Form 5500

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Annual Return/Report of Employee Benefit Plan

This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6057(b) and 6058(a) of the Internal Revenue Code (the Code).

▶ **Complete all entries in accordance with the instructions to the Form 5500.**

OMB Nos. 1210-0110
1210-0089

2024

This Form is Open to Public Inspection

Part I Annual Report Identification Information

For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024

A This return/report is for:
- [X] a multiemployer plan
- [ ] a multiple-employer plan (Filers checking this box must provide participating employer information in accordance with the form instructions.)
- [ ] a single-employer plan
- [ ] a DFE (specify) ____

B This return/report is:
- [ ] the first return/report
- [ ] the final return/report
- [ ] an amended return/report
- [ ] a short plan year return/report (less than 12 months)

C If the plan is a collectively-bargained plan, check here. . . . . ▶ [X]

D Check box if filing under:
- [X] Form 5558
- [ ] automatic extension
- [ ] the DFVC program
- [ ] special extension (enter description)

E If this is a retroactively adopted plan permitted by SECURE Act section 201, check here. . . . . ▶ [ ]

Part II Basic Plan Information—enter all requested information

1a Name of plan
CEMENT MASONS INSTITUTE LOCAL 502 WELFARE TRUST FUND

1b Three-digit plan number (PN) ▶ 501

1c Effective date of plan 06/01/1950

2a Plan sponsor's name (employer, if for a single-employer plan)
Mailing address (include room, apt., suite no. and street, or P.O. Box)
City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions)
BD OF TRUSTEES CM INSTITUTE LOC 502 WELFARE TRUST FD

739 25TH AVENUE
BELLWOOD, IL 60104

2b Employer Identification Number (EIN) 51-0191061

2c Plan Sponsor's telephone number 708-544-9105

2d Business code (see instructions) 238100

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

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

SIGN HERE	Filed with authorized/valid electronic signature.	07/12/2025	KEVIN FARLEY
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	Filed with authorized/valid electronic signature.	07/14/2025	STEVE BAUMGARTNER
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

3a Plan administrator's name and address [X] Same as Plan Sponsor

3b Administrator's EIN

3c Administrator's telephone number

4 If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report:

a Sponsor's name

c Plan Name

4b EIN

4d PN

5	Total number of participants at the beginning of the plan year	**5**	1190
6	Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines **6a(1), 6a(2), 6b, 6c,** and **6d**).		
a(1)	Total number of active participants at the beginning of the plan year	**6a(1)**	1190
a(2)	Total number of active participants at the end of the plan year	**6a(2)**	1182
b	Retired or separated participants receiving benefits	**6b**	
c	Other retired or separated participants entitled to future benefits	**6c**	
d	Subtotal. Add lines **6a(2)**, **6b**, and **6c**.	**6d**	1182
e	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	**6e**	
f	Total. Add lines **6d** and **6e**.	**6f**	
g(1)	Number of participants with account balances as of the beginning of the plan year (only defined contribution plans complete this item)	**6g(1)**	
g(2)	Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g(2)**	
h	Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested.	**6h**	
7	Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	**7**	335

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

9a Plan funding arrangement (check all that apply)

- **(1)** [ ] Insurance
- **(2)** [ ] Code section 412(e)(3) insurance contracts
- **(3)** [X] Trust
- **(4)** [ ] General assets of the sponsor

9b Plan benefit arrangement (check all that apply)

- **(1)** [X] Insurance
- **(2)** [ ] Code section 412(e)(3) insurance contracts
- **(3)** [X] Trust
- **(4)** [ ] General assets of the sponsor

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

a Pension Schedules

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

b General Schedules

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

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

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

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

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

11c Enter the Receipt Confirmation Code for the 2024 Form M-1 annual report. If the plan was not required to file the 2024 Form M-1 annual report, enter the Receipt Confirmation Code for the most recent Form M-1 that was required to be filed under the Form M-1 filing requirements. (Failure to enter a valid Receipt Confirmation Code will subject the Form 5500 filing to rejection as incomplete.)

Receipt Confirmation Code_____

SCHEDULE A (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Insurance Information

This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA).

▶ **File as an attachment to Form 5500.**

▶ Insurance companies are required to provide the information pursuant to ERISA section 103(a)(2).

OMB No. 1210-0110

2024

This Form is Open to Public Inspection

For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024

A Name of plan
CEMENT MASONS INSTITUTE LOCAL 502 WELFARE TRUST FUND

B Three-digit plan number (PN) ▶ 501

C Plan sponsor's name as shown on line 2a of Form 5500
BD OF TRUSTEES CM INSTITUTE LOC 502 WELFARE TRUST FD

D Employer Identification Number (EIN)
51-0191061

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
THE UNION LABOR LIFE INSURNACE COMPANY

(b) EIN	(c) NAIC code	(d) Contract or identification number	(e) Approximate number of persons covered at end of policy or contract year	Policy or contract year	
				(f) From	(g) To
13-1423090	69744	G3359/C4622	1165	06/01/2023	05/31/2024

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

Part II Investment and Annuity Contract Information

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

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

6 Contracts With Allocated Funds:

a State the basis of premium rates ▶

b	Premiums paid to carrier	6b	
c	Premiums due but unpaid at the end of the year	6c	
d	If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, enter amount.	6d	

Specify nature of costs ▶

e Type of contract: (1) ☐ individual policies (2) ☐ group deferred annuity

(3) ☐ other (specify) ▶

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

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

a Type of contract: (1) ☐ deposit administration (2) ☐ immediate participation guarantee

(3) ☐ guaranteed investment (4) ☐ other ▶

b	Balance at the end of the previous year			7b	
c	Additions: (1) Contributions deposited during the year	7c(1)			
	(2) Dividends and credits	7c(2)			
	(3) Interest credited during the year	7c(3)			
	(4) Transferred from separate account	7c(4)			
	(5) Other (specify below)	7c(5)			
	▶				
	(6)Total additions			7c(6)	0
d	Total of balance and additions (add lines **7b** and **7c(6)**).			7d	
e	Deductions:				
	(1) Disbursed from fund to pay benefits or purchase annuities during year	7e(1)			
	(2) Administration charge made by carrier	7e(2)			
	(3) Transferred to separate account	7e(3)			
	(4) Other (specify below)	7e(4)			
	▶				
	(5) Total deductions			7e(5)	0
f	Balance at the end of the current year (subtract line **7e(5)** from line **7d**)			7f	

Part III Welfare Benefit Contract Information

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

8 Benefit and contract type (check all applicable boxes)

- **a** [ ] Health (other than dental or vision)
- **b** [ ] Dental
- **c** [ ] Vision
- **d** [X] 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** [X] Other (specify) ▶ AD&D

9 Experience-rated contracts:				
a Premiums: (1) Amount received	**9a(1)**			
(2) Increase (decrease) in amount due but unpaid	**9a(2)**			
(3) Increase (decrease) in unearned premium reserve	**9a(3)**			
(4) Earned (**(1)** + **(2)** - **(3)**)			**9a(4)**	
b Benefit charges (1) Claims paid	**9b(1)**			
(2) Increase (decrease) in claim reserves	**9b(2)**			
(3) Incurred claims (add **(1)** and **(2)**)			**9b(3)**	
(4) Claims charged			**9b(4)**	
c Remainder of premium: (1) Retention charges (on an accrual basis) --				
(A) Commissions	**9c(1)(A)**			
(B) Administrative service or other fees	**9c(1)(B)**			
(C) Other specific acquisition costs	**9c(1)(C)**			
(D) Other expenses	**9c(1)(D)**			
(E) Taxes	**9c(1)(E)**			
(F) Charges for risks or other contingencies	**9c(1)(F)**			
(G) Other retention charges	**9c(1)(G)**			
(H) Total retention			**9c(1)(H)**	
(2) Dividends or retroactive rate refunds. (These amounts were [ ] paid in cash, or [ ] credited.)			**9c(2)**	
d Status of policyholder reserves at end of year: (1) Amount held to provide benefits after retirement			**9d(1)**	
(2) Claim reserves			**9d(2)**	
(3) Other reserves			**9d(3)**	
e Dividends or retroactive rate refunds due. (Do not include amount entered in line **9c(2)**.)			**9e**	
10 Nonexperience-rated contracts:				
a Total premiums or subscription charges paid to carrier			**10a**	676935
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. Specify nature of costs.			**10b**	

Part IV Provision of Information

11 Did the insurance company fail to provide any information necessary to complete Schedule A? [ ] Yes [X] No

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

SCHEDULE C (Form 5500)	Service Provider Information	OMB No. 1210-0110
Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	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.**	**2024** **This Form is Open to Public Inspection.**

For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024

A Name of plan
CEMENT MASONS INSTITUTE LOCAL 502 WELFARE TRUST FUND

B Three-digit plan number (PN) ▶ 501

C Plan sponsor's name as shown on line 2a of Form 5500
BD OF TRUSTEES CM INSTITUTE LOC 502 WELFARE TRUST FD

D Employer Identification Number (EIN)
51-0191061

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).. . . . . [X] 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

THE VANGUARD GROUP, INC.

23-1945930

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

ROBERT W. BAIRD & CO., INC.

777 EAST WISCONSIN AVENUE
MILWAUKEE, WI 53202

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

INTERCONTINENTAL REAL ESTATE CORPOR

04-2895544

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

NEWTOWER TRUST COMPANY

30-0872552

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

UBS ASSET MANAGEMENT LLC

ELEVEN MADISON AVENUE
NEW YORK, NY 10010

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

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

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

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

MARATHON HEALTH

84-3269071

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	851170	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

BLUECROSS BLUESHIELD OF ILLINOIS

36-1236610

(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 13 73	NONE	559516	Yes [X] No [ ]	Yes [X] No [ ]	0	Yes [ ] No [ ]

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

UNION EYES, LLC

83-3067276

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	409575	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

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

ERIN CADOGAN-ENGER

51-0191061

(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	EMPLOYEE	134163	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

LEGACY PROFESSIONALS LLP

32-0043599

(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 15	NONE	125109	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

CHARLES PICARDI

51-0191061

(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	EMPLOYEE	115090	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

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

WILLIAM BEEMAN

51-0191061

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
14 30	EMPLOYEE	112811	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

SAVRX PRESCRIPTION SERVICES

86-1323040

(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	NONE	109452	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

JOHNSON & KROL LLC

36-4342024

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
29	NONE	101718	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

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

KARLA GENERETTE

51-0191061

(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	EMPLOYEE	99715	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

KHAREN MCNAMARA

51-0191061

(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	EMPLOYEE	99715	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

CAROLYN RACZYNSKI

51-0191061

(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	EMPLOYEE	85999	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

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

ANGELO FEOLA

51-0191061

(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	EMPLOYEE	83441	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

BRIDGEWAY BENEFIT TECHNOLOGIES, LLC

52-1796473

(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 49	NONE	70675	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

LUCILA DUARTE

51-0191061

(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	EMPLOYEE	69284	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

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

SHERMAN ESPER

51-0191061

(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	EMPLOYEE	57538	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

MATTHEW STIKA

51-0191061

(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	EMPLOYEE	48678	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

COLLEEN LAKIS

51-0191061

(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	EMPLOYEE	47777	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

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

KATHLEEN SUMMERLIN

51-0191061

(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	EMPLOYEE	43102	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

VALENZ CARE

36-4869660

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	42243	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

ZENITH AMERICAN SOLUTIONS

52-1590516

(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 15	NONE	41569	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

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

GREAT LAKES ADVISORS, LLC

80-0292839

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28	NONE	35094	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

TFBC, LLC

27-3782504

(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 16	NONE	33960	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

NATIONAL INVESTMENT SERVICES

84-3937993

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 51	NONE	33356	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

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

AMALGAMATED BANK OF CHICAGO

36-0721895

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 51 62	NONE	30283	Yes [X] No [ ]	Yes [X] No [ ]	0	Yes [ ] No [ ]

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

NADIA FAUST

51-0191061

(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	EMPLOYEE	29848	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

NANCY AGUADO

51-0191061

(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	EMPLOYEE	29819	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

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

TRILOGY CONSULTING GROUP, INC

36-4016705

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
10	NONE	28000	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

MARQUETTE ASSOCIATES

36-3485298

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
27	NONE	15667	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

79 RATIO

83-1062141

(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 49	NONE	13425	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

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

ANTHONY FARRELL

51-0191061

(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?
20	TRUSTEE	11139	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

MIDWEST INSTITUTIONAL TRUST CO

93-1799133

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
18 33 55	NONE	9037	Yes [X] No [ ]	Yes [X] No [ ]	0	Yes [ ] No [ ]

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

SANDRA HUNT

51-0191061

(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?
20	TRUSTEE	7184	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

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

JAY LASALA

51-0191061

(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?
20	TRUSTEE	7092	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

SMART DATA SOLUTIONS

960 BLUE GENTIAN ROAD
EAGAN, MN 55121

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	6434	Yes ☐ No ☐	Yes ☐ No ☐	0	Yes ☐ No ☐

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

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

Part I Service Provider Information (continued)

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

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

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
SMART DATA SOLUTIONS 960 BLUE GENTIAN ROAD EAGAN, MN 55121	49	DID NOT RESPOND TO THE PLAN'S MULTIPLE REQUESTS FOR INFORMATION REGARDING INDIRECT COMPENSATION RECEIVED.

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

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

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

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

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

Part III Termination Information on Accountants and Enrolled Actuaries (see instructions)

(complete as many entries as needed)

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE H (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Financial Information

This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code).

▶ **File as an attachment to Form 5500.**

OMB No. 1210-0110

2024

This Form is Open to Public Inspection

For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024

A Name of plan
CEMENT MASONS INSTITUTE LOCAL 502 WELFARE TRUST FUND

B Three-digit plan number (PN) ▶ 501

C Plan sponsor's name as shown on line 2a of Form 5500
BD OF TRUSTEES CM INSTITUTE LOC 502 WELFARE TRUST FD

D Employer Identification Number (EIN)
51-0191061

Part I Asset and Liability Statement

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

Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a	1909044	1743096
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	2131522	1566620
(2) Participant contributions	1b(2)	8708	20854
(3) Other	1b(3)	1625921	1521222
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	412783	422719
(2) U.S. Government securities	1c(2)	9570497	10457888
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)	14912212	15275169
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)		
(5) Partnership/joint venture interests	1c(5)	6571283	6272000
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)		
(9) Value of interest in common/collective trusts	1c(9)		
(10) Value of interest in pooled separate accounts	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	41768691	48830513
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other	1c(15)	604479	563358

		(a) Beginning of Year	(b) End of Year
1d Employer-related investments:			
(1) Employer securities	1d(1)		
(2) Employer real property	1d(2)		
e Buildings and other property used in plan operation	1e	1037954	567481
f Total assets (add all amounts in lines 1a through 1e)	1f	80553094	87240920
Liabilities			
g Benefit claims payable	1g	2972000	3039980
h Operating payables	1h	388407	342318
i Acquisition indebtedness	1i		
j Other liabilities	1j		
k Total liabilities (add all amounts in lines 1g through1j)	1k	3360407	3382298
Net Assets			
l Net assets (subtract line 1k from line 1f)	1l	77192687	83858622

Part II Income and Expense Statement

2 Plan income, expenses, and changes in net assets for the year. Include all income and expenses of the plan, including any trust(s) or separately maintained fund(s) and any payments/receipts to/from insurance carriers. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 2a, 2b(1)(E), 2e, 2f, and 2g.

Income		(a) Amount	(b) Total
a Contributions:			
(1) Received or receivable in cash from: **(A)** Employers	2a(1)(A)	24879966	
(B) Participants	2a(1)(B)	225577	
(C) Others (including rollovers)	2a(1)(C)		
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		25105543
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	53010	
(B) U.S. Government securities	2b(1)(B)	282574	
(C) Corporate debt instruments	2b(1)(C)	668526	
(D) Loans (other than to participants)	2b(1)(D)		
(E) Participant loans	2b(1)(E)		
(F) Other	2b(1)(F)		
(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		1004110
(2) Dividends: **(A)** Preferred stock	2b(2)(A)		
(B) Common stock	2b(2)(B)		
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	1234878	
(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		1234878
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	2b(4)(A)	12751081	
(B) Aggregate carrying amount (see instructions)	2b(4)(B)	12636512	
(C) Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result	2b(4)(C)		114569
(5) Unrealized appreciation (depreciation) of assets: **(A)** Real estate	2b(5)(A)	60064	
(B) Other	2b(5)(B)	3888403	
(C) Total unrealized appreciation of assets. Add lines **2b(5)(A)** and **(B)**	2b(5)(C)		3948467

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		0
c Other income	2c		2331469
d Total income. Add all **income** amounts in column (b) and enter total	2d		33739036
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	20905601	
(2) To insurance carriers for the provision of benefits	2e(2)	678685	
(3) Other	2e(3)	2214357	
(4) Total benefit payments. Add lines **2e(1)** through **(3)**	2e(4)		23798643
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions)	2g		
h Interest expense	2h		
i Administrative expenses:			
(1) Salaries and allowances	2i(1)	2017286	
(2) Contract administrator fees	2i(2)	51961	
(3) Recordkeeping fees	2i(3)	88971	
(4) IQPA audit fees	2i(4)	87000	
(5) Investment advisory and investment management fees	2i(5)	114400	
(6) Bank or trust company trustee/custodial fees	2i(6)	9037	
(7) Actuarial fees	2i(7)	33960	
(8) Legal fees	2i(8)	101718	
(9) Valuation/appraisal fees	2i(9)		
(10) Other trustee fees and expenses	2i(10)	34080	
(11) Other expenses	2i(11)	736045	
(12) Total administrative expenses. Add lines **2i(1)** through **(11)**	2i(12)		3274458
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		27073101
Net Income and Reconciliation			
k Net income (loss). Subtract line **2j** from line **2d**	2k		6665935
l Transfers of assets:			
(1) To this plan	2l(1)		
(2) From this plan	2l(2)		

Part III Accountant's Opinion

3 Complete lines 3a through 3c if the opinion of an independent qualified public accountant is attached to this Form 5500. Complete line 3d if an opinion is not attached.

a The attached opinion of an independent qualified public accountant for this plan is (see instructions):

(1) [X] 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)** [X] 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: LEGACY PROFESSIONALS LLP **(2)** EIN: 32-0043599

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

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

Part IV Compliance Questions

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

During the plan year:

		Yes	No	Amount
a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)	4a		X	
b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)	4b		X	
c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)	4c		X	
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)	4d		X	
e Was this plan covered by a fidelity bond?	4e	X		2500000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?	4f		X	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?	4g		X	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?	4h		X	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	4i	X		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.)	4j	X		
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?	4k		X	
l Has the plan failed to provide any benefit when due under the plan?	4l		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	4m		X	
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.	4n			

5a Has a resolution to terminate the plan been adopted during the plan year or any prior plan year? [ ] Yes [X] No

If "Yes," enter the amount of any plan assets that reverted to the employer this year _____.

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

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

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

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

Cement Masons' Institute Local 502
Welfare Trust Fund

Financial Statements

December 31, 2024

Cement Masons' Institute Local 502
Welfare Trust Fund

Financial Statements with Supplementary Information

December 31, 2024 and 2023

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	Schedule
Supplementary Information	
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LEGACY
PROFESSIONALS LLP
CERTIFIED PUBLIC ACCOUNTANTS

Report of Independent Auditors

To the Participants and Trustees of
Cement Masons' Institute Local 502
Welfare Trust Fund

Opinion

We have audited the financial statements of Cement Masons' Institute Local 502 Welfare Trust 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 and of benefit obligations as of December 31, 2024 and 2023, and the related statements of changes in net assets available for benefits and of changes in benefit obligations for the years then ended, and the related notes to the financial statements.

In our opinion, the accompanying financial statements present fairly, in all material respects, the net assets available for benefits and benefit obligations of Cement Masons' Institute Local 502 Welfare Trust Fund as of December 31, 2024 and 2023, and the changes in its net assets available for benefits and benefit obligations 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 (GAAS). Our responsibilities under those standards are further described in the *Auditors' 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 fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about 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.

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

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

In performing an audit in accordance with GAAS, we:

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

Legacy Professionals LLP

Westchester, Illinois

May 13, 2025

Cement Masons' Institute Local 502
Welfare Trust Fund

Statements of Net Assets Available for Benefits

December 31, 2024 and 2023

	2024	2023
Assets		
Cash		
Checking and savings accounts	$ 2,165,455	$ 2,321,467
Petty cash	360	360
Total cash	2,165,815	2,321,827
Receivables		
Contractor contributions	1,566,620	2,131,522
Participants' self-contributions	20,854	8,708
Due from related organizations - net	654,649	759,536
Prescription drug rebates	422,399	263,996
Accrued investment income	265,738	236,560
Total receivables	2,930,260	3,400,322
Investments - at fair value		
Mutual funds	46,859,923	40,936,100
U.S. Government and Government Agency obligations	10,457,888	9,570,497
Corporate bonds and notes	15,275,169	14,912,212
Municipal obligations	563,358	604,479
Real estate investment funds	6,272,000	6,571,283
Money market funds	1,970,590	832,591
Total investments	81,398,928	73,427,162
Property and equipment - net	567,481	1,037,954
Prepaid expenses	178,436	365,829
Total assets	87,240,920	80,553,094
Liabilities and Net Assets		
Liabilities		
Accounts payable and accrued expenses	252,696	298,990
Due to contractors - performance bond deposits	89,622	89,417
Total liabilities	342,318	388,407
Net assets available for benefits	$ 86,898,602	$ 80,164,687

See accompanying notes to financial statements.

Cement Masons' Institute Local 502
Welfare Trust Fund

Statements of Changes in Net Assets Available for Benefits

Years Ended December 31, 2024 and 2023

	2024	2023
Additions		
Contribution income		
Contractor - regular	$ 24,866,866	$ 27,001,524
Payroll compliance audits	13,100	29,933
COBRA and participants' self-contributions	225,577	170,359
Total contribution income	25,105,543	27,201,816
Investment income		
Net appreciation in fair value of investments	4,000,648	4,132,114
Interest and dividends	2,301,376	1,935,214
	6,302,024	6,067,328
Less investment expenses	(114,400)	(103,913)
Investment income - net	6,187,624	5,963,415
Prescription drug rebates	842,760	538,566
Subrogation settlements	249,928	222,144
Total additions	32,385,855	33,925,941
Deductions		
Cost of benefits		
Medical	16,687,422	16,253,437
Supplemental	448,269	429,866
Prescription drug	3,701,930	2,777,669
Wellness centers	1,612,598	1,784,008
Life insurance premiums	678,685	612,638
PPO and cost containment fees	601,759	578,272
Total cost of benefits	23,730,663	22,435,890
Fees mandated by ACA	7,644	6,918
Administrative expenses		
Paid directly by the Plan - net	1,745,106	1,856,536
Allocated from related organizations	168,527	155,025
Total deductions	25,651,940	24,454,369
Net increase	6,733,915	9,471,572
Net assets available for benefits		
Beginning of year	80,164,687	70,693,115
End of year	$ 86,898,602	$ 80,164,687

See accompanying notes to financial statements.

Cement Masons' Institute Local 502
Welfare Trust Fund

Statements of Benefit Obligations

December 31, 2024 and 2023

	2024	2023
Amounts currently payable		
Claims payable and claims incurred but not reported	$ 2,983,251	$ 2,914,700
Insurance premiums payable	56,729	57,300
Total amounts currently payable	3,039,980	2,972,000
Other obligations for current benefit coverage, at estimated amounts		
Future payment of benefits	5,448,000	7,017,000
Reserve contribution hours	17,999,000	16,820,000
Total other obligations	23,447,000	23,837,000
Total benefit obligations	$ 26,486,980	$ 26,809,000

See accompanying notes to financial statements.

Cement Masons' Institute Local 502
Welfare Trust Fund

Statements of Changes in Benefit Obligations

Years Ended December 31, 2024 and 2023

	2024	2023
Amounts currently payable		
Balance at beginning of year	$ 2,972,000	$ 3,086,000
Increase (decrease) during the year attributable to changes in		
Claims payable and claims incurred but not reported	68,551	(124,505)
Insurance premiums payable	(571)	10,505
Balance at end of year	3,039,980	2,972,000
Other obligations for current benefit coverage, at estimated amounts		
Balance at beginning of year	23,837,000	22,392,000
Increase (decrease) during the year attributable to changes in		
Future payment of benefits	(1,569,000)	230,000
Reserve contribution hours	1,179,000	1,215,000
Balance at end of year	23,447,000	23,837,000
Total benefit obligations	$ 26,486,980	$ 26,809,000

See accompanying notes to financial statements.

Cement Masons' Institute Local 502
Welfare Trust Fund

Notes to Financial Statements

December 31, 2024 and 2023

Note 1. Summary of Significant Accounting Policies

Method of Accounting - The accompanying financial statements of Cement Masons' Institute Local 502 Welfare Trust Fund (the Plan) have been prepared using the accrual basis of accounting.

Investments - The investments of the Plan are reported at fair value. The fair value of a financial instrument is the amount that would be received to sell that asset (or paid to transfer a liability) in an orderly transaction between market participants at the measurement date (the exit price). Net appreciation or depreciation includes the Plan's gains and losses on investments bought and sold as well as held during the year.

Purchases and sales of the investments are reflected on a trade-date basis.

Dividend income is recorded on the ex dividend date. Interest income is recorded on the accrual basis.

Contributions Receivable - Contractor contributions due and not paid prior to year end are recorded as contributions receivable. Deficiencies identified through a payroll compliance audit program are recorded upon settlement with the contractor. An allowance for uncollectible accounts is considered unnecessary and is not provided.

Performance Bond Deposits - Contractors who maintain neither a letter of credit nor a surety bond must make a deposit to the Plan. The Plan holds the funds in escrow to act as a surety bond for the contractor.

Property and Equipment - Property and equipment are recorded at cost. Major additions are capitalized while replacements, maintenance and repairs which do not improve or extend the lives of the respective assets are expensed currently. Depreciation and amortization are computed by the straight-line method over the following estimated useful lives of the related assets:

Office furniture and equipment	3 to 5 years
Leasehold improvements	3 to 5 years
Automobile	3 years

Note 1. Summary of Significant Accounting Policies (continued)

Prescription Drug Rebates - The Plan utilizes a pharmacy benefit manager (PBM) who periodically makes refunds to the Plan based on the Plan's actual utilization pattern of specific drugs. Refunds due from the Plan's PBM are recorded when earned. Refunds due as of the financial statement date have been reported as a receivable.

Subrogation Settlements - Claims that are reimbursed pursuant to subrogation matters are recorded upon settlement. Subrogation matters involve third parties from whom the Plan seeks reimbursement.

Benefit Obligations - The estimated obligation for claims payable and claims incurred but not reported is estimated by the Plan's actuarial consultant based on claims experience, Plan benefits and other data as considered necessary.

The obligation for future payment of benefits at December 31 is an estimate of claims which will be due the following year for participants who had been credited with sufficient hours prior to December 31 to maintain eligibility after year end.

In contribution quarters where participants are credited with more than 250 hours, their credited hours in excess of 250 may be accumulated as reserve contribution hours to provide future eligibility. The reserve is limited to a maximum of 1,200 hours which would provide approximately 15 months of eligibility.

Revenue Recognition - Revenue derived from contractor contributions is recognized in the period in which covered work is performed, based on the number of hours worked in covered employment and the contribution rate currently in effect, as set forth in the applicable collective bargaining agreement. Contractors are required to remit contributions monthly. The Plan carries out its purpose described in Note 2 within the cement mason and plastering trade industry primarily located in the greater Chicagoland area.

Reciprocal Contributions - The Plan is signatory to reciprocity agreements with various other multiemployer welfare plans for its participants who perform work outside the geographic jurisdiction of the local union. Participants who are normally employed within the territory of one local union (home local) may be temporarily employed within the territory of another local union (reciprocating local). When a participant of the home local works in the territory of reciprocating local, the latter is to make contributions to the former's fringe benefit plan on the participant's behalf. Monies received by the Plan on behalf of persons from outside participating local unions are forwarded to their home local fringe benefit plans. The Plan uses the same recognition and measurement criteria for such revenue as for all other contractor contribution revenue. Amounts paid to other plans under the terms of reciprocity agreements are not reflected in the statements of changes in net assets available for benefits, as the amounts received are not revenue earned by the Plan, and the corresponding payments are not an expense of the Plan.

Note 1. Summary of Significant Accounting Policies (continued)

Reciprocal Contributions (continued) - The Plan recognizes a liability upon receiving reciprocal contributions on behalf of non-participants working within the jurisdiction of the local union, and recognizes a decrease in that liability upon remitting those contributions to the appropriate plan. Contractor contributions included reciprocal contributions of $214,615 and $228,098 for the years ended December 31, 2024 and 2023, respectively, from various other welfare plans under the terms or reciprocity agreements. The Plan remitted a total of $1,081,136 and $922,488 in reciprocal contributions to various other welfare plans under the terms of reciprocity agreements for the years ended December 31, 2024 and 2023, respectively. A total of $143,057 and $198,587 in reciprocity payments were owed to the other plans at December 31, 2024 and 2023, respectively. Such amounts are included in accounts payable and accrued expenses in the statements of net assets available for benefits.

Leases - Arrangements for shared office space with related parties are described in Note 9. Because these leases provide for a 30-day notice period of termination by either the lessor or lessee, the Plan has determined that due to a mutual termination option, enforceable rights and obligations do not exist under these leasing arrangements beyond the 30-day notice period. Therefore, the leases qualify for the short-term lease exception, and neither an operating lease right-of-use asset nor a lease liability was recorded. The Plan is also a party to several leases in conjunction with its participation in a wellness center cooperative, as described in Note 12. Due to the immaterial nature of the amounts owed pursuant to these leasing agreements, neither an operating lease right-of-use asset nor a lease liability was recorded for those leases. Informative disclosures regarding the Plan's leasing arrangements are provided in Notes 9 and 12.

Expenses - Certain investment related expenses are included in net appreciation in fair value of investments.

Estimates - The preparation of financial statements in conformity with generally accepted accounting principles requires management to make estimates and assumptions that affect certain reported amounts and disclosures in the financial statements. Actual results could differ from those estimates.

Subsequent Events - Subsequent events have been evaluated through May 13, 2025, which is the date the financial statements were available to be issued.

Note 2. Description of the Plan

The Plan is a multiemployer health and welfare plan established during 1950 as a result of a collective bargaining agreement to provide medical, vision, death, disability and other healthcare benefits for eligible participants and dependents. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA), as amended.

To become initially eligible for benefits, an individual must be employed by a contributing contractor or contractors and working within the jurisdiction of Cement Masons' Union Local No. 502, and must be credited with at least 250 hours of contributions in an eligibility quarter or 200 hours within two consecutive eligibility quarters.

Note 2. Description of the Plan (continued)

Once attaining initial eligibility, participants remain eligible if they work at least 250 credited hours in an eligibility quarter. Participants who work less than 250 hours will be allowed to make self-contributions to maintain eligibility once their reserve contribution hours are exhausted. Self-payments may be made for a maximum of four consecutive quarters.

Continuation of health care benefits to persons who would otherwise lose those benefits due to certain events, as mandated by Consolidated Omnibus Budget Reconciliation Act (COBRA), has been adopted by the Plan.

Participants should refer to the summary plan description for more complete information.

Note 3. Priorities upon Termination

It is the intent of the Trustees to continue the Plan in full force and effect; however, to safeguard against any unforeseen contingencies, the right to discontinue the Plan is reserved to the Trustees. In the event of termination, the Trustees shall first satisfy or make provisions to satisfy the obligations of the Plan. Any remaining Plan assets will be distributed in such manner as will in the opinion of the Trustees bring about the purpose of the Plan. Termination shall not permit any part of the Plan to be used for or diverted to purposes other than the exclusive benefit of the participants.

Note 4. Tax Status

The Plan's notice of exemption is dated September 17, 1979, in which the Internal Revenue Service stated that the trust established under the Plan, as then designed, was in compliance with the applicable requirements of the Internal Revenue Code. The Plan has been amended since receiving the notice of exemption. The Plan's administrator and the Plan's legal counsel believe that the Plan is currently designed and being operated in compliance with the applicable requirements of the Internal Revenue Code. They therefore believe that the Plan was qualified and the related trust was tax-exempt as of the financial statement date.

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

Note 5. Funding Policy

The participating contractors contribute such amounts as are specified in the collective bargaining agreements. Hourly contractor contribution rates in effect during the years ended December 31, 2024 and 2023 were as follows:

Effective Dates	Rate
1-01-23 to 5-31-23	$ 14.05
6-01-23 to 5-31-24	$ 14.30
6-01-24 to 12-31-24	$ 14.44

In addition to participants being able to self-pay to continue coverage, participant contributions are allowed to provide benefits under COBRA. Participant contributions rates are determined annually. Participant contributions to provide benefits under COBRA were paid at a monthly rate ranging from $212 to $534 during the years ended December 31, 2024 and 2023, depending on the participant's coverage option.

Note 6. 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 those changes could materially affect the amounts reported in the statements of net assets available for benefits. The current economic environment has increased the degree of uncertainty.

Benefit obligations are reported based on certain assumptions pertaining to claims cost, health care inflation rates, and participant demographics, all of which are subject to change. Due to uncertainties inherent in the estimations and assumptions process, it is at least reasonably possible that changes in these estimates and assumptions in the near term would be material to the financial statements.

The Plan has a significant portion of its assets invested with one mutual fund with underlying assets consisting of domestic equity securities. This investment represented approximately 27% and 25% of the Plan's net assets available for benefits as of December 31, 2024 and 2023, respectively. The Plan's exposure to a concentration of credit risk is limited by the diversification of investments across the Plan's investment portfolio. Additionally, the investments within each investment fund are further diversified into varied financial instruments.

Note 7. Fair Value Measurements

The *Fair Value Measurements and Disclosures* Topic of the FASB Accounting Standards Codification established 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 below:

Basis of Fair Value Measurement

Level 1	Unadjusted quoted prices in active markets that are accessible at the measurement date for identical, unrestricted assets or liabilities
Level 2	Quoted prices in markets that are not considered to be active or financial instruments for which all significant inputs are observable, either directly or indirectly
Level 3	Prices or valuations that require inputs that are both significant to the fair value measurement and unobservable

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

The following tables set forth, by level within the fair value hierarchy, the Plan's investment assets at fair value as of December 31, 2024 and 2023. As required, assets and liabilities are classified in their entirety based on the lowest level of input that is significant to the fair value measurement. In accordance with generally accepted accounting principles, certain investments that are measured at fair value using the net asset value per share (or its equivalent) practical expedient have not been classified in the fair value hierarchy. The fair value amounts presented in the following tables are intended to permit reconciliation of the fair value hierarchy to the amounts presented in the statements of net assets available for benefits.

Note 7. Fair Value Measurements (continued)

	Total	Fair Value Measurements at 12/31/24 Using: Quoted Prices in Active Markets for Identical Assets (Level 1)	Significant Other Observable Inputs (Level 2)	Significant Unobservable Inputs (Level 3)
Mutual funds	$ 46,859,923	$ 46,859,923	$ -	$ -
U.S. Government and Government Agency obligations	10,457,888	8,045,776	2,412,112	-
Corporate bonds and notes	15,275,169	-	15,275,169	-
Municipal obligations	563,358	-	563,358	-
Money market funds	1,970,590	1,970,590	-	-
	75,126,928	$ 56,876,289	$ 18,250,639	$ -
Investments measured at net asset value:				
Real estate investment funds	6,272,000			
Total	$ 81,398,928			

	Total	Fair Value Measurements at 12/31/23 Using: Quoted Prices in Active Markets for Identical Assets (Level 1)	Significant Other Observable Inputs (Level 2)	Significant Unobservable Inputs (Level 3)
Mutual funds	$ 40,936,100	$ 40,936,100	$ -	$ -
U.S. Government and Government Agency obligations	9,570,497	7,583,497	1,987,000	-
Corporate bonds and notes	14,912,212	-	14,912,212	-
Municipal obligations	604,479	-	604,479	-
Money market funds	832,591	832,591	-	-
	66,855,879	$ 49,352,188	$ 17,503,691	$ -
Investments measured at net asset value:				
Real estate investment funds	6,571,283			
Total	$ 73,427,162			

Level 1 Measurements

The fair values of the mutual funds are determined by reference to the funds' underlying assets, which are principally marketable equity and fixed income securities. Shares held in mutual funds are traded on national securities exchanges and are valued at the net asset value as of the last business day of each period presented.

U.S. Treasury securities are traded in active markets on national and international securities exchanges and are valued at closing prices on the last business day of each period presented.

The money market funds represent shares held in mutual funds.

Note 7. Fair Value Measurements (continued)

Level 2 Measurements

U.S. Government Agency obligations, corporate bonds and notes and municipal obligations are generally valued by benchmarking model-derived prices to quoted market prices and trade data for identical or comparable securities. To the extent that quoted prices are not available, fair value is determined based on a valuation model that include inputs such as interest rate yield curves and credit spreads. Securities traded in markets that are not considered active are valued based on quoted market prices, broker or dealer quotations, or alternative pricing sources with reasonable levels of price transparency. Securities that trade infrequently and therefore have little or no price transparency are valued using the custodian's best estimate.

Measurements Using Net Asset Value as a Practical Expedient

The real estate investment funds are valued at the net asset value per share (or its equivalent), used as a practical expedient to estimate fair value. The net asset value is based on the fair values of the underlying investments held by the fund less its liabilities. This practical expedient is not used when it is determined to be probable that the fund will sell the investment for an amount different than the reported net asset value.

The underlying assets of the real estate funds are comprised of domestic real estate properties. Redemptions are available quarterly with up to a one-year notice period, based on cash availability.

Note 8. Property and Equipment

Property and equipment at December 31, 2024 and 2023 consisted of the following:

	2024	2023
Office furniture and equipment	$ 230,801	$ 267,202
Leasehold improvements - wellness centers	1,959,574	1,959,574
Leasehold improvements - Plan office	-	34,001
Automobile	55,911	40,592
Total	2,246,286	2,301,369
Less accumulated depreciation and amortization	(1,678,805)	(1,263,415)
Net property and equipment	$ 567,481	$ 1,037,954

Depreciation and amortization expense was $453,538 in 2024 and $472,274 in 2023.

Note 9. Related Organizations

The Plan shares certain common governance with six related tax-exempt organizations: a pension plan, a retiree health and welfare plan, an annuity plan, an apprentice fund, a savings plan and a local union, and provides administrative services to an affiliated labor-management cooperation council.

Joint Administrative and Computer Processing Expenses

The Plan shares facilities, equipment and staff with the related organizations. Joint operating expenses, except for computer processing costs, are initially paid by the Plan. Amounts allocated to the related organizations for joint administrative expenses totaled $1,238,781 in 2024 and $1,022,760 in 2023. A total of $358,395 and $303,212 was due from related organizations at December 31, 2024 and 2023, respectively, for joint administrative expenses reimbursed after year end. Administrative expenses paid directly by the Plan are presented net of such reimbursements.

Expenses incurred for computer processing are initially paid by Pension Fund of Cement Masons' Union Local No. 502 (the Pension Plan). These expenses are allocated based on estimates of time spent and costs incurred. For the years ended December 31, 2024 and 2023, the net amount of computer processing costs was $83,664 and $81,098 respectively. A total of $3,844 and $6,498 was due to the Pension Plan at December 31, 2024 and 2023, respectively, for computer processing costs reimbursed after year end.

Office Leases

The Trustees of the Plan and related fringe benefit plans jointly executed a five-year lease for office space in Bellwood, Illinois with Cement Masons' Union Local No. 502 (the Local) effective January 1, 2020. This lease required minimum annual rent of $106,025 in addition to an annual allocation of utility expenses based on square footage. Due to the relocation of the office space, this lease was amended effective October 7, 2024 and extended through December 31, 2026. As of December 31, 2024, the lease requires gross minimum annual rent of $57,960 in addition to an annual allocation of utility expenses based on square footage.

The Trustees of the Plan and the retiree health and welfare plan also jointly executed a five-year lease for claims administration office space in Bellwood, Illinois with the Local effective January 1, 2022. The lease requires gross minimum annual rent of $37,020 in addition to an annual allocation of real estate taxes and utility expenses based on square footage.

A summary by year of the gross future minimum lease payments required under these leases, prior to allocation between the related organizations, is as follows:

Year ending December 31,	
2025	$ 94,080
2026	94,080
Total	$ 189,960

Note 9. Related Organizations (continued)

Office Leases (continued)

As described in Note 1, these leases provide a 30-day notice period for termination by either the lessor or lessee.

Gross rent expense for the years ended December 31, 2024 and 2023 was $96,280 and $106,025, respectively. The Plan's share of rent expense was $45,151 for 2024 and $65,109 for 2023.

Lockbox Account

The Pension Plan maintains a lockbox account. Contributions for this Plan and other related organizations are received and deposited in the lockbox account. On a regular basis, contributions due to the Plan are transferred from the lockbox account into the Plan's investment trust cash account.

Contributions received in the Pension Plan's lockbox account and not processed at year end are recorded as "due from related organizations" in the statements of net assets available for benefits. A total of $212,184 and $339,896 was owed to the Plan for its lockbox deposits at December 31, 2024 and 2023, respectively.

Payroll Compliance Audits

Delinquencies determined by payroll compliance audits are recorded when agreed upon by the contractor and the Plan. All payments are initially received by the Plan and remitted to other cement masons' organizations monthly. Allocated receipts from payroll compliance audits net of related expenses owed from related organizations totaled $87,914 and $122,926 at December 31, 2024 and 2023, respectively.

Note 10. Concentration of Cash

Cash consists of monies held in checking and savings accounts without significant withdrawal restrictions. The Plan places its cash with financial institutions deemed to be creditworthy. Balances are insured by the FDIC up to $250,000 per financial institution. Although balances may at times exceed insured limits, the Plan believes its credit risk to be minimal.

Note 11. Participation in Multiemployer Plans

Defined Benefit Pension Plan

All of the Plan's employees are covered by a multiemployer defined benefit pension plan. 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.

Defined Benefit Pension Plan (continued)

The Plan's participation in the multiemployer defined benefit pension plan for the years ended December 31, 2024 and 2023 is outlined in the following table. Plans that are considered to be significant are required to be identified. The "EIN/PN" column provides the employer identification number (EIN) and the three-digit plan number (PN). The most recent Pension Protection Act (PPA) zone status provides an indication of the financial health of the plan. Among other factors, plans in the red zone are below 65 percent funded, plans in the yellow zone are between 65 percent and 80 percent funded, and plans in the green zone are at least 80 percent funded. The "FIP/RP Status Pending/Implemented" column indicates plans for which a funding improvement plan (FIP) or rehabilitation plan (RP) is either pending or has been implemented. The last column specifies the year end date of the plan to which the annual report (Form 5500) relates.

Pension Plan	EIN/PN	Pension Protection Act Zone Status		FIP/RP Status Pending/ Implemented	Contributions		Most Recently Available Annual Report (Form 5500)
		2024	2023		2024	2023	
Pension Fund of Cement Masons' Union Local No. 502	51-6034597/001	Green as of 1/1/25	Green as of 1/1/24	N/A	$ 485,894	$ 468,365	12/31/2023

Contributions to the plan are made monthly under the terms of a participation agreement, which does not have an expiration date. The Plan's contributions do not represent more than 5% of total contributions to this plan as indicated in the plan's most recently available annual report.

Defined Contribution Retirement Plan

Certain employees are also covered by a multiemployer defined contribution retirement plan. Contributions to the plan are made monthly under the terms of a participation agreement. Contributions to this plan for the years ended December 31, 2024 and 2023 totaled $98,926 and $59,039 respectively. During the year ended December 31, 2024, there was a significant increase in the contribution rate to this plan.

Note 11. Participation in Multiemployer Plans (continued)

Welfare Plan that Provides Postretirement Benefits

All of the Plan's employees are also covered by a multiemployer health and welfare plan that provides medical benefits to retirees and to eligible employees working under collective bargaining or participation agreements, and their dependents. Contributions to this plan for the years ended December 31, 2024 and 2023 totaled $65,862 and $60,653 respectively.

Note 12. Chicagoland Construction Trades Wellness Center Cooperative

Effective April 1, 2021, the Trustees of the Plan executed a Memo of Understanding with five other building construction trades multiemployer health and welfare plans, establishing the Chicagoland Construction Trades Wellness Center Cooperative (the Cooperative). The purpose of the Cooperative is to establish wellness centers (clinics) to provide health care benefits to their participants. Each clinic location is leased, with each participating member of the Cooperative named as joint tenants. As of December 31, 2024, the Cooperative had ten participating members and eight clinics in operation. The leasehold buildout, administrative and operating costs of the clinics are allocated under a cost sharing arrangement based on a pro-rata percentage of eligible participants covered by each participating plan. For the years ended December 31, 2024 and 2023, the Plan incurred operating expenses related to the clinics totaling $1,612,598 and $1,784,008 respectively, which included rent and depreciation. As of December 31, 2024, the Plan had capitalized $1,959,574 of leasehold improvements associated with the clinics and prepaid $178,436 to the Cooperative for its share of leasehold improvements and operating costs. As of December 31, 2023, the Plan had capitalized $1,959,574 of leasehold improvements associated with the clinics and prepaid $349,438 to the Cooperative for its share of leasehold improvements and operating costs.

The Plan allocates a portion of clinic expenses to the related retiree health and welfare plan. Clinic rent expense for the years ended December 31, 2024 and 2023 totaled $165,254 and $146,325 respectively, prior to the allocation.

Note 13. 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:

	2024	2023
Net assets available for benefits per the financial statements	$ 86,898,602	$ 80,164,687
Less - benefit obligations currently payable	(3,039,980)	(2,972,000)
Net assets available for benefits per the Form 5500	$ 83,858,622	$ 77,192,687

The following is a reconciliation of benefits paid to or for participants per the financial statements to the Form 5500 for the year ended December 31, 2024:

Benefits paid per the financial statements	$ 23,730,663
Add - amounts currently payable at end of year	3,039,980
Less - amounts currently payable at beginning of year	(2,972,000)
Benefits paid per the Form 5500	$ 23,798,643

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REPORT OF INDEPENDENT AUDITORS ON SUPPLEMENTAL SCHEDULES

To the Participants and Trustees of
Cement Masons' Institute
Local 502 Welfare Trust Fund

We have audited the financial statements of Cement Masons' Institute Local 502 Welfare Trust Fund (the Plan) as of and for the years ended December 31, 2024 and 2023, and our report thereon dated May 13, 2025, which expressed an unmodified opinion on those financial statements, appears on pages 1 and 2. Our audits were conducted for the purpose of forming an opinion on the financial statements as a whole. Supplemental Schedules 1 and 2 are presented for purposes of additional analysis and are not a required part of the financial statements but are supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audits of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with GAAS.

In forming our opinion on the 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.

Legacy Professionals LLP

Westchester, Illinois

May 13, 2025

FOOTNOTES STATEMENT 1

SCHEDULE C - DIRECT AND INDIRECT COMPENSATION:
THE AMOUNT OF DIRECT COMPENSATION ATTRIBUTABLE TO PLAN EMPLOYEES AND TRUSTEES AND REPORTED ON SCHEDULE C HAS BEEN DETERMINED IN ACCORDANCE WITH DEPARTMENT OF LABOR RULES AND REGULATIONS FOR COMPLETING FORM 5500. THESE AMOUNTS MAY CONSIST OF ELEMENTS CONSIDERED TO BE TAXABLE AS WELL AS NON-TAXABLE AS DETERMINED UNDER THE CURRENT INTERNAL REVENUE CODE.

SCHEDULE H, PART II, LINE 2I - THE AMOUNT OF ADMINISTRATIVE EXPENSES ARE REPORTED GROSS ALLOCATIONS TO RELATED RELATED ORGANIZATION JOINT EXPENSES.

SCHEDULE H OTHER RECEIVABLES STATEMENT 2

DESCRIPTION	BEGINNING	ENDING
DUE FROM OTHER CEMENT MASONS' ORGANI	759,536.	654,649.
ACCRUED INVESTMENT INCOME	236,560.	265,738.
PRESCRIPTION DRUG REBATES	263,996.	422,399.
PREPAID EXPENSES	365,829.	178,436.
TOTAL TO SCHEDULE H, LINE 1B(3)	1,625,921.	1,521,222.

SCHEDULE H OTHER GENERAL INVESTMENTS STATEMENT 3

DESCRIPTION	BEGINNING	ENDING
MUNICIPAL OBLIGATIONS	604,479.	563,358.
TOTAL TO SCHEDULE H, LINE 1C(15)	604,479.	563,358.

SCHEDULE H — OTHER INCOME — STATEMENT 4

DESCRIPTION	AMOUNT
ADMINISTRATIVE EXPENSES REIMBURSEMENT	1,238,781.
PRESCRIPTION DRUG REBATES	842,760.
SUBROGATION SETTLEMENTS	249,928.
TOTAL TO SCHEDULE H, LINE 2C	2,331,469.

SCHEDULE H — OTHER PAYMENTS TO PROVIDE BENEFITS — STATEMENT 5

DESCRIPTION	AMOUNT
PPO AND COST CONTAINMENT FEES	601,759.
WELLNESS CENTERS	1,612,598.
TOTAL TO SCHEDULE H, LINE 2E(3)	2,214,357.

SCHEDULE H — OTHER ADMINISTRATIVE EXPENSES — STATEMENT 6

DESCRIPTION	AMOUNT
OFFICE SUPPLIES, PRINTING AND POSTAGE	133,173.
DEPRECIATION	50,450.
INSURANCE	23,962.
RENT	96,280.
OFFICE EQUIPMENT AND MAINTENANCE	36,311.
TELEPHONE	8,614.
COMPUTER EXPENSES	177,515.
FEES MANDATED BY ACA	7,644.
CLAIMS DEPARTMENT	108,986.
PAYROLL TAXES	93,110.
TOTAL TO SCHEDULE H, LINE 2I(11)	736,045.

Cement Masons Local 502 Health & Welfare Fund
Schedule of Investments Held
12/31/2024 EIN:51-0191061

		Cost at 12/31/2024	Market Value at 12/31/2024
Money Market Funds and Cash Equivalents			
Chase Segregated Checking		383,097	383,097
1st American Bank Checking		39,622	39,622
			422,719
U.S. Government and Government Agency Obligations			
U.S. Government Obligations	Pg 9	See attached	7,249,398
Mortgage Backed Securities	Pg 15	See attached	2,412,112
U.S. Treasury Bills	Pg 6	See attached	218,809
U.S. Government Agency	Pg 27	See attached	577,569
			10,457,888
Corporate Debt Instruments			
Collateralized Mortgage Obligations	Pg 27	See attached	4,375,838
Commercial Paper	Pg 6	See attached	149,482
Corporate Bonds	Pg 50	See attached	10,749,849
	Total		15,275,169
Partnership/Joint Venture Interests			
Bentall Green Oak Diversified	Pg 50	See attached	3,161,481
Intercontinental US Real Estate	Pg 50	See attached	3,110,519
			6,272,000
Registered Investment Company			
Goldman Financial Square Gov't	Pg 5	See attached	1,971,391
Credit Suisse Floating Rate High	Pg 50	See attached	2,939,701
Vanguard Extended Market Index	Pg 50	See Attached	3,685,502
Vanguard 500 Index Fund	Pg 50	See attached	23,419,084
Baird Short Term Bond Fund	Pg 50	See attached	16,815,636
Amalgamated Invested - Cash Equivalents	Pg 5	See attached	(801)
	Total		48,830,513
Other			
Municipal Obligations	Pg 29	See attached	563,358
	Total		81,821,647

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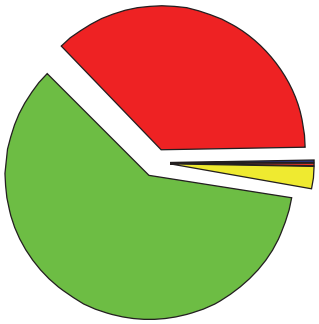
TRADE DATE - INCOME ACCRUALS

Statement Period 01/01/24 through 12/31/24

CEMENT MASONS LOCAL 502 WELFARE FUND - COMBINED

Investment Review - Summary Of General Investments

Investment Allocation



0.3%	CASH	264,937.24
37.1%	EQUITIES	30,266,067.66
59.9%	FIXED INCOME SECURITIES	48,943,460.57
2.4%	MONEY MARKETS	1,971,391.28
0.3%	U S TREASURY BILLS	218,809.08
100.0%	Total	81,664,665.83

Investment Summary

	Cost	Market Value	% of Acct	Estim Ann Inc	Income Yield
CASH	264,937.24	264,937.24	0.32	0	0.00
MONEY MARKETS	1,971,391.28	1,971,391.28	2.41	83,784	4.25
U S TREASURY BILLS	218,809.08	218,809.08	0.27	9,273	4.24
FIXED INCOME SECURITIES	52,774,055.96	48,943,460.57	59.93	1,937,059	3.96
EQUITIES	14,200,602.86	30,266,067.66	37.06	329,596	1.09
Total Fund	69,429,796.42	81,664,665.83	100.00	2,359,711	2.89

Investment Review - Detail Of General Investments

SHARES/FACE	ASSET	CARRYING VALUE	CURRENT PRICE	MARKET VALUE	EST ANN INC	YIELD TO MKT
	CASH	800.65-		800.65-		0.00
	ACCRUED INCOME	265,737.89		265,737.89		0.00
	TOTAL CASH	264,937.24		264,937.24	0	0.00
	SHORT TERM INVESTMENTS					
1,971,391.28	GOLDMAN FINANCIAL SQUARE GOVT-A FD# 465 (AMALFGOV) MASTER #2839100 4.25% 38141W273	1,971,391.28		1,971,391.28	83,784	4.25

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TRADE DATE - INCOME ACCRUALS

Statement Period 01/01/24 through 12/31/24

CEMENT MASONS LOCAL 502 WELFARE FUND - COMBINED

Investment Review - Detail Of General Investments

SHARES/FACE	ASSET	CARRYING VALUE	CURRENT PRICE	MARKET VALUE	EST ANN INC	YIELD TO MKT
	U S TREASURY BILLS					
100,000	TREASURY BILL BILL 02/06/2025 912797MJ3	99,515.08	99.59	99,515.08	4,317	4.34
120,000	TREASURY BILL BILL 02/18/2025 912797NH6	119,294.00	99.453	119,294.00	4,956	4.15
	TOTAL U S TREASURY BILLS	218,809.08		218,809.08	9,273	4.24
	COMMERCIAL PAPER					
30,000	ALEXANDRIA REAL ESTATE EQUITY COMMERCIAL PAPER 4.5% 07/30/2029 015271AG4	29,501.70	97.77	29,331.00	1,350	4.60
125,000	CITIGROUP INC COMMERCIAL PAPER 4.412% 03/31/2031 172967MP3	143,160.00	96.121	120,151.25	5,515	4.59
	TOTAL COMMERCIAL PAPER	172,661.70		149,482.25	6,865	4.59
	U S GOVERNMENT OBLIGATIONS					
35,000	U.S. TREASURY BONDS 3.5% 02/15/2039 912810QA9	41,188.16	87.731	30,705.85	1,225	3.99
50,000	U.S. TREASURY BONDS 2.75% 11/15/2042 912810QY7	43,439.46	74.82	37,410.00	1,375	3.68
135,000	U.S. TREASURY BONDS 2.875% 05/15/2043 912810RB6	108,417.77	75.828	102,367.80	3,881	3.79
130,000	U.S. TREASURY BONDS 3% 11/15/2044 912810RJ9	106,320.71	75.981	98,775.30	3,900	3.95
85,000	U.S. TREASURY BONDS 2.5% 02/15/2045 912810RK6	65,273.44	69.465	59,045.25	2,125	3.60
60,000	U.S. TREASURY BONDS 2.5% 02/15/2046 912810RQ3	61,763.28	68.469	41,081.40	1,500	3.65
315,000	U.S. TREASURY BONDS 2.25% 08/15/2046 912810RT7	285,869.76	64.641	203,619.15	7,088	3.48

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TRADE DATE - INCOME ACCRUALS

Statement Period 01/01/24 through 12/31/24

CEMENT MASONS LOCAL 502 WELFARE FUND - COMBINED

Investment Review - Detail Of General Investments

SHARES/FACE	ASSET	CARRYING VALUE	CURRENT PRICE	MARKET VALUE	EST ANN INC	YIELD TO MKT
55,000	U.S. TREASURY BONDS 2.75% 11/15/2047 912810RZ3	56,405.08	70.266	38,646.30	1,513	3.91
310,000	U.S. TREASURY BONDS 1.25% 05/15/2050 912810SN9	203,835.56	47.50	147,250.00	3,875	2.63
50,000	U.S. TREASURY NOTES 1.875% 02/15/2041 912810SW9	37,781.25	67.07	33,535.00	938	2.80
45,000	U.S. TREASURY NOTES 2.375% 05/15/2051 912810SX7	30,093.75	62.992	28,346.40	1,069	3.77
530,000	U.S. TREASURY NOTES 1.875% 11/15/2051 912810TB4	395,628.40	55.258	292,867.40	9,938	3.39
437,000	U.S. TREASURY NOTES 2% 11/15/2041 912810TC2	414,618.13	67.223	293,764.51	8,740	2.98
45,000	U.S. TREASURY NOTES 2.875% 05/15/2052 912810TG3	37,385.16	70.055	31,524.75	1,294	4.10
50,000	U.S. TREASURY NOTES 3.375% 08/15/2042 912810TK4	42,527.34	82.637	41,318.50	1,688	4.08
35,000	U.S. TREASURY BONDS 4.25% 02/15/2054 912810TX6	32,255.47	91.383	31,984.05	1,488	4.65
20,000	U.S. TREASURY BONDS 4.25% 08/15/2054 912810UC0	19,192.19	91.484	18,296.80	850	4.65
290,000	U.S. TREASURY NOTES 1.5% 08/15/2026 9128282A7	280,529.38	95.723	277,596.70	4,350	1.57
65,000	U.S. TREASURY NOTES 1.625% 08/15/2029 912828YB0	59,723.83	88.742	57,682.30	1,056	1.83
15,000	U.S. TREASURY NOTES 1.625% 11/30/2026 912828YU8	15,171.68	95.215	14,282.25	244	1.71

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SHARES/FACE	ASSET	CARRYING VALUE	CURRENT PRICE	MARKET VALUE	EST ANN INC	YIELD TO MKT
109,000	U.S. TREASURY NOTES 1.5% 01/31/2027 912828Z78	103,815.71	94.563	103,073.67	1,635	1.59
65,000	U.S. TREASURY NOTES 1.5% 02/15/2030 912828Z94	55,747.66	86.82	56,433.00	975	1.73
45,000	U.S. TREASURY NOTES .625% 05/15/2030 912828ZQ6	38,146.29	82.043	36,919.35	281	0.76
25,000	U.S. TREASURY NOTES .25% 09/30/2025 91282CAM3	24,907.55	97.093	24,273.25	63	0.26
995,000	U.S. TREASURY NOTES 1% 07/31/2028 91282CCR0	888,879.88	89.012	885,669.40	9,950	1.12
75,000	U.S. TREASURY NOTES 1.125% 08/31/2028 91282CCV1	73,640.63	89.18	66,885.00	844	1.26
49,000	U.S. TREASURY NOTES 1.375% 11/15/2031 91282CDJ7	43,926.45	81.711	40,038.39	674	1.68
350,000	U.S. TREASURY NOTES 1.25% 12/31/2026 91282CDQ1	349,794.92	94.309	330,081.50	4,375	1.33
254,000	U.S. TREASURY NOTES 1.5% 02/15/2025 91282CDZ1	241,585.43	99.65	253,111.00	3,810	1.51
660,000	U.S. TREASURY NOTES 2.375% 03/31/2029 91282CEE7	609,215.96	92.277	609,028.20	15,675	2.57
588,000	U.S. TREASURY NOTES 2.875% 05/15/2032 91282CEP2	533,453.05	89.809	528,076.92	16,905	3.20
315,000	U.S. TREASURY NOTES 3.5% 02/15/2033 91282CGM7	308,978.12	93.035	293,060.25	11,025	3.76
455,000	U.S. TREASURY NOTES 3.5% 04/30/2030 91282CGZ8	437,568.54	95.684	435,362.20	15,925	3.66

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163,000	U.S. TREASURY NOTES 3.375% 05/15/2033 91282CHC8	153,831.91	91.906	149,806.78	5,501	3.67
95,000	U.S. TREASURY NOTES 4.125% 07/31/2028 91282CHQ7	93,950.42	99.297	94,332.15	3,919	4.15
100,000	U.S. TREASURY NOTES 4% 07/31/2030 91282CHR5	98,191.41	97.891	97,891.00	4,000	4.09
95,000	U.S. TREASURY NOTES 3.875% 08/15/2033 91282CHT1	92,279.88	95.184	90,424.80	3,681	4.07
45,000	U.S. TREASURY NOTES 4% 02/15/2034 91282CJZ5	43,941.80	95.754	43,089.30	1,800	4.18
1,104,000	U.S. TREASURY NOTES 4.125% 03/31/2031 91282CKF7	1,101,644.96	98.152	1,083,598.08	45,540	4.20
75,000	U.S. TREASURY BONDS 3.5% 09/30/2029 91282CLN9	73,795.90	96.207	72,155.25	2,625	3.64
78,000	U.S. TREASURY NOTES 4.25% 11/15/2034 91282CLW9	76,167.86	97.422	75,989.16	3,315	4.36
	TOTAL U S GOVERNMENT OBLIGATIONS	7,780,884.13		7,249,398.36	210,655	2.91
	MORTGAGE BACKED SECURITIES					
12,003.11	FHLMC POOL #G07961 3.5% 03/01/2045 3128MAFA2	12,918.32	90.381	10,848.53	420	3.87
15,054.96	FHLMC GOLD POOL #G15670 3.5% 11/01/2030 3128MEQX2	16,184.08	97.87	14,734.29	527	3.58
17,286.9011	FHLMC POOL #G08624 4% 01/01/2045 3128MJVS6	18,532.95	93.077	16,090.13	691	4.30
27,709.916	FHLMC POOL #G08721 3% 09/01/2046 3128MJYT1	25,584.05	86.753	24,039.18	831	3.46

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30,718.2125	FHLMC POOL #G08747 3% 02/01/2047 3128MJZM5	31,207.79	86.886	26,689.83	922	3.45
22,672.9	FHLMC POOL #G18630 2% 02/01/2032 3128MMVY6	22,729.56	92.722	21,022.77	453	2.16
35,943.556	FHLMC GOLD POOL #C91581 3% 11/01/2032 3128P7XJ7	33,607.21	94.615	34,008.00	1,078	3.17
8,184.1246	FREDDIE MAC POOL ZM6956 4.5% 06/01/2048 3131Y1WR7	8,182.85	95.491	7,815.10	368	4.71
17,682.14	FHLMC POOL#ZS7189 3% 02/01/2030 3132A77A3	18,393.04	96.85	17,125.15	530	3.10
8,299.31	FHLMC POOL #ZS6658 2% 03/01/2028 3132A7MF5	8,452.33	96.471	8,006.43	166	2.07
19,768.72	FHLMC POOL#FR SB0368 4% 03/01/2034 3132CWMR2	21,875.31	97.901	19,353.77	791	4.09
51,378.4168	FHLMC FR SC0093 2% 10/01/2040 3132D9C69	44,807.59	83.48	42,890.70	1,028	2.40
61,365.56	FHLMC POOL FR SC0170 2% 07/01/2041 3132D9FK5	63,148.99	83.38	51,166.60	1,227	2.40
81,696.97	FHLMC FR SC0400 3.5% 06/01/2043 3132D9NR1	77,765.31	90.861	74,230.68	2,859	3.85
54,527.32	FREDDIE MAC POOL SD2217 6% 01/01/2053 3132DPPA0	55,787.82	101.73	55,470.64	3,272	5.90
5,185.28	FHLMC GOLD #G60641 4.5% 01/01/2042 31335AWA2	5,697.34	96.99	5,029.20	233	4.64
60,647.6368	FREDDIE MAC POOL FR QD2299 2.5% 12/01/2051 3133AYRU6	53,208.83	82.158	49,826.89	1,516	3.04
25,720.5878	FHLMC POOL#QU7463 3% 07/01/2050 3133JLJG5	25,608.05	83.379	21,445.57	772	3.60

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30,232.94	FHLMC POOL FR QU7793 1.5% 03/01/2051 3133JLUS6	21,465.38	71.914	21,741.72	453	2.09
31,627.7774	FREDDIE MAC FR RA7748 3% 08/01/2052 3133KPTD0	28,425.46	85.166	26,936.11	949	3.52
40,239.9	FHLMC POOL# RD5038 1.5% 09/01/2030 3133LPS32	41,409.38	93.044	37,440.81	604	1.61
11,058.4565	FHLMC MULTIFAMILY SERIES 4162 CL P 3% 02/15/2033 3137AYHU8	10,989.37	96.5742	10,679.61	332	3.11
15,000	FREDDIE MAC PRO 2 SERIES K119 CLASS A2 1.566% 09/25/2030 3137F63Z8	11,630.27	84.0685	12,610.28	235	1.86
28,520.6103	FNMA POOL#AI2444 5% 05/01/2041 3138AFWE6	32,941.30	99.409	28,352.05	1,426	5.03
4,123.85	FNMA POOL #AK4047 3% 02/01/2027 3138E8P97	4,212.76	98.433	4,059.23	124	3.05
7,409.32	FNMA 3% 06/01/2027 3138EJCF3	7,813.35	98.335	7,285.95	222	3.05
50,562.07	FNMA FN AL7077 4% 07/01/2035 3138EP2K9	49,661.43	96.353	48,718.07	2,022	4.15
12,995.4507	FNMA POOL# AL7276 2% 08/01/2030 3138EQCN0	13,401.56	94.193	12,240.80	260	2.12
23,756.5368	FNMA FN AR3040 2% 01/01/2028 3138W0LW7	22,706.05	96.569	22,941.45	475	2.07
22,714.956	FNMA #AU3735 3% 08/01/2043 3138X3EH1	23,133.76	88.126	20,017.78	681	3.40
9,067.66	FNMA POOL FN BM5515 4% 02/01/2029 3140JADV7	9,243.35	98.754	8,954.68	363	4.05
44,554.27	FNMA BN7466 2% 10/01/2050 3140JQJL8	46,881.51	78.416	34,937.68	891	2.55

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35,272.85	FNMA 2.5% 07/01/2035 3140KGYS6	37,146.73	91.521	32,282.07	882	2.73
38,387.56	FNMA POOL#BT9772 2% 10/01/2036 3140LY2E2	39,473.20	88.631	34,023.28	768	2.26
26,462.08	FNMA 1 POOL#BU1789 3% 10/01/2051 3140M27B2	26,797.00	86.511	22,892.61	794	3.47
18,849.951	FNMA POOL#CA4693 5% 03/01/2049 3140QCGB6	21,488.95	99.591	18,772.85	943	5.02
53,486.49	FNMA POOL FN CA9443 2.5% 03/01/2036 3140QHP58	56,662.27	91.032	48,689.82	1,337	2.75
22,119.83	FNMA POOL #FM1737 3% 10/01/2049 3140X44X1	22,372.12	86.071	19,038.76	664	3.49
32,038.56	FNMA POOL# FM1234 3% 12/01/2031 3140X4LQ7	32,819.50	96.998	31,076.76	961	3.09
55,225.67	FNMA POOL#FM5037 2% 12/01/2035 3140X8S32	57,572.74	89.248	49,287.81	1,105	2.24
54,504.6228	FNMA POOL#FM5733 2% 01/01/2051 3140X9LP8	56,565.59	79.068	43,095.72	1,090	2.53
4,572.0055	FNMA POOL #AA7236 4% 06/01/2039 31416RBE2	4,934.90	94.324	4,312.50	183	4.24
19,624.76	FNMA POOL#MA2121 4% 12/01/2034 31418BLB0	21,121.11	96.891	19,014.63	785	4.13
7,381.4033	FNMA POOL #MA2495 3.5% 01/01/2046 31418BXZ4	7,623.60	89.719	6,622.52	258	3.90
19,311.5546	FNMA POOL #MA2771 3% 10/01/2046 31418CCH5	19,607.23	86.637	16,730.95	579	3.46
47,363.61	FNMA POOL#MA4387 2% 07/01/2041 31418D2V3	44,188.78	83.387	39,495.09	947	2.40
15,111.56	FNMA FN MA3928 2.5% 02/01/2030 31418DLJ9	14,497.66	95.805	14,477.63	378	2.61

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12,254.81	FNMA POOL #MA3953 2.5% 02/01/2030 31418DMB5	12,513.32	95.512	11,704.81	306	2.62
24,835.7435	FNMA POOL#MA4122 1.5% 09/01/2035 31418DSL7	21,661.43	86.384	21,454.11	373	1.74
21,565.0052	FNMA POOL#MA4154 1.5% 10/01/2035 31418DTL6	18,471.77	86.322	18,615.34	323	1.74
24,540.67	FNMA 1 POOL# MA4308 1.5% 04/01/2031 31418DYE6	25,025.72	92.395	22,674.35	368	1.62
58,366.63	FNMA POOL MA5166 6% 10/01/2053 31418EW48	57,764.74	100.577	58,703.41	3,502	5.97
72,604.07	FANNIE MAE POOL FN MA5539 5% 11/01/2044 31418FEM5	72,048.20	97.471	70,767.91	3,630	5.13
43,892.392	GINNIE MAE II G2 MA8260 4% 09/20/2052 36179XE93	41,519.46	90.879	39,888.97	1,756	4.40
26,237.46	GNMA II POOL MA9107 6% 08/20/2053 36179YDL5	26,221.06	100.759	26,436.60	1,574	5.95
38,079.0316	GNMA II G2 MA9158 5% 09/20/2053 36179YE75	38,055.24	96.618	36,791.20	1,904	5.18
65,467.0256	GNMA II POOL MA9228 5.5% 10/20/2053 36179YHD9	65,282.90	98.723	64,631.01	3,601	5.57
33,884.85	GNMA I POOL GN CO01900 6% 07/15/2052 3617FDDD2	36,415.24	105.778	35,842.72	2,033	5.67
61,663.25	GNMA POOL#BG5666 4% 06/15/2048 3617GQJK0	65,671.37	93.773	57,823.48	2,467	4.27
18,303.7753	GNMA POOL#BL0123 5% 03/20/2049 3617JCD40	20,374.36	96.139	17,597.07	915	5.20
74,307.64	GNMA POOL# BN0298 2.5% 08/15/2049 3617K3KK4	75,712.54	84.047	62,453.34	1,858	2.97

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38,472.15	GNMA POOL #BN2663 3% 11/15/2049 3617K55Y6	39,530.15	87.407	33,627.35	1,154	3.43
11,548.73	GNMA POOL #BQ3224 4.5% 09/20/2049 3617LMSM9	12,552.03	95.279	11,003.51	520	4.72
34,965.726	GNMA POOL#BT8093 3.5% 04/20/2050 3617MW7E7	36,670.33	89.058	31,139.78	1,224	3.93
29,371.53	GNMA II G2 BZ1768 3% 11/20/2050 3617QV6D8	31,537.68	86.715	25,469.52	881	3.46
77,435.2521	GNMA POOL #CF1851 4.5% 07/20/2051 3617W3BU9	84,114.05	93.633	72,504.95	3,485	4.81
74,556.1	GNMA POOL# G2 CI1513 3% 03/20/2052 3617X5VE7	65,306.48	86.692	64,634.17	2,237	3.46
34,528.42	GNMA POOL#CI2267 3.5% 10/20/2051 3617X6QU5	37,398.60	90.435	31,225.78	1,208	3.87
21,118.37	GNMA AD0022 3.5% 03/20/2038 36180BAX9	22,867.43	91.053	19,228.91	739	3.84
34,109.6885	GINNIE MAE POOL G2 CR6801 5% 02/20/2053 3618AMRW8	33,352.88	97.493	33,254.56	1,705	5.13
27,561.42	GNMA II POOL#785305 3% 06/20/2050 3622AAYA6	29,378.73	85.609	23,595.06	827	3.50
28,877.21	GINNIE MAE POOL GN 785782 3% 02/15/2050 3622ABJ37	25,804.50	87.103	25,152.92	866	3.44
80,568.8398	GINNIE MAE POOL G2 786134 3% 04/20/2052 3622ABV33	70,472.55	85.121	68,581.00	2,417	3.52
91,669.47	GNMA G2 786725 3% 11/20/2052 3622ACLE8	82,058.50	84.436	77,402.03	2,750	3.55
8,930.08	GINNIE MAE POOL POOL GN 758872 3% 03/15/2033 36230T2D3	3,143.36	93.746	8,371.59	268	3.20

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60,893.3	GNMA POOL #626978 3.5% 03/15/2040 36291FQ76	63,557.40	92.012	56,029.14	2,131	3.80
5,781.85	GNMA POOL #626971 3.5% 08/20/2030 36291FQY7	5,995.07	96.509	5,580.01	202	3.63
9,105.18	GNMA POOL #626985 3.5% 09/20/2030 36291FRE0	9,440.91	96.423	8,779.49	319	3.63
19,708.21	GNMA POOL# GN635091 4% 06/15/2046 36291QRL0	22,486.13	95.387	18,799.07	788	4.19
34,312.57	GNMA POOL GN 635189 3% 04/15/2047 36291QUN2	30,516.73	87.471	30,013.55	1,029	3.43
16,593.83	GNMA POOL#711443 4.5% 08/15/2039 36297GLY4	19,445.89	98.252	16,303.77	747	4.58
9,684.59	GNMA POOL #711723 3.5% 02/20/2028 36297GVQ0	10,041.70	98.186	9,508.91	339	3.56
	TOTAL MORTGAGE BACKED SECURITIES	2,642,886.18		2,412,112.07	88,841	3.68
	COLLATERALIZED MTG OBLIG					
3,950.63	COUNTRYWIDE ALTERNATIVE LOAN TR SERIES 2006-43CB CLASS 1A7 6% 02/25/2037 02149FAG9	6.44	52.4541	2,072.27	237	11.44
18,623.4	AMERICREDIT AUTO SERIES 21-1 CLASS C .89% 10/19/2026 03063FAE4	17,366.32	99.1327	18,461.87	166	0.90
25,000	AMERICREDIT SERIES 21-2 CLASS C 1.01% 01/19/2027 03066RAE5	24,994.15	97.9683	24,492.07	253	1.03
35,000	AMERICREDIT AUTOMOBILE RECEIV 2 SERIES 22-1 CLASS C 2.98% 09/20/2027 03066TAE1	34,108.59	97.8114	34,233.99	1,043	3.05

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25,321.37	AXIS EQUIPMENT FINANCE REC SERIES 23-1A CLASS A2 6.09% 12/20/2029 03236YAB1	25,321.37	101.3304	25,658.25	1,542	6.01
45,000	AVIS BUDGET RENTAL CAR FDG AESOP 1 SERIES 23-2A CLASS A 5.2% 10/20/2027 05377RGJ7	44,989.45	100.5127	45,230.69	2,340	5.17
10,000	BBCCRE TRUST SERIES 2015-GTP CLASS B 4.216% 08/10/2025 05490TAC6	9,911.72	94.493	9,449.30	422	4.46
25,000	BARCLAYS 2.108% 09/15/2054 05493MAC8	22,830.08	90.4654	22,616.35	527	2.33
20,000	BARCLAYS COMMERCIAL MTG PRO 1% 12/15/2055 054975AE7	20,599.60	103.2636	20,652.72	200	0.97
30,000	BARCLAYS COMMERCIAL MTG 5.451% 04/15/2056 05553RAC4	30,645.79	101.2164	30,364.91	1,635	5.39
10,000	BARCLAYS COMMERCIAL MTG 2 SERIES 23-C21 CLASS A5 6% 09/15/2056 05553WAE9	10,364.84	105.2359	10,523.59	600	5.70
25,000	BX TRUST SERIES 19-0C11 CLASS A 3.2019996% 12/09/2041 05606FAA1	24,053.39	90.3057	22,576.42	801	3.55
1,974.53	BANC OF AMERICA MTGE SECURITIES SERIES 2005-H CLASS 2A5 FLOATING RATE BOND 4.33507% 09/25/2035 05949CGA8	0.09	87.6464	1,730.60	86	4.95
18,726.4	BANK SERIES 17-BNK6 CLASS A4 3.254% 07/15/2060 060352AE1	16,994.94	96.1319	18,002.04	609	3.38
30,000	P US CMBS SERIES 23 BNK46 CLASS A4 5.745% 08/15/2056 06541DBH6	30,397.76	102.9673	30,890.19	1,724	5.58
21,556.66	P US CMBS 2 SERIES 24-5YRS5 CLASS A3 5.702% 02/15/2029 065931AZ0	22,203.03	101.9289	21,972.48	1,229	5.59

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9,018.2	BAYVIEW FINANCIAL ACQUISITION SERIES 06-A CLASS M4 FLOATING RATE BOND 6.56361% 02/28/2041 07325NDB5	8,746.45	99.8658	9,006.09	592	6.57
30,000	BENCHMARK MTG TR SER 21-B29 CL A5 2.3879% 09/15/2054 08163JAE4	24,042.19	84.0602	25,218.06	716	2.84
29,296.9	COMM MORTGAGE TRUST SERIES 2015-PCI CLASS A5 3.9020004% 07/10/2050 12593GAF9	30,855.73	99.6636	29,198.33	1,143	3.92
25,000	COMM MORTGAGE TRUST SERIES 19-GC44 CLASS AM 3.263% 08/15/2057 12655TBP3	27,321.29	89.4957	22,373.92	816	3.65
60,000	CAP ONE MULTI-ASSET EXE TRUST SERIES 22-A2 CLASS A 3.49% 05/15/2027 14041NGA3	59,990.41	99.6075	59,764.48	2,094	3.50
45,000	CARMAX AUTO OWNER SERIES 24-2 CL A3 5.5% 01/16/2029 14319EAE6	44,998.42	101.5937	45,717.15	2,475	5.41
4,616.36	CARVANA AUTO RECEIVABLES SERIES 21-N2 CLASS B .75% 03/10/2028 14686KAC1	4,599.42	95.99	4,431.25	35	0.78
16,425.34	CARVANA AUTO SERIES 21-P2 CLASS A4 .8% 01/10/2027 14687TAD9	16,419.72	98.3853	16,160.12	131	0.81
25,000	CARVANA AUTO SERIES 21-P2 CLASS B 1.27% 03/10/2027 14687TAE7	24,993.00	96.1171	24,029.27	318	1.32
21,284.3534	COMMONBOND STUDENT LN SERIES 17-BG5 CLASS A1 2.68% 09/25/2042 20268KAA8	20,632.52	91.7456	19,527.47	570	2.92
70,000	DISCOVER CARD EXECUTION NOTE TR SERIES 23-A1 CLASS A 4.31% 03/15/2028 254683CY9	69,737.54	99.7724	69,840.68	3,017	4.32

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40,000	DRIVE AUTO RECEIVABLES TR 2 SERIES 24-2 CLASS A3 4.5% 09/15/2028 26207AAD5	39,999.13	99.7049	39,881.94	1,800	4.51
95,000	DRIVE AUTO RECEIVABLES TR SERIES 24-1 CLASS A3 5.35% 02/15/2028 26208WAC8	95,352.92	100.3976	95,377.75	5,083	5.33
24,341.88	DRIVE AUTO SERIES 21-1 CL D 1.45% 01/16/2029 262108AF0	24,128.88	99.0956	24,121.73	353	1.46
53,424.58	EXTER AUTOMOBLIE RECEIVABLES 1.55% 06/15/2027 30166AAF1	50,363.10	97.5763	52,129.71	828	1.59
20,000	EXETER AUTO 3 SERIES 24-4A CLASS C 5.48% 08/15/2030 30166UAE0	19,995.82	100.5624	20,112.48	1,096	5.45
9,243.2	FRESB MULTIFAMILY MORTGAGE SERIES 2018-SB53 CLASS A10F 3.66% 06/25/2028 30297DAJ9	9,245.77	97.0749	8,972.83	338	3.77
10,408.09	FRESB MULTIFAMILY MORTGAGE SERIES 2018-SB55 CLASS A10F 3.77% 09/25/2028 30297PAJ2	10,335.45	97.0192	10,097.84	392	3.89
30,000	FIRST HELP FINANCIAL LLC 2 SERIES 24-3A CLASS A2 4.94% 11/15/2030 30339EAB4	29,995.37	99.775	29,932.50	1,482	4.95
5,074.775	FNMA SERIES 12-46 CLASS CA 2% 04/25/2041 3136A5H66	5,001.84	98.3774	4,992.43	102	2.03
2,446.74	FNMA 1.5% 06/25/2027 3136A6A20	2,472.27	97.7916	2,392.71	37	1.53
563.896	FNMA SERIES 12-101 CLASS BA 1.25% 09/25/2027 3136A76L1	552.61	98.9349	557.89	7	1.26
11,990.515	FNMA SERIES 12-98 CL NT 1.5% 09/25/2077 3136A8BU3	12,237.83	96.8474	11,612.50	180	1.55

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7,124.5688	FNMA 2% 10/25/2041 3136A9KS6	7,115.66	93.1073	6,633.50	142	2.15
4,204.6483	FNMA SERIES 12-137 CL CE 2% 08/25/2041 3136AAN50	4,299.26	97.5935	4,103.46	84	2.05
7,627.0975	FNMA SER 14-14 CL CA 3% 01/25/2033 3136AJQZ2	7,908.35	98.9064	7,543.69	229	3.03
55,212.42	FNMA 2 SERIES 15-41 CLASS AG 3% 09/25/2034 3136ANZG5	53,780.35	97.6138	53,894.96	1,656	3.07
12,581.0336	FNMA SERIES 15-60 CL CP 3.75% 10/25/2044 3136APXE7	13,288.72	97.3594	12,248.82	472	3.85
10,374.0723	FNMA SERIES 15 87 CLASS TA 3% 11/25/2035 3136AQXC9	11,038.66	94.5649	9,810.24	311	3.17
13,686.87	FNMA SER 17 43 CL A 3.5% 08/25/2044 3136AWU70	14,325.78	98.8563	13,530.33	479	3.54
27,270.06	FNMA SERIES 19-M4 CL A2 3.61% 02/25/2031 3136B35Z9	27,636.51	93.7942	25,577.74	984	3.85
37,573.09	FNMA SER 2019-M1 CL A2 3.544% 09/25/2028 3136B3XY1	35,912.15	96.2244	36,154.47	1,332	3.68
20,000	FANNIE MAE SERIES 23-M5 CL A2 4.4% 07/25/2033 3136BQCP2	19,378.12	95.5204	19,104.07	880	4.61
20,104.6721	FHLMC SERIES 3972 CL PJ 3% 11/15/2031 3137AJQU1	21,147.58	96.0541	19,311.36	603	3.12
19,996.21	FHLMC SERIES 4010 CL QA 2% 01/15/2042 3137AMUP0	20,458.65	90.8593	18,168.41	400	2.20
50,000	FHLMC MULTIFAMILY STRUCTURED SERIES 4045 CL PE 3.5% 05/15/2042 3137APUR9	42,656.25	88.4556	44,227.81	1,750	3.96

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8,146.58	FHLMC SERIES 4125 CLASS KP 2.5% 05/15/2041 3137AW6M2	8,282.78	95.2843	7,762.41	204	2.62
21,669.022	FHLMC MULTIFAMILY STRUCTURED SERIES 4160 CL HP 2.5% 01/15/2033 3137AXUG6	22,803.27	94.4754	20,471.90	542	2.65
10,845.703	FHLMC MULTIFAMILY STRUCTURED SERIES 4186 CL HC 1.5% 03/15/2028 3137B0RH9	11,060.91	96.7411	10,492.25	163	1.55
223,371.76	FHLMC SERIES 4485 CL GA 3.5% 07/15/2044 3137BJPS6	213,669.04	95.9751	214,381.23	7,818	3.65
71,917.84	FHLMC MULTIFAMILY STRUCTURED SERIES K050 CL A2 3.334% 08/25/2025 3137BLW95	74,918.17	99.1755	71,324.89	2,398	3.36
42,239.535	FHLMC MULTI FAM STRUCTURED FHR SER 4552 CL AV 3.5% 06/15/2027 3137BMV29	42,298.93	99.3439	41,962.40	1,478	3.52
55,000	FHLMC MUTLIFAMILY STRUCTURED SERIES K152 CL A2 3.08% 01/25/2031 3137BPVN6	62,012.50	91.1337	50,123.52	1,694	3.38
20,026.72	FHLMC MULTIFAMILY MTG PASS THRU SERIES 4596 CLASS CA 2% 06/15/2046 3137BQN52	20,058.01	91.3204	18,288.48	401	2.19
521.8348	FHLMC MULTIFAMILY STRUCTURED SERIES K057 CLASS A1 2.206% 06/25/2025 3137BRQH1	515.63	99.4553	518.99	12	2.22
45,000	FHLMC MULTIFAM STRUCTURED PASS SERIES 4623 CL MW 2.5% 10/15/2046 3137BSLC5	35,493.75	79.3006	35,685.28	1,125	3.15
27,014.08	FHLMC SEREIS 4661 CL AC 4% 04/15/2043 3137BVEX0	26,478.01	99.6289	26,913.84	1,081	4.01

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15,183.48	FHLMC MULTIFAMILY SERIES KL1P CLASS A1P 2.544% 10/25/2025 3137BYLC2	15,121.80	98.9465	15,023.52	386	2.57
82,000	FHLMC SERIES K154 CLASS A2 3.424% 04/25/2032 3137FDES7	92,577.19	94.409	77,415.38	2,808	3.63
125,000	FHLMC SERIES K072 CLASS A2 3.444% 12/25/2027 3137FEBQ2	134,707.03	96.7329	120,916.11	4,305	3.56
50,000	FGLMC SERIES K089 CLASS AM 3.633% 01/25/2029 3137FL6Q2	54,103.52	95.8181	47,909.06	1,817	3.79
100,000	FGLMC SERIES K092 CLASS A2 3.298% 04/25/2029 3137FLYV0	106,148.44	94.5579	94,557.89	3,298	3.49
150,000	FGLMC SERIES K-1512 CLASS A3 3.059% 04/25/2034 3137FMTT9	154,851.56	85.5275	128,291.27	4,589	3.58
13,702.376	FREDDIE MAC 1.054% 08/25/2026 3137FTAX5	12,841.70	98.0487	13,435.00	144	1.07
20,000	FHLMC SERIES K112 CLASS A2 1.311% 05/25/2030 3137FUZV9	17,134.38	83.844	16,768.79	262	1.56
8,131.316	FREDDIE MAC SERIES 5145 CL HA 2% 01/25/2031 3137H2FN9	7,882.30	99.318	8,075.86	163	2.01
30,000	FHLMC MULTIFAMILY SERIES K-150 CL A2 3.71% 09/25/2032 3137H9C98	28,518.75	92.3222	27,696.66	1,113	4.02
86,052.2	FREDDIE MAC SERIES 5465 CL AB 5% 08/25/2048 3137HFZL2	85,191.68	98.8567	85,068.34	4,303	5.06
23,536.4368	FNMA SERIES 2005-69 CLASS AG 5% 08/25/2035 31394EP69	26,743.28	100.2524	23,595.85	1,177	4.99
109.85	FREDDIE MAC CMO 5% 06/15/2025 31395VG60	117.13	99.7874	109.62	5	5.01

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1,135.74	FIRST INVESTORS AUTO OWNER TRUST SERIES 22-1A CL A 2.03% 01/15/2027 32057KAA8	1,135.73	99.8193	1,133.69	23	2.03
50,000	FORD CREDIT AUTO OWNER TRUST SERIES 23-C CL A3 5.53% 09/15/2028 344940AD3	49,989.26	101.3188	50,659.42	2,765	5.46
40,000	FORD CREDIT AUTO OWNER TR 2 SERIES 24-D CLASS A3 4.61% 08/15/2029 34535VAD6	39,998.72	100.0602	40,024.09	1,844	4.61
35,000	FORD CREDIT AUTO OWNER TR 2 SERIES 24-D CLASS B 4.88% 09/15/2030 34535VAF1	34,998.77	99.9827	34,993.94	1,708	4.88
.01	GSR MORTGAGE LOAN TRUST SERIES 2005-FFA CLASS M3 6.017% 03/25/2025 362341HF9	0.00		0.00	0	0.00
35,000	GM FINANCIAL AUTO 1 SERIES 23-1 CLASS B 5.51% 01/20/2027 362541AF1	34,502.34	100.4593	35,160.75	1,929	5.48
50,000	GM FINANCIAL AUTO 2 SERIES 23-1 5.76% 01/20/2027 362541AG9	49,998.05	100.5756	50,287.79	2,880	5.73
45,000	GM FINALCIAL SECURITIZED TERM 2 SERIES 24-2 CLASS A3 5.1% 03/16/2029 379931AD0	44,991.29	100.9889	45,445.01	2,295	5.05
40,000	GMCAR 2023-1-A3 GM FINANCIAL SECURITIZED TERM SERIES 23-1 CLASS B 5.03% 09/18/2028 38013JAF0	38,932.81	100.7463	40,298.52	2,012	4.99
50,000	GM FINANCIAL SERIES 21-3 CLASS A4 .73% 08/16/2027 380140AD5	48,980.47	98.1056	49,052.80	365	0.74
40,000	GM FINANCIAL SECURITIZED SERIES 22-1 CLASS C 1.94% 04/17/2028 380146AF7	38,579.69	96.8585	38,743.38	776	2.00

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24,813.8678	GNMA SERIES 02-83 CL Z 6.79987% 10/16/2042 38373VT83	24,503.70	99.7218	24,744.84	1,687	6.82
5,681.48	GNMA SER 12-50 CLASS PG 2% 12/20/2041 38375CGT1	5,676.83	92.9842	5,282.88	114	2.15
30,329.9045	GNMA SERIES 2013-33 CLASS AC 1.744% 05/16/2046 38378B7E3	28,002.23	88.2524	26,766.86	529	1.98
49,491.47	GINNIE MAE SERIES 13-67 CL TV 3% 02/20/2042 38378MXD2	43,475.13	92.3819	45,721.18	1,485	3.25
50,000	SERIES 15-42 CL EY 2% 11/20/2042 38379LBS4	50,296.88	78.9694	39,484.69	1,000	2.53
179,061	GNMA SERIES 17-120 CLASS KW 3% 04/20/2047 38380GSH8	178,557.39	77.8652	139,426.17	5,372	3.85
77,117.6777	GNMA SERIES 21-223 CL P 2% 06/20/2051 38383FHR7	67,170.71	83.3032	64,241.49	1,542	2.40
70,000	GNMA SERIES 22-139 CL AL 4% 07/20/2051 38383M3M8	63,557.81	87.0754	60,952.79	2,800	4.59
63,000	GOVT NATL MORTGAGE SERIES 23-103 CL LT 6% 07/20/2053 38384CDV8	62,232.19	100.1197	63,075.39	3,780	5.99
26,967.17	GINNIE MAE SERIES 23-141 CL LD 6% 01/20/2043 38384EF75	26,925.03	101.1412	27,274.92	1,618	5.93
40,000	HARLEY DAVIDSON MOTORCYCLE 2 SERIES 23-B CL A3 5.69% 08/15/2028 41285YAC9	39,990.96	101.1283	40,451.33	2,276	5.63
440.12	JP MORGAN MORTGAGE TRUST SERIES 2006-A3 4.58055% 04/25/2035 46628KAV2	0.04	96.6801	425.51	20	4.74

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1,431.34	JPMBB COMM MTGE SEC TRUST SERIES 2014-C25 CLASS A5 3.672% 11/15/2047 46643PBE9	1,474.27	98.499	1,409.86	53	3.73
24,572.67	JPMBB COMMERCIAL SERIES 15-C31 CLASS A3 3.8014% 08/15/2048 46644YAU4	27,079.86	99.0887	24,348.75	934	3.84
11,750	JIMMY JOHN'S FUNDING LLC SERIES 17-1A CLASS A2II 4.846% 07/30/2047 47760QAB9	12,473.34	97.942	11,508.19	569	4.95
20,493.35	JOHN DEERE OWNER TURST SERIES 22-A CL A3 2.32% 09/16/2026 47787JAC2	20,488.82	99.1671	20,322.66	475	2.34
1,093.44	LEHMAN MORTGAGE TRUST SERIES 2005-2 CLASS 3A3 5.5% 12/25/2035 52520MCA9	0.37	53.1077	580.70	60	10.36
20,067.29	LOUISIANA ST LOCAL GOVT ENVRNMNT 3.615% 02/01/2029 54627RAL4	19,913.01	98.812	19,828.89	725	3.66
24,961.66	MVW OWNER TRUST SERIES 21-1WA CLASS A 1.14% 01/22/2041 55389TAA9	22,309.75	94.8841	23,684.64	285	1.20
35,000	MASTER CREDIT CARD TRUST SERIES 23-1A CLASS A 4.7% 06/21/2027 576339DF9	35,010.94	100.1465	35,051.29	1,645	4.69
56,782.53	MERCEDES-BENZ AUTO LEASE TR SERIES 23-A CLASS A3 4.74% 01/15/2027 58768RAC4	56,780.55	100.0903	56,833.83	2,691	4.74
44,819.57	MERCEDES BENZ AUTO SERIES 23-1 CL A3 4.51% 11/15/2027 58770AAC7	44,814.19	100.0123	44,825.09	2,021	4.51
1,122.15	MERRILL LYNCH MTG INVS INC SERIES 2005-A5 CLASS A9 4.87203% 06/25/2035 59020UYU3	0.08	95.4934	1,071.58	55	5.10
50,000	MORGAN STANLEY BAML SERIES 15-C26 CLASS A4 3.252% 10/15/2048 61690VAY4	53,685.55	99.2653	49,632.64	1,626	3.28

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4,257.83	NAVIENT STUDENT LOAN TRUST SERIES 18-DA CLASS A2B FLOATING RATE BOND 3.28375% 12/15/2059 63940UAC8	4,241.85	99.7329	4,246.46	140	3.29
7,923.06	NAVIENT STUDENT LOAN TRUST SERIES 20-CA CLASS A2A 2.15% 11/15/2068 63941KAB1	8,129.18	94.0631	7,452.67	170	2.29
3,962.2728	OCTANE RECEIVABLE TRUST SERIES 21-2A CLA 1.21% 09/20/2028 67578AAA6	3,925.75	99.3081	3,934.86	48	1.22
43,236.99	OCTANE RECEIVABLES TRUST SERIES 24-2A CL A2 5.8% 07/20/2032 67578YAB2	43,235.04	101.0837	43,705.53	2,508	5.74
40,000	SFS AUTO RECEIVABLES SECURITIZ 2 SERIES 24-2A CLASS A3 5.33% 11/20/2029 78397XAC8	39,992.90	100.9804	40,392.16	2,132	5.28
35,000	SBNA AUTO LEASE TRUST 2 SERIES 24-C CLASS A3 4.56% 02/22/2028 78398DAC1	34,890.63	99.9568	34,984.88	1,596	4.56
18,187.53	SANTANDER DRIVE AUTO REC SERIES 21-4 CLASS D 1.67% 10/15/2027 80285VAF6	18,212.39	98.3844	17,893.69	304	1.70
8,862.95	SANTANDER DRIVE AUTO SERIES 21-1 CL D 1.13% 11/16/2026 80286NAG1	8,458.57	99.5778	8,825.53	100	1.13
40,000	SANTANDER DRIVE AUTO RCVBLS TR SERIES 23-5 CLASS A3 6.02% 09/15/2028 80286PAC5	39,993.88	101.0539	40,421.54	2,408	5.96
30,000	SANTANDER DRIVE AUTO 1 SERIES 23-1 CLASS C 5.09% 05/15/2030 80287GAE0	29,921.48	100.3499	30,104.97	1,527	5.07
30,000	SERIES 24-4 CLASS B 4.93% 09/17/2029 802919AD2	29,999.24	100.2798	30,083.94	1,479	4.92
50,000	SANTANDER DRIVE SERIES 23-4 CL A3 5.73% 04/17/2028 802927AD5	49,990.32	100.6423	50,321.14	2,865	5.69

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6,038.13	SMB PRIVATE EDUCATION SERIES 17-B CLASS A2A 2.82% 10/15/2035 83189DAB6	6,236.27	98.3591	5,939.05	170	2.87
25,000	STACK INFRASTRUCTURE 2 21-1A CLASS A2 1.877% 03/26/2046 85236KAE2	23,871.09	96.1979	24,049.48	469	1.95
29,475	TACO BELL FUNDING, LLC SERIES 21-1A CLASS A2II 2.294% 08/25/2051 87342RAH7	29,475.00	88.6737	26,136.57	676	2.59
14,874.39	TESLA AUTO LEASE TRUST SERIES 23-A CLASS A3 5.89% 06/22/2026 88167PAC2	14,873.41	100.351	14,926.60	876	5.87
26,290.24	TOYOTA AUTO RECEIVABLES OWNE SERIES 22-B CLASS A3 2.93% 09/15/2026 89238FAD5	26,289.62	99.3928	26,130.60	770	2.95
115,998.09	TRINITY RAIL SERIES 21-1A CLASS A 2.26% 07/19/2051 89656GAA2	112,288.77	90.6506	105,152.93	2,622	2.49
40,000	VERIZON MASTER TRUST VERIZON MASTER TRUST SERIES 22-4 CLASS C 3.89% 11/20/2028 92348KAU7	39,721.88	99.5713	39,828.50	1,556	3.91
40,000	VERIZON MASTER TRUST SERIES 23-1 CL A 4.49% 01/22/2029 92348KBG7	39,991.52	100.0264	40,010.57	1,796	4.49
45,000	VOLKSWAGON AUTO LEASE TR SERIES 24-A CL A3 5.21% 06/21/2027 92866EAD1	44,996.23	100.9364	45,421.38	2,345	5.16
40,000	WESTLAKE AUTOMOBLIE SERIES 22-2A CL D 5.48% 09/15/2027 96042VAG4	39,787.50	100.5261	40,210.43	2,192	5.45
35,974.7	WORLD OMNI AUTO REC 3.25% 07/15/2027 98163QAD1	35,970.34	99.4245	35,767.67	1,169	3.27
55,000	WORLD OMNI SELECT AUTO SERIES 23-A CLASS B 5.87% 08/15/2028 98163UAE0	54,995.70	101.2301	55,676.53	3,229	5.80

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SHARES/FACE	ASSET	CARRYING VALUE	CURRENT PRICE	MARKET VALUE	EST ANN INC	YIELD TO MKT
	TOTAL COLLATERALIZED MTG OBLIG	4,545,296.36		4,375,837.51	170,733	3.90
	U S GOVERNMENT AGENCY					
75,000	FHLB CALL11/02/23@100 4.25% 11/02/2038 3130AFAU1	67,500.00	90.618	67,963.50	3,188	4.69
45,000	FHLB CALL02/26/22@100 1% 08/16/2028 3130AKYM2	38,358.00	88.361	39,762.45	450	1.13
105,000	FHLB CALL 11/25/24@100 2% 02/25/2036 3130AL5M2	84,288.75	73.577	77,255.85	2,100	2.72
50,000	FHLB CALL 01/18/24@100 2.74% 01/28/2037 3130AQQ55	40,000.00	78.834	39,417.00	1,370	3.48
80,000	FHLB CALL 01/13/25@100 5.3% 12/13/2029 3130B3Y23	80,000.00	99.796	79,836.80	4,240	5.31
25,000	FFCB 2.75% 06/12/2034 3133EKQQ2	21,513.60	84.407	21,101.75	688	3.26
35,000	FFCB CALL 01/23/25@100 2.96% 01/23/2045 3133ELJK1	24,325.00	69.452	24,308.20	1,036	4.26
65,000	FFCB 1.84% 12/17/2035 3133EMKM3	49,530.00	73.438	47,734.70	1,196	2.51
75,000	FFCB 2.58% 03/15/2041 3133EMTM4	54,375.00	70.378	52,783.50	1,935	3.67
25,000	FFCB FEDERAL FARM CREDIT BANK 5.05% 01/18/2028 3133ERLN9	25,000.00	100.23	25,057.50	1,263	5.04
25,000	FHLMC .55% 02/12/2026 3134GXLF9	22,064.25	95.88	23,970.00	138	0.57
83,000	U.S. TREASURY .75% 08/31/2026 91282CCW9	75,760.19	94.43	78,376.90	623	0.79
	TOTAL U S GOVERNMENT AGENCY	582,714.79		577,568.15	18,227	3.16

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SHARES/FACE	ASSET	CARRYING VALUE	CURRENT PRICE	MARKET VALUE	EST ANN INC	YIELD TO MKT
	MUNICIPAL OBLIGATIONS					
15,000	CALIFORNIA ST BUILD AMERICA BONDS-TAXABLE VAR PURP GO UNLTD 7.55% 04/01/2039 13063A5G5	18,340.70	118.203	17,730.45	1,133	6.39
30,000	CALIFORNIA ST 7.3% 10/01/2039 13063A7D0	34,823.15	113.861	34,158.30	2,190	6.41
45,000	CHGO ILL WTR RECLAMATION DIST 5.72% 12/01/2038 167560PL9	48,196.25	100.401	45,180.45	2,574	5.70
50,000	CICERO IL 1.3% 01/01/2026 171646SY9	50,000.00	96.88	48,440.00	650	1.34
10,000	COLUMBIA UNIVERSITY 4.355% 10/01/2035 198643AD0	10,000.00	94.416	9,441.60	436	4.61
15,000	CONNECTICUT ST 5.09% 10/01/2030 20772JAC6	15,116.40	99.763	14,964.45	764	5.10
20,000	COOK CNTY ILL 6.229% 11/15/2034 213185DV0	21,201.20	103.948	20,789.60	1,246	5.99
20,000	DALLAS TX INDPT SCH DIST 6.45% 02/15/2035-2025 235308RA3	20,000.00	101.027	20,205.40	1,290	6.38
5,000	FLORIDA ST BRD OF ADMIN FIN CORP 2.154% 07/01/2030 341271AF1	4,239.39	86.20	4,310.00	108	2.50
30,000	FLORIDA ST BRD OF ADMIN FIN CORP 5.526% 07/01/2034-2034 341271AH7	30,007.35	101.002	30,300.60	1,658	5.47
5,000	ILL ST TOLL HWY AUTH TOLL REV 6.184% 01/01/2034 452252FH7	5,414.40	104.11	5,205.50	309	5.94
23,574.44	LOUISIANA ST LOCAL GOVT ENVRNMNT 3.24% 08/01/2028 54627RAK6	23,309.23	98.81	23,293.90	764	3.28
4,651.24	LOUISIANA ST LOCAL GOVT 5.197% 09/01/2039 54628CG30	4,515.38	99.434	4,624.91	242	5.23

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SHARES/FACE	ASSET	CARRYING VALUE	CURRENT PRICE	MARKET VALUE	EST ANN INC	YIELD TO MKT
7,920.2	MASSACHUSETTS ST. 4.11% 07/15/2031 576004HG3	7,710.24	97.693	7,737.48	326	4.21
20,000	NEW YORK NY 5.968% 03/01/2036 64966HYM6	20,885.35	102.586	20,517.20	1,194	5.82
10,000	NEW YORK NY 6.271% 12/01/2037 64966JAR7	10,495.10	104.967	10,496.70	627	5.97
25,000	NY ST DORM AUTH PERSONAL INC TAX 5.5% 03/15/2030 649902T29	25,036.90	100.049	25,012.25	1,375	5.50
5,000	NEW YORK ST DORM AUTH ST 5.628% 03/15/2039 64990FMT8	5,097.40	100.062	5,003.10	281	5.62
1,000	OMAHA NE SPL OBLG 6.4% 02/01/2026 68189TBA3	1,155.66	100.418	1,004.18	64	6.37
22,150.59	OREGON ST SCH BRDS ASSN SHORT 4.759% 06/30/2028 686053GG8	22,902.15	99.975	22,145.05	1,054	4.76
69,517.92	TEXAS NATURAL GAS 5.102% 04/01/2035 88258MAA3	68,293.84	100.21	69,663.91	3,547	5.09
40,000	TEXAS ST 4.631% 04/01/2033 882722VP3	39,826.52	98.018	39,207.20	1,852	4.72
50,000	TEXAS ST 5.178% 04/01/2030 88283LHU3	51,281.47	100.942	50,471.00	2,589	5.13
35,000	TRICON AMERICAN HOMES SERIES 20-SFR1 CLASS B 2.049% 07/17/2038 89613GAB2	33,490.63	95.5845	33,454.58	717	2.14
	TOTAL MUNICIPAL OBLIGATIONS	571,338.71		563,357.81	26,990	4.79
	CORPORATE BONDS					
50,000	AT&T INC 3.1% 02/01/2043 00206RKD3	48,897.00	72.005	36,002.50	1,550	4.31
35,000	AT&T INC 2.25% 02/01/2032 00206RKH4	31,789.65	82.707	28,947.45	788	2.72

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SHARES/FACE	ASSET	CARRYING VALUE	CURRENT PRICE	MARKET VALUE	EST ANN INC	YIELD TO MKT
103,000	AT&T INC 3.5% 09/15/2053 00206RKJ0	101,476.20	67.372	69,393.16	3,605	5.20
15,000	ACCENTURE CAPITAL INC 4.5% 10/04/2034 00440KAD5	15,032.40	95.042	14,256.30	675	4.73
55,000	AERCAP IRELAND CAP 2.45% 10/29/2026 00774MAV7	51,033.95	95.726	52,649.30	1,348	2.56
30,000	AGREE LP 2.9% 10/01/2030 008513AA1	26,550.60	88.603	26,580.90	870	3.27
35,000	AIR LEASE CORP AIR LEASE CORP SER A MTN 1.875% 08/15/2026 00914AAM4	31,351.95	95.315	33,360.25	656	1.97
107,000	ALBEMARLE CORP 5.05% 06/01/2032 012653AE1	102,633.33	95.181	101,843.67	5,404	5.31
60,000	ALLSTATE CORP .75% 12/15/2025 020002BH3	58,757.00	96.407	57,844.20	450	0.78
25,000	AMEREN CORPORATION 1.75% 03/15/2028 023608AK8	21,699.75	90.493	22,623.25	438	1.93
45,374.38	AMER AIRLINE 17-2 AA PTT SINKABLE BOND 3.35% 10/15/2029 02376AAA7	41,845.69	93.6632	42,499.10	1,520	3.58
60,000	AMERICAN EXPRESS CO 2.25% 03/04/2025 025816CQ0	58,023.60	99.694	59,816.40	1,350	2.26
105,000	AMERICAN EXPRESS CREDIT 3.3% 05/03/2027 0258M0EL9	109,788.00	96.916	101,761.80	3,465	3.41
40,000	AMERICAN HONDA FINANCE 4.45% 10/22/2027 02665WFT3	39,972.40	99.272	39,708.80	1,780	4.48
30,000	AMERICAN HOMES 4 RENT 4.25% 02/15/2028 02666TAA5	29,724.00	97.624	29,287.20	1,275	4.35

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SHARES/FACE	ASSET	CARRYING VALUE	CURRENT PRICE	MARKET VALUE	EST ANN INC	YIELD TO MKT
20,000	AMERIPRISE FINANCIAL INC 5.7% 12/15/2028 03076CAN6	19,966.60	103.032	20,606.40	1,140	5.53
25,000	AMGEN INC 4.05% 08/18/2029 031162DH0	24,174.75	96.272	24,068.00	1,013	4.21
60,000	AMPHENOL CORP 2.2% 09/15/2031 032095AL5	59,780.40	83.808	50,284.80	1,320	2.63
50,000	AMPHENOL CORP 4.75% 03/30/2026 032095AM3	49,829.00	100.052	50,026.00	2,375	4.75
35,000	AMPHENOL CORP 5.05% 04/05/2029 032095AP6	35,341.45	100.622	35,217.70	1,768	5.02
63,000	ELEVANCE HEALTH INC 3.65% 12/01/2027 036752AB9	69,203.04	97.362	61,338.06	2,300	3.75
100,000	ELEVANCE HEALTH INC 2.375% 01/15/2025 036752AJ2	95,592.00	99.914	99,914.00	2,375	2.38
20,000	AON CORP/AON GLOBAL HOLD 2.05% 08/23/2031 03740LAA0	19,942.40	82.688	16,537.60	410	2.48
115,000	APOLLO GLOBAL MGMT INC 6.375% 11/15/2033 03769MAA4	126,287.70	108.105	124,320.75	7,331	5.90
50,000	ARES CAPITAL CORP 3.25% 07/15/2025 04010LAY9	46,891.50	99.031	49,515.50	1,625	3.28
50,000	ARES CAPITAL CORP 5.95% 07/15/2029 04010LBG7	49,187.00	101.117	50,558.50	2,975	5.88
20,000	ARTHUR J GALLAGHER & CO 5% 02/15/2032 04316JAM1	19,986.80	98.623	19,724.60	1,000	5.07
50,000	ASCENSION HEALTH 3.945% 11/15/2046 04351LAB6	54,446.00	79.84	39,920.00	1,973	4.94

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SHARES/FACE	ASSET	CARRYING VALUE	CURRENT PRICE	MARKET VALUE	EST ANN INC	YIELD TO MKT
35,000	ASTRAZENECA PLC 4.375% 08/17/2048 046353AU2	45,326.05	84.865	29,702.75	1,531	5.16
25,000	BHP BILLITON FINANCE BHP BILLITON FIN USA LTD 5.25% 09/08/2030 055451BD9	24,938.29	101.585	25,396.25	1,313	5.17
50,000	BANK OF AMERICA CORP 4.125% 05/15/2041 06050WGY5	56,873.00	85.256	42,628.00	2,063	4.84
105,000	BANK OF AMERICA CORP 3.248% 10/21/2027 06051GGA1	107,184.00	96.369	101,187.45	3,410	3.37
45,000	BANK OF AMERICA CORP 3.419% 12/20/2028 06051GHD4	42,879.00	95.84	43,128.00	1,539	3.57
25,000	BANK OF AMERICA CORP 3.97% 03/05/2029 06051GHG7	23,329.75	96.979	24,244.75	993	4.09
110,000	BANK OF AMERICA CORP VARIABLE 2.299% 07/21/2032 06051GKA6	96,599.50	83.424	91,766.40	2,529	2.76
30,000	BANK OF AMERICA CORP 3.384% 04/02/2026 06051GKM0	30,000.00	99.626	29,887.80	1,015	3.40
35,000	BANK OF AMERICA CORP BANK OF AMERICA CORP 5.819% 09/15/2029 06051GLS6	34,277.20	102.487	35,870.45	2,037	5.68
30,000	BANK OF AMERICA CORP BANK OF AMERICA CORP 5.518% 10/25/2035 06051GMD8	30,000.00	97.625	29,287.50	1,655	5.65
25,000	BANK OF MONTREAL VARIABLE RATE 3.088% 01/10/2037 06368DH72	22,755.25	83.092	20,773.00	772	3.72
25,000	BANK OF MONTREAL 1.25% 09/15/2026 06368FAC3	24,957.75	94.562	23,640.50	313	1.32

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SHARES/FACE	ASSET	CARRYING VALUE	CURRENT PRICE	MARKET VALUE	EST ANN INC	YIELD TO MKT
35,000	BANK OF MONTREAL 6.255396% 09/10/2027 06368L8L3	35,000.00	98.08	34,328.00	2,189	6.38
20,000	BANK OF NY MELLON CORP 4.289% 06/13/2033 06406RBH9	19,089.25	94.442	18,888.40	858	4.54
75,000	BANK OF NY MELLON CORP BANK OF NY MELLON CORP 4.89% 07/21/2028 06406RBX4	76,496.25	100.393	75,294.75	3,668	4.87
25,000	BANK OF NOVA SCOTIA 5.25% 06/12/2028 06418GAD9	24,957.75	101.046	25,261.50	1,313	5.20
30,000	BANK OF NOVA SCOTIA 5.35% 12/07/2026 06418JAA9	29,960.70	101.294	30,388.20	1,605	5.28
10,000	BARCLAYS PLC 7.385% 11/02/2028 06738ECD5	10,007.00	106.008	10,600.80	739	6.97
40,000	BARRICK GOLD CORP 5.25% 04/01/2042 067901AH1	53,164.00	94.529	37,811.60	2,100	5.55
35,000	BRANCH BANKING & TRUST VARIABLE RATE BOND 2.636% 09/17/2029 07330MAC1	33,602.40	96.547	33,791.45	923	2.73
50,000	BLACKSTONE HOLDINGS FINANCIAL 5% 06/15/2044 09256BAG2	67,011.00	90.857	45,428.50	2,500	5.50
45,000	BLACKROCK FUNDING INC 4.6% 07/26/2027 09290DAH4	45,045.00	100.244	45,109.80	2,070	4.59
50,000	BOARDWALK PIPELINES LP 5.95% 06/01/2026 096630AE8	56,275.50	101.204	50,602.00	2,975	5.88
30,000	BOARDWALK PIPELINES LP 4.45% 07/15/2027 096630AF5	28,882.80	98.953	29,685.90	1,335	4.50
110,000	BOARDWALK PIPELINES LP 5.625% 08/01/2034 096630AK4	110,160.40	99.61	109,571.00	6,188	5.65

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SHARES/FACE	ASSET	CARRYING VALUE	CURRENT PRICE	MARKET VALUE	EST ANN INC	YIELD TO MKT
65,000	BOEING CO 2.95% 02/01/2030 097023CN3	66,181.70	89.263	58,020.95	1,918	3.30
50,000	BOEING CO 5.15% 05/01/2030 097023CY9	59,733.50	98.56	49,280.00	2,575	5.23
15,000	BP CAP MARKETS AMERICA 4.234% 11/06/2028 10373QAE0	14,579.25	97.894	14,684.10	635	4.33
75,000	BP CAP MARKETS AMERICA BP CAPITAL MARKETS 2.721% 01/12/2032 10373QBT6	75,558.00	85.574	64,180.50	2,041	3.18
30,000	BP CAP MARKETS AMERICA 4.812% 02/13/2033 10373QBU3	30,002.05	96.502	28,950.60	1,444	4.99
30,000	BROADCOM INC 4.15% 11/15/2030 11135FAQ4	27,765.00	95.653	28,695.90	1,245	4.34
25,000	BROOKFIELD FINANCE INC 6.35% 01/05/2034 11271LAK8	25,000.00	105.425	26,356.25	1,588	6.02
35,000	CBRE SERVICES INC 2.5% 04/01/2031 12505BAE0	28,636.65	85.165	29,807.75	875	2.94
40,000	THE CIGNA GROUP 2.375% 03/15/2031 125523CM0	40,373.60	84.695	33,878.00	950	2.80
50,000	CAMPBELL SOUP CO 2.375% 04/24/2030 134429BJ7	49,886.00	87.741	43,870.50	1,188	2.71
75,000	CAMPBELL SOUP CO 5.2% 03/21/2029 134429BN8	77,060.25	100.919	75,689.25	3,900	5.15
30,000	CANADIAN IMPERIAL BANK 5.001% 04/28/2028 13607LNG4	30,000.00	100.29	30,087.00	1,500	4.99
30,000	CANADIAN IMPERIAL BANK 6.092% 10/03/2033 13607LWW9	30,000.00	104.584	31,375.20	1,828	5.82

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25,000	CANADIAN NATL RESOURCES 5.4% 02/15/2035 136385BB6	25,020.60	98.966	24,741.50	1,350	5.46
55,000	CAPITAL ONE FINANCIAL CO 3.2% 02/05/2025 14040HBG9	55,772.75	99.98	54,989.00	1,760	3.20
60,000	CAPITAL ONE FINANCIAL CO 4.2% 10/29/2025 14040HBJ3	57,194.40	99.347	59,608.20	2,520	4.23
27,000	CAPITAL ONE FINANCIAL CO 7.624% 10/30/2031 14040HDC6	30,144.96	110.433	29,816.91	2,058	6.90
30,000	CARDINAL HEALTH INC CARDINAL HEALTH INC 5% 11/15/2029 14149YBR8	29,964.60	99.374	29,812.20	1,500	5.03
35,000	CENTENE CORP 3.375% 02/15/2030 15135BAV3	29,830.40	89.068	31,173.80	1,181	3.79
20,000	CENTERPOINT ENERGY RESOURCE 5.25% 03/01/2028 15189YAG1	20,535.40	100.949	20,189.80	1,050	5.20
15,000	CHARTER COMM OPT LLC/CAP 2.25% 01/15/2029 161175CD4	12,711.00	88.182	13,227.30	338	2.55
30,000	CHARTER COMM OPT LLC/CAP 6.55% 06/01/2034 161175CR3	29,930.70	102.318	30,695.40	1,965	6.40
40,000	CHUBB INA HOLDINGS INC 5% 03/15/2034 171239AK2	39,859.20	98.844	39,537.60	2,000	5.06
35,000	CITIGROUP INC 6.625% 06/15/2032 172967BL4	37,916.90	106.886	37,410.10	2,319	6.20
60,000	CITIGROUP INC 4.65% 07/30/2045 172967JU6	69,610.20	87.37	52,422.00	2,790	5.32
20,000	CITIGROUP INC 1.462% 06/09/2027 172967NA5	20,000.00	95.211	19,042.20	292	1.54

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20,000	CITIGROUP INC 1 6.174% 05/25/2034 17327CAR4	20,000.00	101.956	20,391.20	1,235	6.06
50,000	CLOROX CO 1.8% 05/15/2030 189054AX7	49,316.00	85.066	42,533.00	900	2.12
40,000	COCA COLA CO 1.65% 06/01/2030 191216CV0	34,551.20	85.276	34,110.40	660	1.93
30,000	CONSUMERS 23 SECURE FUND 5.21% 09/01/2030 21071BAB1	30,738.85	100.999	30,299.70	1,563	5.16
50,000	CREDIT SUISSE NEW YORK 5% 07/09/2027 22550L2K6	48,878.40	100.596	50,298.00	2,500	4.97
25,000	DCP MIDSTREAM OPERATING 5.625% 07/15/2027 23311VAJ6	25,437.20	101.364	25,341.00	1,406	5.55
50,000	D.R. HORTON INC 2.6% 10/15/2025 23331ABN8	53,755.00	98.336	49,168.00	1,300	2.64
10,000	DTE ELECTRIC CO 5.2% 04/01/2033 23338VAS5	10,180.15	99.93	9,993.00	520	5.20
144,000	DEVON ENERGY CORP 5.6% 07/15/2041 25179MAL7	153,261.83	92.605	133,351.20	8,064	6.05
20,000	DEVON ENERGY CORP 5.85% 12/15/2025 25179MAV5	23,025.20	100.666	20,133.20	1,170	5.81
75,000	DISCOVER BANK 4.65% 09/13/2028 25466AAP6	68,751.00	97.966	73,474.50	3,488	4.75
65,000	WALT DISNEY CO 6.65% 11/15/2037 254687EH5	91,152.35	111.531	72,495.15	4,323	5.96
30,000	DISCOVER FINANCIAL SERVICES 4.1% 02/09/2027 254709AM0	28,819.20	98.202	29,460.60	1,230	4.18

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SHARES/FACE	ASSET	CARRYING VALUE	CURRENT PRICE	MARKET VALUE	EST ANN INC	YIELD TO MKT
55,000	DISCOVERY COMMUNICATIONS 4.125% 05/15/2029 25470DBF5	60,475.10	93.163	51,239.65	2,269	4.43
70,000	DUKE ENERGY CORPORATION 3.75% 09/01/2046 26441CAT2	69,798.30	73.706	51,594.20	2,625	5.09
85,000	DUKE ENERGY CAROLINAS 4.95% 01/15/2033 26442CBJ2	84,408.65	98.347	83,594.95	4,208	5.03
30,000	DUKE ENERGY OHIO INC 2.125% 06/01/2030 26442EAH3	25,332.60	86.455	25,936.50	638	2.46
5,000	DUKE ENERGY PROGRESS NC 2.387% 07/01/2037 26444BAB0	4,217.70	80.025	4,001.25	119	2.98
5,000	DUKE ENERGY FLORIDA LLC 2.858% 03/01/2033 26444GAD5	4,420.30	86.895	4,344.75	143	3.29
102,000	EDWARDS LIFESCIENCES CORP 4.3% 06/15/2028 28176EAD0	118,905.16	97.862	99,819.24	4,386	4.39
55,000	ELECTRONIC ARTS INC 4.8% 03/01/2026 285512AD1	65,960.50	100.019	55,010.45	2,640	4.80
30,000	ELEVANCE HEALTH INC. 4.75% 02/15/2033 28622HAB7	29,846.50	95.889	28,766.70	1,425	4.95
25,000	ENACT HOLDINGS INC 6.25% 05/28/2029 29249EAA7	24,988.25	101.844	25,461.00	1,563	6.14
50,000	ENERGY TRANSFER PARTNERS 4.2% 04/15/2027 29273RBK4	54,109.25	98.669	49,334.50	2,100	4.26
5,000	ENERGY TRANSFER EQUITY LP 5.75% 02/15/2033 29273VAQ3	4,998.00	101.371	5,068.55	288	5.67
35,000	ENERGY TRANSFER OPERATING 3.75% 05/15/2030 29278NAQ6	33,668.49	93.307	32,657.45	1,313	4.02

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25,000	ENTERGY LOUISIANA, LLC 3.12% 09/01/2027 29364WAZ1	23,447.40	96.124	24,031.00	780	3.25
70,000	EQUIFAX INC 3.1% 05/15/2030 294429AS4	76,139.30	90.634	63,443.80	2,170	3.42
20,000	ESSEX PORTFOLIO LP 2.55% 06/15/2031 29717PAZ0	16,793.00	84.972	16,994.40	510	3.00
25,000	EVERSOURCE ENERGY 1.65% 08/15/2030 30040WAK4	20,231.05	83.241	20,810.25	413	1.98
3,900.89	EXPORT IMPORT BK UNITED SINKABLE BOND 1.822% 05/03/2025 302155AU0	3,490.92	99.331	3,874.79	71	1.83
70,000	FEDEX CORPORATION 4.9% 01/15/2034 31428XAX4	85,265.50	97.537	68,275.90	3,430	5.02
70,000	FIFTH THIRD BANCORP 3.95% 03/14/2028 316773CV0	64,782.90	96.811	67,767.70	2,765	4.08
44,000	FIFTH THIRD BANCORP 2.375% 01/28/2025 316773CY4	43,419.52	99.806	43,914.64	1,045	2.38
50,000	FIRST HORIZON NATIONAL CORP 4% 05/26/2025 320517AD7	50,934.00	99.534	49,767.00	2,000	4.02
25,000	FIRST TENNESSEE BANK 5.75% 05/01/2030 337158AJ8	26,520.35	99.501	24,875.25	1,438	5.78
1,856.67	IRWIN LAND LLC SERIES 144A SINKING FUND 5.03% 12/15/2025 347466AB0	2,022.40	105.095	1,951.27	93	4.79
110,000	GMAC LLC 8% 11/01/2031 36186CBY8	142,015.90	110.584	121,642.40	8,800	7.23
62,000	GENERAL MOTORS CO 6.125% 10/01/2025 37045VAV2	71,396.10	100.771	62,478.02	3,798	6.08

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61,000	GENERAL MOTORS CO 5.4% 10/18/2029 37045VAY6	57,955.49	100.654	61,398.94	3,294	5.36
60,000	GENERAL MOTORS FINL CO 4% 10/06/2026 37045XBQ8	66,406.80	98.589	59,153.40	2,400	4.06
35,000	GENERAL MOTORS FINL CO 6.1% 01/07/2034 37045XEP7	34,730.85	101.496	35,523.60	2,135	6.01
35,000	GLOBAL PAYMENTS INC 3.2% 08/15/2029 37940XAB8	34,819.15	91.648	32,076.80	1,120	3.49
20,000	GOLDMAN SACHS GROUP INC 5.851% 04/25/2035 38141GA95	20,066.00	101.94	20,388.00	1,170	5.74
75,000	GOLDMAN SACHS GROUP INC 3.85% 01/26/2027 38141GWB6	82,789.50	98.138	73,603.50	2,888	3.92
30,000	GOLDMAN SACHS GROUP INC 1.992% 01/27/2032 38141GXR0	30,000.00	82.581	24,774.30	598	2.41
60,000	GOLDMAN SACHS GROUP INC 1.431% 03/09/2027 38141GYA6	55,842.60	95.998	57,598.80	859	1.49
100,000	GOLDMAN SACHS GROUP INC 1.542% 09/10/2027 38141GYG3	94,339.00	94.567	94,567.00	1,542	1.63
100,000	GOLDMAN SACHS GROUP INC 4.25% 02/15/2030 38143CFL0	112,138.00	94.984	94,984.00	4,250	4.47
30,000	GOLDMAN SACHS GROUP INC 3.5% 01/23/2025 38148LAC0	28,876.20	99.943	29,982.90	1,050	3.50
25,000	HSBC HOLDINGS PLC 2.099% 06/04/2026 404280CG2	24,424.25	98.825	24,706.25	525	2.12
30,000	HSBC HOLDINGS PLC 5.733% 05/17/2032 404280EG0	31,271.70	101.167	30,350.10	1,720	5.67

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SHARES/FACE	ASSET	CARRYING VALUE	CURRENT PRICE	MARKET VALUE	EST ANN INC	YIELD TO MKT
25,000	HEALTHCARE TRUST OF AMERICA 3.75% 07/01/2027 42225UAF1	24,353.50	97.17	24,292.50	938	3.86
20,000	HEALTHCARE TRUST OF AMERICA 2% 03/15/2031 42225UAH7	16,032.60	81.779	16,355.80	400	2.45
50,000	HEWLETT PACKARD ENTERPRISE 4.4% 09/25/2027 42824CBS7	49,976.50	98.963	49,481.50	2,200	4.45
55,000	HUMANA INC 3.95% 03/15/2027 444859BF8	62,041.10	98.079	53,943.45	2,173	4.03
20,000	HUNTINGTON NATL BK HUNTINGTON NATL BANK 5.65% 01/10/2030 44644MAJ0	20,007.03	101.789	20,357.80	1,130	5.55
55,000	HYUNDAI CAPITAL AMERICA 5.25% 01/08/2027 44891ACT2	54,957.10	100.574	55,315.70	2,888	5.22
35,000	INTERCONTINENTAL EXCHANGE INC 3.625% 09/01/2028 45866FBB9	34,281.10	95.905	33,566.75	1,269	3.78
20,000	INVITATION HOMES OP 2% 08/15/2031 46188BAA0	15,415.60	81.156	16,231.20	400	2.46
55,000	JPMORGAN CHASE CO VARIABLE RATE BOND 4.26% 02/22/2048 46647PAA4	60,385.60	82.864	45,575.20	2,343	5.14
25,000	JPMORGAN CHASE CO VARIABLE RATE BOND 2.182% 06/01/2028 46647PBR6	25,122.05	93.934	23,483.50	546	2.32
30,000	JPMORGAN CHASE CO 1.045% 11/19/2026 46647PBT2	30,008.55	96.777	29,033.10	314	1.08
25,000	JPMORGAN CHASE CO 5.766% 04/22/2035 46647PEH5	24,955.00	102.318	25,579.50	1,442	5.64
135,000	JEFFERIES GROUP INC 6.45% 06/08/2027 472319AE2	158,896.45	103.14	139,239.00	8,708	6.25

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29,530.08	JETBLUE 2020 SINKABLE BOND 4% 11/15/2032 477164AA5	27,795.19	93.9755	27,751.05	1,181	4.26
30,000	JUNIPER NETWORKS INC 5.95% 03/15/2041 48203RAD6	40,945.50	98.638	29,591.40	1,785	6.03
35,000	JUNIPER NETWORKS INC 1.2% 12/10/2025 48203RAN4	35,025.20	96.783	33,874.05	420	1.24
55,000	KEMPER CORP 4.35% 02/15/2025 488401AB6	60,519.20	99.723	54,847.65	2,393	4.36
50,000	KEMPER CORP 2.4% 09/30/2030 488401AC4	50,671.00	84.893	42,446.50	1,200	2.83
35,000	KIMCO REALTY OP 4.85% 03/01/2035 49447BAB9	34,549.65	95.262	33,341.70	1,698	5.09
40,000	LPL HOLDINGS INC 6.75% 11/17/2028 50212YAH7	39,918.20	105.062	42,024.80	2,700	6.42
30,000	L3 HARRIS TECHNOLOGIES INC 5.25% 06/01/2031 502431AT6	29,869.05	100.169	30,050.70	1,575	5.24
65,000	LAZARD GROUP LLC 4.5% 09/19/2028 52107QAJ4	75,479.05	97.745	63,534.25	2,925	4.60
55,000	LAZARD GROUP LLC 4.375% 03/11/2029 52107QAK1	53,156.95	97.406	53,573.30	2,406	4.49
35,000	LEGGETT & PLATT INC 4.4% 03/15/2029 524660AZ0	40,432.00	93.557	32,744.95	1,540	4.70
55,000	LINCOLN NATL CORP 3.35% 03/09/2025 534187BE8	56,454.20	99.559	54,757.45	1,843	3.36
100,000	MANUF & TRADERS TRUST CO 5.4% 11/21/2025 55279HAT7	96,574.00	100.298	100,298.00	5,400	5.38

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SHARES/FACE	ASSET	CARRYING VALUE	CURRENT PRICE	MARKET VALUE	EST ANN INC	YIELD TO MKT
30,000	MPLX LP 4.5% 04/15/2038 55336VAM2	26,709.60	87.184	26,155.20	1,350	5.16
40,000	MPLX LP 4% 03/15/2028 55336VAR1	42,508.00	97.007	38,802.80	1,600	4.12
135,000	MARS INC 4.2% 04/01/2059 571676AH8	146,214.40	76.239	102,922.65	5,670	5.51
30,000	MARSH & MCLENNAN COMPANIES INC 5.15% 03/15/2034 571748BW1	29,993.70	99.535	29,860.50	1,545	5.17
20,000	MASCO CORP 6.5% 08/15/2032 574599AY2	26,497.40	105.374	21,074.80	1,300	6.17
30,000	MASTERCARD INC 4.55% 01/15/2035 57636QBC7	30,429.60	95.563	28,668.90	1,365	4.76
60,000	MCDONALD'S CORP 3.6% 07/01/2030 58013MFQ2	70,498.60	93.825	56,295.00	2,160	3.84
60,000	MICROSOFT CORP 3.4% 09/15/2026 594918CN2	68,254.80	98.389	59,033.40	2,040	3.46
30,000	MICROSOFT CORP 3.4% 06/15/2027 594918CQ5	33,342.30	97.834	29,350.20	1,020	3.48
35,000	MICRON TECHNOLOGY INC 4.185% 02/15/2027 595112BP7	39,677.40	98.584	34,504.40	1,465	4.25
50,000	MICRON TECHNOLOGY INC 4.663% 02/15/2030 595112BQ5	61,282.00	97.611	48,805.50	2,332	4.78
55,000	MOISON COORS BEVERAGE CO 3% 07/15/2026 60871RAG5	59,181.65	97.404	53,572.20	1,650	3.08
55,000	MORGAN STANLEY 4.35% 09/08/2026 6174467Y9	60,109.50	99.217	54,569.35	2,393	4.38

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SHARES/FACE	ASSET	CARRYING VALUE	CURRENT PRICE	MARKET VALUE	EST ANN INC	YIELD TO MKT
25,000	MORGAN STANLEY SER 1 MTN 5.164% 04/20/2029 61747YFD2	24,873.75	100.273	25,068.25	1,291	5.15
25,000	NMI HOLDINGS INC 6% 08/15/2029 629209AC1	24,860.00	100.426	25,106.50	1,500	5.97
55,000	NVR INC 3% 05/15/2030 62944TAF2	57,541.00	90.268	49,647.40	1,650	3.32
30,000	NASDAQ INC BROKERAGE ASSETMANAGERS 5.55% 02/15/2034 63111XAJ0	30,104.40	100.932	30,279.60	1,665	5.50
15,000	NEW YORK NY TXBL FISCAL .982% 08/01/2025 64966QZX1	15,000.00	98.094	14,714.10	147	1.00
5,000	NEW YORK ST URBAN DEV CORP 3.9% 03/15/2033-2028 650036JX5	4,593.00	92.987	4,649.35	195	4.19
35,000	NEXTERA ENERGY CAPITAL 3.55% 05/01/2027 65339KAT7	38,428.60	97.443	34,105.05	1,243	3.64
55,000	NORFOLK SOUTHERN CORP 2.3% 05/15/2031 655844CK2	56,706.10	85.596	47,077.80	1,265	2.69
75,000	NORTHERN TRUST CORP 3.375% 05/08/2032 665859AS3	81,279.35	95.959	71,969.25	2,531	3.52
25,000	OGE ENERGY CORP 5.45% 05/15/2029 670837AD5	25,085.50	101.659	25,414.75	1,363	5.36
20,000	OLD REPUBLIC INTERNATIONAL CORP 3.875% 08/26/2026 680223AK0	20,637.60	98.325	19,665.00	775	3.94
20,000	OLD REPUBLIC INTERNATIONAL CORP 5.75% 03/28/2034 680223AM6	19,867.80	100.178	20,035.60	1,150	5.74
35,000	ORACLE CORP 4.7% 09/27/2034 68389XCT0	34,897.80	94.803	33,181.05	1,645	4.96

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SHARES/FACE	ASSET	CARRYING VALUE	CURRENT PRICE	MARKET VALUE	EST ANN INC	YIELD TO MKT
65,000	OWL ROCK CAPITAL CORP 3.4% 07/15/2026 69121KAE4	58,422.00	96.88	62,972.00	2,210	3.51
85,000	OWL ROCK CAPITAL CORP 2.625% 01/15/2027 69121KAF1	77,623.80	94.431	80,266.35	2,231	2.78
50,000	PG&E WILDFIRE RECOVERY 4.263% 06/01/2036 693342AB3	46,975.45	93.898	46,949.00	2,132	4.54
3,918.46	PG&E WILDFIRE RECOVERY 4.022% 06/01/2031 693342AF4	3,733.22	97.651	3,826.42	158	4.12
10,000	PG&E WILDFIRE RECOVERY 4.722% 06/01/2037 693342AG2	9,698.85	95.55	9,555.00	472	4.94
85,000	PNC FINANCIAL SERVICES 3.45% 04/23/2029 693475AW5	86,546.60	94.643	80,446.55	2,933	3.65
35,000	PNC FINANCIAL SERVICES 6.615% 10/20/2027 693475BT1	36,115.10	103.016	36,055.60	2,315	6.42
35,000	PNC FINANCIAL SERVICES 5.492% 05/14/2030 693475BX2	35,216.65	101.40	35,490.00	1,922	5.42
45,000	PPG INDUSTRIES INC 2.55% 06/15/2030 693506BS5	46,054.80	88.228	39,702.60	1,148	2.89
30,000	PPL ELECTRIC UTILITIES 4.85% 02/15/2034 69351UBC6	29,744.70	97.448	29,234.40	1,455	4.98
2,570.82	PACIFIC BEACON LLC SINKING FUND 5.379% 07/15/2026-2014 69403WAA5	2,774.01	109.414	2,812.84	138	4.92
5,000	PG&E ENERGY RECOVERY FND 2.28% 01/15/2036 71710TAB4	4,165.40	78.766	3,938.30	114	2.89
21,508.68	PG&E ENERGY RECOVERY FND 5.045% 07/15/2032 71710TAD0	21,985.10	100.204	21,552.56	1,085	5.03

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81,000	PHILLIPS 66 3.9% 03/15/2028 718546AR5	87,932.79	96.95	78,529.50	3,159	4.02
20,000	PHILLIPS 66 5.25% 06/15/2031 718547AU6	20,626.20	100.305	20,061.00	1,050	5.23
70,000	PHILLIPS 66 PARTNERS LP 4.9% 10/01/2046 718549AE8	85,567.30	74.175	51,922.50	3,430	6.61
25,000	PHYSICIANS REALTY LP 3.95% 01/15/2028 71951QAB8	24,909.79	97.025	24,256.25	988	4.07
110,000	PRIVATE EXPORT FDG CORP 4.3% 12/15/2028 742651EA6	109,990.10	98.753	108,628.30	4,730	4.35
10,000	PROLOGIS LP 1.75% 07/01/2030 74340XBZ3	8,624.70	84.362	8,436.20	175	2.07
15,000	PROLOGIS LP 1.75% 02/01/2031 74340XCA7	12,257.70	82.882	12,432.30	263	2.11
135,000	PRUDENTIAL FINANCIAL INC 2.1% 03/10/2030 74432QCG8	129,364.15	88.134	118,980.90	2,835	2.38
25,000	PUB SVC OKLAHOMA 5.25% 01/15/2033 744533BQ2	24,941.85	98.495	24,623.75	1,313	5.33
30,000	PUBLIC SERVICES ENTERPRISES 5.2% 04/01/2029 744573AY2	30,018.00	101.06	30,318.00	1,560	5.15
50,000	PUGET SOUND ENERGY INC. MTN 7.02% 12/01/2027 74531EAA0	65,314.00	105.347	52,673.50	3,510	6.66
50,000	PULTEGROUP INC 7.875% 06/15/2032 745867AM3	71,743.00	113.979	56,989.50	3,938	6.91
20,000	QUEST DIAGNOSTICS INC 5% 12/15/2034 74834LBG4	19,921.80	97.271	19,454.20	1,000	5.14

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25,000	CITIZENS BANK NA/RI VARIABLE RATE 4.575% 08/09/2028 75524KPG3	24,326.18	99.078	24,769.50	1,144	4.62
20,000	REALTY INCOME CORP 2.1% 03/15/2028 756109CA0	19,872.80	91.898	18,379.60	420	2.29
10,000	REGENCY CENTERS LP 3.9% 11/01/2025 75884RAU7	11,009.90	99.02	9,902.00	390	3.94
30,000	REGENCY CENTERS LP 2.95% 09/15/2029 75884RAZ6	26,797.65	91.635	27,490.50	885	3.22
10,000	REGENCY CENTERS LP 3.7% 06/15/2030 75884RBA0	9,494.60	93.446	9,344.60	370	3.96
110,000	REGIONS FINANCIAL CORP 1.8% 08/12/2028 7591EPAT7	88,595.10	89.065	97,971.50	1,980	2.02
30,000	REGIONS FINANCIAL CORP 5.722% 06/06/2030 7591EPAU4	30,000.00	101.367	30,410.10	1,717	5.64
4,500	RELIANCE INDUSTRIES LTD SINKABLE BOND 2.512% 01/15/2026 759470AT4	4,500.00	98.466	4,430.97	113	2.55
6,315.82	RELIANCE INDUSTRIES LTD SINKABLE BOND 1.87% 01/15/2026 759470AV9	6,203.21	98.446	6,217.67	118	1.90
15,000	REXFORD INDUSTRIAL 5% 06/15/2028 76169XAC8	14,748.90	99.619	14,942.85	750	5.02
35,000	ROYAL BANK OF CANADA 4.65% 01/27/2026 780082AD5	35,773.12	99.863	34,952.05	1,628	4.66
20,000	ROYAL BNK OF CANADA 4.95% 02/01/2029 78016HZV5	19,982.00	99.983	19,996.60	990	4.95
55,000	ROYAL BNK OF CANADA 5.069% 07/23/2027 78016HZX1	55,000.00	100.453	55,249.15	2,788	5.05

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30,000	ROYAL BANK OF CANADA 4.65% 10/18/2030 78017FZT3	30,000.00	97.929	29,378.70	1,395	4.75
111,000	SBC COMMUNICATIONS 6.15% 09/15/2034 78387GAQ6	146,073.89	104.196	115,657.56	6,827	5.90
10,000	SANTANDER HOLDINGS USA 6.565% 06/12/2029 80282KBG0	9,904.80	103.269	10,326.90	657	6.36
80,000	SARA LEE CORP 6.125% 11/01/2032 803111AM5	82,147.20	101.518	81,214.40	4,900	6.03
25,000	CHARLES SCHWAB CORP 1.65% 03/11/2031 808513BG9	19,732.50	81.892	20,473.00	413	2.01
25,000	CHARLES SCHWAB CORP 5.853% 05/19/2034 808513CE3	23,531.25	103.028	25,757.00	1,463	5.68
10,000	SEATTLE CHILDREN HOSP 1.208% 10/01/2027 81257VAA9	9,143.60	90.996	9,099.60	121	1.33
35,000	SERVICENOW INC 1.9% 09/01/2030 81762PAE2	34,292.65	83.104	29,086.40	665	2.29
23,036.16	SIGECO SECURITIZATION 5.026% 11/15/2036 82655KAA9	23,403.13	98.104	22,599.39	1,158	5.12
50,000	SIMON PROPERTY GROUP LP 3.375% 06/15/2027 828807DC8	47,838.00	97.242	48,621.00	1,688	3.47
30,000	6297782 LLC 5.026% 10/01/2029 83007CAC6	29,933.20	98.242	29,472.60	1,508	5.12
30,000	SMITH & NEPHEW PLC 5.4% 03/20/2034 83192PAD0	29,744.40	99.235	29,770.50	1,620	5.44
55,000	JM SMUCKER CO 2.375% 03/15/2030 832696AS7	55,463.10	88.291	48,560.05	1,306	2.69

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Amalgamated Bank of Chicago

TRADE DATE - INCOME ACCRUALS

Statement Period 01/01/24 through 12/31/24

CEMENT MASONS LOCAL 502 WELFARE FUND - COMBINED

Investment Review - Detail Of General Investments

SHARES/FACE	ASSET	CARRYING VALUE	CURRENT PRICE	MARKET VALUE	EST ANN INC	YIELD TO MKT
10,000	STATE STREET CORP 4.821% 01/26/2034 857477CA9	10,008.70	97.05	9,705.00	482	4.97
35,000	STATE STREET CORP 4.675% 10/22/2032 857477CR2	34,714.30	97.078	33,977.30	1,636	4.82
55,000	SUMITOMO MITSUI FINL GRP 2.632% 07/14/2026 86562MAF7	58,033.25	96.924	53,308.20	1,448	2.72
50,000	SUNTRUST BANK 3.3% 05/15/2026 86787GAJ1	56,530.50	97.914	48,957.00	1,650	3.37
55,000	TD AMERITRADE HOLDING 3.3% 04/01/2027 87236YAF5	57,604.80	95.709	52,639.95	1,815	3.45
15,000	T-MOBILE USA INC 3.375% 04/15/2029 87264ABV6	14,378.10	93.336	14,000.40	506	3.62
30,000	TAKE-TWO INTERACTIVE SOFTWARE 4.95% 03/28/2028 874054AK5	29,987.00	99.98	29,994.00	1,485	4.95
30,000	TARGA RESOURCES PARTNERS 4.875% 02/01/2031 87612BBS0	30,360.00	96.561	28,968.30	1,463	5.05
50,000	TORONTO DOMINION BK 4.693% 09/15/2027 89115A2H4	49,536.50	99.777	49,888.50	2,347	4.70
40,000	TORONTO DOMINION BK 5.532% 07/17/2026 89115A2S0	40,003.80	101.141	40,456.40	2,213	5.47
25,000	TOTALENERGIES CAPITAL SA 4.724% 09/10/2034 89157XAD3	25,000.00	96.201	24,050.25	1,181	4.91
15,000	TRUIST FINANCIAL CORP 5.867% 06/08/2034 89788MAP7	14,663.40	101.835	15,275.25	880	5.76
25,000	TRUIST FINANCIAL CORP 7.161% 10/30/2029 89788MAQ5	25,636.00	106.959	26,739.75	1,790	6.70

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CEMENT MASONS LOCAL 502 WELFARE FUND - COMBINED

Investment Review - Detail Of General Investments

SHARES/FACE	ASSET	CARRYING VALUE	CURRENT PRICE	MARKET VALUE	EST ANN INC	YIELD TO MKT
20,000	UDR INC 4.4% 01/26/2029 90265EAP5	18,405.60	97.202	19,440.40	880	4.53
22,208.28	US AIRWAYS 2013-1A PTT SINKABLE 3.95% 05/15/2027 90346WAA1	20,986.83	98.9917	21,984.35	877	3.99
59,893.3687	UNITED AIR 2014-2 A PTT SINKABLE BOND 3.75% 03/03/2028 90932QAA4	57,186.92	98.0231	58,709.32	2,246	3.83
30,000	US BANCORP 6.787% 10/26/2027 91159HJP6	31,067.70	103.394	31,018.20	2,036	6.56
40,000	VERIZON COMMUNICATIONS 2.55% 03/21/2031 92343VGJ7	39,101.75	86.173	34,469.20	1,020	2.96
70,000	PARAMOUNT GLOBAL 4.95% 01/15/2031 92556HAB3	83,182.90	93.367	65,356.90	3,465	5.30
25,000	WEC ENERGY GROUP INC 2.2% 12/15/2028 92939UAG1	24,285.00	90.181	22,545.25	550	2.44
90,000	WALGREENS BOOTS ALLIANCE 4.1% 04/15/2050 931427AT5	84,339.56	61.821	55,638.90	3,690	6.63
30,000	WELLS FARGO & COMPANY VARIABLE RATE BOND 2.879% 10/30/2030 95000U2G7	29,973.00	90.241	27,072.30	864	3.19
55,000	WELLS FARGO & COMPANY 4.478% 04/04/2031 95000U2L6	67,926.10	96.831	53,257.05	2,463	4.62
15,000	WELLS FARGO & COMPANY 2.188% 04/30/2026 95000U2N2	15,000.00	99.097	14,864.55	328	2.21
25,000	WELLS FARGO & COMPANY 5.389% 04/24/2034 95000U3D3	24,958.00	98.911	24,727.75	1,347	5.45
30,000	WELLS FARGO & COMPANY 5.574% 07/25/2029 95000U3E1	30,000.00	101.543	30,462.90	1,672	5.49

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CEMENT MASONS LOCAL 502 WELFARE FUND - COMBINED

Investment Review - Detail Of General Investments

SHARES/FACE	ASSET	CARRYING VALUE	CURRENT PRICE	MARKET VALUE	EST ANN INC	YIELD TO MKT
20,000	WELLS FARGO & COMPANY 5.707% 04/22/2028 95000U3L5	20,000.00	101.658	20,331.60	1,141	5.61
45,000	WESTAR ENERGY INC 2.55% 07/01/2026 95709TAN0	42,679.35	97.028	43,662.60	1,148	2.63
30,000	WESTPAC BANKING CORP 5.457% 11/18/2027 961214FK4	30,000.00	102.328	30,698.40	1,637	5.33
60,000	WISCONSIN ELECTRIC POWER 5% 05/15/2029 976656CQ9	59,855.40	100.688	60,412.80	3,000	4.97
	TOTAL CORPORATE BONDS	11,609,934.09		10,749,848.98	470,827	4.38
	MUTUAL FUNDS/FIXED					
1,742,552.913	BAIRD AGGREGATE BOND FUND-IS 057071854	18,707,952.00	9.65	16,815,635.61	677,853	4.03
464,407.674	CREDIT SUISSE FLOATING RATE HIGH INCOME FUND 22540S836	3,054,920.64	6.33	2,939,700.58	266,106	9.05
2,678.4234	INTERCONTINENTAL US REAL ESTATE INVESTMENT FUND INTUSR005	3,105,467.36	1161.3247	3,110,519.25	0	0.00
	TOTAL MUTUAL FUNDS/FIXED	24,868,340.00		22,865,855.44	943,959	4.13
	MUTUAL FUNDS/EQUITY					
25,579.556	VANGUARD EXTENDED MARKET INDEX FUND ADMIRAL SHARES 922908694	1,949,924.24	144.08	3,685,502.43	40,288	1.09
43,148.14	VANGUARD 500 INDEX FUND #540 ADMIRAL SHARES 922908710	9,240,504.78	542.76	23,419,084.47	289,308	1.24
1,311.0331	BGO DIVERSIFIED CLASS B BMO BGODIV002	3,010,173.84	2411.4424	3,161,480.76	0	0.00
	TOTAL MUTUAL FUNDS/EQUITY	14,200,602.86		30,266,067.66	329,596	1.09
	Total Fund	**69,429,796.42**		**81,664,665.83**	**2,359,750**	**2.89**

Statement Period 01/01/24 through 12/31/24

CEMENT MASONS LOCAL 502 WELFARE FUND - COMBINED

Schedule Of Reportable Transactions

PLAN NUMBER: **EIN NUMBER:**

DESCRIPTION	PURCH/SELL PRICE EXPENSE INCURRED	COST OF ASSET	VALUE OF ASSET ON TXN DATE	NET GAIN OR LOSS
BEGINNING MARKET VALUE:	**74,161,492.81**			
SECURITY TRANSACTIONS EXCEEDING 5%:				
SHORT TERM INVESTMENTS				
CUSIP # 38141W273 GOLDMAN FINANCIAL SQUARE GOVT-A FD# 465 (AMALFGOV) MASTER #2839100 4.25%				
TOTAL ACTIVITY FROM 01/01/24 TO 12/31/24				
DEPOSIT	9,426,594.58	9,426,594.58	9,426,594.58	
WITHDRAWAL	8,124,428.52	8,124,428.52	8,124,428.52	
TOTAL	17,551,023.10	17,551,023.10	17,551,023.10	
TOTAL SHORT TERM INVESTMENTS	**17,551,023.10**	**17,551,023.10**	**17,551,023.10**	
SHORT TERM PRIME				
CUSIP # 38141W364 GOLDMAN FINANCIAL SQUARE FUND #462 (AMALFPOP) MASTER# 2839100 5.19%				
TOTAL ACTIVITY FROM 01/01/24 TO 12/31/24				
PURCHASED 2,044,643.358 SHS ON 12/31/24 AT 1.001	2,046,524.03	2,046,524.03	2,046,688.00	
SOLD 2,207,193.546 SHS ON 12/31/24 AT 1.001	2,209,272.77	2,209,232.15	2,209,400.75	40.62
TOTAL	4,255,796.80	4,255,756.18	4,256,088.75	40.62
TOTAL SHORT TERM PRIME	**4,255,796.80**	**4,255,756.18**	**4,256,088.75**	**40.62**
TOTAL SECURITY TRANSACTIONS EXCEEDING 5%		**21,806,779.28**		

Amalgamated Bank of Chicago

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Statement Period 01/01/24 through 12/31/24

CEMENT MASONS LOCAL 502 WELFARE FUND - COMBINED

Schedule Of Reportable Transactions

PLAN NUMBER: **EIN NUMBER:**

DESCRIPTION	PURCH/SELL PRICE EXPENSE INCURRED	COST OF ASSET	VALUE OF ASSET ON TXN DATE	NET GAIN OR LOSS

BEGINNING MARKET VALUE: 74,161,492.81

SINGLE TRANSACTIONS EXCEEDING 5%:

TOTAL SINGLE TRANSACTIONS EXCEEDING 5%

TRADE DATE - INCOME ACCRUALS

Statement Period 01/01/24 through 12/31/24

CEMENT MASONS LOCAL 502 WELFARE FUND - COMBINED

Schedule Of Reportable Transactions

BY ASSET **VALUATION** **74,161,492.81** **THRESHOLD** **3,708,074.64**

DESCRIPTION	TRAN TYPE	SETTLE DATE / SHARES / UNITS	PURCHASE / SALE COST / PROCEEDS	BROKER COMMISSION / OTH EXPENSE	COST OF ASSET / PREV ANNL MKT	NET GAIN / LOSS

NO REPORTABLE TRANSACTIONS

Amalgamated Bank of Chicago

TRADE DATE - INCOME ACCRUALS

Statement Period 01/01/24 through 12/31/24

CEMENT MASONS LOCAL 502 WELFARE FUND - COMBINED

Schedule Of Reportable Transactions

AGGREGATE BY ASSET **VALUATION** **74,161,492.81** **THRESHOLD** **3,708,074.64**

DESCRIPTION	TRAN TYPE	SETTLE DATE / SHARES / UNITS	PURCHASE / SALE COST / PROCEEDS	BROKER COMMISSION / OTH EXPENSE	COST OF ASSET / PREV ANNL MKT	NET GAIN / LOSS
CUSIP # 38141W273						
GOLDMAN FINANCIAL SQUARE GOVT-A						
FD# 465 (AMALFGOV) MASTER						
#2839100 4.25%	NET		9,426,594.58		9,426,594.58	
					9,426,594.58	
	NET		8,124,428.52		8,124,428.52	
					8,124,428.52	
278 PURCHASES FOR 9,426,594.58		158 SALES FOR	8,124,428.52	ISSUE AGGREGATE TOTAL	17,551,023.10	
CUSIP # 38141W364						
GOLDMAN FINANCIAL SQUARE FUND						
#462 (AMALFPOP) MASTER# 2839100						
5.19%	NET		2,046,524.03		2,046,524.03	
		2,044,643.358			2,046,524.03	
	NET		2,209,272.77		2,209,232.15	36.00
		2,207,193.546			2,209,236.77	
52 PURCHASES FOR 2,046,524.03		37 SALES FOR	2,209,272.77	ISSUE AGGREGATE TOTAL	4,255,796.80	

Amalgamated Bank of Chicago

TRADE DATE - INCOME ACCRUALS

Statement Period 01/01/24 through 12/31/24

CEMENT MASONS LOCAL 502 WELFARE FUND - COMBINED

Schedule Of Reportable Transactions

AGGREGATE BY BROKER **VALUATION** **74,161,492.81** **THRESHOLD** **3,708,074.64**

DESCRIPTION	TRAN TYPE	SETTLE DATE / SHARES / UNITS	PURCHASE / SALE COST / PROCEEDS	BROKER COMMISSION / OTH EXPENSE	COST OF ASSET / PREV ANNL MKT	NET GAIN / LOSS

NO REPORTABLE TRANSACTIONS