</b> Name of plan <u>UNITED FOOD &amp; COMMERCIAL WORKERS UNION EMPLOYER HEALTH &amp; WELFARE FUND</u></p>	<p><b>1b</b> Three-digit plan number (PN) ▶ <u>501</u></p>
<p><b>2a</b> Plan sponsor's name (employer, if for a single-employer plan) Mailing address (include room, apt., suite no. and street, or P.O. Box) City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions) <u>UNITED FOOD &amp; COMMERCIAL WORKERS UNION EMPLOYER HEALTH &amp; WELFARE FU</u></p> <p><u>9199 MARKET ST</u> <u>BROADVIEW HEIGHTS, OH 44147</u></p>	<p><b>1c</b> Effective date of plan <u>09/01/1952</u></p> <p><b>2b</b> Employer Identification Number (EIN) <u>34-6726563</u></p> <p><b>2c</b> Plan Sponsor's telephone number <u>216-241-2828</u></p> <p><b>2d</b> Business code (see instructions) <u>445110</u></p>

**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.

<b>SIGN HERE</b>	Filed with authorized/valid electronic signature.	07/10/2025	CARL IVKA
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
<b>SIGN HERE</b>	Filed with authorized/valid electronic signature.	07/10/2025	SASHA PHILLIPS
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
<b>SIGN HERE</b>			
	Signature of DFE	Date	Enter name of individual signing as DFE

<b>3a</b> Plan administrator's name and address <input checked="" type="checkbox"/> Same as Plan Sponsor	<b>3b</b> Administrator's EIN	
	<b>3c</b> Administrator's telephone number	
<b>4</b> 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: <b>a</b> Sponsor's name <b>c</b> Plan Name	<b>4b</b> EIN	
	<b>4d</b> PN	
<b>5</b> Total number of participants at the beginning of the plan year	<b>5</b>	13731
<b>6</b> Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines <b>6a(1)</b> , <b>6a(2)</b> , <b>6b</b> , <b>6c</b> , and <b>6d</b> ). <b>a(1)</b> Total number of active participants at the beginning of the plan year ..... <b>a(2)</b> Total number of active participants at the end of the plan year ..... <b>b</b> Retired or separated participants receiving benefits ..... <b>c</b> Other retired or separated participants entitled to future benefits ..... <b>d</b> Subtotal. Add lines <b>6a(2)</b> , <b>6b</b> , and <b>6c</b> . ..... <b>e</b> Deceased participants whose beneficiaries are receiving or are entitled to receive benefits ..... <b>f</b> Total. Add lines <b>6d</b> and <b>6e</b> . ..... <b>g(1)</b> Number of participants with account balances as of the beginning of the plan year (only defined contribution plans complete this item) ..... <b>g(2)</b> Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item) ..... <b>h</b> Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested.....	<b>6a(1)</b>	11367
	<b>6a(2)</b>	11201
	<b>6b</b>	2165
	<b>6c</b>	0
	<b>6d</b>	13366
	<b>6e</b>	
	<b>6f</b>	
	<b>6g(1)</b>	
<b>6g(2)</b>		
<b>6h</b>		
<b>7</b> Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item).....	<b>7</b>	34

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

**b** If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristics Codes in the instructions:  
4A 4B 4D 4E 4F 4H 4L

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

<b>a Pension Schedules</b>	<b>b General Schedules</b>
(1) <input type="checkbox"/> <b>R</b> (Retirement Plan Information)	(1) <input checked="" type="checkbox"/> <b>H</b> (Financial Information)
(2) <input type="checkbox"/> <b>MB</b> (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary	(2) <input type="checkbox"/> <b>I</b> (Financial Information – Small Plan)
(3) <input type="checkbox"/> <b>SB</b> (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary	(3) <input checked="" type="checkbox"/> <b>A</b> (Insurance Information) – Number Attached <u>1</u>
(4) <input type="checkbox"/> <b>DCG</b> (Individual Plan Information) – Number Attached _____	(4) <input checked="" type="checkbox"/> <b>C</b> (Service Provider Information)
(5) <input type="checkbox"/> <b>MEP</b> (Multiple-Employer Retirement Plan Information)	(5) <input type="checkbox"/> <b>D</b> (DFE/Participating Plan Information)
	(6) <input type="checkbox"/> <b>G</b> (Financial Transaction Schedules)

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

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**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.

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

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**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 \_\_\_\_\_

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**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 **10/01/2023** and ending **09/30/2024**

<b>A</b> Name of plan <b>UNITED FOOD &amp; COMMERCIAL WORKERS UNION EMPLOYER HEALTH &amp; WELFARE FUND</b>		<b>B</b> Three-digit plan number (PN) ▶ <b>501</b>
<b>C</b> Plan sponsor's name as shown on line 2a of Form 5500 <b>UNITED FOOD &amp; COMMERCIAL WORKERS UNION EMPLOYER HEALTH &amp; WELFARE FU</b>		<b>D</b> Employer Identification Number (EIN) <b>34-6726563</b>

**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  
**MEDMUTUAL LIFE INSURANCE COMPANY**

<b>(b)</b> EIN	<b>(c)</b> NAIC code	<b>(d)</b> Contract or identification number	<b>(e)</b> Approximate number of persons covered at end of policy or contract year	<b>Policy or contract year</b>	
				<b>(f)</b> From	<b>(g)</b> To
<b>21-0706531</b>	<b>62375</b>	<b>G 14317</b>	<b>10525</b>	<b>10/01/2023</b>	<b>09/30/2024</b>

**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.

<b>(a)</b> Total amount of commissions paid	<b>(b)</b> Total amount of fees paid
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**3 Persons receiving commissions and fees.** (Complete as many entries as needed to report all persons).

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

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

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

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

<b>Part II</b>	<b>Investment and Annuity Contract Information</b> 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.
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<b>4</b> Current value of plan's interest under this contract in the general account at year end .....	<b>4</b>	
<b>5</b> Current value of plan's interest under this contract in separate accounts at year end.....	<b>5</b>	

**6** Contracts With Allocated Funds:

**a** State the basis of premium rates ▶

<b>b</b> Premiums paid to carrier .....	<b>6b</b>	
<b>c</b> Premiums due but unpaid at the end of the year.....	<b>6c</b>	
<b>d</b> 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. .... Specify nature of costs ▶	<b>6d</b>	

**e** Type of contract: (1)  individual policies      (2)  group deferred annuity  
(3)  other (specify) ▶

**f** If contract purchased, in whole or in part, to distribute benefits from a terminating plan, check here ▶

**7** Contracts With Unallocated Funds (Do not include portions of these contracts maintained in separate accounts)

**a** Type of contract: (1)  deposit administration      (2)  immediate participation guarantee  
(3)  guaranteed investment      (4)  other ▶

<b>b</b> Balance at the end of the previous year .....	<b>7b</b>	
<b>c</b> Additions: (1) Contributions deposited during the year .....	<b>7c(1)</b>	
	<b>7c(2)</b>	
	<b>7c(3)</b>	
	<b>7c(4)</b>	
	<b>7c(5)</b>	
(6) Total additions .....	<b>7c(6)</b>	
<b>d</b> Total of balance and additions (add lines <b>7b</b> and <b>7c(6)</b> ) .....	<b>7d</b>	
<b>e</b> Deductions: (1) Disbursed from fund to pay benefits or purchase annuities during year .....	<b>7e(1)</b>	
	<b>7e(2)</b>	
	<b>7e(3)</b>	
	<b>7e(4)</b>	
	(5) Total deductions .....	<b>7e(5)</b>
<b>f</b> Balance at the end of the current year (subtract line <b>7e(5)</b> from line <b>7d</b> ) .....	<b>7f</b>	0

**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) **▶ AD&D**

**9** Experience-rated contracts:

<b>a</b> Premiums: (1) Amount received .....	<b>9a(1)</b>	305357	
(2) Increase (decrease) in amount due but unpaid.....	<b>9a(2)</b>		
(3) Increase (decrease) in unearned premium reserve .....	<b>9a(3)</b>		
(4) Earned ((1) + (2) - (3)).....	<b>9a(4)</b>		305357
<b>b</b> Benefit charges (1) Claims paid.....	<b>9b(1)</b>	279510	
(2) Increase (decrease) in claim reserves .....	<b>9b(2)</b>		
(3) Incurred claims (add (1) and (2)).....	<b>9b(3)</b>		279510
(4) Claims charged .....	<b>9b(4)</b>		
<b>c</b> Remainder of premium: (1) Retention charges (on an accrual basis) --			
(A) Commissions .....	<b>9c(1)(A)</b>		
(B) Administrative service or other fees .....	<b>9c(1)(B)</b>	31915	
(C) Other specific acquisition costs .....	<b>9c(1)(C)</b>		
(D) Other expenses .....	<b>9c(1)(D)</b>		
(E) Taxes .....	<b>9c(1)(E)</b>	453	
(F) Charges for risks or other contingencies.....	<b>9c(1)(F)</b>		
(G) Other retention charges .....	<b>9c(1)(G)</b>		
(H) Total retention .....	<b>9c(1)(H)</b>		32368
(2) Dividends or retroactive rate refunds. (These amounts were <input type="checkbox"/> paid in cash, or <input type="checkbox"/> credited.) .....	<b>9c(2)</b>		
<b>d</b> Status of policyholder reserves at end of year: (1) Amount held to provide benefits after retirement .....	<b>9d(1)</b>		
(2) Claim reserves .....	<b>9d(2)</b>		
(3) Other reserves.....	<b>9d(3)</b>		
<b>e</b> Dividends or retroactive rate refunds due. (Do not include amount entered in line 9c(2).) .....	<b>9e</b>		

**10** Nonexperience-rated contracts:

<b>a</b> Total premiums or subscription charges paid to carrier .....	<b>10a</b>	
<b>b</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 .....	<b>10b</b>	

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. ▶

<b>SCHEDULE C</b> <b>(Form 5500)</b>  <small>Department of the Treasury Internal Revenue Service</small>  <small>Department of Labor Employee Benefits Security Administration</small>  <small>Pension Benefit Guaranty Corporation</small>	<b>Service Provider Information</b>  This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA).  <b>▶ File as an attachment to Form 5500.</b>	<small>OMB No. 1210-0110</small>  <b>2023</b>  <b>This Form is Open to Public Inspection.</b>
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For calendar plan year 2023 or fiscal plan year beginning **10/01/2023** and ending **09/30/2024**

<b>A</b> Name of plan <b>UNITED FOOD &amp; COMMERCIAL WORKERS UNION EMPLOYER HEALTH &amp; WELFARE FUND</b>	<b>B</b> Three-digit plan number (PN) ▶	<b>501</b>
<b>C</b> Plan sponsor's name as shown on line 2a of Form 5500 <b>UNITED FOOD &amp; COMMERCIAL WORKERS UNION EMPLOYER HEALTH &amp; WELFARE FU</b>	<b>D</b> Employer Identification Number (EIN) <b>34-6726563</b>	

**Part I Service Provider Information (see instructions)**

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

**1 Information on Persons Receiving Only Eligible Indirect Compensation**

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

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

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

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

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

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

MERRILL LYNCH

13-5674085

(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		333332	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	2795	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

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

MEDICAL MUTUAL

2060 EAST NINTH ST  
CLEVELAND, OH 44115

(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?
12		2485221	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

USI INSURANCE

100 SUMMIT LAKE DR  
VAHALLA, NY 10595

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
22		16975	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

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

THE SEGAL COMPANY

13-1975125

(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		25759	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

DENTEMAX

75 REMITTANCE  
CHICAGO, IL 60675

(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?
12		58496	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	0	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

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

CAREMARK

620 EPSILON  
PITTSBURG, PA 15238

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
15		732847	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

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

FUSCO GALLAGHER PORCARO LLP

34-1327628

(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		9820	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

CUNNINGHAM & ASSOCIATES

38-3349378

(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		138200	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

UFCW HEALTH & WELFARE PLAN

34-6726563

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30		1076547	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

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

BANK OF AMERICA

1400 MERRILL LYNCH DR  
PENNINGTON, NJ 08534

(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		8848	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

METROHEALTH

2500 METROHEALTH DRIVE  
216-778-7800  
CLEVELAND, OH 44109

(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?
12		16875	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

INFOSTORE

1200 EAST GRANGER  
216-749-4636  
BROOKLYN HTS, OH 44131

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
15		130520	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

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

BRIDEGWAY TECHNOLOGIES

3700 KOPPERS ST  
BALTIMORE, MD 21201

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
16		135249	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

CALL A DOCTOR PLUS

35 NOD RD  
AVAON, CT 06001

(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?
12		214322	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

DAVIS VISION

2000 NEWPORT PK  
LAWRENCEVILLE, GA 30043

(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?
12		40903	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

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

WAINBLAT LAW LLC

85-4381750

(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		264001	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

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

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

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

**Part I Service Provider Information (continued)**

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

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

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

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

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

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

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

<b>(a)</b> Enter name and EIN or address of service provider (see instructions)	<b>(b)</b> Nature of Service Code(s)	<b>(c)</b> 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)

<b>a</b> Name:	<b>b</b> EIN:
<b>c</b> Position:	
<b>d</b> Address:	<b>e</b> Telephone:

Explanation:

<b>a</b> Name:	<b>b</b> EIN:
<b>c</b> Position:	
<b>d</b> Address:	<b>e</b> Telephone:

Explanation:

<b>a</b> Name:	<b>b</b> EIN:
<b>c</b> Position:	
<b>d</b> Address:	<b>e</b> Telephone:

Explanation:

<b>a</b> Name:	<b>b</b> EIN:
<b>c</b> Position:	
<b>d</b> Address:	<b>e</b> Telephone:

Explanation:

<b>a</b> Name:	<b>b</b> EIN:
<b>c</b> Position:	
<b>d</b> Address:	<b>e</b> Telephone:

Explanation:

<b>SCHEDULE H</b> <b>(Form 5500)</b>  <small>Department of the Treasury Internal Revenue Service</small>  <small>Department of Labor Employee Benefits Security Administration</small>  <small>Pension Benefit Guaranty Corporation</small>	<b>Financial Information</b>  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).  ▶ <b>File as an attachment to Form 5500.</b>	OMB No. 1210-0110  <b>2023</b>  <b>This Form is Open to Public Inspection</b>
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For calendar plan year 2023 or fiscal plan year beginning **10/01/2023** and ending **09/30/2024**

<b>A</b> Name of plan <b>UNITED FOOD &amp; COMMERCIAL WORKERS UNION EMPLOYER HEALTH &amp; WELFARE FUND</b>	<b>B</b> Three-digit plan number (PN) ▶	<b>501</b>
<b>C</b> Plan sponsor's name as shown on line 2a of Form 5500 <b>UNITED FOOD &amp; COMMERCIAL WORKERS UNION EMPLOYER HEALTH &amp; WELFARE FU</b>	<b>D</b> Employer Identification Number (EIN) <b>34-6726563</b>	

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

		(a) Beginning of Year	(b) End of Year
<b>Assets</b>			
<b>a</b> Total noninterest-bearing cash .....	<b>1a</b>	6101426	
<b>b</b> Receivables (less allowance for doubtful accounts):			
<b>(1)</b> Employer contributions .....	<b>1b(1)</b>	621394	541289
<b>(2)</b> Participant contributions .....	<b>1b(2)</b>		
<b>(3)</b> Other .....	<b>1b(3)</b>	3242968	3214499
<b>c</b> General investments:			
<b>(1)</b> Interest-bearing cash (include money market accounts & certificates of deposit) .....	<b>1c(1)</b>	4654749	21302828
<b>(2)</b> U.S. Government securities .....	<b>1c(2)</b>	7925109	9874461
<b>(3)</b> Corporate debt instruments (other than employer securities):			
<b>(A)</b> Preferred .....	<b>1c(3)(A)</b>		
<b>(B)</b> All other .....	<b>1c(3)(B)</b>	15003776	16615010
<b>(4)</b> Corporate stocks (other than employer securities):			
<b>(A)</b> Preferred .....	<b>1c(4)(A)</b>		
<b>(B)</b> Common .....	<b>1c(4)(B)</b>	33605802	42631312
<b>(5)</b> Partnership/joint venture interests .....	<b>1c(5)</b>		
<b>(6)</b> Real estate (other than employer real property) .....	<b>1c(6)</b>		
<b>(7)</b> Loans (other than to participants) .....	<b>1c(7)</b>		
<b>(8)</b> Participant loans .....	<b>1c(8)</b>		
<b>(9)</b> Value of interest in common/collective trusts .....	<b>1c(9)</b>		
<b>(10)</b> Value of interest in pooled separate accounts .....	<b>1c(10)</b>		
<b>(11)</b> Value of interest in master trust investment accounts .....	<b>1c(11)</b>		
<b>(12)</b> Value of interest in 103-12 investment entities .....	<b>1c(12)</b>		
<b>(13)</b> Value of interest in registered investment companies (e.g., mutual funds) .....	<b>1c(13)</b>		
<b>(14)</b> Value of funds held in insurance company general account (unallocated contracts) .....	<b>1c(14)</b>		
<b>(15)</b> Other .....	<b>1c(15)</b>	18529046	23108178

<b>1d</b> Employer-related investments:		<b>(a)</b> Beginning of Year	<b>(b)</b> End of Year
(1) Employer securities .....	<b>1d(1)</b>		
(2) Employer real property .....	<b>1d(2)</b>		
<b>e</b> Buildings and other property used in plan operation .....	<b>1e</b>	355882	189202
<b>f</b> Total assets (add all amounts in lines 1a through 1e) .....	<b>1f</b>	90040152	117476779
<b>Liabilities</b>			
<b>g</b> Benefit claims payable .....	<b>1g</b>	2547277	2474285
<b>h</b> Operating payables .....	<b>1h</b>	254715	400438
<b>i</b> Acquisition indebtedness .....	<b>1i</b>		
<b>j</b> Other liabilities .....	<b>1j</b>	24311000	26668000
<b>k</b> Total liabilities (add all amounts in lines 1g through 1j) .....	<b>1k</b>	27112992	29542723
<b>Net Assets</b>			
<b>l</b> Net assets (subtract line 1k from line 1f) .....	<b>1l</b>	62927160	87934056

**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.

<b>Income</b>		<b>(a)</b> Amount	<b>(b)</b> Total
<b>a Contributions:</b>			
(1) Received or receivable in cash from: <b>(A)</b> Employers .....	<b>2a(1)(A)</b>	105541278	
<b>(B)</b> Participants .....	<b>2a(1)(B)</b>	5708030	
<b>(C)</b> Others (including rollovers) .....	<b>2a(1)(C)</b>		
(2) Noncash contributions .....	<b>2a(2)</b>		
(3) Total contributions. Add lines <b>2a(1)(A)</b> , <b>(B)</b> , <b>(C)</b> , and line <b>2a(2)</b> .....	<b>2a(3)</b>		111249308
<b>b Earnings on investments:</b>			
<b>(1) Interest:</b>			
<b>(A)</b> Interest-bearing cash (including money market accounts and certificates of deposit) .....	<b>2b(1)(A)</b>	1437167	
<b>(B)</b> U.S. Government securities .....	<b>2b(1)(B)</b>	326063	
<b>(C)</b> Corporate debt instruments .....	<b>2b(1)(C)</b>	716834	
<b>(D)</b> Loans (other than to participants) .....	<b>2b(1)(D)</b>		
<b>(E)</b> Participant loans .....	<b>2b(1)(E)</b>		
<b>(F)</b> Other .....	<b>2b(1)(F)</b>		
<b>(G)</b> Total interest. Add lines <b>2b(1)(A)</b> through <b>(F)</b> .....	<b>2b(1)(G)</b>		2480064
<b>(2) Dividends:</b>			
<b>(A)</b> Preferred stock .....	<b>2b(2)(A)</b>	1155	
<b>(B)</b> Common stock .....	<b>2b(2)(B)</b>	562726	
<b>(C)</b> Registered investment company shares (e.g. mutual funds) .....	<b>2b(2)(C)</b>	501007	
<b>(D)</b> Total dividends. Add lines <b>2b(2)(A)</b> , <b>(B)</b> , and <b>(C)</b> .....	<b>2b(2)(D)</b>		1064888
<b>(3)</b> Rents .....	<b>2b(3)</b>		
<b>(4) Net gain (loss) on sale of assets:</b>			
<b>(A)</b> Aggregate proceeds .....	<b>2b(4)(A)</b>		
<b>(B)</b> Aggregate carrying amount (see instructions) .....	<b>2b(4)(B)</b>	874123	
<b>(C)</b> Subtract line <b>2b(4)(B)</b> from line <b>2b(4)(A)</b> and enter result .....	<b>2b(4)(C)</b>		-874123
<b>(5) Unrealized appreciation (depreciation) of assets:</b>			
<b>(A)</b> Real estate .....	<b>2b(5)(A)</b>		
<b>(B)</b> Other .....	<b>2b(5)(B)</b>	15114009	
<b>(C)</b> Total unrealized appreciation of assets. Add lines <b>2b(5)(A)</b> and <b>(B)</b> .....	<b>2b(5)(C)</b>		

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts.....	<b>2b(6)</b>		
(7) Net investment gain (loss) from pooled separate accounts.....	<b>2b(7)</b>		
(8) Net investment gain (loss) from master trust investment accounts.....	<b>2b(8)</b>		
(9) Net investment gain (loss) from 103-12 investment entities.....	<b>2b(9)</b>		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds) .....	<b>2b(10)</b>		
<b>c</b> Other income .....	<b>2c</b>		13051179
<b>d</b> Total income. Add all <b>income</b> amounts in column (b) and enter total .....	<b>2d</b>		142085325

**Expenses**

<b>e</b> Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers .....	<b>2e(1)</b>		
(2) To insurance carriers for the provision of benefits.....	<b>2e(2)</b>	113330912	
(3) Other.....	<b>2e(3)</b>		
(4) Total benefit payments. Add lines <b>2e(1)</b> through <b>(3)</b> .....	<b>2e(4)</b>		113330912
<b>f</b> Corrective distributions (see instructions).....	<b>2f</b>		
<b>g</b> Certain deemed distributions of participant loans (see instructions) .....	<b>2g</b>		
<b>h</b> Interest expense .....	<b>2h</b>		
<b>i</b> Administrative expenses:			
(1) Salaries and allowances.....	<b>2i(1)</b>	1028470	
(2) Contract administrator fees.....	<b>2i(2)</b>		
(3) Recordkeeping fees.....	<b>2i(3)</b>		
(4) IQPA audit fees.....	<b>2i(4)</b>		
(5) Investment advisory and investment management fees .....	<b>2i(5)</b>	342180	
(6) Bank or trust company trustee/custodial fees .....	<b>2i(6)</b>	12	
(7) Actuarial fees .....	<b>2i(7)</b>	25759	
(8) Legal fees .....	<b>2i(8)</b>	273822	
(9) Valuation/appraisal fees .....	<b>2i(9)</b>		
(10) Other trustee fees and expenses .....	<b>2i(10)</b>		
(11) Other expenses .....	<b>2i(11)</b>	2077274	
(12) Total administrative expenses. Add lines <b>2i(1)</b> through <b>(11)</b> .....	<b>2i(12)</b>		3747517
<b>j</b> Total expenses. Add all <b>expense</b> amounts in column (b) and enter total .....	<b>2j</b>		117078429

**Net Income and Reconciliation**

<b>k</b> Net income (loss). Subtract line <b>2j</b> from line <b>2d</b> .....	<b>2k</b>		25006896
<b>l</b> Transfers of assets:			
(1) To this plan .....	<b>2l(1)</b>		
(2) From this plan .....	<b>2l(2)</b>		

**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: **CUNNINGHAM & ASSOCIATES**

(2) EIN: **38-3349378**

**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
<b>a</b> Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)		X	
<b>b</b> Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)		X	
<b>c</b> Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)		X	
<b>d</b> Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)		X	
<b>e</b> Was this plan covered by a fidelity bond?	X		500000
<b>f</b> Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		X	
<b>g</b> Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
<b>h</b> Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
<b>i</b> Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	X		
<b>j</b> Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.)		X	
<b>k</b> Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?		X	
<b>l</b> Has the plan failed to provide any benefit when due under the plan?		X	
<b>m</b> If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)		X	
<b>n</b> 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.)

<b>5b(1)</b> Name of plan(s)	<b>5b(2)</b> EIN(s)	<b>5b(3)</b> 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 \_\_\_\_\_.

**UNITED FOOD & COMMERCIAL WORKERS UNION -  
EMPLOYER HEALTH & WELFARE FUND**

**FINANCIAL STATEMENTS**

**SEPTEMBER 30, 2024 AND 2023**



**CUNNINGHAM & ASSOCIATES**

UNITED FOOD & COMMERCIAL WORKERS UNION –  
EMPLOYER HEALTH & WELFARE FUND

FINANCIAL STATEMENTS

SEPTEMBER 30, 2024 AND 2023

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# CUNNINGHAM & ASSOCIATES

[www.c-p-a.com](http://www.c-p-a.com) Offices in Ohio, South Carolina, and North Carolina 440.717.1350

June 17, 2025

## INDEPENDENT AUDITOR'S REPORT

To the Trustees of the  
United Food & Commercial Workers Union – Employer Health & Welfare Fund  
Broadview Heights, Ohio

### Opinion

We have audited the accompanying financial statements of the United Food & Commercial Workers Union – Employer Health & Welfare 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 September 30, 2024 and 2023 and the related statements of changes in net assets available for benefits for the years then ended, and the related notes to the financial statements.

In our opinion, the financial statements referred to above present fairly, in all material respects, the net assets available for benefits of the United Food & Commercial Workers Union – Employer Health & Welfare Fund as of September 30, 2024 and 2023 and the changes in its net assets available for benefits for the years then ended, in accordance with accounting principles generally accepted in the United States of America.

### Basis for Opinion

We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Our responsibilities under those standards are further described in the Auditor’s Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of the Plan and to meet our other ethical responsibilities in accordance with the relevant ethical requirements relating to our audits. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

### Responsibilities of Management for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with accounting principles generally accepted in the United States of America, and for the design, implementation, and maintenance of internal control relevant to the preparation and presentation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about the Plan’s ability to continue as a going concern within one year after the date that the financial statements are available to be issued.

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

#### Auditor's Responsibilities for the Audit of the Financial Statements

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

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

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Plan's internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about the Plan's ability to continue as a going concern for a reasonable period of time.

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

Report on 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 Schedule of Assets (Held at End of Year) and Schedule of Reportable Transactions, together referred to as “supplemental schedules”, are presented for the purpose of additional analysis and are not a required part of the financial statements but are supplementary information required by the Department of Labor’s Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audits of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America.

In 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.

*Cunningham & Associates*

Broadview Heights, Ohio

**UNITED FOOD & COMMERCIAL WORKERS UNION –**  
**EMPLOYER HEALTH & WELFARE FUND**  
**STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS**

**SEPTEMBER 30,**

	2024	2023
<b><u>ASSETS</u></b>		
<b>Investments, at fair value:</b>		
Common stocks	\$ 42,631,312	\$ 33,605,802
U.S. Government obligations	9,874,461	7,925,109
Mutual and exchange traded funds	23,108,178	18,529,046
Corporate bonds	16,615,010	15,003,776
Money market funds	4,610,400	4,634,026
Interest-bearing cash	35,587	20,723
	96,874,948	79,718,482
<b>Receivables:</b>		
Employers' contributions	541,289	621,394
Investment income	294,002	315,080
Amounts due from related funds	172,851	185,308
Formulary rebates	2,747,646	2,742,581
<b>Total Receivables</b>	<b>3,755,788</b>	<b>3,864,362</b>
<b>Cash - operating</b>	<b>16,656,842</b>	<b>6,101,426</b>
<b>Prepaid expenses and deposits</b>	<b>19,177</b>	<b>23,308</b>
<b>Fixed assets, at cost:</b>		
Office furniture, fixtures and equipment	972,066	972,066
Less: accumulated depreciation	878,565	840,434
	93,502	131,632
<b>Computer software system, net</b>	<b>76,522</b>	<b>200,942</b>
<b>Right of use asset - operating lease, net</b>	<b>926,506</b>	<b>1,038,787</b>
 <b>Total Assets</b>	 <b>118,403,285</b>	 <b>91,078,939</b>
<b><u>LIABILITIES</u></b>		
Lease liability - operating lease	926,506	1,038,787
Accounts payable	374,579	230,236
Accrued expenses	25,858	24,478
	1,326,944	1,293,501
<b>Total Liabilities</b>	<b>1,326,944</b>	<b>1,293,501</b>
 <b>Net Assets Available for Benefits</b>	 <b>\$ 117,076,341</b>	 <b>\$ 89,785,438</b>

The accompanying Independent Auditor's Report and notes are an integral part of these financial statements.



**UNITED FOOD & COMMERCIAL WORKERS UNION –**  
**EMPLOYER HEALTH & WELFARE FUND**

**STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS**  
**FOR THE YEARS ENDED SEPTEMBER 30,**

	2024	2023
<b>Additions:</b>		
<b>Contributions:</b>		
Employers	\$ 105,541,278	\$ 104,782,495
Participants	5,708,030	5,766,541
	111,249,308	110,549,036
<b>Net Investment Income:</b>		
Interest and dividends from securities in investment account	3,544,952	2,809,412
Net appreciation in fair value of investments	14,239,888	4,194,581
Less: investment advisor and custodian fees	(342,180)	(318,212)
	17,442,660	6,685,781
<b>Other Income:</b>		
Medicare Part D subsidy	6,778,530	6,265,781
Formulary rebates	6,272,649	5,478,592
	13,051,179	11,744,373
<b>Total Additions</b>	<b>141,743,147</b>	<b>128,979,190</b>
<b>Deductions:</b>		
<b>Cost of benefits:</b>		
Medical, dental, disability and vision claims - self funded	74,019,618	80,032,406
Paid prescription program	33,522,209	33,734,704
Administrative fees - medical	3,149,324	3,160,379
Stop loss premiums	87,406	91,226
Premiums - life insurance (net of refunds)	268,348	(60,103)
	111,046,905	116,958,612
Administrative expenses	3,405,339	3,378,294
<b>Total Deductions</b>	<b>114,452,244</b>	<b>120,336,906</b>
<b>Net Increase</b>	<b>27,290,903</b>	<b>8,642,284</b>
<b>Net assets available for benefits:</b>		
Beginning of year	89,785,438	81,143,154
End of Year	<b>\$ 117,076,341</b>	<b>\$ 89,785,438</b>

The accompanying Independent Auditor's Report and notes are an integral part of these financial statements.

UNITED FOOD & COMMERCIAL WORKERS UNION –  
EMPLOYER HEALTH WELFARE FUND

NOTES TO FINANCIAL STATEMENTS

SEPTEMBER 30, 2024 AND 2023

Note 1 - Description of the Plan:

**General:**

The United Food & Commercial Workers Union - Employer Health & Welfare Fund (the "Plan") is a multiemployer health and welfare benefit plan. The Plan, which is subject to the provisions of the Employee Retirement Income Security Act of 1974 ("ERISA"), as amended, was established as a result of collective bargaining agreements (the "CBAs") between United Food & Commercial Workers (UFCW) Local 880 and Northeast Ohio employers in the retail food, drug, and meat processing industries. The sole purpose of the Plan is to provide health and welfare benefits to eligible members and their dependents. Administration of the Plan is the responsibility of the Board of Trustees (the "Trustees") and is governed by a joint board consisting of equal representation from labor and management.

**Contributions:**

The participating employers make monthly contributions to the Plan on behalf of the covered employees in amounts determined by the CBAs and subject to the minimum funding requirements of ERISA and maximum deductibility of contributions by participating employers under the Internal Revenue Code (the "IRC"). Contributions for continued health coverage are required for eligible members who have retired. Medicare eligible retiree benefits, except for prescription drugs, are coordinated with those provided by the Federal Government. Participants should refer to the summary plan description and plan document for a complete description of the Plan's provisions.

In addition to deductibles and co-payments, retirees contribute to the estimated cost of providing postretirement benefits based on years of service and type of coverage elected.

**Benefits:**

The Plan, in conjunction with MedMutual Life Insurance Company and Medical Mutual of Ohio, provides various hospital, surgical, medical, dental, accident, sickness, weekly indemnity, and life insurance benefits to covered members. The extent of the benefits provided to the members depends on the terms of the CBAs currently in effect with their respective employers. Retired employees, who meet the eligibility requirements, are entitled to medical and prescription benefits supplemental to Medicare coverage. The Plan also provides continuation of certain benefits upon termination of employment through the Consolidated Omnibus Budget Reconciliation Act (COBRA).

**Self - insured Benefits:**

The claims for self-insured benefits are processed by either the Plan's administrative staff or by the Plan's third-party claims processors under administrative services only arrangements. The claims processors pay claims directly to providers. Despite the Plan's utilization of third-party claim's processors, ultimate responsibility for payments to providers is retained by the Plan.

UNITED FOOD & COMMERCIAL WORKERS UNION –  
EMPLOYER HEALTH WELFARE FUND

NOTES TO FINANCIAL STATEMENTS

SEPTEMBER 30, 2024 AND 2023

Note 1 - Description of the Plan (Continued):

**Stop Loss Coverage:**

The Plan purchases "aggregate deductible stop-loss insurance" from Medical Mutual of Ohio to insure against unusual and catastrophic medical claims that exceed a calculated threshold.

**Self-insured Eye Care Program:**

The Plan has contracted with Davis Vision Inc. to provide a fully paid eye care program for covered members, their spouses and children. The program provides for a free eye examination and a pair of glasses once every 24 months for adults, and once every 12 months for children. Additionally, there is a scheduled vision plan for covered members, their spouses and children.

**Self-insured Paid Prescription Drug Program:**

Caremark administers the program that provides for the payments of prescription drugs. The program generally covers members, spouses and eligible children, and requires the member to pay 30% for acute care prescriptions and 20% for maintenance drugs. Some members are covered under a program which requires a member to pay 30% for all prescriptions. There is a maximum co-pay of \$30 for maintenance generic drugs. There is also an additional \$10 charge if a member chooses to use a non-preferred drug. In addition, there is a \$4,000 maximum limit on participant out-of-pocket expenses.

The Plan participates in a formulary rebate program with Caremark whereby the Plan receives a percentage of the manufacturer rebates generated by the volume of business. The amount earned from these rebates was \$6,272,649 and \$5,478,592 for the years ended September 30, 2024 and 2023, respectively. Of this amount, \$2,747,646 and \$2,742,581 was received after year end and are reflected as receivables at September 30, 2024 and 2023, respectively.

**Life Insurance Benefits:**

MedMutual Life Insurance Company provides life insurance coverage for covered members. The amount of coverage varies per plan up to a maximum of \$20,000.

Note 2 - Summary of Significant Accounting Policies:

**Basis of Accounting:**

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

**UNITED FOOD & COMMERCIAL WORKERS UNION –  
EMPLOYER HEALTH WELFARE FUND**

**NOTES TO FINANCIAL STATEMENTS**

**SEPTEMBER 30, 2024 AND 2023**

**Note 2 - Summary of Significant Accounting Policies (Continued):**

**Use of Estimates:**

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires the Trustees to make estimates and assumptions that affect certain reported amounts of assets, liabilities, benefit obligations and changes therein, IBNR (claims incurred but not recorded) and disclosure of contingent assets and liabilities. Actual results may differ from those estimates.

**Employers' Contributions Receivable:**

The Plan's policy is to recognize contributions based on the latest executed CBAs on an individual employer basis. Contributions from participating employers are based on monthly contribution rates and payable to the Plan each month. Contributions due but not paid prior to year-end are recorded as contributions receivable. Contributions that have not been received during a reasonable period of time after the year-end are estimated.

A review is made, at year-end, of the current status of estimated receivables in order to determine their collectability. Such review, coupled with historical collection experience, serves as a basis for determining the amount required, if any, as an allowance for doubtful accounts. Employers' contributions receivable are charged against the allowance when accounts are deemed to be uncollectible. There were no write-offs in the years ended September 30, 2024 and 2023. The Trustees believe no allowance for doubtful accounts is necessary at September 30, 2024 and 2023.

**Valuation of Investments:**

Investments are reported at fair value. Shares of mutual funds are valued at the net asset value of shares held by the Plan at year end. 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 Trustees determine the Plan's valuation policies utilizing information provided by its investment advisors and custodians. See Note 4 for a discussion of fair value measurement. Gains and losses are recognized when securities are sold on the trade date. In those instances where stocks have been purchased at various times, an average cost is used to determine the realized gain or loss. Interest is recorded on the accrual basis and 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.

UNITED FOOD & COMMERCIAL WORKERS UNION –  
EMPLOYER HEALTH WELFARE FUND

NOTES TO FINANCIAL STATEMENTS

SEPTEMBER 30, 2024 AND 2023

Note 2 - Summary of Significant Accounting Policies (Continued):

**Fixed Assets:**

Fixed assets are recorded at cost, less accumulated depreciation. Major additions are capitalized, whereas replacements, maintenance and repairs, which do not improve or extend the useful lives of the respective assets, are expensed currently. Depreciation is computed on the "straight-line" method using an estimated useful life of 3 -7 years. Depreciation expense for the years ended September 30, 2024 and 2023 was \$38,128 and \$48,486, respectively. Depreciation expense is included in administrative expenses on the Statements of Changes in Net Assets Available for Benefits.

**Computer software system:**

The computer software system is recorded at cost. It is externally housed and developed and is used in the Plan's operations. Amortization expense is provided using the straight-line method over the estimated life of the software system. The Plan implemented the new software in November 2019 and began amortizing the amount at that time. Amortization expense for the years ended September 30, 2024 and 2023 was \$124,420 and \$124,417, respectively. Amortization expense is included in administrative expenses on the Statements of Changes in Net Assets Available for Benefits.

**Leases:**

Effective October 1, 2022, the Plan adopted ASU 2016-2, *Leases* (Topic 842), for reporting leases, which requires an entity that is a lessee to recognize a lease liability and a right of use asset on the Statement of Net Assets Available for Benefits for all leases that have a term greater than 12 months. Leases are classified as finance or operating, with classification affecting the pattern and classification of expense recognition on the Statement of Changes in Net Assets Available for Benefits. The Plan used the effective date as the date of initial application.

Right of use assets represent the Plan's right to use an underlying asset for the lease term, and lease liabilities represent the Plan's obligation to make lease payments. The right of use asset and liability are recognized at the lease commencement date based on the present value of the lease payments over the lease term. Unless the implicit rate is readily available, the Plan uses the risk free rate at the lease commencement date as the discount rate.

**Reclassification:**

Certain amounts in 2022 have been reclassified to conform to the 2023 presentation.

UNITED FOOD & COMMERCIAL WORKERS UNION –  
EMPLOYER HEALTH WELFARE FUND

NOTES TO FINANCIAL STATEMENTS

SEPTEMBER 30, 2024 AND 2023

Note 2 - Summary of Significant Accounting Policies (Continued):

**Refunds:**

Refunds due from the Plan's paid prescription drug program are recorded when earned. Refunds due as of the financial statement date have been reported as a receivable, with the offset being netted against claims paid.

**Medicare Part D Subsidy:**

The Medicare Prescription Drug, Improvement and Modernization Act of 2003 (the Act) introduced a prescription drug benefit under Medicare as well as a federal subsidy to sponsors of retiree health care benefit plans which provide a benefit that is at least actuarially equivalent to Medicare Part D. The Plan has been determined to be actuarially equivalent to the Medicare Part D. Under the Act, for multiemployer plans, any Medicare subsidy is received directly by the Plan and not the individual employers participating in the Plan. As a result, the Plan has earned \$6,778,530 and \$6,265,781 in subsidies for the years ended September 30, 2024 and 2023, respectively. The Plan's benefit subsidies are subject to final review by Medicare. Any adjustments resulting from such reviews are not yet known and may impact future subsidies.

**Payment of Benefits:**

Benefit payments to providers and third party claims processors are recorded as an expense when paid.

**Postretirement Benefits Obligation:**

The postretirement benefit obligation represents the actuarial present value of those estimated future benefits that are attributed by the terms of the Plan to employees' service rendered to the date of the financial statements, reduced by the actuarial present value of contributions expected to be received in the future from current Plan participants. Postretirement benefits include future benefits expected to be paid to or for (1) currently retired or terminated employees and their beneficiaries and dependents and (2) active employees and their beneficiaries and dependents after retirement from service with the participating employers. Prior to an active employee's full eligibility date, the postretirement benefit obligation is the portion of the expected postretirement benefit obligation that is attributed to the employee's service in the industry rendered to the valuation date.

The actuarial present value of the expected postretirement benefit obligation is determined by an actuary and is the amount that results from applying actuarial assumptions to the cost data of historical claims, to estimate future annual incurred claims costs per participant and to adjust such estimates for the time value of money (through discounts for interest) and the probability of payment (by means of decrements such as those for death, disability, withdrawal or retirement) between the valuation date and the expected date of payment.

**UNITED FOOD & COMMERCIAL WORKERS UNION –  
EMPLOYER HEALTH WELFARE FUND**

**NOTES TO FINANCIAL STATEMENTS**

**SEPTEMBER 30, 2024 AND 2023**

**Note 2 - Summary of Significant Accounting Policies (Continued):**

**Postretirement Benefits Obligation (continued):**

The following are significant assumptions used in the valuations as of September 30, 2024 and 2023. A change in the weighted-average discount rate has caused a change in the expected postretirement benefit obligation. See Note 5 for a table that presents the components of the Plan's benefit obligations and the related changes in the Plan's benefit obligations as of September 30, 2024 and 2023.

	<u>2024</u>	<u>2023</u>
<b>Health care trend rates:</b>		
<b>Medical</b>	9.00% graded to 4.5% over 10 yrs.	8.00% graded to 4.5% over 10 yrs.
<b>Weighted-average discount rate</b>	4.75%	5.50%
<b>Mortality:</b>		
<b>Healthy</b>	RP-2012 Blue Collar Healthy Annuitant Mortality Table projected generationally with Scale	RP-2012 Blue Collar Healthy Annuitant Mortality Table projected generationally with Scale
<b>Disabled</b>	1983 Railroad Disability Table	1983 Railroad Disability Table
<b>Retirement Rates</b>	<u>Age</u> <u>Rate</u>	<u>Age</u> <u>Rate</u>
	55-61    15%	55-61    15%
	62        20%	62        20%
	63-64    15%	63-64    15%
	65        30%	65        30%
	66-69    15%	66-69    15%
	70        100%	70        100%

**UNITED FOOD & COMMERCIAL WORKERS UNION –  
EMPLOYER HEALTH WELFARE FUND**

**NOTES TO FINANCIAL STATEMENTS**

**SEPTEMBER 30, 2024 AND 2023**

**Note 2 - Summary of Significant Accounting Policies (Continued):**

**Postretirement Benefits Obligation (continued):**

	2024	2023
Administrative Expenses	\$276	\$268
	Administrative expense added to the total per capita cost	Administrative expense added to the total per capita cost
Actuarial cost method	Projected Unit Credit	Projected Unit Credit
Medicare Part D subsidy	\$0 per participant	\$0 per participant

The foregoing 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 the postretirement benefit obligations.

**Note 3 - Investments:**

In accordance with provisions of the Plan's trust agreement relating to the investment of employer contributions, the Trustees have retained various investment advisors and a custodian to manage and hold the investments. The advisors are allocated various percentages of the total investment assets by management. The advisors are part of a program under the direction of Merrill Lynch. Merrill Lynch monitors the advisors and reports their performance to the Trustees on a regular basis. Bank of America, which owns Merrill Lynch, is the custodian of the assets.

**Note 4 - Fair Value Measurements:**

The framework for measuring fair value provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (level 1 measurements) and the lowest priority to unobservable inputs (level 3 measurements). The three levels of the fair value hierarchy are described as follows:

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

**UNITED FOOD & COMMERCIAL WORKERS UNION –  
EMPLOYER HEALTH WELFARE FUND**

**NOTES TO FINANCIAL STATEMENTS**

**SEPTEMBER 30, 2024 AND 2023**

**Note 4 - Fair Value Measurements (continued):**

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

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

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

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

The asset's or liability's fair value measurement level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement. Valuation techniques used need to maximize the use of observable inputs and minimize the use of unobservable inputs.

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

**Common and preferred stocks:** Valued at the closing price reported on the active market on which the individual securities are traded.

**Corporate obligations:** Valued using pricing models maximizing the use of observable inputs for similar securities. This includes basing value on yields currently available on comparable securities of issuers with similar credit ratings.

**Mutual and exchange traded funds and money market funds:** Valued at the daily closing price as reported by the fund. Mutual funds held by the Plan are open-end mutual funds that are registered with the Securities and Exchange Commission (SEC). These funds are required to publish their daily net asset value (NAV) and to transact at that price. The mutual funds held by the Plan are deemed to be actively traded. The NAV is used as a practical expedient to estimate fair value and are not classified in the fair value hierarchy.

**U.S. government obligations:** Valued at the closing price reported on the active market on which the obligations are traded.

UNITED FOOD & COMMERCIAL WORKERS UNION –  
EMPLOYER HEALTH WELFARE FUND

NOTES TO FINANCIAL STATEMENTS

SEPTEMBER 30, 2024 AND 2023

Note 4 - Fair Value Measurements (continued):

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

The following tables set forth by level, within the fair value hierarchy, the Plan's assets at fair value as of September 30, 2024 and 2023:

Assets at Fair Value as of September 30, 2024				
	Level 1	Level 2	Level 3	Total
Common stocks	\$ 42,631,312	\$ -	\$ -	\$ 42,631,312
U.S. Government obligations	9,874,461	-	-	9,874,461
Corporate bonds	-	16,615,010	-	16,615,010
Interest bearing cash	35,587	-	-	35,587
Total assets at fair value	52,541,360	16,615,010	-	69,156,370
Investments measured at NAV	-	-	-	27,718,578
Total investments	\$ 52,541,360	\$ 16,615,010	\$ -	\$ 96,874,948

  

Assets at Fair Value as of September 30, 2023				
	Level 1	Level 2	Level 3	Total
Common stocks	\$ 33,605,802	\$ -	\$ -	\$ 33,605,802
U.S. Government obligations	7,925,109	-	-	7,925,109
Corporate bonds	-	15,003,776	-	15,003,776
Interest bearing cash	20,723	-	-	20,723
Total assets at fair value	41,551,634	15,003,776	-	56,555,410
Investments measured at NAV	-	-	-	23,163,072
Total investments	\$ 41,551,634	\$ 15,003,776	\$ -	\$ 79,718,482

As of September 30, 2024, the following table summarizes the Plan's investments measured at NAV:

Investment Type	Fair Value	Unfunded Commitments	Redemption Frequency	Redemption Notice Period
Mutual and exchange traded funds	\$ 23,108,178	\$ -	Daily	N/A
Money market funds	\$ 4,610,400	\$ -	Daily	N/A

UNITED FOOD & COMMERCIAL WORKERS UNION –  
EMPLOYER HEALTH WELFARE FUND

NOTES TO FINANCIAL STATEMENTS

SEPTEMBER 30, 2024 AND 2023

Note 4 - Fair Value Measurements (continued):

These investments are valued using the NAV per share as provided by the fund manager, which is based on the fair value of the underlying assets held by the fund, less its liabilities. Management considers these valuations to be a reasonable estimate of fair value as of the reporting date.

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. Management evaluates the significance of transfers between levels based upon the nature of the financial instrument and size of the transfer relative to total net assets available for benefits.

Note 5 - Claims Incurred But Not Reported:

Plan benefit obligations at September 30, 2024 and 2023 for health claims incurred by active participants but not yet reported at that date are estimated and reviewed by Plan management based on year-end subsequent payments and statistical lag reports. Such estimated amounts are reported in the Plan's benefit obligations as reported in the table below. These amounts are paid by the Plan only if claims are submitted and approved for payment. Health claims incurred by retired participants, but not reported at year end are included in the post retirement benefit obligations.

The following tables present the components of the Plan's benefit obligations and the related changes in the Plan's benefit obligations:

Plan Benefit Obligations:	September 30,	
	2024	2023
Amounts currently payable:		
Insurance premiums and claims payable	\$ 2,474,285	\$ 2,547,277
Claims incurred but not reported	26,668,000	24,311,000
	29,142,285	26,858,277
Postretirement benefit obligations, net of amounts currently payable:		
Retired participants	135,951,687	128,721,513
Other participants	4,240,038	6,609,762
Participants not yet fully eligible for benefits	27,193,379	37,001,001
	167,385,104	172,332,276
Total Plan Benefit Obligation	\$ 196,527,389	\$ 199,190,553



UNITED FOOD & COMMERCIAL WORKERS UNION –  
EMPLOYER HEALTH WELFARE FUND

NOTES TO FINANCIAL STATEMENTS

SEPTEMBER 30, 2024 AND 2023

Note 5 - Claims Incurred But Not Reported (continued):

The weighted-average health care cost-trend rate assumptions (see Note 2) have a significant effect on the amounts reported in the accompanying financial statements. If the assumed rates increased by one percentage point in each year, it would increase the obligation as of September 30, 2024 and 2023 by \$18,231,788 and \$19,239,410, respectively. See Note 2 for a listing of actuarial assumptions.

The estimated Medicare Part D subsidies included as reductions in the Plan's total benefit obligation at September 30, 2024 and 2023 were \$0.

Note 6 - Priorities Upon Termination:

It is the intent of the Trustees of the Plan to continue the Plan in full force and effect. However, in the event of termination of the Plan, the Trustees shall apply the assets of the Plan to provide for the payment of all obligations of the Plan and shall distribute any remaining surplus in accordance with the provisions of ERISA and the provisions of the Plan. Furthermore, the corpus or income of the Plan may be used only for the exclusive benefit of the employees and their eligible dependents or the payment of administrative expenses of the Plan and shall not revert or accrue to the benefit of any employer or the union.

Note 7 - Federal Income Tax Status:

The Internal Revenue Service has determined that the Plan qualifies under Section 501(c)(9) of the IRC and, therefore, is exempt from Federal income taxes. The Plan is subject to the provisions of ERISA, as amended.

In addition, the Plan is required to operate in conformity with the IRC to maintain the tax-exempt status. The Plan administrator believes that the Plan is being operated in compliance with the applicable requirements of the IRC and, therefore, believes that the Plan is tax-exempt.

Accounting principles generally accepted in the United States of America require Plan management to evaluate tax positions taken by the Plan and recognize a tax liability (or asset) if it has taken an uncertain position that more likely than not would not be sustained upon examination by the IRS. The Plan is subject to routine audits by taxing jurisdictions, however, there are currently no audits for any tax periods in progress.

**UNITED FOOD & COMMERCIAL WORKERS UNION –**  
**EMPLOYER HEALTH WELFARE FUND**

**NOTES TO FINANCIAL STATEMENTS**

**SEPTEMBER 30, 2024 AND 2023**

**Note 8 - Related Party/Party - In - Interest Transactions:**

In June 2011, the Plan consolidated its Akron and Cleveland offices with the move to 9199 Market St., Broadview Heights, Ohio. The Plan leases the facility from UFCW Local 880, under a sublease agreement. The gross rent expense for this facility was \$210,208 and \$208,869 for the years ended September 30, 2024 and 2023, respectively.

The Plan also includes costs that are allocated to the United Food & Commercial Workers Local 880 - Retail Food Employers Joint Pension Fund, United Food & Commercial Workers Local 880 - Mercantile Employers Joint Pension Fund and the UFCW Union - Employer Pension Fund (collectively known as the Combined Pension Administration Fund). Total expenses charged to the Combined Pension Administration Fund were \$172,851 and \$185,308 for the years ended September 30, 2024 and 2023, respectively.

Employees of the Plan are covered for their health and welfare benefits through this Plan. Contributions by the Plan on behalf of its employees were \$434,751 and \$430,498 for the years ended September 30, 2024 and 2023, respectively. In addition, the UFCW Local 880 (Local 880) also contributes to the Plan, which includes a supplementary dental benefit, covering its employees. Premiums received from Local 880 for this dental care policy were \$7,210 and \$7,506 for the years ended September 30, 2024 and 2023, respectively.

Bank of America is the custodian of the Plan's assets. In addition, Merrill Lynch oversees the activity of all money managers under their platform (See Note 3). Bank of America is the owner of Merrill Lynch. For the years ended September 30, 2024 and 2023, the Plan paid custodian fees to Bank of America of \$8,848 and \$7,682, respectively. Investment advisory fees paid to Merrill Lynch were \$333,332 and \$310,530 for the years ended September 30, 2024 and 2023, respectively.

During the years ended September 30, 2024 and 2023, the Plan purchased computer equipment, software, and other related computer expenses consisting of the following amounts:

	<b>For the Years Ended</b>	
	<b>September 30,</b>	
	<b>2024</b>	<b>2023</b>
Salary and related payroll costs	\$ 194,530	\$ 192,759
Maintenance and equipment	37,809	52,113
Document scanning and storage	130,520	146,313
Other charges	21,696	17,310
	<b><u>\$ 384,555</u></b>	<b><u>\$ 408,495</u></b>

UNITED FOOD & COMMERCIAL WORKERS UNION –  
EMPLOYER HEALTH WELFARE FUND

NOTES TO FINANCIAL STATEMENTS

SEPTEMBER 30, 2024 AND 2023

Note 8 - Related Party/Party - In - Interest Transactions (continued):

A part of these costs were allocated to and reimbursed by the following related parties, who also use the computer system:

	For the Years Ended September 30,	
	2024	2023
Combined Pension Administration Fund	\$ 18,000	\$ 18,000
UFCW Union - Local 880	48,077	35,301
	\$ 66,077	\$ 53,301

Note 9 - Operations Under Operating Lease:

The Plan leases a facility located at 9199 Market St., Broadview Heights, Ohio from UFCW Local 880 under a sublease agreement. As of June 1, 2021, a lease extension was exercised. The extension runs through May 31, 2031. The lease is classified as an operating lease.

The following summarizes the line items in the Statements of Net Assets Available for Benefits as of September 30, 2024 and 2023:

	2024	2023
Right of use asset - operating lease	\$ 926,506	\$ 1,038,787
Lease liability - operating lease	\$ 926,506	\$ 1,038,787

The weighted average remaining lease term and weighted average discount rate for the operating lease is 6.67 years and 3.98% at September 30, 2024, respectively.

UNITED FOOD & COMMERCIAL WORKERS UNION –  
EMPLOYER HEALTH WELFARE FUND

NOTES TO FINANCIAL STATEMENTS

SEPTEMBER 30, 2024 AND 2023

Note 9 - Operations Under Operating Lease (continued):

Minimum future annual payments for this lease are as follows:

Year Ending September 30,		
2025	\$	151,591
2026		153,396
2027		158,810
2028		158,810
2029		158,810
Thereafter		<u>277,915</u>
Total undiscounted lease payments		1,059,332
Less: Imputed interest		<u>(132,826)</u>
		<u>\$ 926,506</u>

The following summarizes the line items in the Statements of Changes in Net assets Available for Benefits for the years ended September 30, 2024 and 2023:

	<u>2024</u>	<u>2023</u>
Lease payments included in lease expense	<u>\$ 151,591</u>	<u>\$ 151,591</u>
Variable costs included in lease expense	<u>\$ 58,617</u>	<u>\$ 57,278</u>

Note 10 - Retirement Plans for Employees of the Plan:

All eligible Plan employees are participants in the Pension Plan for Employees of United Food & Commercial Workers Union - Employer Health & Welfare Fund (Pension Plan), a contributory defined benefit pension plan. This retirement plan provides normal retirement and vested deferred benefits. There were no employer contributions made to the Pension Plan for the years ended September 30, 2024 and 2023, respectively.

**UNITED FOOD & COMMERCIAL WORKERS UNION –  
EMPLOYER HEALTH WELFARE FUND**

**NOTES TO FINANCIAL STATEMENTS**

**SEPTEMBER 30, 2024 AND 2023**

**Note 10 - Retirement Plans for Employees of the Plan (continued):**

In addition, all eligible employees of the Plan are participants in one of the following plans: United Food & Commercial Workers Union Local 880 - Retail Food Employers Joint Pension Plan or United Food & Commercial Workers Union - Employer Pension Plan, each of which are multiemployer defined benefit pension plans. The risk of participating in multiemployer defined benefit pension plans is different from single employer plans. Assets contributed to a multiemployer defined benefit pension plan by one employer may be used to provide benefits to employees of other participating employers. If a participating employer stops contributing to the Plan, the unfunded obligations of the Plan may be borne by the remaining participating employers. Plan contributions totaling \$142,420 and \$146,573, respectively, were made to these plans for the years ended September 30, 2024 and 2023.

**Note 11 - Agreements With Preferred Provider Organizations:**

The Plan has an agreement with Medical Mutual of Ohio for the processing and paying of medical claims and outpatient services, as well as providing medical review services.

Agreements with MetroHealth and Dentemax are currently in effect. These preferred provider organizations (PPO's) generate a savings in the amount of claims paid when a member uses one of the PPO's doctor or dentist networks or outpatient hospital networks. In exchange, the Plan pays an administration fee to the PPO.

**Note 12 - Significant Participating Employers:**

For the years ended September 30, 2024 and 2023, contributions from one employer represented approximately 33% of total employer contributions. The contribution receivable due from this employer at September 30, 2024 and 2023 was \$0.

**Note 13 - 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 future statements of net assets available for benefits.

UNITED FOOD & COMMERCIAL WORKERS UNION –  
EMPLOYER HEALTH WELFARE FUND

NOTES TO FINANCIAL STATEMENTS

SEPTEMBER 30, 2024 AND 2023

Note 13 - Risks and Uncertainties (continued):

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

Note 14 - Administrative Expenses:

	<u>For the Years ended September 30,</u>	
	<u>2024</u>	<u>2023</u>
<b>Fund Office Administrative Expenses:</b>		
Wages	\$ 1,028,470	\$ 1,031,012
Temporary help and employment agency fees	69,993	564
Payroll taxes	83,821	83,886
Health and welfare plans, net of dental premiums received	427,541	422,992
Pension plans	142,420	146,573
Dues and subscriptions	13,998	17,891
Rent	210,208	208,869
Postage	142,424	150,310
Office supplies	14,176	21,735
Telephone	34,725	36,026
Printing	48,491	42,639
Patient research fee tax	43,995	43,770
Xerox maintenance	9,656	11,701
Payroll processing service	4,144	3,994
Computer expenses and supplies	387,242	373,297
Reimbursements of computer costs	(63,863)	(89,749)
Consulting fees	2,850	2,850
Property insurance	3,840	3,665
Office expense	4,484	5,100
Administration of office employees' pension plans	69,770	83,950
Depreciation and amortization	162,548	172,903
Utilities, security, janitorial and office maintenance	62,426	56,817
Bank charges	12	45,986
Office equipment rent and maintenance	29,723	24,025
	<hr/>	<hr/>
<b>Total Fund Office Administrative Expenses</b>	<b>2,933,094</b>	<b>2,900,806</b>

UNITED FOOD & COMMERCIAL WORKERS UNION –  
EMPLOYER HEALTH WELFARE FUND

NOTES TO FINANCIAL STATEMENTS

SEPTEMBER 30, 2024 AND 2023

Note 14 - Administrative Expenses (continued):

	2024	2023
<b>Other Administrative Expenses:</b>		
Fiduciary liability and fidelity insurance	16,613	30,963
Legal fees	273,822	267,866
Actuarial fees	25,759	21,203
Auditing fees	135,000	129,400
Conference and meeting expenses	21,051	28,056
Total Other Administrative Expenses	472,245	477,488
<b>Total Administrative Expenses</b>	<b>\$ 3,405,339</b>	<b>\$ 3,378,294</b>

Note 15 - Reconciliation of Financial Statements to Form 5500:

The following is a reconciliation of net assets available for benefits per the financial statements to the Form 5500:

	For the Years Ended September 30,	
	2024	2023
Net assets available for benefits per the financial statement	\$ 117,076,341	\$ 89,785,438
Benefit obligations currently payable	(29,442,485)	(27,547,676)
Net assets available for benefits per the Form 5500	\$ 87,633,856	\$ 62,237,761

The following is a reconciliation of the cost of benefits paid per the financial statements to the Form 5500:

	For the Years Ended September 30,	
	2024	2023
Cost of benefits paid per the financial statements	\$ 111,046,905	\$ 116,958,612
Add: current year's amount currently payable	29,442,485	27,547,677
Less: previous years amounts currently payable	(27,547,677)	(28,260,431)
Cost of benefits paid per the Form 5500	\$ 112,941,713	\$ 116,245,858

UNITED FOOD & COMMERCIAL WORKERS UNION –  
EMPLOYER HEALTH WELFARE FUND

NOTES TO FINANCIAL STATEMENTS

SEPTEMBER 30, 2024 AND 2023

Note 16 - Subsequent Events:

The Trustees have evaluated subsequent events through June 17, 2025, the date which the financial statements were available to be issued, and no matters came to their attention that would require adjustments to or disclosure in the financial statements.

UNITED FOOD & COMMERCIAL WORKERS UNION -  
EMPLOYER HEALTH & WELFARE FUND

EIN-34-6726563 PLAN NO. 501

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

SEPTEMBER 30, 2024

(a) (b) Description of Asset	(c) Face Amount or Number of Shares	(d) Cost	(e) Current Value
3I Group	838 Shs.	\$ 23,607	\$ 37,150
3M Company	283 Shs.	35,941	38,686
Abbot Labs	1,574 Shs.	177,813	179,452
Abbvie Inc	792 Shs.	122,499	156,404
Accenture PLC	385 Shs.	100,737	136,190
ACI Worldwide, Inc.	723 Shs.	17,566	36,801
Adobe Inc	352 Shs.	189,168	182,359
Advanced Drainage Systems Inc.	102 Shs.	11,882	16,030
Advanced Micro Devices, Inc.	356 Shs.	42,515	58,512
Adyen NV	1,118 Shs.	13,283	17,474
Affiliated Managers Group	294 Shs.	33,061	52,373
Agilent Technologies Inc	183 Shs.	29,414	27,172
AIA Group, Ltd.	406 Shs.	17,018	14,287
Airbus SE	184 Shs.	22,388	26,946
Air Liquide	132 Shs.	19,345	25,624
Air Liquide	379 Shs.	10,352	14,648
Air Products & Chemicals	582 Shs.	151,976	173,385
Akamai Technologies, Inc.	425 Shs.	30,730	42,904
Albany Intl Corp	311 Shs.	21,751	27,632
Albemarle Corporation	302 Shs.	31,017	28,602
Alcon Inc	272 Shs.	22,603	27,289
Alcon Inc	889 Shs.	51,872	88,962
Alibaba Group Holding, Ltd.	552 Shs.	60,518	58,678
Alphabet, Inc. Class C	3,979 Shs.	477,091	665,249
Alphabet, Inc. Class A	767 Shs.	21,186	127,207
Altria Group, Inc.	1,558 Shs.	70,631	79,520
Amadeus IT Group	159 Shs.	7,898	11,489
Amazon.com., Inc.	2,768 Shs.	221,449	515,761
American Express Company	589 Shs.	101,301	159,737
American Homes 4 Rent	4,044 Shs.	158,728	155,249
American International Group Inc.	1,072 Shs.	80,923	78,503
American Tower Reit Inc	724 Shs.	150,497	168,373
American Water Works Co Inc	735 Shs.	99,655	107,486
Americold Realty Inc.	3,579 Shs.	104,928	101,178
Ameriprise Finl Inc.	269 Shs.	42,729	126,379
Amgen, Inc.	319 Shs.	69,184	102,785
Amicus Therapeutics Inc.	2,497 Shs.	32,950	26,668
Amphenol Corporation	430 Shs.	10,854	28,019
Analog Devices Inc.	641 Shs.	115,160	147,539
Ansys, Inc.	454 Shs.	118,857	144,658
ANZ Group Holdings Ltd	820 Shs.	13,306	17,228
Aon PLC	309 Shs.	41,904	106,911
Apellis Pharmaceuticals	1,128 Shs.	55,915	32,532
Apple, Inc.	4,069 Shs.	535,293	948,077
Applied Industrial Technologies	96 Shs.	20,986	21,420
Applied Material Inc	431 Shs.	66,457	87,084
Aptargroup, Inc.	445 Shs.	34,481	72,285

**UNITED FOOD & COMMERCIAL WORKERS UNION -  
EMPLOYER HEALTH & WELFARE FUND**

**EIN-34-6726563 PLAN NO. 501**

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

**SEPTEMBER 30, 2024**

(a) (b) Description of Asset	(c) Face Amount or Number of Shares	(d) Cost	(e) Current Value
Common stocks continued:			
Aptiv Plc	242 Shs.	\$ 23,628	\$ 17,426
Aramark	1,637 Shs.	39,891	63,401
Arch Rock, Inc.	3,118 Shs.	23,471	63,108
Argenx SE	133 Shs.	30,454	72,097
Arista Networks Inc.	108 Shs.	24,734	41,453
ARM Holdings Inc.	143 Shs.	18,595	20,450
Arrow Electronics, Inc.	351 Shs.	29,468	46,623
Ashtead Group PLC	82 Shs.	15,377	25,329
ASML Holdings N.V.	90 Shs.	54,561	74,993
Astrazeneca PLC	510 Shs.	36,391	39,734
AT&T Inc.	1,621 Shs.	30,058	35,662
Atmos Energy Corp	713 Shs.	76,452	98,900
Autodesk, Inc.	545 Shs.	65,931	150,137
Automatic Data Processing, Inc.	101 Shs.	23,892	27,950
Autozone Inc	28 Shs.	42,812	88,201
Avalonbay Community Inc.	1,133 Shs.	212,951	255,208
Avery Dennison Corp.	220 Shs.	41,592	48,567
Avidity Biosciences Inc.	319 Shs.	14,060	14,652
Avient Corp	517 Shs.	22,890	26,015
BAE Systems PLC	2,186 Shs.	20,663	36,286
Ball Corp	228 Shs.	10,872	15,483
Barclays Ord	9,109 Shs.	21,832	27,436
Bayer	1,473 Shs.	23,233	12,476
Berkley W R Corp	2,443 Shs.	65,116	138,591
Berkshire Hathaway, Inc.	470 Shs.	108,454	216,322
Best Buy Co Inc.	256 Shs.	34,790	26,445
Biogen Inc	139 Shs.	30,298	26,944
Bio Rad Labs	146 Shs.	36,285	48,849
Bio Techne Corporation	476 Shs.	20,239	38,047
Birkenstock Holdings	362 Shs.	15,278	17,843
Blackbaud, Inc.	480 Shs.	23,496	40,646
Blackrock, Inc.	246 Shs.	108,575	233,579
Blackstone Group, Inc.	740 Shs.	87,721	113,316
Block Inc	551 Shs.	58,088	36,989
BNP Paribas	305 Shs.	20,546	20,951
Boeing Company	1,471 Shs.	273,391	224,651
Booz Allen Hamilton HLDG Corp.	535 Shs.	44,891	87,077
Borg Warner, Inc.	1,076 Shs.	42,932	39,048
Boston Properties Inc	746 Shs.	36,463	62,515
Box Inc	1,642 Shs.	41,951	53,743
Braze Inc.	613 Shs.	32,622	19,824
Brinks Co	186 Shs.	20,648	21,509
Bristol-Myers Squibb	644 Shs.	37,045	33,321
Brixmor Property Group Inc	6,751 Shs.	139,595	188,083
Broadcom, Ltd.	894 Shs.	78,416	154,215
Broadridge Financial Solutions, Inc.	382 Shs.	11,378	29,244

UNITED FOOD & COMMERCIAL WORKERS UNION -  
EMPLOYER HEALTH & WELFARE FUND

EIN-34-6726563 PLAN NO. 501

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

SEPTEMBER 30, 2024

(a) (b) Description of Asset	(c) Face Amount or Number of Shares	(d) Cost	(e) Current Value
Common stocks continued:			
Broadstone Net Lease	7,966 Shs.	\$ 134,157	\$ 150,956
Brown & Brown, Inc.	802 Shs.	34,597	83,087
BWX Technologies Inc.	742 Shs.	45,991	80,655
Burford Capital LTD	1,228 Shs.	11,919	16,283
Burlington Stores, Inc.	261 Shs.	41,245	68,768
BXP Inc.	2,325 Shs.	172,533	187,070
Cabot Corporation	606 Shs.	35,875	67,733
Caci Intl, Inc.	192 Shs.	47,863	96,876
Cameo Corp	439 Shs.	10,160	20,967
Canadian Pacific Kansas City	382 Shs.	29,004	32,676
Capital One Finl Corp	1,065 Shs.	96,927	159,462
Caretr Inc.	2,110 Shs.	51,024	65,115
Carlisle Companies, Inc.	340 Shs.	50,390	152,915
Carrier Global Corp Reg.	300 Shs.	14,956	24,147
Caseys General Stores Inc.	188 Shs.	43,272	70,633
Caterpillar Inc	171 Shs.	40,807	66,882
CBRE Group, Inc.	865 Shs.	40,505	107,675
Celsuis Holdings Inc	293 Shs.	17,186	9,188
Cencora Inc	139 Shs.	21,580	31,286
Centene Corporation	611 Shs.	28,880	45,996
CF Inds Hldgs, Inc.	754 Shs.	21,333	64,693
Chevron Corporation	1,569 Shs.	201,128	231,067
Championx Corp	1,044 Shs.	21,664	31,477
Charles River Labs	249 Shs.	52,569	49,046
Chewy Inc.	1,249 Shs.	35,824	36,583
Chipotle Mexican Grill, Inc.	196 Shs.	3,074	11,294
Choice Hotels International, Inc.	494 Shs.	46,874	64,368
Chubb, Ltd.	368 Shs.	60,803	106,128
CIE Generale DES	3,921 Shs.	52,572	79,596
Cigna Corporation	378 Shs.	65,627	130,954
Cincinnati Financial Corporation	602 Shs.	27,819	81,944
Cirrus Logic Corporation	431 Shs.	24,584	53,535
Cisco Systems, Inc.	2,706 Shs.	93,354	144,013
Citigroup Inc	2,022 Shs.	119,434	126,577
Coca Cola Company	2,019 Shs.	113,252	145,085
Colgate Palmolive	339 Shs.	30,011	35,192
Columbia Banking System Inc	732 Shs.	17,826	19,113
Columbia Sportswear Company	500 Shs.	29,247	41,595
Comcast Corporation	3,133 Shs.	158,151	130,865
Compass Group PLC	764 Shs.	19,435	24,771
Compass Group PLC	1,356 Shs.	29,735	43,544
Commerce Bancshares	674 Shs.	34,218	40,036
Confluent Inc.	873 Shs.	20,926	17,792
Conmed Corp	487 Shs.	43,695	35,025
Conocophillips	1,285 Shs.	97,896	135,285
Constellation Brands Inc	262 Shs.	62,838	67,515
Constellation Software Inc.	15 Shs.	41,471	48,892

UNITED FOOD & COMMERCIAL WORKERS UNION -  
EMPLOYER HEALTH & WELFARE FUND

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

SEPTEMBER 30, 2024

(a) (b) Description of Asset	(c) Face Amount or Number of Shares	(d) Cost	(e) Current Value
Common stocks continued:			
Copt Defense Properties	1,046 Shs.	\$ 25,870	\$ 31,725
Corteva Inc.	2,000 Shs.	70,476	117,580
Costco Wholesale	102 Shs.	50,970	90,425
Coterra Energy Inc	2,990 Shs.	54,792	71,611
CRH Plc.	278 Shs.	23,303	25,782
Crinetics Pharmaceuticals Inc	375 Shs.	13,945	19,163
Crown Castle Inc	706 Shs.	89,374	83,753
Cullen/Frost Bankers Inc.	507 Shs.	44,986	56,713
Cummins Inc	86 Shs.	19,740	27,846
Curtiss Wright	135 Shs.	25,329	44,373
Diamiler Truck	650 Shs.	12,979	12,123
Daiichi Sankyo Co Ltd.	399 Shs.	13,044	13,136
Danaher Corporation	485 Shs.	101,458	134,840
Darden Restaurants, Inc.	250 Shs.	17,923	42,033
Deckers Outdoor Corp	300 Shs.	16,702	47,835
Deere & Company	146 Shs.	40,320	60,930
Deutsche Telekom	2,420 Shs.	47,323	71,437
Diageo PLC	1,139 Shs.	152,195	159,847
Digital Realty Inc	1,475 Shs.	188,667	238,699
Diodes, Inc.	341 Shs.	17,593	22,855
Disney Walt Co	1,047 Shs.	119,668	100,711
Dolby Laboratories, Inc.	1,359 Shs.	96,768	104,004
Dominion Energy, Inc.	3,012 Shs.	202,429	174,063
Doordash Inc.	245 Shs.	24,770	34,969
Dorman Products Inc.	180 Shs.	20,981	20,362
D R Horton, Inc.	656 Shs.	69,908	125,145
Duke Energy Corporation	882 Shs.	77,998	101,695
Eastman Chemical Company	454 Shs.	38,148	50,825
Eaton Corporation PLC	527 Shs.	74,317	175,669
Ebay Inc.	1,087 Shs.	80,142	70,775
Ecolab Inc.	573 Shs.	124,537	146,304
Edwards Lifesciences Corp	499 Shs.	48,373	32,929
Elastic	197 Shs.	20,864	15,122
Electronic Arts Inc.	170 Shs.	23,293	24,385
Elevance Health Inc	101 Shs.	43,283	52,520
Eli Lilly & Co	234 Shs.	116,832	207,310
Embraer Group Inc	501 Shs.	13,593	17,720
Emerson Elec Co	179 Shs.	16,953	19,577
Emcor Group Inc	143 Shs.	10,451	61,566
Empire State Realty Inc.	5,531 Shs.	57,806	61,283
Entegris, Inc.	501 Shs.	17,340	56,378
Envista Hldgs Corp.	2,646 Shs.	77,863	52,285
EQT Corp	644 Shs.	25,622	23,596
Equinix Inc.	589 Shs.	358,829	522,814
Equinor	601 Shs.	16,144	15,223
Equity Lifestyles Properties Inc.	907 Shs.	58,232	64,705
Etsy, Inc.	551 Shs.	38,851	30,597

UNITED FOOD & COMMERCIAL WORKERS UNION -  
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SCHEDULE H, LINE 4(i)-SCHEDULE OF ASSETS (HELD AT END OF YEAR)

SEPTEMBER 30, 2024

(a) (b) Description of Asset	(c) Face Amount or Number of Shares	(d) Cost	(e) Current Value
Common stocks continued:			
Evolution Gaming Group	100 Shs.	\$ 9,688	\$ 9,819
Exlservice Holdings Inc	600 Shs.	21,159	22,890
Expedia Group Inc.	412 Shs.	60,500	60,984
Expeditors International of Washington, Inc.	419 Shs.	19,339	55,057
Extra Space Storage Inc.	1,553 Shs.	209,528	279,835
Exxon Mobil Corp	355 Shs.	39,786	42,613
FactSet Research Systems, Inc.	164 Shs.	19,018	75,415
Fair Isaac Corporation	46 Shs.	68,727	89,402
Fastenal Company	1,345 Shs.	39,646	96,060
Ferrari Nv	76 Shs.	19,822	35,728
Fidelity National Information Services, Inc.	2,058 Shs.	176,070	172,358
FirstCash, Inc.	321 Shs.	13,948	36,851
Flutter Entertainment	170 Shs.	35,534	40,338
Formfactor Inc.	703 Shs.	25,252	32,338
Fortive Corp.	217 Shs.	14,281	17,128
FTI Consulting Inc.	173 Shs.	30,272	39,368
GATX Corporation	472 Shs.	28,725	62,516
General Dynamic Corp	602 Shs.	109,401	181,924
General Mills	608 Shs.	38,624	44,901
General Motors Co	1,266 Shs.	43,896	56,767
Gilead Sciences Inc	389 Shs.	26,363	32,614
Gitlab Inc	930 Shs.	47,110	47,932
Givaudan SA	180 Shs.	12,069	19,700
Godaddy, Inc.	1,171 Shs.	89,321	183,589
Goldman Sachs Group Inc.	78 Shs.	38,151	38,619
Graco, Inc.	720 Shs.	22,134	63,007
Haleon Plc	3,988 Shs.	20,122	21,017
Hamilton Lane Inc	225 Shs.	27,273	37,888
HDFC Bank, Ltd.	310 Shs.	16,878	19,394
Healthpeak Properties Inc	9,297 Shs.	180,409	212,622
Hermes International	14 Shs.	28,038	34,468
Hershey Company	146 Shs.	28,333	28,000
Hexcel Corporation	673 Shs.	20,668	41,612
Hewlett Packard	880 Shs.	15,077	18,005
Hologic, Inc.	673 Shs.	32,458	54,823
Home Depot Inc.	218 Shs.	88,550	88,334
Honeywell International, Inc.	605 Shs.	114,392	125,060
Houlihan Lokey, Inc.	707 Shs.	58,266	111,720
Hoya Corp.	92 Shs.	9,210	13,733
HSBC Holdings Plc	3,392 Shs.	25,220	30,448
Hubbell Inc.	115 Shs.	38,596	49,260
Hubspot Inc.	155 Shs.	58,751	82,398
Hunt J B Transport Services, Inc.	281 Shs.	26,257	48,425
Huntington Bancshares	1,408 Shs.	20,999	20,698
Huntington Ingalls Industries, Inc.	150 Shs.	18,085	39,657
Hyatt Hotels Corp.	380 Shs.	25,510	57,836
Iberdrola	2,875 Shs.	34,867	44,568

UNITED FOOD & COMMERCIAL WORKERS UNION -  
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SCHEDULE H, LINE 4(i)-SCHEDULE OF ASSETS (HELD AT END OF YEAR)

SEPTEMBER 30, 2024

(a) (b) Description of Asset	(c) Face Amount or Number of Shares	(d) Cost	(e) Current Value
<b>Common stocks continued:</b>			
ICICI Bank Ltd	2,035 Shs.	\$ 41,623	\$ 60,745
Ideaya Biosciences Inc.	1,054 Shs.	43,238	34,391
IDEX Corporation	248 Shs.	31,032	53,196
Illinois Tool Works, Inc.	365 Shs.	54,670	95,656
Illumina, Inc.	304 Shs.	74,741	39,645
Immunocore Holdings Ltd.	701 Shs.	39,290	21,822
Inari Med Inc.	449 Shs.	30,412	18,517
Independence Realty Inc.	5,530 Shs.	91,578	114,365
Insmid Inc	438 Shs.	28,137	32,974
ING GP NV	1,680 Shs.	16,373	30,509
Insight Enterprises Inc.	70 Shs.	14,239	15,077
Insperity, Inc.	442 Shs.	53,522	38,896
International Business Machines Corp	134 Shs.	29,015	29,625
Intuitive Surgical, Inc.	287 Shs.	83,934	140,995
Intuit Inc	126 Shs.	73,381	78,246
Iqvia Holdings Inc.	89 Shs.	18,658	21,090
Irhythm Technologies, Inc.	297 Shs.	22,731	22,049
Iron Mountain Inc.	966 Shs.	79,847	114,790
Itau Unibanco Holdings SA	2,460 Shs.	12,728	16,359
Ivanhoe Mine Ltd.	1,322 Shs.	19,107	19,704
Jack Henry & Associates Inc	163 Shs.	11,790	28,776
JD Communications Inc.	183 Shs.	10,174	8,320
Jfrog Ltd	1,227 Shs.	26,904	35,632
Johnson & Johnson	1,370 Shs.	189,008	222,022
Johnson Controls Intl PLC	302 Shs.	24,269	23,438
Jones Lang Lasalle, Inc.	226 Shs.	26,617	60,977
JP Morgan Chase & Co	706 Shs.	58,670	149,867
Kenvue Inc.	2,822 Shs.	65,101	65,273
KeyCorp	2,618 Shs.	36,027	43,852
Keyence Corp	86 Shs.	39,988	41,516
Kilroy Realty Corp	2,190 Shs.	78,262	84,753
Kinsale Capital Group	49 Shs.	17,562	22,813
Kirby Corporation	426 Shs.	27,611	52,155
KKR & Co Inc	1,011 Shs.	80,372	132,016
KLA Corp	90 Shs.	30,782	69,697
Knight-Swift Transportation Holdings	346 Shs.	17,961	18,667
L'Oreal Co	72 Shs.	33,260	32,307
L'Oreal Co	233 Shs.	21,338	20,914
Lam Research Corp.	103 Shs.	60,690	84,056
Landstar System, Inc.	373 Shs.	41,922	70,449
Lattice Semiconductor Corp	678 Shs.	41,196	35,981
Lennar Corp	855 Shs.	61,147	160,295
Lennox International, Inc.	202 Shs.	67,928	122,067
Lightspeed Communications Inc	480 Shs.	19,917	7,915
Lincoln Election Holdings Inc.	156	32,367	29,955
Linde Plc.	112 Shs.	44,778	53,408
Lineage Inc	577 Shs.	47,416	45,225

**UNITED FOOD & COMMERCIAL WORKERS UNION -  
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**SCHEDULE H, LINE 4(i)-SCHEDULE OF ASSETS (HELD AT END OF YEAR)**

**SEPTEMBER 30, 2024**

(a) (b) Description of Asset	(c) Face Amount or Number of Shares	(d) Cost	(e) Current Value
Common stocks continued:			
LKQ Corp.	1,907 Shs.	\$ 80,750	\$ 76,127
Lonza Group	390 Shs.	20,968	24,636
Lonza Group	42 Shs.	23,023	26,618
Lowes Cos, Inc.	1,313 Shs.	181,110	355,626
Lululemon Athletica Inc	61 Shs.	19,392	16,552
LVMH Moet Hennessy Louis Vuitto	166 Shs.	16,129	25,499
LXP Industrial Trust	11,637 Shs.	110,428	116,952
Macerich Co.	6,589 Shs.	99,834	120,183
Macquarie Group Ltd	333 Shs.	47,462	53,682
Madrigal Pharmaceuticals Inc.	88 Shs.	20,885	18,675
Manhattan Associates, Inc.	289 Shs.	47,467	81,319
Marathon Petroleum Corp	156 Shs.	26,057	25,414
Markel Corporation	55 Shs.	39,809	86,272
Marriott Intl Inc	566 Shs.	119,983	140,708
Marsh & McLennan Companies, Inc.	515 Shs.	67,210	114,891
Martin Marietta Matls Inc.	192 Shs.	56,031	103,344
Mastercard, Inc.	407 Shs.	155,199	200,977
McDonalds Corp	127 Shs.	33,122	38,673
McKesson Corporation	293 Shs.	64,905	144,865
Medtronic PLC	673 Shs.	68,235	60,590
Mercadolibre, Inc.	69 Shs.	77,906	141,585
Merck & Company, Inc.	2,368 Shs.	168,420	268,910
Meta Platforms Inc.	983 Shs.	146,343	562,709
Metlife	747 Shs.	50,564	61,613
Microchip Technology Inc.	1,208 Shs.	64,800	96,990
Microsoft Corporation	3,183 Shs.	726,075	1,369,645
Middleby Corp	338 Shs.	46,933	47,026
Mitsubishi UFJ Finl Group	6,302 Shs.	24,755	64,154
Modine Manufacturing Co	138 Shs.	13,670	18,325
Mongodb Inc.	230 Shs.	72,210	62,181
Monolithic Power Systems, Inc.	77 Shs.	5,338	71,187
Monotaro Co Ltd.	564 Shs.	9,603	9,402
Monster Beverage Corporation	1,877 Shs.	36,493	97,923
Moog, Inc.	374 Shs.	24,946	75,555
Moody's Corp	98 Shs.	37,586	46,510
Morgan Stanley	818 Shs.	64,785	85,268
Morningstar, Inc.	280 Shs.	47,602	89,354
Mueller Industries Inc	393 Shs.	27,737	29,121
Murata Manufacturing Co	1,306 Shs.	12,257	12,838
Murphy USA Inc	87 Shs.	42,969	42,880
Myriad Genetics, Inc.	1,469 Shs.	25,930	40,236
NASDAQ Stock Market, Inc.	1,107 Shs.	45,769	80,822
Nestle SA	1,495 Shs.	133,577	150,502
Nestle SA	207 Shs.	27,239	20,848
Netflix, Inc.	468 Shs.	156,918	331,938
Neurocrine Biosciences, Inc.	423 Shs.	46,003	48,738
New York Times Company	1,045 Shs.	36,758	58,175

UNITED FOOD & COMMERCIAL WORKERS UNION -  
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SCHEDULE H, LINE 4(i)-SCHEDULE OF ASSETS (HELD AT END OF YEAR)

SEPTEMBER 30, 2024

(a) (b) Description of Asset	(c) Face Amount or Number of Shares	(d) Cost	(e) Current Value
Common stocks continued:			
Nexgen Energy Ltd.	3,219 Shs.	\$ 19,679	\$ 21,020
Nextera Energy Inc	519 Shs.	45,520	43,871
Nike Inc	964 Shs.	106,282	85,218
Nintendo, Ltd.	9,942 Shs.	128,819	132,427
Nordson Corporation	325 Shs.	32,151	85,355
Norfolk Southern Corporation	592 Shs.	80,321	147,112
Northrop Grumman Corporation	207 Shs.	91,178	109,311
Novartis AG	430 Shs.	30,291	49,459
Novo Nordisk A S BR	900 Shs.	22,934	107,163
Novo Nordisk A S Adr	279 Shs.	25,943	32,864
NU Holdings LTD	1,690 Shs.	8,490	23,069
Nutrien Ltd.	177 Shs.	13,220	8,507
Nvidia Corporation	10,425 Shs.	254,168	1,266,012
NXP Semiconductors N.V.	261 Shs.	49,109	62,643
ON Holding	469 Shs.	13,445	23,520
ON Semiconductor Corporation	594 Shs.	6,949	43,130
Option Care Health Inc.	533 Shs.	18,471	16,683
Oracle Corporation	1,734 Shs.	94,825	295,474
Oshkosh Corporation	455 Shs.	50,834	45,596
Otis Worldwide Corp	152 Shs.	13,007	15,799
Paccar Inc.	958 Shs.	90,444	94,535
Palo Alto Networks Inc.	65 Shs.	18,632	22,217
Papa Johns International Inc.	844 Shs.	60,340	45,466
Parker Hannifin Corp	252 Shs.	52,140	159,219
Patrick Industries Inc	148 Shs.	21,068	21,071
Paychex, Inc.	792 Shs.	28,148	106,278
Paypal Holdings, Inc.	1,104 Shs.	98,245	86,145
Penn Entertainment Inc	1,360 Shs.	36,214	25,650
Pepsico, Inc.	513 Shs.	78,271	87,236
Pfizer, Inc.	2,285 Shs.	101,139	66,128
Philip Morris International, Inc.	1,331 Shs.	121,220	162,583
Phillips Edison And Co Inc.	1,571 Shs.	57,741	59,242
PNC Financial Services Group, Inc.	409 Shs.	43,962	75,604
POOLCORP	92 Shs.	25,558	34,666
Power Integrations, Inc.	384 Shs.	13,519	24,622
PPG Industries Inc.	127 Shs.	18,004	16,822
Procure Technologies Inc.	575 Shs.	42,861	35,489
Procter & Gamble Co	1,065 Shs.	153,862	184,458
Progressive Corp Ohio	1,589 Shs.	158,670	403,225
Prologis Inc	6,321 Shs.	628,521	798,216
Prosperity Bancshares, Inc.	297 Shs.	19,190	21,405
PT Bank Rakyat	649 Shs.	10,420	10,579
PT Bank Central Asia	30,803 Shs.	17,028	21,022
Pub Service Enterprise Group	537 Shs.	33,796	47,906
Public Storage	391 Shs.	131,416	142,273
Qiagen	967 Shs.	44,384	43,708
Qualcomm, Inc.	1,265 Shs.	147,347	215,113

UNITED FOOD & COMMERCIAL WORKERS UNION -  
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SCHEDULE H, LINE 4(i)-SCHEDULE OF ASSETS (HELD AT END OF YEAR)

SEPTEMBER 30, 2024

(a) (b) Description of Asset	(c) Face Amount or Number of Shares	(d) Cost	(e) Current Value
Common stocks continued:			
Quantum Services Inc.	244 Shs.	\$ 60,237	\$ 72,749
Raymond James Financial, Inc.	449 Shs.	16,673	54,985
Realty INCM Corp	6,079 Shs.	355,286	385,530
Recruit Holdings Co Ltd	1,605 Shs.	18,876	19,469
Recruit Holdings Co Ltd	409 Shs.	12,647	24,891
Regency Centers Corp	1,627 Shs.	98,555	117,518
Regeneron Pharmaceuticals, Inc.	148 Shs.	74,555	155,584
Reinsurance Group of America, Inc.	353 Shs.	34,799	76,908
Renaissancere Holdings Ltd.	156 Shs.	33,803	42,494
Republic Services, Inc.	241 Shs.	10,723	48,402
Roche Holding, Ltd.	1,367 Shs.	53,197	54,612
Rockwell Automation, Inc.	104 Shs.	33,342	27,920
RPM International, Inc.	1,352 Shs.	107,463	163,592
RTX Corp	711 Shs.	58,859	86,145
Ryder System Inc.	427 Shs.	21,884	62,257
Ryman Hospitality Properties	1,314 Shs.	114,429	140,913
S&P Global Inc	113 Shs.	52,073	58,378
Safehold Inc	3,963 Shs.	76,602	103,950
Safran	109 Shs.	24,187	25,680
Salesforce.com, Inc.	723 Shs.	156,685	197,892
Sanofi	290 Shs.	29,069	33,304
SAP Se	105 Shs.	16,543	23,923
Sarepta Therapeutics Inc	288 Shs.	36,768	35,968
SBA Communications Corp	181 Shs.	32,602	43,567
Schlumberger, Ltd.	1,141 Shs.	50,734	47,865
Schneider Electric	125 Shs.	27,082	32,951
Schwab Charles Corp.	1,713 Shs.	94,954	111,020
SEI Investments Corporation	1,652 Shs.	62,432	114,302
Sempra	685 Shs.	46,264	57,287
Service Corporation International	310 Shs.	16,103	24,468
Servicenow Inc.	148 Shs.	101,025	132,370
Seven and I Holdings Co	675 Shs.	10,615	10,105
Shell PLC	269 Shs.	12,246	17,741
Shell PLC	1,071 Shs.	30,173	34,837
Shin Etsu Chemical	330 Shs.	14,682	13,789
Shopify Inc	1,469 Shs.	88,126	117,726
Siemens A.G.	102 Shs.	14,335	20,718
Simon Property Group	942 Shs.	107,660	159,217
Simpson Manufacturing Development	155 Shs.	26,277	29,647
SMC	45 Shs.	24,027	20,024
Smith A.O.	1,341 Shs.	73,233	120,462
Snap-on, Inc.	184 Shs.	24,917	53,307
Sonoco Products Company	730 Shs.	39,944	39,880
Sony Group Corporation	346 Shs.	33,540	34,025
Sony Group Corporation	1,184 Shs.	94,879	114,339
Southern Company	1,112 Shs.	63,648	100,280

UNITED FOOD & COMMERCIAL WORKERS UNION -  
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SCHEDULE H, LINE 4(i)-SCHEDULE OF ASSETS (HELD AT END OF YEAR)

SEPTEMBER 30, 2024

(a) (b) Description of Asset	(c) Face Amount or Number of Shares	(d) Cost	(e) Current Value
Common stocks continued:			
Springworks Therapeutics Inc.	973 Shs.	\$ 53,110	\$ 31,175
Sprouts Farmers Markets Inc.	261 Shs.	25,153	28,817
Spotify Tech	110 Shs.	22,879	40,538
Starbucks Corporation	2,733 Shs.	245,343	266,440
Steris Place	147 Shs.	33,866	35,653
Stifel Financial Corp	551 Shs.	37,253	51,739
Stoneco Ltd.	729 Shs.	12,747	8,209
Sumitomo Mitsui Financial	665 Shs.	28,284	42,130
Suncor Energy Inc	300 Shs.	10,849	12,076
Swedbank AB	1,223 Shs.	20,222	25,976
Synopsis, Inc.	47 Shs.	9,819	23,800
T-Mobile US Inc.	230 Shs.	45,677	47,463
Taiwan Semiconductor MFG LTD	900 Shs.	82,179	156,303
Tanger Inc	1,910 Shs.	57,935	63,374
Tapestry Inc.	1,123 Shs.	37,779	52,759
Target Corp	219 Shs.	40,177	34,133
Te Connectivity	444 Shs.	66,232	67,040
Teledyne Technologies, Inc.	301 Shs.	81,865	132,736
Teleflex, Inc.	366 Shs.	82,692	90,519
Tencent Holdings, Ltd.	1,143 Shs.	11,774	13,773
Tesla Motors, Inc.	1,357 Shs.	271,194	355,032
Texas Instruments	804 Shs.	89,716	166,082
Texas Roadhouse	215 Shs.	37,414	37,969
Thermo Fisher Scientific Corporation	228 Shs.	131,283	141,034
TJX Inc.	527 Shs.	38,447	61,944
Topbuild Corp	110 Shs.	18,521	44,749
TotalEnergies	1,956 Shs.	117,930	126,396
Toyota Motor Corp	1,139 Shs.	21,938	20,246
Trade Desk Inc	160 Shs.	9,042	17,544
Trane Tech Pub LTD Co.	113 Shs.	22,552	43,927
Transdigm Group Inc.	42 Shs.	37,011	59,939
Transunion	587 Shs.	31,903	61,459
Tractor Supply Co	141 Shs.	31,435	41,021
Trimble Inc.	1,277 Shs.	67,120	79,289
Tyler Technologies Inc	234 Shs.	81,992	136,590
Uber Technologies Inc.	519 Shs.	19,446	39,008
UDR Inc	5,637 Shs.	235,766	255,582
Ulta Beauty Inc.	151 Shs.	54,223	58,757
Unicredit SPA,	862 Shs.	16,951	37,871
Unicharm Corporation	2,077 Shs.	14,728	14,893
Union Pacific Corporation	373 Shs.	52,255	91,937
United Healthcare Group Inc	164 Shs.	86,436	95,888
United Parcel Services, Inc.	628 Shs.	79,358	85,622
US Bancorp	3,000 Shs.	108,738	137,190
Valvoline Inc.	506 Shs.	20,770	21,177
Valero Energy Corporation	398 Shs.	35,035	53,742

UNITED FOOD & COMMERCIAL WORKERS UNION -  
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EIN-34-6726563 PLAN NO. 501

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

SEPTEMBER 30, 2024

(a) (b) Description of Asset	(c) Face Amount or Number of Shares	(d) Cost	(e) Current Value
<b>Common stocks continued:</b>			
Valmont Industries	143 Shs.	\$ 38,935	\$ 41,463
Ventas Inc	1,205 Shs.	72,153	77,278
Verizon Communications, Inc.	1,939 Shs.	80,227	87,080
Verra Mobility Corp	1,021 Shs.	29,901	28,393
Vertex Pharmaceuticals Inc.	311 Shs.	62,927	144,640
Vertiv Holdings Co	234 Shs.	22,220	23,281
Vici Properties Inc	7,580 Shs.	181,372	252,490
Viking Therapeutics Inc.	224 Shs.	15,324	14,180
Visa, Inc.	1,066 Shs.	122,265	293,094
W W Grainger Incorp	81 Shs.	49,485	84,144
Wabtech	118 Shs.	18,854	21,448
Walmart De Mexico	5,212 Shs.	19,504	15,733
Walmart Inc.	746 Shs.	58,611	60,240
Webster Financial	815 Shs.	29,620	37,987
Wells Fargo & Co	795 Shs.	45,209	44,910
Welltower Inc	4,036 Shs.	362,159	516,729
WEX, Inc.	376 Shs.	53,588	78,858
Weyerhaeuser Co	588 Shs.	18,410	19,910
Wheaton Precious Metals	687 Shs.	36,840	41,964
Wingstop Inc	206 Shs.	36,852	85,712
Wintrust Financial	353 Shs.	33,011	38,311
Wolters Kluwer	163 Shs.	20,241	27,524
Woodward, Inc.	359 Shs.	23,765	61,570
Workday, Inc.	145 Shs.	20,259	35,438
WRC Energy Group Inc.	428 Shs.	32,720	41,165
Xcel Energy Inc.	1,207 Shs.	76,655	78,817
Xenon Pharmaceuticals	425 Shs.	18,065	16,730
Xylem Inc.	845 Shs.	82,651	114,100
Yum Brands, Inc.	284 Shs.	16,743	39,677
Yum China Holdings, Inc.	341 Shs.	9,918	15,352
Zoetis Inc	206 Shs.	46,160	40,246
Zurich INS Group LTD	97 Shs.	46,009	58,622
<b>Total common stocks</b>		<b>\$ 29,707,702</b>	<b>\$ 42,631,312</b>
<b>Other equities:</b>			
Vanguard FTSE Developed Markets	37,561 Shs.	\$ 1,647,434	\$ 1,983,592
Vanguard Growth	10,497 Shs.	1,612,240	4,030,177
Ishares China LargeCap	4,200 Shs.	114,047	133,476
Ishares India Index Fund	611 Shs.	31,972	15,762
<b>Total other equities</b>		<b>\$ 3,405,693</b>	<b>\$ 6,163,007</b>
<b>Mutual funds:</b>			
Loomis Sayles Securitized Assets Fund	834,685 Shs.	\$ 6,360,300	\$ 6,602,359
Loomis Sayles High Income Opportunities Fund	143,490 Shs.	1,239,754	1,291,410

**UNITED FOOD & COMMERCIAL WORKERS UNION -  
EMPLOYER HEALTH & WELFARE FUND**

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

**SEPTEMBER 30, 2024**

(a) (b) Description of Asset	(c) Face Amount or Number of Shares	(d) Cost	(e) Current Value
<b>Mutual funds continued:</b>			
Western Asset Smash Series Core	562,083 Shs.	\$ 4,858,318	\$ 3,462,430
Western Asset Smash Series C Fund	321,893 Shs.	3,026,985	3,074,083
Western Asset Smash Series M Fund	311,685 Shs.	3,105,297	2,514,889
<b>Total mutual funds</b>		<b>\$ 18,590,654</b>	<b>\$ 16,945,171</b>
<b>Total mutual and exchange traded funds</b>		<b>\$ 21,996,347</b>	<b>\$ 23,108,178</b>
<b>U.S. Government obligations:</b>			
FHLMC SD 8206, 2.500%, due 2052	112,526	\$ 92,348	\$ 97,105
FHLMC SD 8206, 0.030%, due 2052	80,798	74,541	72,673
FHLMC SD 8214, 3.500%, due 2052	2,582	2,453	2,407
FHLMC SD 8220, 0.030%, due 2052	124,728	112,119	112,164
FHLMC SD 8225, 0.030%, due 2052	52,296	45,727	46,997
FHLMC SD 8226, 3.500%, due 2052	12,331	11,026	11,485
FHLMC SD 8236, 3.500%, due 2052	153,001	139,320	142,411
FHLMC SD 8237, 0.40%, due 2052	8,037	7,395	7,717
FHLMC SD 8243, 3.50%, due 2052	22,531	20,658	20,986
FHLMC SD 8244, 0.040%, due 2052	167,664	157,213	161,045
FHLMC SD 8257, 4.500%, due 2052	101,307	99,177	99,554
FHLMC SD 8288, 0.05%, due 2053	3,570	3,600	3,570
FHLMC SD 8299, 0.05%, due 2053	21,854	21,552	21,852
FHLMC SD 8315, 0.05%, due 2053	2,741	2,587	2,740
FHLMC SD 8347, 4.500%, due 2053	56,131	53,024	55,160
FHLMC SD 8360, 4.05%, due 2053	21,918	20,813	21,546
FHLMC RB 5391, 0.030%, due 2051	82,839	70,966	74,386
FNMA PBH9215, 3.500%, due 2048	34,494	35,211	32,536
FNMA PBJ1662, 3.500%, due 2047	9,897	11,774	9,336
FNMA PCB2548, 2.500%, due 2052	18,375	17,669	15,979
FNMA PCB3049, 2.500%, due 2052	27,400	22,921	23,732
FNMA PCB3050, 2.500%, due 2052	95,211	79,932	82,556
FNMA FS0392, 2.500%, due 2052	166,933	148,055	144,066
FNMA FS0630, 0.030%, due 2052	61,286	62,119	55,396
FNMA FS1374, 0.030%, due 2052	15,360	12,793	13,812
FNMA FS1630, 2.500%, due 2051	24,666	20,530	21,287
FNMA FS4228, 3.500%, due 2052	5,428	4,678	5,057
FNMA FS4371, 3.500%, due 2052	11,007	9,951	10,266
FNMA FS5125, 2.500%, due 2051	50,732	42,224	43,783
FNMA FS5133, 0.030%, due 2051	25,142	21,829	22,577
FNMA FS5387, 2.500%, due 2052	8,519	7,087	7,352
FNMA FS5387, 3.500%, due 2052	5,552	4,993	5,199
FNMA FS6256, 3.500%, due 2052	38,888	34,619	36,245
FNMA FS6631, 2.500%, due 2052	1,922	1,594	1,668
FNMA FS7879, 2.500%, due 2052	26,356	21,730	22,746
FNMA MA4355, 0.020%, due 2051	107,925	109,499	89,769
FNMA MA4398, 0.020%, due 2051	99,386	101,017	82,429

**UNITED FOOD & COMMERCIAL WORKERS UNION -  
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**SEPTEMBER 30, 2024**

(a) (b) Description of Asset	(c) Face Amount or Number of Shares	(d) Cost	(e) Current Value
U.S. Government obligations continued:			
FNMA MA4548, 2.500%, due 2052	115,630	\$ 99,486	\$ 100,001
FNMA MA4564, 0.030%, due 2052	209,429	204,575	188,425
FNMA MA4578, 2.500%, due 2052	869	806	752
FNMA MA4577, 0.020%, due 2052	85,305	67,378	70,648
FNMA MA4579, 0.030%, due 2052	12,847	11,083	11,556
FNMA MA4598, 2.500%, due 2052	159,747	139,839	138,059
FNMA MA4599, 0.030%, due 2052	100,838	89,356	90,547
FNMA MA4600, 3.500%, due 2052	217,419	213,444	202,377
FNMA MA4654, 3.500%, due 2052	239,530	219,795	222,958
FNMA MA4656, 4.500%, due 2052	66,996	66,703	65,920
FNMA MA4730, 0.030%, due 2052	161,902	139,215	145,435
FNMA MA4732, 0.040%, due 2052	5,316	4,911	5,104
FNMA MA4782, 3.500%, due 2052	155,682	142,662	144,911
FNMA MA4784, 4.500%, due 2052	144,259	141,887	141,828
FNMA MA4785, 0.050%, due 2052	189,857	188,320	189,914
FNMA MA4867, 4.500%, due 2053	103,139	99,731	101,401
FNMA MA5027, 0.040%, due 2053	9,363	8,832	8,987
FNMA MA5038, 0.050%, due 2053	155,864	152,962	155,807
FNMA MA5070, 4.500%, due 2053	13,077	12,417	12,850
FNMA MA5164, 0.050%, due 2053	23,727	23,301	23,706
FNMA MA5294, 0.050%, due 2054	50,433	48,795	50,385
GNM MA7988, 0.030%, due 2052	10,016	9,096	9,137
GNM MA8098, 0.030%, due 2052	148,655	136,301	135,623
FNMA Bonds, 6.625%, due 11/15/30	196,000	269,088	226,807
U.S. Treasury Bond, 3.125%, due 11/15/41	160,000	172,379	141,387
U.S. Treasury Bond, 3.000%, due 5/15/42	190,400	200,182	163,685
U.S. Treasury Bond, 3.000%, due 11/15/44	139,000	149,067	115,983
U.S. Treasury Bond, 3.000%, due 5/15/45	147,000	155,971	122,211
U.S. Treasury Bond, 2.250%, due 8/15/46	66,000	59,454	47,249
U.S. Treasury Bond, 2.875%, due 11/15/46	394,000	409,670	316,784
U.S. Treasury Bond, 3.000%, due 2/15/48	311,000	329,514	252,943
U.S. Treasury Bond, 3.000%, due 2/15/49	489,000	425,624	395,880
U.S. Treasury Bond, 2.000%, due 2/15/50	788,000	745,948	513,461
U.S. Treasury Bond, 1.250%, due 5/15/50	89,000	80,700	47,629
U.S. Treasury Bond, 1.375%, due 8/15/50	389,000	320,966	214,269
U.S. Treasury Bond, 1.625%, due 11/15/50	238,000	204,608	139,992
U.S. Treasury Bond, 2.375%, due 5/15/51	786,000	552,278	554,531
U.S. Treasury Bond, 3.875%, due 2/15/43	75,900	77,313	73,220
U.S. Treasury Bond, 3.625%, due 5/15/53	70,800	66,942	64,431
U.S. Treasury Bond, 4.125%, due 8/15/53	80,000	76,675	79,666
U.S Treasury Bond, 4.750%, due 11/15/53	94,000	100,389	103,830
U.S Treasury Bond, 4.250%, due 2/15/54	93,000	88,448	94,773
U.S Treasury Bond, 4.500%, due 2/15/44	43,000	43,544	44,868
U.S Treasury Bond, 4.250%, due 8/15/54	92,000	94,688	93,940
U.S. Treasury Note, 4.500%, due 11/15/33	83,000	85,259	87,653
U.S. Treasury Note, 4.000%, due 2/15/34	128,000	126,283	130,200
U.S. Treasury Note, 4.375%, due 5/15/34	220,000	225,118	230,415

**UNITED FOOD & COMMERCIAL WORKERS UNION -  
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**SEPTEMBER 30, 2024**

(a) (b) Description of Asset	(c) Face Amount or Number of Shares	(d) Cost	(e) Current Value
<b>U.S. Government obligations continued:</b>			
U.S. Treasury Note, 3.500%, due 1/31/2030	188,000	\$ 184,028	\$ 187,060
U.S. Treasury Note, 3.375%, due 5/15/2033	223,200	214,292	217,002
U.S. Treasury Note, 1.250%, due 12/31/2026	309,000	299,945	293,417
U.S. Treasury Note, 0.875%, due 9/30/2026	438,000	427,876	414,904
U.S. Treasury Note, 3.875%, due 8/15/2034	46,000	46,526	46,323
U.S. Treasury Note, 3.625%, due 8/31/2029	375,000	376,582	376,114
U.S. Treasury Inflation Note, 1.875%, due 7/15/34	183,434	188,356	187,914
<b>Total U.S. Government obligations</b>		<b>\$ 10,723,352</b>	<b>\$ 9,874,461</b>
<b>Corporate bonds:</b>			
AbbVie, Inc., 3.600%, due 5/14/25	82,000	\$ 81,645	\$ 81,477
AbbVie, Inc., 3.200%, due 11/21/29	291,000	268,153	278,283
Advanced Auto Parts, 5.900%, due 3/9/26	62,000	61,948	62,640
Advanced Auto Parts, 5.950%, due 3/9/28	63,000	59,339	63,948
AECOM, 5.125%, due 3/15/27	63,000	67,850	64,273
Alcoa Inc., 5.900%, due 2/1/27	61,000	62,185	63,209
Altria Group, Inc., 2.450%, due 2/4/32	99,000	94,108	84,494
Aluminum Co Amer, 6.750%, due 1/15/28	59,000	68,462	63,040
Amazon Com, Inc., 1.500%, due 6/3/30	323,000	313,247	282,586
Amazon Com, Inc., 3.875%, due 8/22/37	77,000	87,505	72,413
American Axle & Manufacturing Inc., 6.500%, due 4/1/27	63,000	63,155	63,163
American Express Co, 1.650%, due 11/4/26	97,000	96,504	92,246
Amgen Inc, 2.450%, due 2/21/30	93,000	93,260	84,940
Anthem, Inc., 4.101%, due 3/1/28	79,000	81,805	78,701
Apple, Inc., 1.700%, due 8/5/31	324,000	310,097	280,924
Asbury Automotive Group Inc., 4.750%, due 3/1/30	68,000	67,737	65,087
AT&T Inc, 4.350%, due 3/1/29	82,000	94,724	82,496
Athene Holdings Ltd, 4.125%, due 1/12/28	86,000	90,876	84,869
Ball Corporation, 6.875%, due 3/15/28	60,000	60,343	62,133
Ball Corporation, 6.000%, due 6/15/29	61,000	61,458	63,130
Ball Corporation, 4.875%, due 3/15/26	60,000	61,493	59,754
Boeing Co., 4.875%, due 5/1/25	136,000	144,605	135,482
Boston Properties, Ltd., 2.750%, due 10/1/26	88,000	88,280	84,828
Boyd Gaming Corporation, 4.750%, due 12/1/27	64,000	62,841	63,276
Broadcom Corp, 3.875%, due 1/15/27	112,000	107,068	111,250
Capital One Financial Co., 3.300%, due 10/30/24	124,000	123,383	124,000
Carpenter Technology Corp, 6.375%, due 7/15/28	62,000	65,891	62,425
Carpenter Technology Corp, 7.625%, due 3/15/30	59,000	58,998	61,777
CCO Holdings LLC, 4.500%, due, 5/1/32	77,000	72,736	66,578
CDW LLC, 5.500%, due 12/1/24	62,000	66,406	61,985
Cedar Fair LP, 5.375%, due 4/15/27	62,000	61,561	61,825
Century Cmnty, Inc., 6.750%, due 6/1/27	61,000	63,751	61,586
Charter Comm Opt LLC, 5.375%, due 5/1/47	77,000	61,350	64,652
Citigroup, Inc., variable, due 5/25/34	278,000	255,578	273,049
Cleveland-Cliffs Inc., 5.875%, due 6/1/27	60,000	62,243	60,133

**UNITED FOOD & COMMERCIAL WORKERS UNION -  
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**SEPTEMBER 30, 2024**

(a) (b) Description of Asset	(c) Face Amount or Number of Shares	(d) Cost	(e) Current Value
Corporate bonds continued:			
CNF Transportations Inc., 6.700%, due 5/1/34	59,000	\$ 58,210	\$ 62,667
Comcast Corporation, 3.400%, due 4/1/30	290,000	316,065	278,214
Comcast Corporation, 4.250%, due 10/15/30	81,000	91,466	80,862
Commercial Metals Co, 3.875%, due 2/15/31	70,000	64,750	64,655
Concentrix Corp, 6.850%, due 8/2/33	62,000	65,374	64,220
Credit Accep Corp Mich, 6.625%, due 3/15/26	60,000	60,860	60,032
Crestwood Midstream, 5.750%, due 4/1/25	62,000	61,254	61,908
Crowdstrike Holdings Inc., 3.000%, due 2/15/29	70,000	63,664	64,789
Crown Americas Capital Corp., 5.250%, due 4/01/30	64,000	61,019	64,618
Crown Americas Capital Corp., 4.250%, due 9/30/26	64,000	59,901	62,988
Crown Cork & Seal Co Inc., 7.375%, due 12/15/26	59,000	69,490	62,173
CSX Corporation, 2.600%, due 11/1/26	82,000	80,558	79,746
CVS Health Corporation, 4.300%, due 3/25/28	357,000	396,108	356,040
DCP Midstream Oper. LP, 5.375%, due 7/15/25	72,000	75,211	72,176
Deere John Cap Corp., 4.750%, due 1/20/28	85,000	86,459	87,039
Dell Int LLC, 5.750%, due 2/1/33	85,000	85,226	91,223
Delta Air Lines Inc., 2.900%, due 10/28/24	109,000	106,083	108,612
Delta Air Lines Inc., 7.375%, due 1/15/26	60,000	66,036	61,726
Devon Energy Corporation, 5.2000%, due 9/15/34	283,000	285,663	281,794
Enact Holdings Inc., 6.250%, due 5/28/29	64,000	66,061	66,449
Encompass Health Corp., 4.750%, due 2/1/30	53,000	54,896	51,803
Encompass Health Corp., 4.500%, due 2/1/28	66,000	66,758	64,780
Energy Transfer Partners LP, 4.050%, due 3/15/25	84,000	83,318	83,621
Enlink Midstream Partner, 4.850%, due 7/15/24	63,000	61,057	63,057
Entergy Corp., .900%, due 9/15/25	98,000	96,164	94,689
Enterprise Products Oper. LLC, 2.800%, due 1/31/30	198,000	201,193	184,724
EQT Midstream Partners LP, 5.500%, due 7/15/28	63,000	59,256	63,845
EQT Midstream Partners LP, 6.500%, due 7/15/48	60,000	54,029	62,031
Everest Reinsurance Holding, 3.125%, due 10/15/52	97,000	92,468	64,898
Exelon Corp., 4.050%, due 4/15/30	90,000	96,529	88,625
Express Scripts Holding Co., 4.500%, due 2/25/26	35,000	36,805	34,951
Exxon Mobil Corp., 2.992%, due 3/19/25	89,000	93,371	88,325
FirstEnergy Corporation, 3.900%, due 7/15/27	65,000	64,024	64,325
FirstEnergy Corporation, 2.050%, due 3/1/25	65,000	62,677	64,069
Ford MTR Co Del, 4.346%, due 12/8/26	63,000	60,441	62,462
Ford MTR Co Del, 3.250%, due 2/12/32	115,000	94,711	97,937
Ford MTR Co Del, 9.625%, due 4/22/30	51,000	54,631	60,448
Fluor Corp, 4.250%, due 9/15/28	65,000	65,055	63,737
General Mills, Inc., 4.000%, due 4/17/25	83,000	84,712	82,624
General Motors Financial Co., 4.350%, due 1/17/27	80,000	83,401	79,826
General Motors Financial Co., 5.400%, due 4/06/26	62,000	61,974	62,750
Global Payments Inc., 3.200%, due 8/15/29	98,000	89,117	91,813
Goldman Sachs Group, Inc., 2.600%, due 2/7/30	505,000	520,160	463,651
Goldman Sachs Group, Inc., var, due 12/9/26	98,000	96,260	94,000
Goldman Sachs Group, Inc., var, due 10/21/27	98,000	95,658	93,424
Griffon Corp, 5.750%, due 3/1/28	64,000	65,794	63,194

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(a) (b) Description of Asset	(c) Face Amount or Number of Shares	(d) Cost	(e) Current Value
Corporate bonds continued:			
H B Fuller Co, 4.250%, due 10/15/28	66,000	\$ 65,061	\$ 63,292
HCA, Inc., 5.375%, due 2/1/25	63,000	65,955	63,020
HP, Inc., 3.000%, due 6/17/27	91,000	98,303	88,158
Hillenbrand, Inc., 3.750%, due 3/1/31	73,000	69,466	65,303
Hilton Domestic Oper Co., Inc., 4.875%, due 1/15/30	56,000	55,901	55,257
Hilton Worldwide Financial LLC, 4.875%, due 4/1/27	125,000	122,750	124,629
Huntington Bancshares, var, due 8/4/28	88,000	84,492	88,114
Humana Inc, 5.375%, due 4/15/31	90,000	89,258	93,220
Iqvia Inc, 6.250%, due 2/1/29	86,000	88,876	91,411
JPMorgan Chase & Company, var, due 12/5/29	368,000	393,413	369,708
JPMorgan Chase & Company, var, due 2/4/32	217,000	179,003	186,462
Jeffries Financial Group Inc., 6.200%, 4/14/34	88,000	87,616	94,203
Keurig Dr Pepper Inc., 3.950%, due 4/15/29	89,000	84,114	87,943
Kinder Morgan Energy Partners, 4.150%, due 2/1/24	88,000	87,572	89,881
L3Harris Technologies Inc., 5.400%, due 1/15/27	84,000	83,345	86,215
Lamar Media Corp, 3.750%, due 2/15/28	66,000	58,980	63,310
Lamar Media Corp, 4.875%, due 1/15/29	64,000	66,456	63,222
L Brands, Inc. 6.750%, due 7/1/36	62,000	60,945	63,898
L Brands, Inc. 5.250%, due 2/1/28	64,000	61,633	64,924
Lowe's Cos Inc., 2.625%, due 4/1/31	93,000	93,829	83,575
LYB International Finance III, 5.500%, due 3/1/34	88,000	88,367	91,529
MGM Resorts International, 5.500%, due 4/15/27	62,000	65,274	62,215
MGM Resorts International, 5.750%, due 6/15/25	60,000	57,691	60,404
Macys Retail Holdings Inc., 4.500%, due 12/15/34	44,000	32,764	36,869
Metlife Inc., 5.375%, due 7/15/33	86,000	83,336	91,505
Micron Technology Inc., 6.750%, due 11/1/29	82,000	86,413	90,093
Mondelez Intl, Inc. 2.750%, due 4/13/30	41,000	42,861	38,028
Morgan Stanley, var, due 7/22/28	186,000	189,198	183,252
Morgan Stanley, var, due 7/17/26	174,000	174,898	173,755
Murphy Oil Corp, 5.875%, due 12/1/27	62,000	60,758	62,756
Murphy Oil USA Inc, 4.750%, due 9/15/29	11,000	10,423	10,688
Nextera Energy Cap Hldings, Inc. 2.250%, due 6/1/30	91,000	91,836	81,337
NRG Energy Inc., 5.570%, due 1/15/28	63,000	60,314	63,469
Nisource, Inc. 0.950%, due 8/15/25	97,000	96,332	93,929
Nvidia Corp., 2.850%, due 4/1/30	88,000	92,683	83,256
Olin Corp, 5.000%, due 2/1/30	66,000	61,149	64,462
Olin Corp, 5.625%, due 8/1/29	63,000	66,762	63,149
Onemain Finance Corporation, 9.000%, due 1/15/29	58,000	57,971	61,461
PBF Holding Co LLC, 6.000%, due 2/15/28	64,000	60,198	63,175
Patterson-Uti Energy Inc., 3.950%, due 2/1/28	66,000	64,142	63,549
Pacific Gas and Electric Co., 5.450%, due 6/15/27	62,000	61,909	63,476
Penske Automotive Group Inc., 3.500%, due 9/1/25	64,000	64,100	62,946
PG&E, Corp., 5.250%, due 7/1/30	61,000	62,270	60,585
Philip Morris International Inc., 5.125%, due 2/15/30	85,000	85,626	88,179
Pilgrim's Pride Corp, 6.250%, due 7/1/33	61,000	59,345	64,719
QVC Inc., 5.450%, due 8/15/34	44,000	43,526	28,420

UNITED FOOD & COMMERCIAL WORKERS UNION -  
EMPLOYER HEALTH & WELFARE FUND

EIN-34-6726563 PLAN NO. 501

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

SEPTEMBER 30, 2024

(a) (b) Description of Asset	(c) Face Amount or Number of Shares	(d) Cost	(e) Current Value
Corporate bonds continued:			
Ryman Hospitality Property, 4.750%, due 10/15/27	64,000	\$ 64,266	\$ 63,219
Radian Group, Inc., 6.200%, due 3/15/29	62,000	62,229	64,781
Range Resources Corporation, 4.875%, due 5/15/25	62,000	63,984	61,688
Regal Rexnord Corp, 6.050%, due 2/15/26	63,000	63,312	63,972
SBA Communications Corp., 3.125%, due 2/1/29	70,000	62,830	64,701
SBA Communications Corp., 3.875%, due 2/15/27	66,000	67,022	64,322
Service Corporation Intl., 5.125%, due 6/1/29	63,000	66,646	62,915
Shea Homes LP, 4.750%, due 2/15/28	65,000	59,507	63,589
Simon Property Group LP, 3.500%, due 9/1/25	88,000	92,508	87,245
SM Energy Co, 6.750%, due 9/15/28	63,000	63,069	62,969
SM Energy Co, 6.625%, due 1/15/27	62,000	63,301	62,129
Southwestern Energy Co, 5.375%, due 2/1/29	65,000	67,131	64,781
Spirit Aerosystems, Inc., 3.850%, due 6/15/26	65,000	62,773	63,115
Sprint Cap Corp, 6.875%, due 11/15/28	58,000	61,848	63,326
Sprint Corporation, 7.625%, due 3/1/26	61,000	70,708	63,010
Starbucks Corporation, 3.800%, due 8/15/25	80,000	81,692	79,534
Synchrony Financial, 3.950%, due 12/1/27	93,000	82,596	90,297
Tegna, Inc., 5.000%, due 9/15/29	68,000	60,326	64,767
Teleflex, Inc., 4.625%, due 11/15/27	64,000	64,372	63,111
Tenet Healthcare Corp SR, 6.125%, due 10/1/28	60,000	55,753	60,479
Tenet Healthcare Corp SR, 6.125%, due 6/15/30	62,000	57,924	63,013
T-Mobile USA Inc., 3.750%, due 4/15/27	88,000	96,301	86,942
Thermo Fisher Scientific, 5.000%, due 1/31/29	86,000	86,851	89,185
Toyota Motor Credit Corporation, 3.050%, due 3/22/27	90,000	87,433	88,232
Transdigm, Inc., 5.500%, due 11/15/27	63,000	63,354	62,783
Truist Financial Corp, var, due 7/28/33	87,000	80,164	85,317
United Rentals North, 5.250%, due 1/15/30	64,000	60,005	65,048
United Rentals North, 4.000%, due 7/15/30	68,000	67,375	64,265
Unitedhealth Group, Inc., 2.750%, due 5/15/40	366,000	348,982	280,147
USA Communications =, 6.875%, due 9/1/27	62,000	60,889	62,524
Verizon Florida LLC, 6.860%, due 2/1/28	65,000	65,650	67,360
Verizon Communications, 4.400%, due 11/1/34	81,000	83,004	79,105
Verizon Communications, Inc 2.550%, due 3/21/31	310,000	310,052	276,805
Virginia Electric & Power Co., 3.150%, due 1/15/26	81,000	82,528	80,007
Vital Energy Inc., 9.750%, due 10/15/30	55,000	60,088	58,769
Warnermedia Holdings Inc., 4.054%, due 3/15/29	91,000	83,875	86,208
Warnermedia Holdings Inc., 4.279%, due 3/15/32	73,000	65,683	64,848
Wells Fargo & Co., various, due 2/11/31	206,000	209,023	187,062
Wells Fargo & Co., various, due 10/30/30	201,000	187,204	186,430
Wells Fargo & Co., 3.000%, due 2/19/25	144,000	146,602	142,950
Western Digital Corp, 4.750%, 2/15/26	64,000	61,602	63,654
Wyndham Worldwide Corporation, 6.600%, due 10/1/25	36,000	40,590	36,363
Yum Brands Inc., 4.625%, due 1/31/32	65,000	64,172	62,222
Yum Brands Inc., 5.375%, due 4/1/32	63,000	59,124	62,786
Total corporate bonds		\$ 16,035,964	\$ 15,577,118

**UNITED FOOD & COMMERCIAL WORKERS UNION -  
EMPLOYER HEALTH & WELFARE FUND**

**EIN-34-6726563 PLAN NO. 501**

**SCHEDULE H, LINE 4(i)-SCHEDULE OF ASSETS (HELD AT END OF YEAR)  
SEPTEMBER 30, 2024**

(a) (b) Description of Asset	(c) Face Amount or Number of Shares	(d) Cost	(e) Current Value
<b>Foreign Obligations:</b>			
Astrazeneca PLC, 3.375%, due 11/16/25	79,000	\$ 80,676	\$ 78,371
DH Europe Fin II Sarl, 2.200%, due 11/15/24	84,000	85,184	83,688
Honda Motor Co Ltd, 2.534%, due 3/10/2027	94,000	92,681	90,789
Pfizer Investment Enterprise Company, 4.450%, due 5/19/28	168,000	162,464	170,492
Royal Caribbean Cruises Global, 3.700%, due 3/15/28	66,000	58,018	63,688
Royal Bank of Canada, 3.625%, due 5/4/2027	90,000	89,421	89,152
Seagate HDD Cayman, 5.750%, due 12/1/2034	64,000	66,872	64,509
USD Seagate HDD Cayman, 4.875%, due 6/1/27	63,000	60,689	62,667
Shell International Finance, 6.375%, due 12/15/38	63,000	87,771	73,097
Toronto-Dominion Bank, 1.250%, due 9/10/2026	99,000	96,845	93,926
WestPac Banking Corporation, var, due 8/10/33	90,000	82,558	92,224
WestPac Banking Corporation, 2.350%, due 2/19/25	76,000	80,200	75,289
<b>Total foreign obligations</b>		<b>\$ 1,043,379</b>	<b>\$ 1,037,892</b>
<b>Total Corporate Bonds</b>		<b>\$ 17,079,343</b>	<b>\$ 16,615,010</b>
<b>Short Term Investments:</b>			
Blackrock Liquidity Funds		\$ 1,437,750	\$ 1,437,750
Merrill Lynch Retirement Cash Management Account		3,172,650	3,172,650
		<b>\$ 4,610,400</b>	<b>\$ 4,610,400</b>
<b>Cash</b>		<b>\$ 35,587</b>	<b>\$ 35,587</b>
<b>Total Assets (Held at End of Year)</b>		<b>\$ 84,152,731</b>	<b>\$ 96,874,948</b>

UNITED FOOD & COMMERCIAL WORKERS UNION –  
EMPLOYER HEALTH & WELFARE FUND

EIN - 34-6726563      PLAN NO. - 501

SCHEDULE H, LINE 4(j) - SCHEDULE OF REPORTABLE TRANSACTIONS

FOR THE YEAR ENDED SEPTEMBER 30, 2024

(a) Identity of Party	(b) Description of Asset	(c) Purchase Price	(d) Selling Price	(g) Cost of Asset	(h) Value of Assets on Transaction Date	(i) Net Gain or (Loss)
Blackrock Liquidity Fund	Money Market Fund	\$ 7,564,380	\$ 7,598,364	\$ 7,598,364	\$ 7,564,380	\$ -
Loomis Sayles Securitized Asset Fund	Mutual Fund	\$ 6,360,300	\$ 6,321,133	\$ 6,143,111	\$ 6,360,300	\$ 178,022

**Federal Statements**

FYE: 9/30/2024 **UNITED FOOD & COMMERCIAL WORKERS UNION EMPLOYER**  
**Plan: 501**

**Assets Held for Investment**

<u>Party in Interest</u>	<u>Identity</u>	<u>Description</u>	<u>Cost</u>	<u>Current Value</u>
		SEE ATTACHED AUDIT	\$	\$