

<p style="text-align: center;"><b>Form 5500</b></p> <p style="font-size: small;">Department of the Treasury Internal Revenue Service</p> <hr/> <p style="font-size: small;">Department of Labor Employee Benefits Security Administration</p> <hr/> <p style="font-size: x-small;">Pension Benefit Guaranty Corporation</p>	<p><b>Annual Return/Report of Employee Benefit Plan</b></p> <p style="font-size: small;">This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6057(b) and 6058(a) of the Internal Revenue Code (the Code).</p> <p>▶ <b>Complete all entries in accordance with the instructions to the Form 5500.</b></p>	<p style="font-size: x-small;">OMB Nos. 1210-0110 1210-0089</p> <hr/> <p style="font-size: large; font-weight: bold;">2024</p> <hr/> <p style="font-weight: bold;">This Form is Open to Public Inspection</p>
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**Part I Annual Report Identification Information**  
 For calendar plan year 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 (Filers checking this box must provide participating employer information in accordance with the form instructions.)

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 (less than 12 months)

**C** If the plan is a collectively-bargained plan, check here. . . . . ▶

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

special extension (enter description)

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

**Part II Basic Plan Information—enter all requested information**

<p><b>1a</b> Name of plan <u>RHUMBLINE REIT INDEX FUND LLC</u></p>	<p><b>1b</b> Three-digit plan number (PN) ▶ <u>001</u></p>
<p><b>2a</b> Plan sponsor's name (employer, if for a single-employer plan) Mailing address (include room, apt., suite no. and street, or P.O. Box) City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions) <u>RHUMBLINE ADVISERS CORP.</u> <u>C/O STATE STREET BANK AND TRUST CO.</u>  <u>2323 GRAND BLVD. 5TH FLOOR</u> <u>KANSAS CITY, MO 64108</u></p>	<p><b>1c</b> Effective date of plan</p> <hr/> <p><b>2b</b> Employer Identification Number (EIN) <u>83-3969290</u></p> <hr/> <p><b>2c</b> Plan Sponsor's telephone number <u>816-871-4100</u></p> <hr/> <p><b>2d</b> Business code (see instructions)</p>

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

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

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

<b>3a</b> Plan administrator's name and address <input checked="" type="checkbox"/> Same as Plan Sponsor	<b>3b</b> Administrator's EIN  <b>3c</b> Administrator's telephone number  <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 REIT INDEX FUND LLC</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>83-3969290</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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**(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)

PKFOD HOLDINGS LLC

33-1351771

(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 99	NONE	10000	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

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	8705	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"/>

**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	8705
(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 REIT INDEX FUND LLC  83-3969290	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>	<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 <u>RHUMBLINE REIT INDEX FUND LLC</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>83-3969290</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)

<b>Part II</b>		<b>Information on Participating Plans (to be completed by DFEs, other than DCGs)</b>	
(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	LOUISIANA CARPENTERS SUPPLEMENTAL RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor	TRUSTEES LOUISIANA CARPENTERS SUPPLEMENTAL RETIREMENT PLAN	<b>c</b> EIN-PN 72-1215190-001
<b>a</b>	Plan name	CITY OF TAUNTON CONTRIBUTORY RETIREMENT SYSTEM	
<b>b</b>	Name of plan sponsor	CITY OF TAUNTON	<b>c</b> EIN-PN 04-6001320-
<b>a</b>	Plan name	TEAMSTERS LOCAL 819 PENSION FUND	
<b>b</b>	Name of plan sponsor	TEAMSTERS LOCAL 819 PENSION FUND	<b>c</b> EIN-PN 13-2578837-001
<b>a</b>	Plan name	TEAMSTERS LOCAL UNION 491 HEALTH AND WELFARE FUND	
<b>b</b>	Name of plan sponsor	BOARD OF TRUSTEES TEAMSTERS LOCAL UNION 491 HEALTH AND WELFARE FUND	<b>c</b> EIN-PN 25-1011380-501
<b>a</b>	Plan name	SOUTHWESTERN PENNSYLVANIA AND WESTERN MARYLAND AREA TEAMSTERS AND EMPLOYERS PENSION FUND	
<b>b</b>	Name of plan sponsor	BD OF TRUST SW. PA & W. MD. AREA TEAMSTERS & EMPLOYERS PENSION FUND	<b>c</b> EIN-PN 25-1046087-001
<b>a</b>	Plan name	MIRAMAR FIREFIGHTERS RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor	MIRAMAR FIREFIGHTERS	<b>c</b> EIN-PN 27-3772862-
<b>a</b>	Plan name	TEAMSTERS UNION NO. 142 HEALTH & WELFARE TRUST FUND	
<b>b</b>	Name of plan sponsor	TRUSTEES OF TEAMSTERS UNION NO. 142 HEALTH AND WELFARE TRUST FUND	<b>c</b> EIN-PN 35-0918199-501
<b>a</b>	Plan name	LOCAL 731 I.B. OF T. HEALTH AND WELFARE FUND	
<b>b</b>	Name of plan sponsor	LOCAL 731 I.B. OF T. HEALTH AND WELFARE FUND	<b>c</b> EIN-PN 36-2392752-501
<b>a</b>	Plan name	FARGO-MOORHEAD HOME BUILDERS HEALTH PLAN AND TRUST	
<b>b</b>	Name of plan sponsor	FARGO-MOORHEAD HOME BUILDERS HEALTH PLAN AND TRUST	<b>c</b> EIN-PN 36-3729320-501
<b>a</b>	Plan name	HEALTH AND WELFARE FUND OF THE EXCAVATING GRADING	
<b>b</b>	Name of plan sponsor	EXCAVATING, GRADING AND ASPHALT CRAFT 731 HEALTH & WELFARE FUND	<b>c</b> EIN-PN 36-6073848-501
<b>a</b>	Plan name	DISTRICT NO. 9, INTERNATIONAL ASSOCIATION OF MACHINISTS AND AEROSPACE WORKERS WELFARE TRUST	
<b>b</b>	Name of plan sponsor	TRUSTEES OF DIST. NO 9 INT'L ASSOC OF MACHINISTS WELFARE TRUST	<b>c</b> EIN-PN 43-0648504-501
<b>a</b>	Plan name	IL TEAMSTERS JOINT COUNCIL NO. 25 AND EMPLOYERS APPRENTICESHIP & TRAINING FUND	
<b>b</b>	Name of plan sponsor	IL TEAMSTERS JOINT COUNCIL NO. 25	<b>c</b> EIN-PN 43-1968605-

**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	TEAMSTERS NEGOTIATED PENSION PLAN	<b>c</b>	EIN-PN	
<b>b</b>	Name of plan sponsor	TEAMSTERS NEGOTIATED PENSION PLAN	<b>c</b>	EIN-PN	43-6196083-001
<b>a</b>	Plan name	LOUISIANA CARPENTERS PENSION PLAN			
<b>b</b>	Name of plan sponsor	BOARD OF TRUSTEES - LOUISIANA CARPENTERS PENSION PLAN	<b>c</b>	EIN-PN	51-0163535-001
<b>a</b>	Plan name	TEAMSTERS UNION NO 142 PENSION TRUST FUND			
<b>b</b>	Name of plan sponsor	TRUSTEES OF TEAMSTERS UNION NO 142 PENSION FUND	<b>c</b>	EIN-PN	51-6051034-001
<b>a</b>	Plan name	LEGAL COUNSEL FOR THE ELDERLY			
<b>b</b>	Name of plan sponsor	LEGAL COUNSEL FOR THE ELDERLY	<b>c</b>	EIN-PN	52-1194741-
<b>a</b>	Plan name	AARP SERVICES, INC.			
<b>b</b>	Name of plan sponsor	AARP SERVICES, INC.	<b>c</b>	EIN-PN	52-2141065-
<b>a</b>	Plan name	JOURNEYMEN & APPRENTICES OF LOCAL 198 PENSION FUND			
<b>b</b>	Name of plan sponsor	JOURNEYMEN & APPRENTICES OF LOCAL 198 PENSION FUND	<b>c</b>	EIN-PN	72-6029984-001
<b>a</b>	Plan name	GULF COAST CARPENTERS AND MILLWRIGHTS HEALTH TRUST			
<b>b</b>	Name of plan sponsor	TRUSTEES OF GULF COAST CARPENTERS AND MILLWRIGHTS HEALTH TRUST	<b>c</b>	EIN-PN	74-6075997-501
<b>a</b>	Plan name	SAINT LOUIS LABOR HEALTHCARE NETWORK			
<b>b</b>	Name of plan sponsor	SAINT LOUIS LABOR HEALTHCARE NETWORK	<b>c</b>	EIN-PN	80-0346232-501
<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 REIT INDEX FUND LLC</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>83-3969290</b>

<b>Part I</b>	<b>Asset and Liability Statement</b>
---------------	--------------------------------------

**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
<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>	325519
<b>c</b> General investments:		
<b>(1)</b> Interest-bearing cash (include money market accounts & certificates of deposit) .....	<b>1c(1)</b>	234948
<b>(2)</b> U.S. Government securities .....	<b>1c(2)</b>	
<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>	75999807
<b>(7)</b> Loans (other than to participants) .....	<b>1c(7)</b>	
<b>(8)</b> Participant loans .....	<b>1c(8)</b>	
<b>(9)</b> Value of interest in common/collective trusts .....	<b>1c(9)</b>	
<b>(10)</b> Value of interest in pooled separate accounts .....	<b>1c(10)</b>	
<b>(11)</b> Value of interest in master trust investment accounts .....	<b>1c(11)</b>	
<b>(12)</b> Value of interest in 103-12 investment entities .....	<b>1c(12)</b>	
<b>(13)</b> Value of interest in registered investment companies (e.g., mutual funds) .....	<b>1c(13)</b>	
<b>(14)</b> Value of funds held in insurance company general account (unallocated contracts) .....	<b>1c(14)</b>	
<b>(15)</b> Other .....	<b>1c(15)</b>	

1d Employer-related investments:		(a) Beginning of Year	(b) End of Year
(1) Employer securities.....	1d(1)		
(2) Employer real property.....	1d(2)		
e Buildings and other property used in plan operation.....	1e		
f Total assets (add all amounts in lines 1a through 1e).....	1f	69408651	76560274
<b>Liabilities</b>			
g Benefit claims payable.....	1g		
h Operating payables.....	1h		
i Acquisition indebtedness.....	1i		
j Other liabilities.....	1j	16172	15095
k Total liabilities (add all amounts in lines 1g through 1j).....	1k	16172	15095
<b>Net Assets</b>			
l Net assets (subtract line 1k from line 1f).....	1l	69392479	76545179

**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: (A) Employers.....	2a(1)(A)		
(B) Participants.....	2a(1)(B)		
(C) Others (including rollovers).....	2a(1)(C)		
(2) Noncash contributions.....	2a(2)		
(3) Total contributions. Add lines 2a(1)(A), (B), (C), and line 2a(2).....	2a(3)		0
<b>b Earnings on investments:</b>			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit).....	2b(1)(A)	4891	
(B) U.S. Government securities.....	2b(1)(B)		
(C) Corporate debt instruments.....	2b(1)(C)		
(D) Loans (other than to participants).....	2b(1)(D)		
(E) Participant loans.....	2b(1)(E)		
(F) Other.....	2b(1)(F)		
(G) Total interest. Add lines 2b(1)(A) through (F).....	2b(1)(G)		4891
(2) Dividends:			
(A) Preferred stock.....	2b(2)(A)		
(B) Common stock.....	2b(2)(B)	2946648	
(C) Registered investment company shares (e.g. mutual funds).....	2b(2)(C)		
(D) Total dividends. Add lines 2b(2)(A), (B), and (C).....	2b(2)(D)		2946648
(3) Rents.....	2b(3)		
(4) Net gain (loss) on sale of assets:			
(A) Aggregate proceeds.....	2b(4)(A)	3050535	
(B) Aggregate carrying amount (see instructions).....	2b(4)(B)	3012439	
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result.....	2b(4)(C)		38096
(5) Unrealized appreciation (depreciation) of assets:			
(A) Real estate.....	2b(5)(A)		
(B) Other.....	2b(5)(B)	-44734	
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B).....	2b(5)(C)		-44734

		(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>		2944901

**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>	17293	
(6) Bank or trust company trustee/custodial fees .....	<b>2i(6)</b>	1921	
(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>	332	
(12) Total administrative expenses. Add lines <b>2i(1)</b> through <b>(11)</b> .....	<b>2i(12)</b>		19546
<b>j</b> Total expenses. Add all <b>expense</b> amounts in column (b) and enter total.....	<b>2j</b>		19546

**Net Income and Reconciliation**

<b>k</b> Net income (loss). Subtract line <b>2j</b> from line <b>2d</b> .....	<b>2k</b>		2925355
<b>l</b> Transfers of assets:			
(1) To this plan.....	<b>2l(1)</b>		6284000
(2) From this plan .....	<b>2l(2)</b>		2056655

**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 REIT Index Fund LLC**

Financial Statements  
and Supplementary Information

December 31, 2024

# RhumbLine REIT Index Fund LLC

Financial Statements  
and Supplementary Information  
December 31, 2024

<b>TABLE OF CONTENTS</b>	<b>Page</b>
Independent Auditor's Report	1
<b>FINANCIAL STATEMENTS</b>	
Statement of Assets and Liabilities	4
Condensed Schedule of Investments	5
Statement of Operations	6
Statement of Changes in Net Assets	7
Notes to Financial Statements	8
<b>SUPPLEMENTARY INFORMATION</b>	
Schedule of Investment Purchases and Sales	13



## Independent Auditor's Report

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Directors and Participants  
RhumbLine REIT Index Fund LLC:

### ***Opinion***

We have audited the financial statements of the RhumbLine REIT Index Fund LLC (the "Fund"), 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 Fund 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 Fund 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 Fund'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 Fund's internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about the Fund's ability to continue as a going concern for a reasonable period of time.

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

### ***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 REIT Index Fund LLC

### Statement of Assets and Liabilities December 31, 2024

#### **ASSETS**

Investments, at fair value (cost \$71,958,787)	\$ 75,999,807
Cash and cash equivalents	234,948
Dividends and interest receivable	<u>325,519</u>

Total Assets 76,560,274

#### **LIABILITIES**

Accounts payable and accrued liabilities	<u>15,095</u>
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#### **NET ASSETS**

\$ 76,545,179

Units Outstanding 6,119,286

#### **Net Asset Value Per Unit**

\$ 12.51

*See accompanying notes to financial statements*

## RhumbLine REIT Index Fund LLC

Condensed Schedule of Investments  
December 31, 2024

Number of Shares	Description	% of Net Assets	Fair Value
<b>Investments in Securities</b>			
<b><u>Real Estate Investment Trusts - United States of America</u></b>			
	Financials	0.10%	\$ 79,113
	Real Estate		
52,501	Prologis Inc <sup>1</sup>	7.25	5,549,356
5,476	Equinix Inc <sup>1</sup>	6.75	5,163,266
26,525	American Tower Corp <sup>1</sup>	6.36	4,864,950
35,012	Welltower Inc <sup>1</sup>	5.76	4,412,562
	Other	73.07	<u>55,930,560</u>
	<b>Total Real Estate Investment Trusts (cost \$71,958,787)</b>	<b>99.29%</b>	<b><u>\$ 75,999,807</u></b>
	<b>Total Investments in Securities (cost \$71,958,787)</b>	<b>99.29%</b>	<b><u>\$ 75,999,807</u></b>

<sup>1</sup> Denotes greater than 5% investment  
See accompanying notes to financial statements

## RhumbLine REIT Index Fund LLC

### Statement of Operations Year Ended December 31, 2024

<b>INCOME</b>	
Interest	\$ 4,891
Dividends	<u>2,946,648</u>
Total Income	<u>2,951,539</u>
<b>EXPENSES</b>	
Custody	1,921
Professional	17,293
Filing fees	<u>332</u>
Total Expenses	<u>19,546</u>
<b>NET INVESTMENT INCOME</b>	<u>2,931,993</u>
<b>NET REALIZED AND UNREALIZED LOSS ON INVESTMENTS</b>	
Net realized loss	(434,248)
Net change in unrealized appreciation	<u>427,610</u>
Net realized and unrealized loss	<u>(6,638)</u>
<b>NET INCREASE IN NET ASSETS RESULTING FROM OPERATIONS</b>	<u>\$ 2,925,355</u>

*See accompanying notes to financial statements*

**RhumbLine REIT Index Fund LLC**

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

**OPERATIONS**

Net investment income	\$ 2,931,993
Net realized loss	(434,248)
Net change in unrealized appreciation	<u>427,610</u>

Net increase in net assets resulting from operations 2,925,355

**NET INCREASE IN NET ASSETS FROM PARTICIPANT TRANSACTIONS** 4,227,345

**NET INCREASE IN NET ASSETS** 7,152,700

**NET ASSETS**

Beginning of year 69,392,479

End of year \$ 76,545,179

*See accompanying notes to financial statements*

## **RhumbLine REIT Index Fund LLC**

Notes to Financial Statements  
December 31, 2024

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

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

The RhumbLine REIT Index Fund LLC (the “Fund”) was established on August 6, 2019. The investment objective of the Fund is to seek to track the return and risk characteristics of the FTSE NAREIT U.S. All Equity Index. State Street Bank and Trust Company (“State Street Bank”) is the Custodian and Recordkeeper. RhumbLine Advisers Limited Partnership is the Fund’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 Fund 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 Fund 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 disclosures 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 on investments are reported on the identified cost basis.

## RhumbLine REIT Index Fund LLC

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. Net investment income is allocated ratably on the valuation dates among all participants. No distributions are made to participants in the Fund 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 Fund 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 Fund is determined daily ("valuation date"). Issuances and redemptions of the Fund 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 Fund is not directly subject to income taxes under the provisions of the Internal Revenue Code and applicable state laws. Therefore, taxable income or loss is reported to the individual members for inclusion in their respective tax returns and no provision for federal and state income taxes has been included in the accompanying financial statements.

### 2. Expenses

Under the Operating Agreement, the Fund may pay certain expenses for services received during the period, which include custodian and professional fees. State Street Bank is paid a custody fee by the Fund based upon the Fund's average net assets. The Investment Manager's fee is not charged to the Fund, but is paid directly by the participants in the Fund. 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 REIT Index Fund LLC

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>11.92</u>
Net investment income		0.59
Net realized and unrealized loss		<u>(0.00)</u>
Net increase from investment operations		<u>0.59</u>
Net asset value, end of year		<u>\$ 12.51</u>
 Total return		 4.95 %
Ratio to average net assets:		
Net investment income		4.06 %
Expenses		0.03 %

### 4. Participant Unit Transactions

	<u>Units</u>	<u>Amounts</u>
Proceeds from sale of units	462,003	\$ 6,284,000
Cost of units redeemed	<u>(162,796)</u>	<u>(2,056,655)</u>
Net increase from participant transactions	<u>299,207</u>	<u>\$ 4,227,345</u>

The minimum initial investment that will be accepted from a new unit holder is \$1,000,000, with the Investment Manager having discretion to accept lesser amounts. There is no minimum for additional capital contribution amounts from an existing unit holder. Withdrawals of at least \$500,000, or lesser amount if approved by the Investment Manager, can be made provided at least five business day's 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 Fund can access at the measurement date.

## RhumbLine REIT Index Fund LLC

Notes to Financial Statements  
December 31, 2024

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

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.

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 period ended December 31, 2024.

#### ***Equity Securities (Real Estate Investment Trusts)***

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.

	Quoted Prices in Active Markets for Identical Assets (Level 1)	<u>Fair Value Measurement Using</u>		Total
		Significant Other Observable Inputs (Level 2)	Significant Unobservable Inputs (Level 3)	
Real estate investment trusts	<u>\$75,999,807</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$75,999,807</u>
Total	<u>\$75,999,807</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$75,999,807</u>

### 6. Risk Factors

The Fund 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.

## **RhumbLine REIT Index Fund LLC**

Notes to Financial Statements  
December 31, 2024

### **7. Indemnifications**

In the normal course of business, the Fund enters into contracts that contain a variety of representations and warranties that provide indemnifications under certain circumstances. The Fund's maximum exposure under these arrangements is unknown, as this would involve future claims that may be made against the Fund that have not yet occurred. The Fund 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 the financial statements were available to be issued. There were no subsequent events that require adjustment to or disclosure in the financial statements.

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# **RhumbLine REIT Index Fund LLC**

Supplementary Information

December 31, 2024

## RhumbLine REIT Index Fund LLC

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

<b>Purchases</b>	
<b>Investment Type</b>	<b>Cost</b>
Real estate investment trusts	<u>\$ 10,201,997</u>
Total Investments Purchased	<u><u>\$ 10,201,997</u></u>

<b>Sales</b>			
<b>Investment Type</b>	<b>Proceeds</b>	<b>Cost</b>	<b>Realized Loss</b>
Real estate investment trusts	<u>\$ 3,050,535</u>	<u>\$ 3,484,783</u>	<u>\$ (434,248)</u>
Total Investments Sold	<u><u>\$ 3,050,535</u></u>	<u><u>\$ 3,484,783</u></u>	<u><u>\$ (434,248)</u></u>

*See independent auditor's report*

(A)	(B) IDENTITY OF ISSUER	(C) DESCRIPTION OF INVESTMENT SHARES/PAR	(D) COST	RATE MAT DATE	(E) CURRENT VALUE
	INTEREST BEARING CASH				
	929MMULI2 SS INST US GOV MM ADMIN SALXX	SS INST US GOV MM ADMIN CLASS	1.000	12/31/2050	
			234,948.01	234,948.01	234,948.01
			234,948.01	234,948.01	234,948.01

(A)	(B) IDENTITY OF ISSUER	(C) DESCRIPTION OF INVESTMENT SHARES/PAR	RATE MAT DATE (D) COST	(E) CURRENT VALUE
CORPORATE STOCKS - COMMON				
	004239109 ACADIA REALTY TRUST	REIT USD.001	151,930.69	159,528.48
	008492100 AGREE REALTY CORP	REIT USD.0001	408,609.53	427,490.60
	014491104 ALEXANDER + BALDWIN INC	REIT	82,229.23	73,283.94
	014752109 ALEXANDER S INC	REIT USD1.0	39,710.04	24,607.38
	015271109 ALEXANDRIA REAL ESTATE EQUIT	REIT USD.01	1,408,228.45	959,599.35
	02083X103 ALPINE INCOME PROPERTY TRUST	REIT USD.01	708.000	11,887.32
	024013104 AMERICAN ASSETS TRUST INC	REIT USD.01	108,939.99	71,689.80
	02665T306 AMERICAN HOMES 4 RENT A	REIT USD.01	510,581.89	717,416.24
	03027X100 AMERICAN TOWER CORP	REIT USD.01	5,794,644.04	4,864,950.25
	03064D108 AMERICOLD REALTY TRUST INC	REIT USD.01	533,580.75	345,267.60
	03748R747 APARTMENT INVT + MGMT CO A	REIT USD.01	294,461.52	71,256.51
	03784Y200 APPLE HOSPITALITY REIT INC	REIT	193,049.87	197,216.80
	04208T108 ARMADA HOFFLER PROPERTIES IN	REIT USD.01	71,029.64	45,451.89
	053484101 AVALONBAY COMMUNITIES INC	REIT USD.01	1,565,479.75	1,772,298.29
	055645303 BRT APARTMENTS CORP	REIT USD3.0	8,657.20	11,467.08
	101121101 EXP INC	REIT USD.01	945,861.01	663,142.48
	10482B101 BRAEMAR HOTELS + RESORTS INC	REIT USD.01	16,667.61	11,193.00
	105368203 BRANDYWINE REALTY TRUST	REIT USD.01	125,803.83	53,911.20
	11120U105 BRIXWOK PROPERTY GROUP INC	REIT USD.01	326,642.77	473,669.76
	11135E203 BROADSTONE NET LEASE INC	REIT USD.00025	226,672.65	168,607.66

(A)	(B) IDENTITY OF ISSUER	(C) DESCRIPTION OF INVESTMENT SHARES/PAR	RATE MAT DATE (D) COST	(E) CURRENT VALUE
	124830878 CBL + ASSOCIATES PROPERTIES	REIT USD.01		
		1,232.000	32,480.19	36,233.12
	133131102 CAMDEN PROPERTY TRUST	REIT USD.01		
		5,876.000	616,723.36	681,851.04
	141741107 CARETRUST REIT INC	REIT USD.01		
		10,465.000	252,718.23	283,078.25
	146280508 SILA REALTY TRUST INC	COMMON STOCK USD.01		
		3,253.000	82,072.49	79,112.96
	152021107 CENTERSPACE	REIT		
		933.000	67,260.52	61,717.95
	162081102 CHATHAM LODGING TRUST	REIT USD.01		
		2,720.000	44,112.06	24,344.00
	178587101 CITY OFFICE REIT INC	REIT USD.01		
		2,200.000	28,180.60	12,144.00
	20369C106 COMMUNITY HEALTHCARE TRUST I	REIT USD.01		
		1,547.000	64,225.50	29,717.87
	220021108 COPT DEFENSE PROPERTIES	REIT USD.01		
		6,345.000	177,688.14	196,377.75
	222795502 COUSINS PROPERTIES INC	REIT USD1.0		
		9,138.000	310,611.23	279,988.32
	22822V101 CROWN CASTLE INC	REIT USD.01		
		24,692.000	3,333,452.97	2,241,045.92
	22948Q101 CTO REALTY GROWTH INC	REIT USD.01		
		1,626.000	31,149.57	32,048.46
	229663109 CUBESMART	REIT USD.01		
		12,705.000	414,936.15	544,409.25
	23128Q101 CURELINE PROPERTIES CORP	REIT USD.01		
		5,353.000	117,230.70	124,296.66
	252784301 DIAMONDROCK HOSPITALITY CO	REIT USD.01		
		11,660.000	108,345.31	105,289.80
	253868103 DIGITAL REALTY TRUST INC	REIT USD.01		
		18,821.000	2,411,834.76	3,337,527.93
	25525P107 DIVERSIFIED HEALTHCARE TRUST	REIT USD.01		
		12,423.000	80,877.48	28,572.90
	25960P109 DOUGLAS EMMETT INC	REIT USD.01		
		9,101.000	328,434.86	168,914.56
	26884U109 EPR PROPERTIES	REIT USD.01		
		4,242.000	248,110.75	187,835.76
	27616P103 EASTERLY GOVERNMENT PROPERTI	REIT USD.01		
		5,515.000	113,512.06	62,650.40
	277276101 EASTGROUP PROPERTIES INC	REIT		
		2,772.000	368,658.87	444,878.28
	292104106 EMPIRE STATE REALTY TRUST A	REIT USD.01		
		7,625.000	95,778.41	78,690.00

(A)	(B) IDENTITY OF ISSUER	(C) DESCRIPTION OF INVESTMENT SHARES/PAR	(D) COST	RATE MAT DATE	(E) CURRENT VALUE
	29444U700 EQUINIX INC	REIT USD.001			
	29472R108 EQUITY LIFESTYLE PROPERTIES	REIT USD.01	5,476.000	3,239,472.07	5,163,265.64
	29476L107 EQUITY RESIDENTIAL	REIT USD.01	10,720.000	708,863.14	713,952.00
	29670E107 ESSENTIAL PROPERTIES REALTY	REIT USD.01	21,452.000	1,578,332.77	1,539,395.52
	29717R105 ESSEX PROPERTY TRUST INC	REIT USD.0001	9,888.000	226,441.22	309,296.64
	30225T102 EXTRA SPACE STORAGE INC	REIT USD.01	3,626.000	1,006,714.46	1,035,005.44
	31154R109 FARMLAND PARTNERS INC	REIT USD.01	11,878.000	1,197,496.77	1,776,948.80
	31374S101 FEDERAL REALTY INVS TRUST	REIT USD.01	2,479.000	21,311.38	29,153.04
	32054K103 FIRST INDUSTRIAL REALTY TR	REIT USD.01	4,794.000	538,185.46	536,688.30
	35086T109 FOUR CORNERS PROPERTY TRUST	REIT USD.0001	7,498.000	302,141.41	375,874.74
	35922N100 FRONTVIEW REIT INC	REIT USD.01	5,437.000	145,672.19	147,560.18
	36467J108 GAMING AND LEISURE PROPERTIE	REIT	805.000	14,679.18	14,594.65
	374297109 GETTY REALTY CORP	REIT USD.01	14,790.000	572,821.13	712,286.40
	376536108 GLADSTONE COMMERCIAL CORP	REIT USD.001	2,804.000	89,256.79	84,484.52
	376549101 GLADSTONE LAND CORP	REIT USD.001	2,281.000	49,280.70	37,043.44
	379378201 GLOBAL NET LEASE INC	REIT USD.01	1,887.000	26,395.01	20,473.95
	37954A204 GLOBAL MEDICAL REIT INC	REIT	11,415.000	191,662.50	83,329.50
	39818P799 PEAKSTONE REALTY TRUST	REIT	3,435.000	39,199.50	26,518.20
	398182303 AMERICAN HEALTHCARE REIT INC	REIT USD.01	2,053.000	67,973.28	22,726.71
	42226K105 HEALTHCARE REALTY TRUST INC	REIT USD.01	8,569.000	192,209.27	243,530.98
	42250P103 HEALTHPEAK PROPERTIES INC	REIT USD1.0	20,053.000	542,847.32	339,898.35
	431284108 HIGHWOODS PROPERTIES INC	REIT USD.01	39,673.000	1,109,082.41	804,171.71
			5,921.000	241,040.68	181,064.18

(A)	(B) IDENTITY OF ISSUER	(C) DESCRIPTION OF INVESTMENT SHARES/PAR	RATE MAT DATE (D) COST	(E) CURRENT VALUE
	44107P104	HOST HOTELS + RESORTS INC REIT USD.01		
		39,578.000	618,695.87	693,406.56
	444097109	HUDSON PACIFIC PROPERTIES IN REIT USD.01		
		7,779.000	222,606.26	23,570.37
	45378A106	INDEPENDENCE REALTY TRUST IN REIT USD.01		
		12,737.000	237,959.51	252,702.08
	456237106	INDUSTRIAL LOGISTICS PROPERT REIT USD.01		
		3,696.000	75,219.23	13,490.40
	45781V101	INNOVATIVE INDUSTRIAL PROPER REIT USD.001		
		1,588.000	177,765.96	105,824.32
	46124J201	INVENTRUST PROPERTIES CORP REIT USD.001		
		4,368.000	119,804.16	131,607.84
	46187W107	INVITATION HOMES INC REIT USD.01		
		34,753.000	1,013,767.41	1,111,053.41
	46284V101	IRON MOUNTAIN INC REIT USD.01		
		16,535.000	599,915.89	1,737,993.85
	46590V100	JBG SMITH PROPERTIES REIT USD.01		
		4,596.000	147,821.61	70,640.52
	49427F108	KILROY REALTY CORP REIT USD.01		
		6,636.000	427,484.18	268,426.20
	49446R109	KIMCO REALTY CORP REIT USD.01		
		37,408.000	703,735.52	876,469.44
	49803T300	KITE REALTY GROUP TRUST REIT USD.01		
		12,238.000	221,336.66	308,887.12
	502175102	LTC PROPERTIES INC REIT USD.01		
		2,457.000	102,926.69	84,889.35
	512816109	LAMAR ADVERTISING CO A REIT USD.001		
		4,945.000	402,337.48	602,004.30
	529043101	LXP INDUSTRIAL TRUST REIT USD.0001		
		16,517.000	171,263.54	134,118.04
	53566V106	LINEAGE INC REIT		
		3,499.000	282,642.90	204,936.43
	554382101	MACERICH CO/THE REIT USD.01		
		13,343.000	249,443.70	285,792.56
	554489104	VERIS RESIDENTIAL INC REIT USD.01		
		4,449.000	85,935.89	73,986.87
	58463J304	MEDICAL PROPERTIES TRUST INC REIT USD.001		
		33,704.000	599,838.18	133,130.80
	59522J103	MID AMERICA APARTMENT COMM REIT USD.01		
		6,595.000	851,486.88	1,019,389.15
	63633D104	NATL HEALTH INVESTORS INC REIT USD.01		
		2,359.000	169,163.16	163,478.70
	637417106	NNN REIT INC REIT USD.01		
		10,592.000	506,115.53	432,683.20

(A)	(B) IDENTITY OF ISSUER	(C) DESCRIPTION OF INVESTMENT SHARES/PAR	RATE MAT DATE (D) COST	(E) CURRENT VALUE
	637870106 NATIONAL STORAGE AFFILIATES	REIT USD.01 3,955.000	134,542.23	149,934.05
	64110Y108 NET LEASE OFFICE PROPERTY	REIT USD.001 847.000	12,542.93	26,434.87
	64119V303 NETSTREIT CORP	REIT USD.01 4,411.000	81,059.85	62,415.65
	65340G205 NEXPOINT DIVERSIFIED REAL ES	REIT USD.001 1,876.000	20,317.21	11,443.60
	65341D102 NEXPOINT RESIDENTIAL	REIT USD.01 1,260.000	56,662.67	52,605.00
	681936100 OMEGA HEALTHCARE INVESTORS	REIT USD.1 15,315.000	550,781.36	579,672.75
	682406103 ONE LIBERTY PROPERTIES INC	REIT USD1.0 904.000	24,305.22	24,624.96
	68629Y103 ORION OFFICE REIT INC	REIT USD.01 3,181.000	68,526.25	11,801.51
	69007J106 OUTFRONT MEDIA INC	REIT USD.01 8,341.000	199,433.07	147,969.34
	69924R108 PARAMOUNT GROUP INC	REIT USD.01 10,486.000	116,378.78	51,800.84
	700517105 PARK HOTELS + RESORTS INC	REIT USD.01 11,560.000	216,313.61	162,649.20
	70509V100 PEBBLEBROOK HOTEL TRUST	REIT USD.01 6,793.000	151,403.74	92,045.15
	71844Y201 PHILLIPS EDISON + COMPANY IN	REIT USD.01 6,920.000	222,772.40	259,223.20
	720190206 PIEDMONT OFFICE REALTY TRU A	REIT USD.01 7,021.000	132,304.14	64,242.15
	729640102 PLYMOUTH INDUSTRIAL REIT INC	REIT USD.01 2,262.000	39,873.38	40,263.60
	73757R102 POSTAL REALTY TRUST INC A	REIT USD.01 1,220.000	17,828.07	15,921.00
	737630103 POTLATCHDELTIC CORP	REIT USD1.0 4,477.000	184,790.53	175,722.25
	74340W103 PROLOGIS INC	REIT USD.01 52,501.000	4,426,776.97	5,549,355.70
	74460D109 PUBLIC STORAGE	REIT USD.1 8,983.000	2,007,057.00	2,689,869.52
	74965L101 RLJ LODGING TRUST	REIT 8,648.000	129,248.94	88,296.08
	754907103 RAYONIER INC	REIT 8,753.000	242,658.87	228,453.30
	756109104 REALTY INCOME CORP	REIT USD1.0 49,504.000	3,070,733.10	2,644,008.64

(A)	(B) IDENTITY OF ISSUER	(C) DESCRIPTION OF INVESTMENT SHARES/PAR	RATE MAT DATE (D) COST	(E) CURRENT VALUE
	758849103 REGENCY CENTERS CORP	REIT USD.01 10,253.000	603,618.93	758,004.29
	761311101 RETAIL OPPORTUNITY INVESTMEN	REIT USD.0001 7,029.000	115,384.73	122,023.44
	76169C100 REXFORD INDUSTRIAL REALTY IN	REIT USD.01 12,501.000	587,484.81	483,288.66
	783771107 RYMAN HOSPITALITY PROPERTIES	REIT USD.01 3,306.000	240,534.87	344,948.04
	78410G104 SBA COMMUNICATIONS CORP	REIT USD.01 6,095.000	1,453,723.86	1,242,161.00
	78440X887 SL GREEN REALTY CORP	REIT USD.01 3,973.000	267,406.13	269,846.16
	78573L106 SABRA HEALTH CARE REIT INC	REIT USD.01 13,166.000	240,956.58	228,035.12
	78646V107 SAFEHOLD INC	REIT USD.001 2,929.000	87,836.80	54,127.92
	804395101 SAUL CENTERS INC	REIT USD.01 605.000	30,639.54	23,474.00
	81761L102 SERVICE PROPERTIES TRUST	REIT USD.01 9,372.000	178,849.72	23,804.88
	828806109 SIMON PROPERTY GROUP INC	REIT USD.0001 18,376.000	2,182,992.84	3,164,530.96
	82981J851 SITE CENTERS CORP	REIT USD.1 2,693.000	139,997.00	41,175.97
	85254J102 STAG INDUSTRIAL INC	REIT USD.01 10,274.000	297,335.18	347,466.68
	866082100 SUMMIT HOTEL PROPERTIES INC	REIT 5,965.000	64,401.51	40,860.25
	866674104 SUN COMMUNITIES INC	REIT USD.01 7,004.000	1,008,416.93	861,281.88
	867892101 SUNSTONE HOTEL INVESTORS INC	REIT USD.01 11,561.000	143,711.84	136,882.24
	875465106 TANGER INC	REIT USD.01 6,000.000	101,974.17	204,780.00
	88146M101 TERRENO REALTY CORP	REIT USD.01 5,384.000	293,828.59	318,409.76
	902653104 UDR INC	REIT USD.01 18,641.000	819,253.98	809,205.81
	903002103 UMH PROPERTIES INC	REIT USD.1 4,074.000	64,211.84	76,917.12
	91325V108 UNITI GROUP INC	REIT USD.0001 13,603.000	97,108.22	74,816.50
	91359E105 UNIVERSAL HEALTH RLTY INCOME	REIT USD.01 739.000	68,656.39	27,498.19

(A)	(B) IDENTITY OF ISSUER	(C) DESCRIPTION OF INVESTMENT SHARES/PAR	RATE MAT DATE (D) COST	(E) CURRENT VALUE
	91704F104 URBAN EDGE PROPERTIES	REIT USD.01 6,962.000	125,265.99	149,683.00
	92276F100 VENTAS INC	REIT USD.25 23,770.002	1,228,185.60	1,399,815.30
	925652109 VICI PROPERTIES INC	REIT USD.01 59,209.000	1,499,823.82	1,729,494.89
	929042109 VORNADO REALTY TRUST	REIT USD.04 9,951.000	501,592.02	418,340.04
	92936U109 WF CAREY INC	REIT USD.001 12,304.000	910,170.20	670,321.92
	939653101 ELME COMMUNITIES	REIT USD.01 4,999.000	128,308.00	76,334.73
	95040Q104 WELLTOWER INC	REIT USD1.0 35,012.000	2,873,663.13	4,412,562.36
	962166104 WEYERHAEUSER CO	REIT USD1.25 41,399.000	1,112,969.98	1,165,381.85
	966084204 WHITESTONE REIT	REIT USD.001 2,763.000	36,576.89	39,151.71
	984017103 XENIA HOTELS + RESORTS INC	REIT USD.01 5,789.000	105,081.18	86,024.54
		1,408,244.002	71,958,786.50	75,999,806.78

ASSET CATEGORY	UNITS	COST	CURRENT VALUE
INTEREST BEARING CASH	234,948.010	234,948.01	234,948.01
CERTIFICATES OF DEPOSIT	0.000	0.00	0.00
U. S. GOVERNMENT SECURITIES	0.000	0.00	0.00
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	1,408,244.002	71,958,786.50	75,999,806.78
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	0.000	0.00	0.00
INSURANCE CO. GENERAL ACCOUNT	0.000	0.00	0.00
** ASSET CATEGORY NOT FOUND **	0.000	0.00	0.00
GRAND TOTALS	1,643,192.012	72,193,734.51	76,234,754.79

RHUMBLINE ADVISERS

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

BEGINNING NET ASSET VALUE: 69,392,479.14

5% OF ASSET VALUE: 3,469,623.96

(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
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INTEREST BEARING CASH

929MMUII2	SS INST US GOV MM ADMIN SALXX				1.000	12/31/2050	
135	2,906,816.16	36	2,880,836.20	0.00	2,880,836.20	171	5,787,652.36

INTEREST BEARING CASH TOTALS

135	2,906,816.16	36	2,880,836.20	0.00	2,880,836.20	171	5,787,652.36
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RHUMBLINE ADVISERS

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

BEGINNING NET ASSET VALUE: 69,392,479.14

5% OF ASSET VALUE: 3,469,623.96

(A) IDENTITY OF PARTY	(B) DESCRIPTION OF ASSET	(C) PURCHASE PRICE	(D) SELLING PRICE	(E) EXPENSES INCURRED	(G) COST OF ASSET #TOTAL	(H) CURR VALUE	(I) GAIN/LOSS
CORPORATE STOCKS - COMMON							
CORPORATE STOCKS - COMMON TOTALS							
0		0.00	0	0.00	0.00	0.00	0.00

CORPORATE STOCKS - COMMON

CORPORATE STOCKS - COMMON TOTALS

0 0.00 0 0.00 0.00 0 0.00 0.00

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

RHUMBLINE ADVISERS

BEGINNING NET ASSET VALUE: 69,392,479.14

5% OF ASSET VALUE: 3,469,623.96

(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							
135	2,906,816.16	36	2,880,836.20	0.00	2,880,836.20	171	5,787,652.36
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

135 2,906,816.16 36 2,880,836.20 0.00 2,880,836.20 171 5,787,652.36

NON-REPORTABLE TRANSACTION TOTALS

645 10,766,021.54 428 3,590,288.74 1,882.87 4,024,536.81 1073 14,356,310.28

RUN DATE: 02/26/25

-434,248.07

RHUMBLINE ADVISERS

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

BEGINNING NET ASSET VALUE: 69,392,479.14

5% OF ASSET VALUE: 3,469,623.96

(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
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INTEREST BEARING CASH

929MMUII2	SS INST US GOV MM ADMIN SALXX				1.000	12/31/2050	
135	2,906,816.16	36	2,880,836.20	0.00	2,880,836.20	171	5,787,652.36

INTEREST BEARING CASH TOTALS

135	2,906,816.16	36	2,880,836.20	0.00	2,880,836.20	171	5,787,652.36
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RHUMBLINE ADVISERS

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

BEGINNING NET ASSET VALUE: 69,392,479.14

5% OF ASSET VALUE: 3,469,623.96

(A) IDENTITY OF PARTY	(B) DESCRIPTION OF ASSET	(C) PURCHASE PRICE	(D) SELLING PRICE	(E) EXPENSES INCURRED	(G) COST OF ASSET #TOTAL	RATE	MAT DATE	(H) CURR VALUE	(I) GAIN/LOSS
CORPORATE STOCKS - COMMON									
CORPORATE STOCKS - COMMON TOTALS									
0		0.00	0	0.00	0.00	0		0.00	0.00

CORPORATE STOCKS - COMMON

CORPORATE STOCKS - COMMON TOTALS

0 0.00 0 0.00 0.00 0.00 0 0.00 0.00 0.00

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

RHUMBLINE ADVISERS

BEGINNING NET ASSET VALUE: 69,392,479.14

5% OF ASSET VALUE: 3,469,623.96

(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							
135	2,906,816.16	36	2,880,836.20	0.00	2,880,836.20	171	5,787,652.36
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							
135	2,906,816.16	36	2,880,836.20	0.00	2,880,836.20	171	5,787,652.36
NON-REPORTABLE TRANSACTION TOTALS							
645	10,766,021.54	428	3,590,288.74	1,882.87	4,024,536.81	1073	14,356,310.28

REPORTABLE TRANSACTION TOTALS 5,787,652.36 0.00

NON-REPORTABLE TRANSACTION TOTALS 14,356,310.28 -434,248.07

RUN DATE: 02/26/25

RHUMBLINE ADVISERS

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

BEGINNING NET ASSET VALUE: 69,392,479.14

5% OF ASSET VALUE: 3,469,623.96

(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									
		0.00		0.00				0.00	0.00
INTEREST BEARING CASH TOTALS									
		0.00		0.00				0.00	0.00

RHUMBLINE ADVISERS

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

BEGINNING NET ASSET VALUE: 69,392,479.14

5% OF ASSET VALUE: 3,469,623.96

(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
CORPORATE STOCKS - COMMON									
CORPORATE STOCKS - COMMON TOTALS									
		0.00		0.00		0.00		0.00	0.00

CORPORATE STOCKS - COMMON

CORPORATE STOCKS - COMMON TOTALS

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

RHUMBLINE ADVISERS

BEGINNING NET ASSET VALUE: 69,392,479.14

5% OF ASSET VALUE: 3,469,623.96

(A) IDENTITY OF PARTY	(B) DESCRIPTION OF ASSET	(C) PURCHASE PRICE	(D) SELLING PRICE	(E) EXPENSES INCURRED	(G) COST OF ASSET	(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



RHUMBLINE ADVISERS

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

BEGINNING NET ASSET VALUE: 69,392,479.14

5% OF ASSET VALUE: 3,469,623.96

(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
CORPORATE STOCKS - COMMON									
CORPORATE STOCKS - COMMON TOTALS									
		0.00		0.00		0.00		0.00	0.00

CORPORATE STOCKS - COMMON

CORPORATE STOCKS - COMMON TOTALS

0.00 0.00 0.00 0.00 0.00 0.00

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

RHUMBLINE ADVISERS

BEGINNING NET ASSET VALUE: 69,392,479.14

5% OF ASSET VALUE: 3,469,623.96

(A) IDENTITY OF PARTY	(B) DESCRIPTION OF ASSET	(C) PURCHASE PRICE	(D) SELLING PRICE	(E) EXPENSES INCURRED	(G) COST OF ASSET	(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