

Form 5500

Annual Return/Report of Employee Benefit Plan

OMB Nos. 1210-0110 1210-0089

2024

This Form is Open to Public Inspection

Department of the Treasury Internal Revenue Service

Department of Labor Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

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

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

Part I Annual Report Identification Information

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

- A This return/report is for: a multiemployer plan, a multiple-employer plan, a single-employer plan, a DFE (specify) E, B This return/report is: the first return/report, the final return/report, an amended return/report, a short plan year return/report, C If the plan is a collectively-bargained plan, check here, D Check box if filing under: Form 5558, automatic extension, the DFVC program, special extension, 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 RHUMLINE TIPS TRUST, 1b Three-digit plan number (PN) 001, 1c Effective date of plan, 2a Plan sponsor's name (employer, if for a single-employer plan) RHUMLINE ADVISERS CORP., C/O STATE STREET BANK AND TRUST CO., 2323 GRAND BLVD. 5TH FLOOR KANSAS CITY, MO 64108, 2b Employer Identification Number (EIN) 83-2033494, 2c Plan Sponsor's telephone number 816-871-4100, 2d Business code (see instructions)

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

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

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

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

Form 5500 (2024) v. 240311

<b>3a</b> Plan administrator's name and address <input checked="" type="checkbox"/> Same as Plan Sponsor	<b>3b</b> Administrator's EIN  <b>3c</b> Administrator's telephone number  <div style="background-color: #cccccc; height: 40px; width: 100%;"></div>
<b>4</b> If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report: <b>a</b> Sponsor's name <b>c</b> Plan Name	<b>4b</b> EIN  <b>4d</b> PN
<b>5</b> Total number of participants at the beginning of the plan year	<b>5</b>
<b>6</b> Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines <b>6a(1)</b> , <b>6a(2)</b> , <b>6b</b> , <b>6c</b> , and <b>6d</b> ). <b>a(1)</b> Total number of active participants at the beginning of the plan year ..... <b>a(2)</b> Total number of active participants at the end of the plan year ..... <b>b</b> Retired or separated participants receiving benefits..... <b>c</b> Other retired or separated participants entitled to future benefits ..... <b>d</b> Subtotal. Add lines <b>6a(2)</b> , <b>6b</b> , and <b>6c</b> ..... <b>e</b> Deceased participants whose beneficiaries are receiving or are entitled to receive benefits. .... <b>f</b> Total. Add lines <b>6d</b> and <b>6e</b> ..... <b>g(1)</b> Number of participants with account balances as of the beginning of the plan year (only defined contribution plans complete this item) ..... <b>g(2)</b> Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item) ..... <b>h</b> Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested.....	<div style="background-color: #cccccc; height: 20px; width: 100%;"></div> <b>6a(1)</b> <b>6a(2)</b> <b>6b</b> <b>6c</b> <b>6d</b> <b>6e</b> <b>6f</b> <b>6g(1)</b> <b>6g(2)</b> <b>6h</b>
<b>7</b> Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item) .....	<b>7</b>

**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:

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

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

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

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

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

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

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<b>SCHEDULE C</b> <b>(Form 5500)</b>  <small>Department of the Treasury Internal Revenue Service</small>  <small>Department of Labor Employee Benefits Security Administration</small>  <small>Pension Benefit Guaranty Corporation</small>	<b>Service Provider Information</b>  This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA).  <b>▶ File as an attachment to Form 5500.</b>	<small>OMB No. 1210-0110</small>  <b>2024</b>  <b>This Form is Open to Public Inspection.</b>
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For calendar plan year 2024 or fiscal plan year beginning **01/01/2024** and ending **12/31/2024**

<b>A</b> Name of plan <b>RHUMBLINE TIPS TRUST</b>	<b>B</b> Three-digit plan number (PN) ▶	<b>001</b>
<b>C</b> Plan sponsor's name as shown on line 2a of Form 5500 <b>RHUMBLINE ADVISERS CORP.</b>	<b>D</b> Employer Identification Number (EIN) <b>83-2033494</b>	

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

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

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

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

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

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

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

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

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

STATE STREET BANK & TRUST

04-1867445

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
19 28 99	TRUSTEE	17361	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	0	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>

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

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

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

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

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

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

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
STATE STREET BANK & TRUST	19 28 99	17361
(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.	
RHUMLINE TIPS TRUST  83-2033494	STIF COMPENSATION 25 BASIS POINTS OVERDRAFT COMPENSATION FED FUNDS RATE PLUS 200 BASIS POINTS	
(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.

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

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

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

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

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

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

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

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

<b>SCHEDULE D</b> <b>(Form 5500)</b>  <small>Department of the Treasury Internal Revenue Service</small>  <small>Department of Labor Employee Benefits Security Administration</small>	<b>DFE/Participating Plan Information</b>  This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA).  <b>▶ File as an attachment to Form 5500.</b>	OMB No. 1210-0110  <hr/> <b>2024</b>  <b>This Form is Open to Public Inspection.</b>
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For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024

<b>A</b> Name of plan <u>RHUMBLINE TIPS TRUST</u>	<b>B</b> Three-digit plan number (PN)	<u>001</u>
<b>C</b> Plan or DFE sponsor's name as shown on line 2a of Form 5500 <u>RHUMBLINE ADVISERS CORP.</u>	<b>D</b> Employer Identification Number (EIN) <u>83-2033494</u>	

<b>Part I</b>	<b>Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs)</b> (Complete as many entries as needed to report all interests in DFEs)
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<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE:		
<b>b</b> Name of sponsor of entity listed in (a):		
<b>c</b> EIN-PN	<b>d</b> Entity code	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE:		
<b>b</b> Name of sponsor of entity listed in (a):		
<b>c</b> EIN-PN	<b>d</b> Entity code	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE:		
<b>b</b> Name of sponsor of entity listed in (a):		
<b>c</b> EIN-PN	<b>d</b> Entity code	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE:		
<b>b</b> Name of sponsor of entity listed in (a):		
<b>c</b> EIN-PN	<b>d</b> Entity code	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE:		
<b>b</b> Name of sponsor of entity listed in (a):		
<b>c</b> EIN-PN	<b>d</b> Entity code	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE:		
<b>b</b> Name of sponsor of entity listed in (a):		
<b>c</b> EIN-PN	<b>d</b> Entity code	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE:		
<b>b</b> Name of sponsor of entity listed in (a):		
<b>c</b> EIN-PN	<b>d</b> Entity code	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

**a** Name of MTIA, CCT, PSA, or 103-12 IE:

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

**c** EIN-PN

**d** Entity code

**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

**a** Name of MTIA, CCT, PSA, or 103-12 IE:

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

**c** EIN-PN

**d** Entity code

**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

**a** Name of MTIA, CCT, PSA, or 103-12 IE:

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

**c** EIN-PN

**d** Entity code

**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

**a** Name of MTIA, CCT, PSA, or 103-12 IE:

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

**c** EIN-PN

**d** Entity code

**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

**a** Name of MTIA, CCT, PSA, or 103-12 IE:

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

**c** EIN-PN

**d** Entity code

**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

**a** Name of MTIA, CCT, PSA, or 103-12 IE:

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

**c** EIN-PN

**d** Entity code

**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

**a** Name of MTIA, CCT, PSA, or 103-12 IE:

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

**c** EIN-PN

**d** Entity code

**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

**a** Name of MTIA, CCT, PSA, or 103-12 IE:

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

**c** EIN-PN

**d** Entity code

**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

**a** Name of MTIA, CCT, PSA, or 103-12 IE:

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

**c** EIN-PN

**d** Entity code

**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

**a** Name of MTIA, CCT, PSA, or 103-12 IE:

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

**c** EIN-PN

**d** Entity code

**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

**Part II Information on Participating Plans (to be completed by DFEs, other than DCGs)**  
 (Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)

<b>a</b> Plan name	CITY OF BOSTON OPEB POOL 8	
<b>b</b> Name of plan sponsor	CITY OF BOSTON OPEB POOL 8	<b>c</b> EIN-PN 04-6001380-
<b>a</b> Plan name	MEDFORD RETIREMENT BOARD FUND	
<b>b</b> Name of plan sponsor	MEDFORD RETIREMENT BOARD FUND	<b>c</b> EIN-PN 04-3003851-
<b>a</b> Plan name	WALT DISNEY	
<b>b</b> Name of plan sponsor	WALT DISNEY	<b>c</b> EIN-PN 91-2092754-
<b>a</b> Plan name	BOSTON WATER AND SEWER OPEB FUND	
<b>b</b> Name of plan sponsor	BOSTON WATER AND SEWER	<b>c</b> EIN-PN 04-2621990-
<b>a</b> Plan name	PENNSYLVANIA TURNPIKE COMMISSION RETIREE MEDICAL TRUST	
<b>b</b> Name of plan sponsor	PENNSYLVANIA TURNPIKE COMMISSION RETIREE MEDICAL TRUST	<b>c</b> EIN-PN 26-6403112-
<b>a</b> Plan name	PLYMOUTH COUNTY RETIREMENT ASSOCIATION	
<b>b</b> Name of plan sponsor	PLYMOUTH COUNTY RETIREMENT ASSOCIATION	<b>c</b> EIN-PN 32-0091442-
<b>a</b> Plan name	MWRA EMPLOYEES RETIREMENT SYSTEM	
<b>b</b> Name of plan sponsor	MWRA	<b>c</b> EIN-PN 58-2669177-
<b>a</b> Plan name	TOWN OF NORWOOD	
<b>b</b> Name of plan sponsor	TOWN OF NORWOOD	<b>c</b> EIN-PN 57-6199810-
<b>a</b> Plan name		
<b>b</b> Name of plan sponsor		<b>c</b> EIN-PN
<b>a</b> Plan name		
<b>b</b> Name of plan sponsor		<b>c</b> EIN-PN
<b>a</b> Plan name		
<b>b</b> Name of plan sponsor		<b>c</b> EIN-PN
<b>a</b> Plan name		
<b>b</b> Name of plan sponsor		<b>c</b> EIN-PN

<b>SCHEDULE H</b> <b>(Form 5500)</b>  <small>Department of the Treasury Internal Revenue Service</small>  <small>Department of Labor Employee Benefits Security Administration</small>  <small>Pension Benefit Guaranty Corporation</small>	<b>Financial Information</b>  This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code).  <b>▶ File as an attachment to Form 5500.</b>	<small>OMB No. 1210-0110</small>  <b>2024</b>  <b>This Form is Open to Public Inspection</b>
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For calendar plan year 2024 or fiscal plan year beginning <b>01/01/2024</b> and ending <b>12/31/2024</b>	
<b>A</b> Name of plan <b>RHUMBLINE TIPS TRUST</b>	<b>B</b> Three-digit plan number (PN) ▶ <b>001</b>
<b>C</b> Plan sponsor's name as shown on line 2a of Form 5500 <b>RHUMBLINE ADVISERS CORP.</b>	<b>D</b> Employer Identification Number (EIN) <b>83-2033494</b>

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

		(a) Beginning of Year	(b) End of Year
<b>Assets</b>			
<b>a</b> Total noninterest-bearing cash .....	<b>1a</b>		
<b>b</b> Receivables (less allowance for doubtful accounts):			
<b>(1)</b> Employer contributions .....	<b>1b(1)</b>		
<b>(2)</b> Participant contributions .....	<b>1b(2)</b>		
<b>(3)</b> Other .....	<b>1b(3)</b>	779861	323853
<b>c</b> General investments:			
<b>(1)</b> Interest-bearing cash (include money market accounts & certificates of deposit) .....	<b>1c(1)</b>	173622	100093
<b>(2)</b> U.S. Government securities .....	<b>1c(2)</b>	245074852	83872867
<b>(3)</b> Corporate debt instruments (other than employer securities):			
<b>(A)</b> Preferred .....	<b>1c(3)(A)</b>		
<b>(B)</b> All other .....	<b>1c(3)(B)</b>		
<b>(4)</b> Corporate stocks (other than employer securities):			
<b>(A)</b> Preferred .....	<b>1c(4)(A)</b>		
<b>(B)</b> Common .....	<b>1c(4)(B)</b>		
<b>(5)</b> Partnership/joint venture interests .....	<b>1c(5)</b>		
<b>(6)</b> Real estate (other than employer real property) .....	<b>1c(6)</b>		
<b>(7)</b> Loans (other than to participants) .....	<b>1c(7)</b>		
<b>(8)</b> Participant loans .....	<b>1c(8)</b>		
<b>(9)</b> Value of interest in common/collective trusts .....	<b>1c(9)</b>		
<b>(10)</b> Value of interest in pooled separate accounts .....	<b>1c(10)</b>		
<b>(11)</b> Value of interest in master trust investment accounts .....	<b>1c(11)</b>		
<b>(12)</b> Value of interest in 103-12 investment entities .....	<b>1c(12)</b>		
<b>(13)</b> Value of interest in registered investment companies (e.g., mutual funds) .....	<b>1c(13)</b>	2163881	1803039
<b>(14)</b> Value of funds held in insurance company general account (unallocated contracts).....	<b>1c(14)</b>		
<b>(15)</b> Other.....	<b>1c(15)</b>		

<b>1d</b> Employer-related investments:		(a) Beginning of Year	(b) End of Year
(1) Employer securities.....	<b>1d(1)</b>		
(2) Employer real property.....	<b>1d(2)</b>		
<b>e</b> Buildings and other property used in plan operation.....	<b>1e</b>		
<b>f</b> Total assets (add all amounts in lines 1a through 1e).....	<b>1f</b>	248192216	86099852
<b>Liabilities</b>			
<b>g</b> Benefit claims payable.....	<b>1g</b>		
<b>h</b> Operating payables.....	<b>1h</b>		
<b>i</b> Acquisition indebtedness.....	<b>1i</b>		
<b>j</b> Other liabilities.....	<b>1j</b>	9126	6367
<b>k</b> Total liabilities (add all amounts in lines 1g through 1j).....	<b>1k</b>	9126	6367
<b>Net Assets</b>			
<b>l</b> Net assets (subtract line 1k from line 1f).....	<b>1l</b>	248183090	86093485

**Part II Income and Expense Statement**

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

<b>Income</b>		(a) Amount	(b) Total
<b>a Contributions:</b>			
(1) Received or receivable in cash from: <b>(A)</b> Employers.....	<b>2a(1)(A)</b>		
<b>(B)</b> Participants.....	<b>2a(1)(B)</b>		
<b>(C)</b> Others (including rollovers).....	<b>2a(1)(C)</b>		
(2) Noncash contributions.....	<b>2a(2)</b>		
(3) Total contributions. Add lines <b>2a(1)(A)</b> , <b>(B)</b> , <b>(C)</b> , and line <b>2a(2)</b> .....	<b>2a(3)</b>		0
<b>b Earnings on investments:</b>			
<b>(1) Interest:</b>			
<b>(A)</b> Interest-bearing cash (including money market accounts and certificates of deposit).....	<b>2b(1)(A)</b>	20850	
<b>(B)</b> U.S. Government securities.....	<b>2b(1)(B)</b>	2818589	
<b>(C)</b> Corporate debt instruments.....	<b>2b(1)(C)</b>		
<b>(D)</b> Loans (other than to participants).....	<b>2b(1)(D)</b>		
<b>(E)</b> Participant loans.....	<b>2b(1)(E)</b>		
<b>(F)</b> Other.....	<b>2b(1)(F)</b>		
<b>(G)</b> Total interest. Add lines <b>2b(1)(A)</b> through <b>(F)</b> .....	<b>2b(1)(G)</b>		2839439
<b>(2) Dividends:</b>			
<b>(A)</b> Preferred stock.....	<b>2b(2)(A)</b>		
<b>(B)</b> Common stock.....	<b>2b(2)(B)</b>		
<b>(C)</b> Registered investment company shares (e.g. mutual funds).....	<b>2b(2)(C)</b>	63632	
<b>(D)</b> Total dividends. Add lines <b>2b(2)(A)</b> , <b>(B)</b> , and <b>(C)</b> .....	<b>2b(2)(D)</b>		63632
<b>(3)</b> Rents.....	<b>2b(3)</b>		
<b>(4) Net gain (loss) on sale of assets:</b>			
<b>(A)</b> Aggregate proceeds.....	<b>2b(4)(A)</b>	195293528	
<b>(B)</b> Aggregate carrying amount (see instructions).....	<b>2b(4)(B)</b>	195860627	
<b>(C)</b> Subtract line <b>2b(4)(B)</b> from line <b>2b(4)(A)</b> and enter result.....	<b>2b(4)(C)</b>		-567099
<b>(5) Unrealized appreciation (depreciation) of assets:</b>			
<b>(A)</b> Real estate.....	<b>2b(5)(A)</b>		
<b>(B)</b> Other.....	<b>2b(5)(B)</b>	-1604107	
<b>(C)</b> Total unrealized appreciation of assets. Add lines <b>2b(5)(A)</b> and <b>(B)</b> .....	<b>2b(5)(C)</b>		-1604107

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts .....	<b>2b(6)</b>		
(7) Net investment gain (loss) from pooled separate accounts .....	<b>2b(7)</b>		
(8) Net investment gain (loss) from master trust investment accounts .....	<b>2b(8)</b>		
(9) Net investment gain (loss) from 103-12 investment entities .....	<b>2b(9)</b>		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds) .....	<b>2b(10)</b>		
<b>c</b> Other income .....	<b>2c</b>		
<b>d</b> Total income. Add all <b>income</b> amounts in column (b) and enter total .....	<b>2d</b>		731865

**Expenses**

<b>e</b> Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers .....	<b>2e(1)</b>		
(2) To insurance carriers for the provision of benefits .....	<b>2e(2)</b>		
(3) Other .....	<b>2e(3)</b>		
(4) Total benefit payments. Add lines <b>2e(1)</b> through <b>(3)</b> .....	<b>2e(4)</b>		0
<b>f</b> Corrective distributions (see instructions) .....	<b>2f</b>		
<b>g</b> Certain deemed distributions of participant loans (see instructions) .....	<b>2g</b>		
<b>h</b> Interest expense .....	<b>2h</b>		
<b>i</b> Administrative expenses:			
(1) Salaries and allowances .....	<b>2i(1)</b>		
(2) Contract administrator fees .....	<b>2i(2)</b>		
(3) Recordkeeping fees .....	<b>2i(3)</b>		
(4) IQPA audit fees .....	<b>2i(4)</b>		
(5) Investment advisory and investment management fees .....	<b>2i(5)</b>	5371	
(6) Bank or trust company trustee/custodial fees .....	<b>2i(6)</b>	14180	
(7) Actuarial fees .....	<b>2i(7)</b>		
(8) Legal fees .....	<b>2i(8)</b>		
(9) Valuation/appraisal fees .....	<b>2i(9)</b>		
(10) Other trustee fees and expenses .....	<b>2i(10)</b>		
(11) Other expenses .....	<b>2i(11)</b>	361	
(12) Total administrative expenses. Add lines <b>2i(1)</b> through <b>(11)</b> .....	<b>2i(12)</b>		19912
<b>j</b> Total expenses. Add all <b>expense</b> amounts in column (b) and enter total .....	<b>2j</b>		19912

**Net Income and Reconciliation**

<b>k</b> Net income (loss). Subtract line <b>2j</b> from line <b>2d</b> .....	<b>2k</b>		711953
<b>l</b> Transfers of assets:			
(1) To this plan .....	<b>2l(1)</b>		4000000
(2) From this plan .....	<b>2l(2)</b>		166801558

**Part III Accountant's Opinion**

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

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

(1)  Unmodified (2)  Qualified (3)  Disclaimer (4)  Adverse

**b** Check the appropriate box(es) to indicate whether the IQPA performed an ERISA section 103(a)(3)(C) audit. Check both boxes (1) and (2) if the audit was performed pursuant to both 29 CFR 2520.103-8 and 29 CFR 2520.103-12(d). Check box (3) if pursuant to neither.

(1)  DOL Regulation 2520.103-8 (2)  DOL Regulation 2520.103-12(d) (3)  neither DOL Regulation 2520.103-8 nor DOL Regulation 2520.103-12(d).

**c** Enter the name and EIN of the accountant (or accounting firm) below:

(1) Name: **BKD, LLP**

(2) EIN: **44-0160260**

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

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

**Part IV Compliance Questions**

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

During the plan year:

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

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

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

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

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

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

# **RhumbLine TIPS Trust**

Financial Statements  
and Supplementary Information

December 31, 2024

# RhumbLine TIPS Trust

Financial Statements  
and Supplementary Information  
December 31, 2024

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## Independent Auditor's Report

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Directors and Participants  
RhumbLine TIPS Trust:

### ***Opinion***

We have audited the financial statements of the RhumbLine TIPS Trust (the "Trust"), which comprise the statement of assets and liabilities, including the condensed schedule of investments, as of December 31, 2024, and the related statements of operations and changes in net assets for the year then ended, and the related notes to the financial statements.

In our opinion, the accompanying financial statements present fairly, in all material respects, the financial position of the Trust as of December 31, 2024, and the results of its operations and the changes in net assets for the year then ended in accordance with accounting principles generally accepted in the United States of America.

### ***Basis for Opinion***

We conducted our audit in accordance with auditing standards generally accepted in the United States of America (GAAS). Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of the Trust and to meet our other ethical responsibilities, in accordance with the relevant ethical requirements relating to our audit. 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 Trust's ability to continue as a going concern within one year after the date that the financial statements are available to be issued.

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

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with 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 Trust's internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about the Trust'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.

### ***Supplementary Information***

Our audit was conducted for the purpose of forming an opinion on the financial statements as a whole. The schedule of investment purchases and sales is presented for purposes of additional analysis and is not a required part of the financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements.

The information has been subjected to the auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with GAAS. In our opinion, the information is fairly stated in all material respects in relation to the financial statements as a whole.

*Wolf & Company, P.C.*

Boston, Massachusetts

March 31, 2025

**RhumbLine TIPS Trust**

Statement of Assets and Liabilities  
December 31, 2024

**ASSETS**

Investments, at fair value (cost \$95,970,756)	\$ 85,675,906
Cash and cash equivalents	100,093
Receivable for interest	<u>323,853</u>

Total Assets 86,099,852

**LIABILITIES**

Accounts payable and accrued liabilities	<u>6,367</u>
--	--------------

**NET ASSETS**

\$ 86,093,485

Units Outstanding 7,458,789

**Net Asset Value Per Unit**

\$ 11.54

*See accompanying notes to financial statements*

## RhumbLine TIPS Trust

Condensed Schedule of Investments  
December 31, 2024

<b>Number of Shares or Principal Amount</b>	<b>Description</b>	<b>% of Net Assets</b>	<b>Fair Value</b>
<b>Investments in Securities</b>			
<b><u>U.S. Government Issued Securities</u></b>			
	U.S. Treasury	97.42%	<u>\$ 83,872,867</u>
	<b>Total U.S. Government Issued Securities (cost \$94,165,432)</b>	97.42%	<u>\$ 83,872,867</u>
<b><u>Mutual Fund - United States of America</u></b>			
	Financials	2.09%	<u>\$ 1,803,039</u>
	<b>Total Mutual Fund (cost \$1,805,324)</b>	2.09%	<u>\$ 1,803,039</u>
	<b>Total Investments in Securities (cost \$95,970,756)</b>	99.51%	<u>\$ 85,675,906</u>

*See accompanying notes to financial statements*

**RhumbLine TIPS Trust**  
Statement of Operations  
Year Ended December 31, 2024

<b>INCOME</b>		
Interest	\$	2,839,439
Dividends		<u>63,632</u>
Total Income		<u>2,903,071</u>
<b>EXPENSES</b>		
Custody		14,180
Professional		5,371
Filing fees		<u>361</u>
Total Expenses		<u>19,912</u>
<b>NET INVESTMENT INCOME</b>		<u>2,883,159</u>
<b>NET REALIZED AND UNREALIZED LOSS ON INVESTMENTS</b>		
Net realized loss		(22,666,344)
Net change in unrealized appreciation		<u>20,495,138</u>
Net realized and unrealized loss		<u>(2,171,206)</u>
<b>NET INCREASE IN NET ASSETS RESULTING FROM OPERATIONS</b>	<b>\$</b>	<u><u>711,953</u></u>

*See accompanying notes to financial statements*

## RhumbLine TIPS Trust

### Statement of Changes In Net Assets Year Ended December 31, 2024

#### OPERATIONS

Net investment income	\$ 2,883,159
Net realized loss	(22,666,344)
Net change in unrealized appreciation	<u>20,495,138</u>

Net increase in net assets resulting from operations 711,953

**NET DECREASE IN NET ASSETS FROM PARTICIPANT TRANSACTIONS** (162,801,558)

**NET DECREASE IN NET ASSETS** (162,089,605)

#### NET ASSETS

Beginning of year 248,183,090

End of year \$ 86,093,485

*See accompanying notes to financial statements*

## **RhumbLine TIPS Trust**

Notes to Financial Statements  
December 31, 2024

### **1. Nature of Operations and Summary of Significant Accounting Policies**

#### ***Nature of Operations***

The RhumbLine TIPS Trust (the “Trust”) was formed under a Declaration of Trust on December 15, 2018, and commenced operations on April 4, 2019. The Trust is comprised of investments in bonds that are included in the Barclays U.S. Treasury Inflation Protected Securities (TIPS) Index. This Index consists of all publicly issued US TIPS with at least one year remaining to maturity, are rated investment grade and have \$250 million par outstanding. State Street Bank and Trust Company (“State Street Bank”) is the Trustee along with the Custodian and Recordkeeper. RhumbLine Advisers Limited Partnership is the Trust’s Investment Manager (“Investment Manager”). The Investment Manager is registered with the United States Securities Exchange Commission as an investment adviser under the Investment Adviser’s Act of 1940.

The Trust follows accounting standards established by the Financial Accounting Standards Board (the “FASB”) to ensure consistent reporting of financial condition and results of operations. References to accounting principles generally accepted in the United States of America (“U.S. GAAP”) in these notes are to the FASB Accounting Standards Codification (“ASC”).

The Trust qualifies as an investment company, defined in FASB, ASC Topic 946 Financial Services – Investment Companies and, therefore, is applying the specialized accounting and reporting guidance in ASC Topic 946.

#### ***Use of Estimates***

The preparation of financial statements in conformity with U.S. GAAP requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of investment income and expenses during the reporting period. Actual results could differ from those estimates.

#### ***Investment Valuation***

All investments in securities are recorded at their estimated fair value. Transfers in and out of Level 1 (quoted market prices), Level 2 (significant other observable inputs), and Level 3 (significant unobservable inputs) are recognized on the period ending date.

#### ***Investment Transactions***

Investment transactions are accounted for on the trade date. Realized gains and losses from investment transactions and unrealized appreciation or depreciation of investments are reported on the average cost basis.

#### ***Discounts and Premiums***

Discounts and premiums to the face amount of debt securities are accreted and amortized using the effective interest rate method over the lives of the respective debt securities.

## **RhumbLine TIPS Trust**

Notes to Financial Statements  
December 31, 2024

### **1. Nature of Operations and Summary of Significant Accounting Policies (*continued*)**

#### ***Investment Income and Distribution of Income***

Dividend income less foreign taxes withheld, if any, is recorded on the ex-dividend date and interest income is recorded on the accrual basis from settlement date. Net investment income is allocated ratably on the valuation dates among all participants. No distributions are made to participants in the Trust until units owned are redeemed, at which time the market value of redeemed units is distributed. Investment income and realized gains (if any) earned by the Trust are reinvested, thereby increasing the respective unit values.

#### ***Cash and Cash Equivalents***

Cash represents cash on hand and demand deposits held at financial institutions. Cash equivalents include short-term highly liquid investments of sufficient credit quality that are readily convertible to known amounts of cash and have original maturities of three months or less. Cash equivalents are held in short-term investment funds or money market funds to meet short-term liquidity requirements, rather than for investment purposes.

#### ***Valuation of Participants' Interest***

The net asset value of the Trust is determined daily ("valuation date"). Issuances and redemptions of the Trust are made on such days, based upon the closing value of the securities bought or sold as of the valuation date, adjusted for the related market effect and transaction costs, which are allocated to the applicable participant. Transaction costs include brokerage commissions, taxes, and other direct costs related to security transactions. Market effect is the difference between the execution price of the investment on the trade date and the investments' closing market value on the valuation date.

#### ***Income Taxes***

The Trust complies with the requirements under Section 501(a) of the Internal Revenue Code and apportions all of its taxable income to its participants. Therefore, the Trust is exempt from federal and state income taxes and no income tax provision is required.

### **2. Expenses**

Under the Declaration of Trust, the Trust may pay certain expenses for services received during the year, which include custodian and professional fees. State Street Bank is paid a custody fee by the Trust based upon the Trust's average net assets. The Investment Manager's fee is not charged to the Trust, but is paid directly by the participants in the Trust. Each participant agrees to and contracts with the Investment Manager independently to a fee related to the chosen investment mix and services based upon the participant's assets under management which is typically paid quarterly.

## RhumbLine TIPS Trust

Notes to Financial Statements  
December 31, 2024

### 3. Financial Highlights

For a unit of participation outstanding throughout the year:

Net asset value, beginning of year	\$ <u>11.35</u>
Net investment income	0.77
Net realized and unrealized loss	<u>(0.58)</u>
Net increase from investment operations	<u>0.19</u>
Net asset value, end of year	<u>\$ 11.54</u>
Total return	1.67 %
Ratio to average net assets:	
Net investment income	2.31 %
Expenses	0.02 %

### 4. Participant Unit Transactions

	<u>Units</u>	<u>Amounts</u>
Proceeds from sale of units	353,207	\$ 4,000,000
Cost of units redeemed	<u>(14,768,647)</u>	<u>(166,801,558)</u>
Net decrease from participant transactions	<u>(14,415,440)</u>	<u>\$ (162,801,558)</u>

There is no minimum initial investment from a new unit holder. There is no minimum for additional capital contribution amounts from an existing unit holder. Withdrawals can be made in any amount provided at least five business days' notice, typically on the last business day of each month, or additional days as designated by the Investment Manager.

### 5. Disclosures About Fair Value of Financial Instruments

Fair value is the price that would be received to sell an asset, or paid to transfer a liability, in an orderly transaction between market participants at the measurement date. Fair value measurements must maximize the use of observable inputs and minimize the use of unobservable inputs. There is a hierarchy of three levels of inputs that may be used to measure fair value:

- Level 1: Quoted prices in active markets for identical assets or liabilities that the Trust can access at the measurement date.
- Level 2: Observable inputs other than Level 1 prices, such as quoted prices for similar assets or liabilities; quoted prices for identical instruments in markets that are not active; or other inputs that are observable or can be corroborated by observable market data for substantially the full term of the assets or liabilities.

## RhumbLine TIPS Trust

Notes to Financial Statements  
December 31, 2024

### 5. Disclosures About Fair Value of Financial Instruments *(continued)*

Level 3: Unobservable inputs that are supported by little or no market activity and that are significant to the fair value of the assets or liabilities.

Following is a description of the valuation methodologies and inputs used for assets measured at fair value on a recurring basis and recognized in the accompanying statement of assets and liabilities, as well as the general classification of such assets pursuant to the valuation hierarchy. There have been no significant changes in the valuation techniques during the year ended December 31, 2024.

#### ***U.S. Government Issued Securities***

U.S. Government issued securities are normally valued using a model that incorporates market observable data, such as reported sales of similar securities, broker quotes, yields, bids, offers, and reference data. Certain securities are valued principally using dealer quotations. U.S. Government issued securities are categorized in Level 2 of the fair value hierarchy, depending on market activity levels and whether quotations or other data are used.

#### ***Equity Securities (Mutual Fund)***

Securities traded on a national securities exchange (or reported on the NASDAQ national market) are valued at the last reported sales price or official closing price as reported by an independent pricing service on the primary market or exchange on which they are traded and are categorized as Level 1 in the hierarchy.

The following table presents the fair value measurements of assets recognized in the accompanying statement of assets and liabilities measured at fair value on a recurring basis and the level within the fair value hierarchy in which the fair value measurements fall on December 31, 2024:

	<u>Fair Value Measurements Using</u>			Total
	Quoted Prices in Active Markets for Identical Assets (Level 1)	Significant Other Observable Inputs (Level 2)	Significant Unobservable Inputs (Level 3)	
U.S. government issued securities	\$ -	\$ 83,872,867	\$ -	\$ 83,872,867
Mutual fund	<u>1,803,039</u>	<u>-</u>	<u>-</u>	<u>1,803,039</u>
Total	<u>\$ 1,803,039</u>	<u>\$ 83,872,867</u>	<u>\$ -</u>	<u>\$ 85,675,906</u>

## **RhumbLine TIPS Trust**

Notes to Financial Statements  
December 31, 2024

### **6. Risk Factors**

The Trust invests in various investment securities. Investment securities are exposed to various risks such as interest rate, market, and credit risks. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in the values of investment securities will occur in the near term and that such changes could materially affect the amounts reported in the accompanying statement of assets and liabilities.

### **7. Indemnifications**

In the normal course of business, the Trust enters into contracts that contain a variety of representations and warranties that provide indemnifications under certain circumstances. The Trust's maximum exposure under these arrangements is unknown, as this would involve future claims that may be made against the Trust that have not yet occurred. The Trust expects the risk of future obligation under these indemnifications to be remote.

### **8. Subsequent Events**

Subsequent events have been evaluated through March 31, 2025, which is the date of the financial statements were available to be issued. Subsequent to December 31, 2024, the Trust experienced participant contributions of \$11,000,000. There were no other subsequent events that require adjustment to or disclosure in the financial statements.

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# **RhumbLine TIPS Trust**

Supplementary Information

December 31, 2024

## RhumbLine TIPS Trust

### Schedule of Investment Purchases and Sales Year Ended December 31, 2024

<b>Purchases</b>	
<b>Investment Type</b>	<b>Cost</b>
Equity:	
Mutual fund	\$ 2,458,382
Fixed Income:	
U.S. government issued securities	<u>30,884,791</u>
Total Investments Purchased	<u>\$ 33,343,173</u>

<b>Sales</b>			
<b>Investment Type</b>	<b>Proceeds</b>	<b>Cost</b>	<b>Realized Gain (Loss)</b>
Equity:			
Mutual fund	\$ 2,797,254	\$ 2,781,036	\$ 16,218
Fixed Income:			
U.S. government issued securities	<u>191,702,100</u>	<u>214,384,662</u>	<u>(22,682,562)</u>
Total Investments Sold	<u>\$ 194,499,354</u>	<u>\$ 217,165,698</u>	<u>\$ (22,666,344)</u>

*See independent auditor's report*

(A) IDENTITY OF ISSUER	(C) DESCRIPTION OF INVESTMENT SHARES/PAR	RATE MAT DATE (D) COST	(E) CURRENT VALUE
INTEREST BEARING CASH			
928HVNL10 STIF 25 BPS	STIF 25 BPS 100,092.72	1.000 12/31/2050 100,092.72	100,092.72
	----- 100,092.72	----- 100,092.72	----- 100,092.72

(A)	(B) IDENTITY OF ISSUER	(C) DESCRIPTION OF INVESTMENT SHARES/PAR	RATE MAT DATE (D) COST	(E) CURRENT VALUE
	U.S. GOVERNMENT SECURITIES			
	912810FD5 TSY INFL IX N/B	04/28 3.625 1,083,138.00	3.625 04/15/2028 1,342,568.35	1,137,316.05
	912810FH6 TSY INFL IX N/B	04/29 3.875 1,242,304.70	3.875 04/15/2029 1,596,168.65	1,333,415.13
	912810FQ6 TSY INFL IX N/B	04/32 3.375 457,028.24	3.375 04/15/2032 611,914.36	495,206.17
	912810FR4 TSY INFL IX N/B	01/25 2.375 0.00	2.375 01/15/2025 0.00	0.00
	912810FS2 TSY INFL IX N/B	01/26 2 1,062,367.16	2.000 01/15/2026 1,159,980.63	1,062,574.65
	912810FS1 TSY INFL IX N/B	01/27 2.375 1,128,530.83	2.375 01/15/2027 1,280,910.48	1,139,243.06
	912810FV4 TSY INFL IX N/B	01/28 1.75 1,059,224.16	1.750 01/15/2028 1,111,260.07	1,052,024.75
	912810PZ5 TSY INFL IX N/B	01/29 2.5 992,385.00	2.500 01/15/2029 1,158,168.51	1,010,546.42
	912810QF8 TSY INFL IX N/B	02/40 2.125 594,386.87	2.125 02/15/2040 758,444.55	574,558.50
	912810QP6 TSY INFL IX N/B	02/41 2.125 872,040.95	2.125 02/15/2041 1,139,668.50	844,806.70
	912810QV3 TSY INFL IX N/B	02/42 0.75 1,394,136.14	0.750 02/15/2042 1,459,597.97	1,069,727.20
	912810RA8 TSY INFL IX N/B	02/43 0.625 1,085,987.63	0.625 02/15/2043 1,014,565.11	796,843.42
	912810RF7 TSY INFL IX N/B	02/44 1.375 1,323,239.03	1.375 02/15/2044 1,510,520.15	1,102,552.74
	912810RL4 TSY INFL IX N/B	02/45 0.75 1,356,535.40	0.750 02/15/2045 1,387,241.64	984,945.38
	912810RR1 TSY INFL IX N/B	02/46 1 857,923.92	1.000 02/15/2046 955,291.96	647,280.14
	912810RW0 TSY INFL IX N/B	02/47 0.875 1,052,642.15	0.875 02/15/2047 1,070,816.88	762,733.81
	912810SB5 TSY INFL IX N/B	02/48 1 747,543.36	1.000 02/15/2048 771,326.61	551,269.43
	912810SG4 TSY INFL IX N/B	02/49 1 709,990.40	1.000 02/15/2049 820,828.92	518,417.79
	912810SM1 TSY INFL IX N/B	02/50 0.25 1,085,348.68	0.250 02/15/2050 1,129,631.66	634,335.43
	912810SV1 TSY INFL IX N/B	02/51 0.125 1,091,169.00	0.125 02/15/2051 1,064,226.27	601,997.09

(A)	(B) IDENTITY OF ISSUER	(C) DESCRIPTION OF INVESTMENT SHARES/PAR	RATE MAT DATE (D) COST	(E) CURRENT VALUE
	912810TE8 TSY INFL IX N/B	02/52 0.125	0.125 02/15/2052	
		1,218,953.25	1,083,239.34	662,543.95
	912810TP3 TSY INFL IX N/B	02/53 1.5	1.500 02/15/2053	
		1,189,316.80	1,099,073.72	954,566.11
	912810TY4 TSY INFL IX N/B	02/54 2.125	2.125 02/15/2054	
		944,172.18	953,514.80	875,609.05
	91282CAQ4 TSY INFL IX N/B	10/25 0.125	0.125 10/15/2025	
		0.00	0.00	0.00
	91282CBF7 TSY INFL IX N/B	01/31 0.125	0.125 01/15/2031	
		2,699,180.82	2,887,758.36	2,397,579.00
	91282CCA7 TSY INFL IX N/B	04/26 0.125	0.125 04/15/2026	
		1,795,815.96	1,827,358.92	1,752,709.36
	91282CCM1 TSY INFL IX N/B	07/31 0.125	0.125 07/15/2031	
		3,007,896.88	3,233,023.43	2,650,297.89
	91282CDC2 TSY INFL IX N/B	10/26 0.125	0.125 10/15/2026	
		2,587,536.00	2,734,777.26	2,515,873.39
	91282CDX6 TSY INFL IX N/B	01/32 0.125	0.125 01/15/2032	
		3,153,087.99	3,131,820.97	2,736,042.85
	91282CEJ6 TSY INFL IX N/B	04/27 0.125	0.125 04/15/2027	
		2,828,438.80	2,828,164.38	2,711,323.76
	91282CEZ0 TSY INFL IX N/B	07/32 0.625	0.625 07/15/2032	
		3,258,113.60	3,149,864.21	2,914,993.51
	91282CFR7 TSY INFL IX N/B	10/27 1.625	1.625 10/15/2027	
		2,396,598.07	2,417,788.58	2,384,778.02
	91282CGK1 TSY INFL IX N/B	01/33 1.125	1.125 01/15/2033	
		3,174,801.28	3,106,140.80	2,922,987.44
	91282CGW5 TSY INFL IX N/B	04/28 1.25	1.250 04/15/2028	
		2,812,931.55	2,765,309.38	2,741,729.22
	91282CHP9 TSY INFL IX N/B	07/33 1.375	1.375 07/15/2033	
		3,102,400.05	2,948,102.36	2,904,743.23
	91282CJH5 TSY INFL IX N/B	10/28 2.375	2.375 10/15/2028	
		2,898,937.15	2,939,710.96	2,945,138.96
	91282CJY8 TSY INFL IX N/B	01/34 1.75	1.750 01/15/2034	
		3,264,451.52	3,214,022.02	3,132,598.30
	91282CKL4 TSY INFL IX N/B	04/29 2.125	2.125 04/15/2029	
		2,998,258.38	2,995,794.56	3,003,763.00
	91282CLE9 TSY INFL IX N/B	07/34 1.875	1.875 07/15/2034	
		3,343,811.04	3,360,626.42	3,242,778.32
	91282CLV1 TSY INFL IX N/B	10/29 1.625	1.625 10/15/2029	
		1,599,052.98	1,588,463.06	1,572,818.52
	91282H45 TSY INFL IX N/B	01/25 0.25	0.250 01/15/2025	
		0.00	0.00	0.00
	91282N71 TSY INFL IX N/B	01/26 0.625	0.625 01/15/2026	
		2,431,045.20	2,452,682.34	2,397,808.27

RHUMBLINE TIPS TRUST  
 RHUMBLINE ADVISORS  
 SCHEDULE H, LINE 4I - SCHEDULE OF ASSETS  
 (HELD AT END OF YEAR)

(A)	(B) IDENTITY OF ISSUER	(C) DESCRIPTION OF INVESTMENT SHARES/PAR	(D) COST	RATE MAT DATE	(E) CURRENT VALUE
	912828950 TSY INFL IX N/B	07/26 0.125	0.125	07/15/2026	
		2,258,414.90		2,275,508.00	2,205,571.51
	912828V49 TSY INFL IX N/B	01/27 0.375	0.375	01/15/2027	
		2,273,710.20		2,326,009.09	2,204,299.88
	912828XL9 TSY INFL IX N/B	07/25 0.375	0.375	07/15/2025	
		0.00		0.00	0.00
	912828Y38 TSY INFL IX N/B	07/28 0.75	0.750	07/15/2028	
		2,245,895.00		2,309,362.27	2,158,120.86
	912828ZJ2 TSY INFL IX N/B	04/25 0.125	0.125	04/15/2025	
		0.00		0.00	0.00
	912828ZK6 TSY INFL IX N/B	07/30 0.125	0.125	07/15/2030	
		2,837,777.70		3,030,943.26	2,559,985.88
	912828Z37 TSY INFL IX N/B	01/30 0.125	0.125	01/15/2030	
		2,567,817.98		2,694,808.94	2,333,604.89
	912828L3 TSY INFL IX N/B	07/27 0.375	0.375	07/15/2027	
		2,331,734.73		2,357,667.85	2,250,533.89
	912828R9 TSY INFL IX N/B	01/28 0.5	0.500	01/15/2028	
		2,574,716.16		2,700,358.56	2,462,625.48
	912828W6 TSY INFL IX N/B	01/29 0.875	0.875	01/15/2029	
		1,927,654.20		2,005,426.59	1,841,926.29
	912828D6 TSY INFL IX N/B	07/29 0.25	0.250	07/15/2029	
		2,284,152.51		2,405,936.27	2,116,677.74
		91,204,594.50		94,166,387.97	83,873,822.43

(A) IDENTITY OF ISSUER	(C) DESCRIPTION OF INVESTMENT SHARES/PAR	RATE MAT DATE (D) COST	(E) CURRENT VALUE
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REGISTERED INVESTMENT COMPANY

464287176 ISHARES TIPS BOND ETF	ISHARES TIPS BOND ETF 16,922.000	1,805,323.57	1,803,039.10
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RHUMBLINE TIPS TRUST  
 RHUMBLINE ADVISORS  
 SCHEDULE H, LINE 41 - SCHEDULE OF ASSETS  
 (HELD AT END OF YEAR)

ASSET CATEGORY	UNITS	COST	CURRENT VALUE
INTEREST BEARING CASH	100,092.720	100,092.72	100,092.72
CERTIFICATES OF DEPOSIT	0.000	0.00	0.00
U. S. GOVERNMENT SECURITIES	91,204,594.500	94,166,387.97	83,873,822.43
CORP. DEBT INSTR. - PREFERRED	0.000	0.00	0.00
CORP. DEBT INSTR. - ALL OTHER	0.000	0.00	0.00
CORPORATE STOCKS - PREFERRED	0.000	0.00	0.00
CORPORATE STOCKS - COMMON	0.000	0.00	0.00
PARTN./JOINT VENTURE INTERESTS	0.000	0.00	0.00
REAL ESTATE-INCOME PRODUCING	0.000	0.00	0.00
REAL ESTATE-NON INC. PRODUCING	0.000	0.00	0.00
LOANS SECURED BY MTGES-RESID.	0.000	0.00	0.00
LOANS SECURED BY MTGES-COM'L	0.000	0.00	0.00
LOANS TO PARTIC. - MORTGAGES	0.000	0.00	0.00
LOANS TO PARTICIPANTS - OTHER	0.000	0.00	0.00
OTHER	0.000	0.00	0.00
COMMON/COLLECTIVE TRUSTS	0.000	0.00	0.00
POOLED SEPARATE ACCOUNTS	0.000	0.00	0.00
103-12 INVESTMENTS	0.000	0.00	0.00
REGISTERED INVESTMENT COMPANY	16,922.000	1,805,323.57	1,803,039.10
INSURANCE CO. GENERAL ACCOUNT	0.000	0.00	0.00
** ASSET CATEGORY NOT FOUND **	0.000	0.00	0.00
GRAND TOTALS	91,321,609.220	96,071,804.26	85,776,954.25

SCHEDULE H, LINE 4J - SCHEDULE OF REPORTABLE TRANSACTIONS - SERIES

BEGINNING NET ASSET VALUE: 248,183,090.30  
5% OF ASSET VALUE: 12,409,154.52

-----  
(A) IDENTITY OF PARTY (B) DESCRIPTION OF ASSET  
#PUR (C) PURCHASE PRICE #SALE (D) SELLING PRICE (F) EXPENSES INCURRED (G) COST OF ASSET #TOTAL (H) CURR VALUE (I) GAIN/LOSS  
-----

INTEREST BEARING CASH

-----  
928HVNII0 STIP 25 BPS STIP 25 BPS 1.000 12/31/2050  
28 6,544,071.91 31 6,617,601.14 0.00 6,617,601.14 59 13,161,673.05 0.00

INTEREST BEARING CASH TOTALS

-----  
28 6,544,071.91 31 6,617,601.14 0.00 6,617,601.14 59 13,161,673.05 0.00  
-----

SCHEDULE H, LINE 4J - SCHEDULE OF REPORTABLE TRANSACTIONS - SERIES

BEGINNING NET ASSET VALUE: 248,183,090.30  
5% OF ASSET VALUE: 12,409,154.52

(A) IDENTITY OF PARTY	(B) DESCRIPTION OF ASSET	(C) PURCHASE PRICE	(D) SELLING PRICE	(F) EXPENSES INCURRED	(G) COST OF ASSET #TOTAL	RATE	MAT DATE	(H) CURR VALUE	(I) GAIN/LOSS
-----									

U.S. GOVERNMENT SECURITIES

U.S. GOVERNMENT SECURITIES TOTALS

0	0.00	0	0.00	0.00	0.00	0		0.00	0.00
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SCHEDULE H, LINE 4J - SCHEDULE OF REPORTABLE TRANSACTIONS - SERIES

BEGINNING NET ASSET VALUE: 248,183,090.30  
5% OF ASSET VALUE: 12,409,154.52

(A) IDENTITY OF PARTY	(B) DESCRIPTION OF ASSET	(C) PURCHASE PRICE	(D) SELLING PRICE	(F) EXPENSES INCURRED	(G) COST OF ASSET #TOTAL	(H) CURR VALUE	(I) GAIN/LOSS
REGISTERED INVESTMENT COMPANY							
REGISTERED INVESTMENT COMPANY TOTALS							
0		0.00	0	0.00	0.00	0.00	0.00

REGISTERED INVESTMENT COMPANY

REGISTERED INVESTMENT COMPANY TOTALS

0 0.00 0 0.00 0.00 0 0.00 0.00

SCHEDULE H, LINE 4J - SCHEDULE OF REPORTABLE TRANSACTIONS - SERIES  
BEGINNING NET ASSET VALUE: 248,183,090.30  
5% OF ASSET VALUE: 12,409,154.52

(A) IDENTITY OF PARTY	(B) DESCRIPTION OF ASSET	(C) PURCHASE PRICE	(D) SALE PRICE	(F) EXPENSES INCURRED	(G) COST OF ASSET	(H) CURR VALUE	(I) GAIN/LOSS
INTEREST BEARING CASH							
28	6,544,071.91	31	6,617,601.14	0.00	6,617,601.14	59	13,161,673.05
CERTIFICATES OF DEPOSIT							
0	0.00	0	0.00	0.00	0.00	0	0.00
U.S. GOVERNMENT SECURITIES							
0	0.00	0	0.00	0.00	0.00	0	0.00
CORP. DEBT INSTR. - PREFERRED							
0	0.00	0	0.00	0.00	0.00	0	0.00
CORP. DEBT INSTR. - ALL OTHER							
0	0.00	0	0.00	0.00	0.00	0	0.00
CORPORATE STOCKS - PREFERRED							
0	0.00	0	0.00	0.00	0.00	0	0.00
CORPORATE STOCKS - COMMON							
0	0.00	0	0.00	0.00	0.00	0	0.00
PARTN./JOINT VENTURE INTERESTS							
0	0.00	0	0.00	0.00	0.00	0	0.00
REAL ESTATE-INCOME PRODUCING							
0	0.00	0	0.00	0.00	0.00	0	0.00
REAL ESTATE-NON INC. PRODUCING							
0	0.00	0	0.00	0.00	0.00	0	0.00
LOANS SECURED BY MTGES-RESID.							
0	0.00	0	0.00	0.00	0.00	0	0.00
LOANS SECURED BY MTGES-COM'L							
0	0.00	0	0.00	0.00	0.00	0	0.00
LOANS TO PARTIC. - MORTGAGES							
0	0.00	0	0.00	0.00	0.00	0	0.00
LOANS TO PARTICIPANTS - OTHER							
0	0.00	0	0.00	0.00	0.00	0	0.00
OTHER							
0	0.00	0	0.00	0.00	0.00	0	0.00
COMMON/COLLECTIVE TRUSTS							
0	0.00	0	0.00	0.00	0.00	0	0.00
POOLED SEPARATE ACCOUNTS							
0	0.00	0	0.00	0.00	0.00	0	0.00
103-12 INVESTMENTS							
0	0.00	0	0.00	0.00	0.00	0	0.00
REGISTERED INVESTMENT COMPANY							
0	0.00	0	0.00	0.00	0.00	0	0.00
INSURANCE CO. GENERAL ACCOUNT							
0	0.00	0	0.00	0.00	0.00	0	0.00
** ASSET CATEGORY NOT FOUND **							
0	0.00	0	0.00	0.00	0.00	0	0.00

REPORTABLE TRANSACTION TOTALS  
28 6,544,071.91 31 6,617,601.14 0.00 6,617,601.14 59 13,161,673.05 0.00

NON-REPORTABLE TRANSACTION TOTALS  
13004 35,885,552.57 3054 195,293,527.57 403.21 217,959,871.35 16058 231,179,080.14 -22,666,343.78

SCHEDULE H, LINE 4J - SCHEDULE OF REPORTABLE TRANSACTIONS - SERIES

BEGINNING NET ASSET VALUE: 248,183,090.30  
5% OF ASSET VALUE: 12,409,154.52

(A) IDENTITY OF PARTY	(B) DESCRIPTION OF ASSET	(C) PURCHASE PRICE	(D) SELLING PRICE	(F) EXPENSES INCURRED	(G) COST OF ASSET	(H) CURR VALUE	(I) GAIN/LOSS
INTEREST BEARING CASH							
928HVNII0	STIP 25 BPS	6,544,071.91	6,617,601.14	0.00	6,617,601.14	13,161,673.05	0.00
28							
INTEREST BEARING CASH TOTALS							
28		6,544,071.91	6,617,601.14	0.00	6,617,601.14	13,161,673.05	0.00

(A) IDENTITY OF PARTY	(B) DESCRIPTION OF ASSET	(C) PURCHASE PRICE	(D) SELLING PRICE	(F) EXPENSES INCURRED	(G) COST OF ASSET	(H) CURR VALUE	(I) GAIN/LOSS
INTEREST BEARING CASH							
928HVNII0	STIP 25 BPS	6,544,071.91	6,617,601.14	0.00	6,617,601.14	13,161,673.05	0.00
28							
INTEREST BEARING CASH TOTALS							
28		6,544,071.91	6,617,601.14	0.00	6,617,601.14	13,161,673.05	0.00

(A) IDENTITY OF PARTY	(B) DESCRIPTION OF ASSET	(C) PURCHASE PRICE	(D) SELLING PRICE	(F) EXPENSES INCURRED	(G) COST OF ASSET	(H) CURR VALUE	(I) GAIN/LOSS
INTEREST BEARING CASH							
928HVNII0	STIP 25 BPS	6,544,071.91	6,617,601.14	0.00	6,617,601.14	13,161,673.05	0.00
28							
INTEREST BEARING CASH TOTALS							
28		6,544,071.91	6,617,601.14	0.00	6,617,601.14	13,161,673.05	0.00

SCHEDULE H, LINE 4J - SCHEDULE OF REPORTABLE TRANSACTIONS - SERIES

BEGINNING NET ASSET VALUE: 248,183,090.30  
5% OF ASSET VALUE: 12,409,154.52

(A) IDENTITY OF PARTY	(B) DESCRIPTION OF ASSET	(C) PURCHASE PRICE	(D) SELLING PRICE	(F) EXPENSES INCURRED	(G) COST OF ASSET #TOTAL	RATE	MAT DATE	(H) CURR VALUE	(I) GAIN/LOSS
-----									

U.S. GOVERNMENT SECURITIES

U.S. GOVERNMENT SECURITIES TOTALS

0	0.00	0	0.00	0.00	0.00	0		0.00	0.00
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SCHEDULE H, LINE 4J - SCHEDULE OF REPORTABLE TRANSACTIONS - SERIES

BEGINNING NET ASSET VALUE: 248,183,090.30  
5% OF ASSET VALUE: 12,409,154.52

(A) IDENTITY OF PARTY	(B) DESCRIPTION OF ASSET	(C) PURCHASE PRICE	(D) SELLING PRICE	(F) EXPENSES INCURRED	(G) COST OF ASSET #TOTAL	(H) CURR VALUE	(I) GAIN/LOSS
REGISTERED INVESTMENT COMPANY							
REGISTERED INVESTMENT COMPANY TOTALS							
0		0.00	0	0.00	0.00	0.00	0.00

REGISTERED INVESTMENT COMPANY

REGISTERED INVESTMENT COMPANY TOTALS

0 0.00 0 0.00 0.00 0 0.00 0.00

SCHEDULE H, LINE 4J - SCHEDULE OF REPORTABLE TRANSACTIONS - SERIES  
BEGINNING NET ASSET VALUE: 248,183,090.30  
5% OF ASSET VALUE: 12,409,154.52

(A) IDENTITY OF PARTY	(B) DESCRIPTION OF ASSET	(C) PURCHASE PRICE	(D) SALE PRICE	(F) EXPENSES INCURRED	(G) COST OF ASSET	(H) CURR VALUE	(I) GAIN/LOSS
INTEREST BEARING CASH							
28	6,544,071.91	31	6,617,601.14	0.00	6,617,601.14	59	13,161,673.05
CERTIFICATES OF DEPOSIT							
0	0.00	0	0.00	0.00	0.00	0	0.00
U.S. GOVERNMENT SECURITIES							
0	0.00	0	0.00	0.00	0.00	0	0.00
CORP. DEBT INSTR. - PREFERRED							
0	0.00	0	0.00	0.00	0.00	0	0.00
CORP. DEBT INSTR. - ALL OTHER							
0	0.00	0	0.00	0.00	0.00	0	0.00
CORPORATE STOCKS - PREFERRED							
0	0.00	0	0.00	0.00	0.00	0	0.00
CORPORATE STOCKS - COMMON							
0	0.00	0	0.00	0.00	0.00	0	0.00
PARTN./JOINT VENTURE INTERESTS							
0	0.00	0	0.00	0.00	0.00	0	0.00
REAL ESTATE-INCOME PRODUCING							
0	0.00	0	0.00	0.00	0.00	0	0.00
REAL ESTATE-NON INC. PRODUCING							
0	0.00	0	0.00	0.00	0.00	0	0.00
LOANS SECURED BY MTGES-RESID.							
0	0.00	0	0.00	0.00	0.00	0	0.00
LOANS SECURED BY MTGES-COM'L							
0	0.00	0	0.00	0.00	0.00	0	0.00
LOANS TO PARTIC. - MORTGAGES							
0	0.00	0	0.00	0.00	0.00	0	0.00
LOANS TO PARTICIPANTS - OTHER							
0	0.00	0	0.00	0.00	0.00	0	0.00
OTHER							
0	0.00	0	0.00	0.00	0.00	0	0.00
COMMON/COLLECTIVE TRUSTS							
0	0.00	0	0.00	0.00	0.00	0	0.00
POOLED SEPARATE ACCOUNTS							
0	0.00	0	0.00	0.00	0.00	0	0.00
103-12 INVESTMENTS							
0	0.00	0	0.00	0.00	0.00	0	0.00
REGISTERED INVESTMENT COMPANY							
0	0.00	0	0.00	0.00	0.00	0	0.00
INSURANCE CO. GENERAL ACCOUNT							
0	0.00	0	0.00	0.00	0.00	0	0.00
** ASSET CATEGORY NOT FOUND **							
0	0.00	0	0.00	0.00	0.00	0	0.00

REPORTABLE TRANSACTION TOTALS  
28 6,544,071.91 31 6,617,601.14 0.00 6,617,601.14 59 13,161,673.05 0.00

NON-REPORTABLE TRANSACTION TOTALS  
13004 35,885,552.57 3054 195,293,527.57 403.21 217,959,871.35 16058 231,179,080.14 -22,666,343.78

SCHEDULE H, LINE 4J - SCHEDULE OF REPORTABLE TRANSACTIONS - SINGLE

BEGINNING NET ASSET VALUE: 248,183,090.30  
5% OF ASSET VALUE: 12,409,154.52

(A) IDENTITY OF PARTY	(B) DESCRIPTION OF ASSET	(C) PURCHASE PRICE	(D) SELLING PRICE	(F) EXPENSES INCURRED	(G) COST OF ASSET	RATE	MAT DATE	(H) CURR VALUE	(I) GAIN/LOSS
-----									

INTEREST BEARING CASH									
-----									

INTEREST BEARING CASH TOTALS									
-----									

0.00	0.00	0.00	0.00	0.00	0.00			0.00	0.00
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SCHEDULE H, LINE 4J - SCHEDULE OF REPORTABLE TRANSACTIONS - SINGLE

BEGINNING NET ASSET VALUE: 248,183,090.30  
5% OF ASSET VALUE: 12,409,154.52

(A) IDENTITY OF PARTY	(B) DESCRIPTION OF ASSET	(C) PURCHASE PRICE	(D) SELLING PRICE	(F) EXPENSES INCURRED	(G) COST OF ASSET	RATE	MAT DATE	(H) CURR VALUE	(I) GAIN/LOSS
-----									

U.S. GOVERNMENT SECURITIES

U.S. GOVERNMENT SECURITIES TOTALS

0.00	0.00	0.00	0.00	0.00	0.00			0.00	0.00
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SCHEDULE H, LINE 4J - SCHEDULE OF REPORTABLE TRANSACTIONS - SINGLE  
BEGINNING NET ASSET VALUE: 248,183,090.30  
5% OF ASSET VALUE: 12,409,154.52

(A) IDENTITY OF PARTY	(B) DESCRIPTION OF ASSET	(C) PURCHASE PRICE	(D) SELLING PRICE	(F) EXPENSES INCURRED	(G) COST OF ASSET	RATE	MAT DATE	(H) CURR VALUE	(I) GAIN/LOSS
REGISTERED INVESTMENT COMPANY									
		0.00		0.00	0.00			0.00	0.00
REGISTERED INVESTMENT COMPANY TOTALS									
		0.00		0.00	0.00			0.00	0.00

REGISTERED INVESTMENT COMPANY

REGISTERED INVESTMENT COMPANY TOTALS

SCHEDULE H, LINE 4J - SCHEDULE OF REPORTABLE TRANSACTIONS - SINGLE

BEGINNING NET ASSET VALUE: 248,183,090.30  
5% OF ASSET VALUE: 12,409,154.52

(A) IDENTITY OF PARTY	(B) DESCRIPTION OF ASSET	(C) PURCHASE PRICE	(D) SELLING PRICE	(F) EXPENSES INCURRED	(G) COST OF ASSET	RATE	(H) CURR VALUE	(I) GAIN/LOSS
INTEREST BEARING CASH								
		0.00	0.00	0.00	0.00		0.00	0.00
CERTIFICATES OF DEPOSIT								
		0.00	0.00	0.00	0.00		0.00	0.00
U.S. GOVERNMENT SECURITIES								
		0.00	0.00	0.00	0.00		0.00	0.00
CORP. DEBT INSTR. - PREFERRED								
		0.00	0.00	0.00	0.00		0.00	0.00
CORP. DEBT INSTR. - ALL OTHER								
		0.00	0.00	0.00	0.00		0.00	0.00
CORPORATE STOCKS - PREFERRED								
		0.00	0.00	0.00	0.00		0.00	0.00
CORPORATE STOCKS - COMMON								
		0.00	0.00	0.00	0.00		0.00	0.00
PARTN./JOINT VENTURE INTERESTS								
		0.00	0.00	0.00	0.00		0.00	0.00
REAL ESTATE-INCOME PRODUCING								
		0.00	0.00	0.00	0.00		0.00	0.00
REAL ESTATE-NON INC. PRODUCING								
		0.00	0.00	0.00	0.00		0.00	0.00
LOANS SECURED BY MTGES-RESID.								
		0.00	0.00	0.00	0.00		0.00	0.00
LOANS SECURED BY MTGES-COM'L								
		0.00	0.00	0.00	0.00		0.00	0.00
LOANS TO PARTIC. - MORTGAGES								
		0.00	0.00	0.00	0.00		0.00	0.00
LOANS TO PARTICIPANTS - OTHER								
		0.00	0.00	0.00	0.00		0.00	0.00
OTHER								
		0.00	0.00	0.00	0.00		0.00	0.00
COMMON/COLLECTIVE TRUSTS								
		0.00	0.00	0.00	0.00		0.00	0.00
POOLED SEPARATE ACCOUNTS								
		0.00	0.00	0.00	0.00		0.00	0.00
103-12 INVESTMENTS								
		0.00	0.00	0.00	0.00		0.00	0.00
REGISTERED INVESTMENT COMPANY								
		0.00	0.00	0.00	0.00		0.00	0.00
INSURANCE CO. GENERAL ACCOUNT								
		0.00	0.00	0.00	0.00		0.00	0.00
** ASSET CATEGORY NOT FOUND **								
		0.00	0.00	0.00	0.00		0.00	0.00
REPORTABLE TRANSACTION TOTALS								
		0.00	0.00	0.00	0.00		0.00	0.00



SCHEDULE H, LINE 4J - SCHEDULE OF REPORTABLE TRANSACTIONS - SINGLE  
BEGINNING NET ASSET VALUE: 248,183,090.30  
5% OF ASSET VALUE: 12,409,154.52

(A) IDENTITY OF PARTY	(B) DESCRIPTION OF ASSET	(C) PURCHASE PRICE	(D) SELLING PRICE	(F) EXPENSES INCURRED	(G) COST OF ASSET	RATE	MAT DATE	(H) CURR VALUE	(I) GAIN/LOSS
-----									

U.S. GOVERNMENT SECURITIES

U.S. GOVERNMENT SECURITIES TOTALS

0.00	0.00	0.00	0.00	0.00	0.00			0.00	0.00
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SCHEDULE H, LINE 4J - SCHEDULE OF REPORTABLE TRANSACTIONS - SINGLE  
BEGINNING NET ASSET VALUE: 248,183,090.30  
5% OF ASSET VALUE: 12,409,154.52

(A) IDENTITY OF PARTY	(B) DESCRIPTION OF ASSET	(C) PURCHASE PRICE	(D) SELLING PRICE	(F) EXPENSES INCURRED	(G) COST OF ASSET	RATE	MAT DATE	(H) CURR VALUE	(I) GAIN/LOSS
REGISTERED INVESTMENT COMPANY									
		0.00		0.00	0.00			0.00	0.00
REGISTERED INVESTMENT COMPANY TOTALS									
		0.00		0.00	0.00			0.00	0.00

REGISTERED INVESTMENT COMPANY

REGISTERED INVESTMENT COMPANY TOTALS

0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00

SCHEDULE H, LINE 4J - SCHEDULE OF REPORTABLE TRANSACTIONS - SINGLE

BEGINNING NET ASSET VALUE: 248,183,090.30  
5% OF ASSET VALUE: 12,409,154.52

(A) IDENTITY OF PARTY	(B) DESCRIPTION OF ASSET	(C) PURCHASE PRICE	(D) SELLING PRICE	(F) EXPENSES INCURRED	(G) COST OF ASSET	RATE	(H) CURR VALUE	(I) GAIN/LOSS
INTEREST BEARING CASH								
		0.00	0.00	0.00	0.00		0.00	0.00
CERTIFICATES OF DEPOSIT								
		0.00	0.00	0.00	0.00		0.00	0.00
U.S. GOVERNMENT SECURITIES								
		0.00	0.00	0.00	0.00		0.00	0.00
CORP. DEBT INSTR. - PREFERRED								
		0.00	0.00	0.00	0.00		0.00	0.00
CORP. DEBT INSTR. - ALL OTHER								
		0.00	0.00	0.00	0.00		0.00	0.00
CORPORATE STOCKS - PREFERRED								
		0.00	0.00	0.00	0.00		0.00	0.00
CORPORATE STOCKS - COMMON								
		0.00	0.00	0.00	0.00		0.00	0.00
PARTN./JOINT VENTURE INTERESTS								
		0.00	0.00	0.00	0.00		0.00	0.00
REAL ESTATE-INCOME PRODUCING								
		0.00	0.00	0.00	0.00		0.00	0.00
REAL ESTATE-NON INC. PRODUCING								
		0.00	0.00	0.00	0.00		0.00	0.00
LOANS SECURED BY MTGES-RESID.								
		0.00	0.00	0.00	0.00		0.00	0.00
LOANS SECURED BY MTGES-COM'L								
		0.00	0.00	0.00	0.00		0.00	0.00
LOANS TO PARTIC. - MORTGAGES								
		0.00	0.00	0.00	0.00		0.00	0.00
LOANS TO PARTICIPANTS - OTHER								
		0.00	0.00	0.00	0.00		0.00	0.00
OTHER								
		0.00	0.00	0.00	0.00		0.00	0.00
COMMON/COLLECTIVE TRUSTS								
		0.00	0.00	0.00	0.00		0.00	0.00
POOLED SEPARATE ACCOUNTS								
		0.00	0.00	0.00	0.00		0.00	0.00
103-12 INVESTMENTS								
		0.00	0.00	0.00	0.00		0.00	0.00
REGISTERED INVESTMENT COMPANY								
		0.00	0.00	0.00	0.00		0.00	0.00
INSURANCE CO. GENERAL ACCOUNT								
		0.00	0.00	0.00	0.00		0.00	0.00
** ASSET CATEGORY NOT FOUND **								
		0.00	0.00	0.00	0.00		0.00	0.00
REPORTABLE TRANSACTION TOTALS								
		0.00	0.00	0.00	0.00		0.00	0.00