

Form 5500

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security
Administration

Pension Benefit Guaranty Corporation

Annual Return/Report of Employee Benefit Plan

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

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

OMB Nos. 1210-0110
1210-0089

2024

This Form is Open to Public Inspection

Part I Annual Report Identification Information

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

- A** This return/report is for:
 - a multiemployer plan
 - a multiple-employer plan (Filers checking this box must provide participating employer information in accordance with the form instructions.)
 - a single-employer plan
 - a DFE (specify) _____
- B** This return/report is:
 - the first return/report
 - the final return/report
 - an amended return/report
 - a short plan year return/report (less than 12 months)
- C** If the plan is a collectively-bargained plan, check here. ▶
- D** Check box if filing under:
 - Form 5558
 - automatic extension
 - the DFVC program
 - special extension (enter description)
- E** If this is a retroactively adopted plan permitted by SECURE Act section 201, check here. ▶

Part II Basic Plan Information—enter all requested information

1a Name of plan <u>PENSION FUND OF MOVING PICTURE MACHINE OPERATORS UNION OF GREATER NEW YORK, LOCAL 306</u>	1b Three-digit plan number (PN) ▶ <u>001</u>
2a Plan sponsor's name (employer, if for a single-employer plan) Mailing address (include room, apt., suite no. and street, or P.O. Box) City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions) <u>BOARD OF TRUSTEES PENSION FUND OF UNION OF GREATER NEW YORK LOCAL 306</u> <u>303 MERRICK ROAD</u> <u>LYNBROOK, NY 11563</u>	1c Effective date of plan <u>01/23/1951</u> 2b Employer Identification Number (EIN) <u>13-6613842</u> 2c Plan Sponsor's telephone number <u>877-999-3555</u> 2d Business code (see instructions) <u>711100</u>

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

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

SIGN HERE	Filed with authorized/valid electronic signature.	10/13/2025	MICHAEL VAN SERTIMA, CPA
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

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

Form 5500 (2024)
v. 240311

3a Plan administrator's name and address <input checked="" type="checkbox"/> Same as Plan Sponsor	3b Administrator's EIN	
	3c Administrator's telephone number	
4 If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report: a Sponsor's name c Plan Name	4b EIN	
	4d PN	
5 Total number of participants at the beginning of the plan year	5	508
6 Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines 6a(1) , 6a(2) , 6b , 6c , and 6d). a(1) Total number of active participants at the beginning of the plan year a(2) Total number of active participants at the end of the plan year b Retired or separated participants receiving benefits..... c Other retired or separated participants entitled to future benefits d Subtotal. Add lines 6a(2) , 6b , and 6c e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits. f Total. Add lines 6d and 6e g(1) Number of participants with account balances as of the beginning of the plan year (only defined contribution plans complete this item) g(2) Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item) h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested.....	6a(1)	37
	6a(2)	19
	6b	265
	6c	127
	6d	411
	6e	82
	6f	493
	6g(1)	
6g(2)		
6h		
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	7	11

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

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

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

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

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

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

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

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

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

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

Receipt Confirmation Code _____

SCHEDULE MB (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6059 of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500 or 5500-SF.	<small>OMB No. 1210-0110</small> 2024 This Form is Open to Public Inspection
---	--	--

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

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

A Name of plan <u>PENSION FUND OF MOVING PICTURE MACHINE OPERATORS UNION OF GREATER NEW YORK, LOCAL 306</u>	B Three-digit plan number (PN) ▶	<u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF <u>BOARD OF TRUSTEES PENSION FUND OF UNION OF GREATER NEW YORK LOCAL 306</u>	D Employer Identification Number (EIN) <u>13-6613842</u>	

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

1a Enter the valuation date: Month 01 Day 01 Year 2024

b Assets		
(1) Current value of assets	1b(1)	<u>6181470</u>
(2) Actuarial value of assets for funding standard account	1b(2)	<u>6785710</u>
c (1) Accrued liability for plan using immediate gain methods	1c(1)	<u>24630110</u>
(2) Information for plans using spread gain methods:		
(a) Unfunded liability for methods with bases	1c(2)(a)	
(b) Accrued liability under entry age normal method	1c(2)(b)	
(c) Normal cost under entry age normal method	1c(2)(c)	
(3) Accrued liability under unit credit cost method	1c(3)	<u>24630110</u>
d Information on current liabilities of the plan:		
(1) Amount excluded from current liability attributable to pre-participation service (see instructions)	1d(1)	
(2) "RPA '94" information:		
(a) Current liability	1d(2)(a)	<u>31231541</u>
(b) Expected increase in current liability due to benefits accruing during the plan year	1d(2)(b)	<u>60010</u>
(c) Expected release from "RPA '94" current liability for the plan year	1d(2)(c)	<u>2687819</u>
(3) Expected plan disbursements for the plan year	1d(3)	<u>3002819</u>

Statement by Enrolled Actuary
 To the best of my knowledge, the information supplied in this schedule and accompanying schedules, statements and attachments, if any, is complete and accurate. Each prescribed assumption was applied in accordance with applicable law and regulations. In my opinion, each other assumption is reasonable (taking into account the experience of the plan and reasonable expectations) and such other assumptions, in combination, offer my best estimate of anticipated experience under the plan.

SIGN HERE		<u>10/02/2025</u>
	Signature of actuary	Date
	<u>JONATHAN D. BENENSON , ASA, MAAA</u>	<u>23-08181</u>
	Type or print name of actuary	Most recent enrollment number
	<u>SEGAL</u>	<u>212-251-5000</u>
	Firm name	Telephone number (including area code)
	<u>66 HUDSON BLVD E 20TH FLOOR NEW YORK, NY 10001-2192</u>	
	Address of the firm	

If the actuary has not fully reflected any regulation or ruling promulgated under the statute in completing this schedule, check the box and see instructions

2 Operational information as of beginning of this plan year:

a Current value of assets (see instructions)	2a	6181470
b "RPA '94" current liability/participant count breakdown:	(1) Number of participants	(2) Current liability
(1) For retired participants and beneficiaries receiving payment	352	23911183
(2) For terminated vested participants	112	6073811
(3) For active participants:		
(a) Non-vested benefits		50261
(b) Vested benefits		1196286
(c) Total active	24	1246547
(4) Total	488	31231541
c If the percentage resulting from dividing line 2a by line 2b(4), column (2), is less than 70%, enter such percentage	2c	19.79 %

3 Contributions made to the plan for the plan year by employer(s) and employees:

(a) Date (MM/DD/YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM/DD/YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	
07/15/2024	565275					
Totals ▶			3(b)	565275	3(c)	
(d) Total withdrawal liability amounts included in line 3(b) total					3(d)	370851

4 Information on plan status:

a Funded percentage for monitoring plan's status (line 1b(2) divided by line 1c(3)).....	4a	27.6 %
b Enter code to indicate plan's status (see instructions for attachment of supporting evidence of plan's status). If entered code is "N," go to line 5	4b	D
c Is the plan making the scheduled progress under any applicable funding improvement or rehabilitation plan?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
d If the plan is in critical status or critical and declining status, does line 1(c) reflect any benefit reductions for the first time (see instructions)?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
e If line d is "Yes," enter the reduction in liability resulting from the reduction in benefits (see instructions), measured as of the valuation date	4e	
f If the plan is in critical status or critical and declining status, and is: • Projected to emerge from critical status within 30 years, enter the plan year in which it is projected to emerge; • Projected to become insolvent within 30 years, enter the plan year in which insolvency is expected and check here..... <input checked="" type="checkbox"/> • Neither projected to emerge from critical status nor become insolvent within 30 years, enter "9999."	4f	2026

5 Actuarial cost method used as the basis for this plan year's funding standard account computations (check all that apply):

a <input type="checkbox"/> Attained age normal	b <input type="checkbox"/> Entry age normal	c <input checked="" type="checkbox"/> Accrued benefit (unit credit)	d <input type="checkbox"/> Aggregate
e <input type="checkbox"/> Frozen initial liability	f <input type="checkbox"/> Individual level premium	g <input type="checkbox"/> Individual aggregate	h <input type="checkbox"/> Shortfall
i <input type="checkbox"/> Other (specify):			
j If box h is checked, enter period of use of shortfall method	5j		
k Has a change been made in funding method for this plan year?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
l If line k is "Yes," was the change made pursuant to Revenue Procedure 2000-40 or other automatic approval?		<input type="checkbox"/> Yes <input type="checkbox"/> No	
m If line k is "Yes," and line l is "No," enter the date (MM/DD/YYYY) of the ruling letter (individual or class) approving the change in funding method	5m		

6 Checklist of certain actuarial assumptions:

a Interest rate for "RPA '94" current liability.....	6a	3.29 %
b Rates specified in insurance or annuity contracts.....	Pre-retirement	Post-retirement
	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
c Mortality table code for valuation purposes:		
(1) Males	6c(1)	9P
(2) Females	6c(2)	9FP
d Valuation liability interest rate	6d	6.00 %
e Salary scale	6e	% <input checked="" type="checkbox"/> N/A
f Withdrawal liability interest rate:		
(1) Type of interest rate	6f(1)	<input type="checkbox"/> Single rate <input type="checkbox"/> ERISA 4044 <input checked="" type="checkbox"/> Other <input type="checkbox"/> N/A
(2) If "Single rate" is checked in (1), enter applicable single rate	6f(2)	%
g Estimated investment return on actuarial value of assets for year ending on the valuation date	6g	8.6 %
h Estimated investment return on current value of assets for year ending on the valuation date	6h	11.8 %
i Expense load included in normal cost reported in line 9b	6i	<input type="checkbox"/> N/A
(1) If expense load is described as a percentage of normal cost, enter the assumed percentage.....	6i(1)	%
(2) If expense load is a dollar amount that varies from year to year, enter the dollar amount included in line 9b.....	6i(2)	305256
(3) If neither (1) nor (2) describes the expense load, check the box	6i(3)	<input type="checkbox"/>

7 New amortization bases established in the current plan year:

(1) Type of base	(2) Initial balance	(3) Amortization Charge/Credit
1	-300364	-29176

8 Miscellaneous information:

a If a waiver of a funding deficiency has been approved for this plan year, enter the date (MM/DD/YYYY) of the ruling letter granting the approval	8a	
b Demographic, benefit, and contribution information		
(1) Is the plan required to provide a projection of expected benefit payments? (See instructions) If "Yes," see instructions for required attachment.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(2) Is the plan required to provide a Schedule of Active Participant Data? (See instructions).	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
(3) Is the plan required to provide a projection of employer contributions and withdrawal liability payments? (See instructions) If "Yes," attach a schedule.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
c Are any of the plan's amortization bases operating under an extension of time under section 412(e) (as in effect prior to 2008) or section 431(d) of the Code?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
d If line c is "Yes," provide the following additional information:		
(1) Was an extension granted automatic approval under section 431(d)(1) of the Code?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
(2) If line 8d(1) is "Yes," enter the number of years by which the amortization period was extended ..	8d(2)	
(3) Was an extension approved by the Internal Revenue Service under section 412(e) (as in effect prior to 2008) or 431(d)(2) of the Code?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
(4) If line 8d(3) is "Yes," enter number of years by which the amortization period was extended (not including the number of years in line (2))	8d(4)	
(5) If line 8d(3) is "Yes," enter the date of the ruling letter approving the extension	8d(5)	
(6) If line 8d(3) is "Yes," is the amortization base eligible for amortization using interest rates applicable under section 6621(b) of the Code for years beginning after 2007?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
e If box 5h is checked or the plan received an amortization extension for this plan year under Code section 431(d), enter the difference between the amount necessary to satisfy the plan's minimum funding standard for this plan year and the amount that would have been necessary without using the shortfall method or extending the amortization period(s).	8e	

9 Funding standard account statement for this plan year:

Charges to funding standard account:

a Prior year funding deficiency, if any	9a	17828051
b Employer's normal cost for plan year as of valuation date.....	9b	338678

c Amortization charges as of valuation date:		Outstanding balance	
(1) All bases except funding waivers and certain bases for which the amortization period has been extended	9c(1)	4635282	1409261
(2) Funding waivers	9c(2)		
(3) Certain bases for which the amortization period has been extended.....	9c(3)		
d Interest as applicable on lines 9a, 9b, and 9c.....	9d		1174559
e Total charges. Add lines 9a through 9d.....	9e		20750549
Credits to funding standard account:			
f Prior year credit balance, if any.....	9f		
g Employer contributions. Total from column (b) of line 3.....	9g		565275
		Outstanding balance	
h Amortization credits as of valuation date.....	9h	4618933	765891
i Interest as applicable to end of plan year on lines 9f, 9g, and 9h	9i		61499
j Full funding limitation (FFL) and credits:			
(1) ERISA FFL (accrued liability FFL).....	9j(1)	19914557	
(2) "RPA '94" override (90% current liability FFL)	9j(2)	22532684	
(3) FFL credit	9j(3)		
k (1) Waived funding deficiency	9k(1)		
(2) Other credits	9k(2)		
l Total credits. Add lines 9f through 9i, 9j(3), 9k(1), and 9k(2)	9l		1392665
m Credit balance: If line 9l is greater than line 9e, enter the difference	9m		
n Funding deficiency: If line 9e is greater than line 9l, enter the difference	9n		19357884
o Current year's accumulated reconciliation account:			
(1) Due to waived funding deficiency accumulated prior to the current plan year.....	9o(1)		
(2) Due to amortization bases extended and amortized using the interest rate under section 6621(b) of the Code:			
(a) Reconciliation outstanding balance as of valuation date	9o(2)(a)		
(b) Reconciliation amount (line 9c(3) balance minus line 9o(2)(a)).....	9o(2)(b)		
(3) Total as of valuation date.....	9o(3)		
10 Contribution necessary to avoid an accumulated funding deficiency. (see instructions.).....	10		19357884
11 Has a change been made in the actuarial assumptions for the current plan year? If "Yes," see instructions			<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

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

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

A Name of plan PENSION FUND OF MOVING PICTURE MACHINE OPERATORS UNION OF GREATER NEW YORK, LOCAL 306	B Three-digit plan number (PN) ▶	001
C Plan sponsor's name as shown on line 2a of Form 5500 BOARD OF TRUSTEES PENSION FUND OF UNION OF GREATER NEW YORK LOCAL 306	D Employer Identification Number (EIN) 13-6613842	

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

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

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

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

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

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

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

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

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

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

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

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

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

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

GOULD, KOBRICK & SCHLAPP, P.C

192 LEXINGTON AVE
NEW YORK, NY 10016

13-3082707

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
10	NONE	27000	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)

THE SEGAL COMPANY

333 WEST 34TH STREET
NEW YORK, NY 10001

13-1835864

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
11 17	NONE	88933	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)

SPIVAK LIPTON LLP

1040 AVENUE OF THE AMERICAS 20 FL
NEW YORK, NY 10018

13-3494495

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
29	UNION ATTORNEY	51048	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

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

ADMINISTRATIVE SERVICES ONLY, INC

303 MERRICK ROAD
LYNBROOK, NY 11563

11-2995970

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
12 14 15	NONE	96948	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)

STACEY BRAUN

377 BROADWAY
NEW YORK, NY 10013

13-2889432

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28	NONE	45141	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input checked="" 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
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

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

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

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

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

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE H (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	Financial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500.	<small>OMB No. 1210-0110</small> 2024 This Form is Open to Public Inspection
--	--	--

For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024	
A Name of plan PENSION FUND OF MOVING PICTURE MACHINE OPERATORS UNION OF GREATER NEW YORK, LOCAL 306	B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 BOARD OF TRUSTEES PENSION FUND OF UNION OF GREATER NEW YORK LOCAL 306	D Employer Identification Number (EIN) 13-6613842

Part I	Asset and Liability Statement
---------------	--------------------------------------

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

		(a) Beginning of Year	(b) End of Year
Assets			
a Total noninterest-bearing cash	1a	906028	762676
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	25034	67108
(2) Participant contributions	1b(2)		
(3) Other	1b(3)	102913	318929
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	35313	2709981
(2) U.S. Government securities	1c(2)	2225176	12267724
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)	168520	45342
(B) All other	1c(3)(B)		975120
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)	1532348	6748286
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)		
(9) Value of interest in common/collective trusts	1c(9)		
(10) Value of interest in pooled separate accounts	1c(10)		0
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	1243569	1358879
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other	1c(15)		

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	6238901	25254045
Liabilities			
g Benefit claims payable.....	1g		
h Operating payables.....	1h	37176	54391
i Acquisition indebtedness.....	1i		
j Other liabilities.....	1j	20255	
k Total liabilities (add all amounts in lines 1g through 1j).....	1k	57431	54391
Net Assets			
l Net assets (subtract line 1k from line 1f).....	1l	6181470	25199654

Part II Income and Expense Statement

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

Income		(a) Amount	(b) Total
a Contributions:			
(1) Received or receivable in cash from: (A) Employers.....	2a(1)(A)	600005	
(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)		600005
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit).....	2b(1)(A)	13241	
(B) U.S. Government securities.....	2b(1)(B)	195566	
(C) Corporate debt instruments.....	2b(1)(C)	5186	
(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)		213993
(2) Dividends:			
(A) Preferred stock.....	2b(2)(A)		
(B) Common stock.....	2b(2)(B)	41378	
(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)		41378
(3) Rents.....	2b(3)		
(4) Net gain (loss) on sale of assets:			
(A) Aggregate proceeds.....	2b(4)(A)	1889645	
(B) Aggregate carrying amount (see instructions).....	2b(4)(B)	1333519	
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result.....	2b(4)(C)		556126
(5) Unrealized appreciation (depreciation) of assets:			
(A) Real estate.....	2b(5)(A)		
(B) Other.....	2b(5)(B)	-580034	
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		-580034

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		265894
c Other income	2c		20655749
d Total income. Add all income amounts in column (b) and enter total	2d		21753111

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	2378762	
(2) To insurance carriers for the provision of benefits	2e(2)		
(3) Other	2e(3)		
(4) Total benefit payments. Add lines 2e(1) through (3)	2e(4)		2378762
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions)	2g		
h Interest expense	2h		
i Administrative expenses:			
(1) Salaries and allowances	2i(1)		
(2) Contract administrator fees	2i(2)	96948	
(3) Recordkeeping fees	2i(3)	6989	
(4) IQPA audit fees	2i(4)	24000	
(5) Investment advisory and investment management fees	2i(5)	45141	
(6) Bank or trust company trustee/custodial fees	2i(6)		
(7) Actuarial fees	2i(7)	88933	
(8) Legal fees	2i(8)	51048	
(9) Valuation/appraisal fees	2i(9)		
(10) Other trustee fees and expenses	2i(10)	2800	
(11) Other expenses	2i(11)	40306	
(12) Total administrative expenses. Add lines 2i(1) through (11)	2i(12)		356165
j Total expenses. Add all expense amounts in column (b) and enter total	2j		2734927

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		19018184
l Transfers of assets:			
(1) To this plan	2l(1)		
(2) From this plan	2l(2)		

Part III Accountant's Opinion

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

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

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

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

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

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

(1) Name: **GOULD, KOBRICK & SCHLAPP P.C**

(2) EIN: **13-3082707**

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

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

Part IV Compliance Questions

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

During the plan year:

	Yes	No	Amount
a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)		X	
b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)		X	
c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)		X	
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)		X	
e Was this plan covered by a fidelity bond?	X		1000000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		X	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	X		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.)	X		
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?		X	
l Has the plan failed to provide any benefit when due under the plan?		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)		X	
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.		X	

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

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

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

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

If "Yes" is checked, enter the My PAA confirmation number from the PBGC premium filing for this plan year 559761.

SCHEDULE R (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	Retirement Plan Information This schedule is required to be filed under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500.	<small>OMB No. 1210-0110</small> 2024 This Form is Open to Public Inspection.
--	---	---

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

A Name of plan <u>PENSION FUND OF MOVING PICTURE MACHINE OPERATORS UNION OF GREATER NEW YORK, LOCAL 306</u>	B Three-digit plan number (PN) ▶	<u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>BOARD OF TRUSTEES PENSION FUND OF UNION OF GREATER NEW YORK LOCAL 306</u>	D Employer Identification Number (EIN) <u>13-6613842</u>	

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

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

1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions.....

1	
---	--

2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits):
 EIN(s): _____

Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.

3 Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year.....

3	0
---	---

Part II	Funding Information (If the plan is not subject to the minimum funding requirements of section 412 of the Internal Revenue Code or ERISA section 302, skip this Part.)
----------------	---

4 Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)? Yes No N/A
If the plan is a defined benefit plan, go to line 8.

5 If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. **Date:** Month _____ Day _____ Year _____
If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.

6 a Enter the minimum required contribution for this plan year (include any prior year accumulated funding deficiency not waived)	6a	
b Enter the amount contributed by the employer to the plan for this plan year	6b	
c Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount).....	6c	

If you completed line 6c, skip lines 8 and 9.

7 Will the minimum funding amount reported on line 6c be met by the funding deadline?..... Yes No N/A

8 If a change in actuarial cost method was made for this plan year pursuant to a revenue procedure or other authority providing automatic approval for the change or a class ruling letter, does the plan sponsor or plan administrator agree with the change? Yes No N/A

Part III	Amendments
-----------------	-------------------

9 If this is a defined benefit pension plan, were any amendments adopted during this plan year that increased or decreased the value of benefits? If yes, check the appropriate box. If no, check the "No" box..... Increase Decrease Both No

Part IV	ESOPs (see instructions). If this is not a plan described under section 409(a) or 4975(e)(7) of the Internal Revenue Code, skip this Part.
----------------	---

10 Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan? Yes No

11 a Does the ESOP hold any preferred stock? Yes No

b If the ESOP has an outstanding exempt loan with the employer as lender, is such loan part of a "back-to-back" loan? (See instructions for definition of "back-to-back" loan.) Yes No

12 Does the ESOP hold any stock that is not readily tradable on an established securities market? Yes No

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

13 Enter the following information for each employer that (1) contributed more than 5% of total contributions to the plan during the plan year or (2) was one of the top-ten highest contributors (measured in dollars). See instructions. Complete as many entries as needed to report all applicable employers.

a Name of contributing employer **FILM FORUM TRIPLE**

b EIN **51-0175953**

c Dollar amount contributed by employer

41972

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month **01** Day **09** Year **2021**

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

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: Hourly Weekly Unit of production Other (specify): **21.28% OF GROSS WAGES**

a Name of contributing employer **WALTER READE THEATRE**

b EIN **23-7042553**

c Dollar amount contributed by employer

35994

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month **06** Day **08** Year **2022**

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

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: Hourly Weekly Unit of production Other (specify): **14.18% OF GROSS WAGES**

a Name of contributing employer **AMER. MUS. MOVING IMAGE**

b EIN **11-2730714**

c Dollar amount contributed by employer

39451

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month **06** Day **30** Year **2022**

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

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: Hourly Weekly Unit of production Other (specify): **23.08% OF GROSS WAGES**

a Name of contributing employer **LOCAL 306 OFFICE STAFF**

b EIN **13-0460219**

c Dollar amount contributed by employer

25096

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month **01** Day **31** Year **2022**

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

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: Hourly Weekly Unit of production Other (specify): **26.59% OF GROSS WAGES**

a Name of contributing employer **BROOKLYN ACADEMY OF MUSIC**

b EIN **11-2201344**

c Dollar amount contributed by employer

11321

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month **01** Day **01** Year **2070**

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

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: Hourly Weekly Unit of production Other (specify): **13% OF GROSS WAGES**

a Name of contributing employer **SYMPHONY SPACE INC.**

b EIN **13-2941455**

c Dollar amount contributed by employer

7474

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month **12** Day **31** Year **2026**

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

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: Hourly Weekly Unit of production Other (specify): **23.04% OF GROSS WAGES**

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

13 Enter the following information for each employer that (1) contributed more than 5% of total contributions to the plan during the plan year or (2) was one of the top-ten highest contributors (measured in dollars). See instructions. Complete as many entries as needed to report all applicable employers.

a Name of contributing employer DIRECTORS GUILD OF AMER.

b EIN 95-1202310 **c** Dollar amount contributed by employer 7040

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month 04 Day 30 Year 2021

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

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: Hourly Weekly Unit of production Other (specify): 19.49% OF GROSS WAGES

a Name of contributing employer FAIR

b EIN 11-2436407 **c** Dollar amount contributed by employer 2140

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month 01 Day 01 Year 2070

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

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: Hourly Weekly Unit of production Other (specify): 13% OF GROSS WAGES

a Name of contributing employer JAZZ AT LINCOLN CENTER, INC

b EIN _____ **c** Dollar amount contributed by employer 1935

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month 10 Day 17 Year 2020

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

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: Hourly Weekly Unit of production Other (specify): 19.11% OF GROSS WAGES

a Name of contributing employer _____

b EIN _____ **c** Dollar amount contributed by employer _____

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

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

(1) Contribution rate (in dollars and cents) _____

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

a Name of contributing employer _____

b EIN _____ **c** Dollar amount contributed by employer _____

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

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

(1) Contribution rate (in dollars and cents) _____

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

a Name of contributing employer _____

b EIN _____ **c** Dollar amount contributed by employer _____

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

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

(1) Contribution rate (in dollars and cents) _____

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

14	Enter the number of deferred vested and retired participants (inactive participants), as of the beginning of the plan year, whose contributing employer is no longer making contributions to the plan for:		
	a The current plan year. Check the box to indicate the counting method used to determine the number of inactive participants: <input checked="" type="checkbox"/> last contributing employer <input type="checkbox"/> alternative <input type="checkbox"/> reasonable approximation (see instructions for required attachment).....	14a	82
	b The plan year immediately preceding the current plan year. <input checked="" type="checkbox"/> Check the box if the number reported is a change from what was previously reported (see instructions for required attachment).....	14b	92
	c The second preceding plan year. <input checked="" type="checkbox"/> Check the box if the number reported is a change from what was previously reported (see instructions for required attachment).....	14c	102
15	Enter the ratio of the number of participants under the plan on whose behalf no employer had an obligation to make an employer contribution during the current plan year to:		
	a The corresponding number for the plan year immediately preceding the current plan year.....	15a	1.18
	b The corresponding number for the second preceding plan year.....	15b	0.79
16	Information with respect to any employers who withdrew from the plan during the preceding plan year:		
	a Enter the number of employers who withdrew during the preceding plan year.....	16a	3
	b If line 16a is greater than 0, enter the aggregate amount of withdrawal liability assessed or estimated to be assessed against such withdrawn employers.....	16b	356134
17	If assets and liabilities from another plan have been transferred to or merged with this plan during the plan year, check box and see instructions regarding supplemental information to be included as an attachment.....		<input type="checkbox"/>

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

18	If any liabilities to participants or their beneficiaries under the plan as of the end of the plan year consist (in whole or in part) of liabilities to such participants and beneficiaries under two or more pension plans as of immediately before such plan year, check box and see instructions regarding supplemental information to be included as an attachment.....	<input type="checkbox"/>
19	If the total number of participants is 1,000 or more, complete lines (a) and (b):	
a	Enter the percentage of plan assets held as: Public Equity: _____% Private Equity: _____% Investment-Grade Debt and Interest Rate Hedging Assets: _____% High-Yield Debt: _____% Real Assets: _____% Cash or Cash Equivalents: _____% Other: _____%	
b	Provide the average duration of the Investment-Grade Debt and Interest Rate Hedging Assets: <input type="checkbox"/> 0-5 years <input type="checkbox"/> 5-10 years <input type="checkbox"/> 10-15 years <input type="checkbox"/> 15 years or more	
20	PBGC missed contribution reporting requirements. If this is a multiemployer plan or a single-employer plan that is not covered by PBGC, skip line 20.	
a	Is the amount of unpaid minimum required contributions for all years from Schedule SB (Form 5500) line 40 greater than zero? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
b	If line 20a is "Yes," has PBGC been notified as required by ERISA sections 4043(c)(5) and/or 303(k)(4)? Check the applicable box: <input type="checkbox"/> Yes. <input type="checkbox"/> No. Reporting was waived under 29 CFR 4043.25(c)(2) because contributions equal to or exceeding the unpaid minimum required contribution were made by the 30th day after the due date. <input type="checkbox"/> No. The 30-day period referenced in 29 CFR 4043.25(c)(2) has not yet ended, and the sponsor intends to make a contribution equal to or exceeding the unpaid minimum required contribution by the 30th day after the due date. <input type="checkbox"/> No. Other. Provide explanation.....	

Part VII IRS Compliance Questions

21a	Does the plan satisfy the coverage and nondiscrimination tests of Code sections 410(b) and 401(a)(4) by combining this plan with any other plans under the permissive aggregation rules? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
21b	If this is a Code section 401(k) plan, check all boxes that apply to indicate how the plan is intended to satisfy the nondiscrimination requirements for employee deferrals and employer matching contributions (as applicable) under Code sections 401(k)(3) and 401(m)(2). <input type="checkbox"/> Design-based safe harbor method <input type="checkbox"/> "Prior year" ADP test <input type="checkbox"/> "Current year" ADP test <input type="checkbox"/> N/A
22	If the plan sponsor is an adopter of a pre-approved plan that received a favorable IRS Opinion Letter, enter the date of the Opinion Letter ___/___/____ (MM/DD/YYYY) and the Opinion Letter serial number _____.

**PENSION FUND OF THE MOVING PICTURE MACHINE
OPERATORS UNION LOCAL 306 IATSE**

**FINANCIAL STATEMENTS
DECEMBER 31, 2024 AND 2023**

**PENSION FUND OF THE MOVING PICTURE MACHINE
OPERATORS UNION LOCAL 306 IATSE**

**FINANCIAL STATEMENTS
DECEMBER 31, 2024 AND 2023**

I N D E X

	<u>Page No.</u>
Independent Auditors' Report	1
Statements of Net Assets Available for Benefits	3
Statements of Changes in Net Assets Available for Benefits	4
Statements of Accumulated Plan Benefits and Changes in Accumulated Plan Benefits	5
Notes to Financial Statements	6

D. ROBERT GOULD, C.P.A. (1933-2015)
STUART L. KOBRICK, C.P.A. (RETIRED)
STEVEN T. SCHLAPP, C.P.A.
MICHAEL A. VAN SERTIMA, C.P.A., C.F.E., M.S.
RONDELL E. MARSHALL, C.P.A.

TEL: 212-564-9451
FAX: 212-268-6562

EMAIL: GKS@GKSPC.COM
WWW.GKSPC.COM

INDEPENDENT AUDITORS' REPORT

To the Board of Trustees
Pension Fund of the Moving Picture Machine
Operators Union Local 306 IATSE

Opinion

We have audited the financial statements of the Pension Fund of the Moving Picture Machine Operators Union Local 306 IATSE, an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (ERISA), which comprise the statements of net assets available for benefits as of December 31, 2024 and 2023, and the related statements of changes in net assets available for benefits for the years then ended, and the statement of accumulated plan benefits as of December 31, 2023, the related statement of changes in accumulated plan benefits 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 net assets available for benefits of the Pension Fund of the Moving Picture Machine Operators Union Local 306 IATSE as of December 31, 2024 and 2023, and the changes in its net assets available for benefits for the years then ended, and accumulated plan benefits as of December 31, 2023, and the changes in its accumulated plan benefits for the year then ended, in accordance with accounting principles generally accepted in the United States of America.

Basis for Opinion

We conducted our audits in accordance with auditing standards generally accepted in the United States of America (GAAS). Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of the Pension Fund of the Moving Picture Machine Operators Union Local 306 IATSE and to meet our other ethical responsibilities, in accordance with the relevant ethical requirements relating to our audits. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Responsibilities of Management for the Financial Statements

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

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about the Pension Fund of the Moving Picture Machine Operators Union Local 306 IATSE's ability to continue as a going concern for one year after the date the financial statements are available to be issued.

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

INDEPENDENT AUDITORS' REPORT (continued)

Auditors' Responsibilities for the Audit of the Financial Statements

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

In performing an audit in accordance with GAAS, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Pension Fund of the Moving Picture Machine Operators Union Local 306 IATSE'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 Pension Fund of the Moving Picture Machine Operators Union Local 306 IATSE'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.

Other Matter—Supplemental Schedules Required by ERISA

Our audits were conducted for the purpose of forming an opinion on the financial statements as a whole. The supplemental schedules of assets held at end of year and reportable transactions attached to Schedule H of Form 5500 are presented for purposes of additional analysis and are not a required part of the financial statements but are supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audits of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with GAAS.

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

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

Auld, Kohnstien & Adolph, P.C.

New York, NY
October 8, 2025

**PENSION FUND OF THE MOVING PICTURE MACHINE
OPERATORS UNION LOCAL 306 IATSE**

**STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
DECEMBER 31, 2024 AND 2023**

	2024	2023
ASSETS		
Investments, at fair value	\$ 24,105,332	\$ 5,204,926
Receivables:		
Accrued investment income	120,624	21,910
Withdrawal liability	34,730	0
Employer contributions	32,378	25,034
Due from related organization	12,425	0
Due from pensioners	12,029	59,477
Total Receivables	212,186	106,421
Other assets:		
Cash, operating accounts	762,676	906,028
Prepaid pension benefit	156,584	0
Prepaid expenses	17,267	21,526
Total Other Assets	936,527	927,554
Total Assets	25,254,045	6,238,901
LIABILITIES		
Accrued administrative expenses	54,391	37,176
Due to related organization	0	20,255
Total Liabilities	54,391	57,431
NET ASSETS AVAILABLE FOR BENEFITS	\$ 25,199,654	\$ 6,181,470

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

**PENSION FUND OF THE MOVING PICTURE MACHINE
OPERATORS UNION LOCAL 306 IATSE**

**STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
YEARS ENDED DECEMBER 31, 2024 AND 2023**

	2024	2023
ADDITIONS TO NET ASSETS		
Investment income:		
Interest and dividends	\$ 255,371	\$ 119,942
Net appreciation in fair value of investments	241,986	642,808
	497,357	762,750
Less - Investment fees	45,141	20,026
Net Investment Income	452,216	742,724
SFA Funding	20,651,764	0
Withdrawal liability income	405,581	947,077
Employer contributions	194,424	272,282
Other income	3,985	400
Total Additions	21,707,970	1,962,483
DEDUCTIONS FROM NET ASSETS		
Retirement benefits paid	2,378,762	2,451,909
Administrative expenses	311,024	482,241
Total Deductions	2,689,786	2,934,150
Net increase (decrease) in net assets available for benefits	19,018,184	(971,667)
Net assets available for benefits:		
Beginning	6,181,470	7,153,137
Ending	\$ 25,199,654	\$ 6,181,470

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

**PENSION FUND OF THE MOVING PICTURE MACHINE
OPERATORS UNION LOCAL 306 IATSE**

**STATEMENT OF ACCUMULATED PLAN BENEFITS
DECEMBER 31, 2023
AND
STATEMENT OF CHANGES IN ACCUMULATED PLAN BENEFITS
YEAR ENDED DECEMBER 31, 2023**

ACTUARIAL PRESENT VALUE OF ACCUMULATED PLAN BENEFITS

Vested benefits:	
Pensioners and beneficiaries currently receiving benefits	\$ 19,577,301
Other vested benefits	5,027,934
Total Vested Benefits	24,605,235
Non-vested benefits	24,875
Total Actuarial Present Value of Accumulated Plan Benefits	<u>\$ 24,630,110</u>

CHANGES IN ACTUARIAL PRESENT VALUE OF ACCUMULATED PLAN BENEFITS

Beginning	<u>\$ 25,699,992</u>
Increase (decrease) during period attributable to:	
Benefits accumulated, net experience gain or loss, and changes in data	(80,285)
Interest	1,462,312
Benefits paid	<u>(2,451,909)</u>
Net (Decrease)	<u>(1,069,882)</u>
Ending	<u>\$ 24,630,110</u>

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

**PENSION FUND OF THE MOVING PICTURE MACHINE
OPERATORS UNION LOCAL 306 IATSE**

**NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2024 AND 2023**

NOTE 1 – DESCRIPTION OF PLAN

The following brief description of the Pension Fund of the Moving Picture Machine Operators Union Local 306 IATSE (the “Plan”) is provided for general information purposes only. Participants should refer to the Plan document and its Summary Plan Description for a more complete description of the Plan’s provisions.

General: The Plan is a collectively bargained multi-employer defined benefit pension plan established on January 23, 1951, and is subject to the provisions of the Employee Retirement Income Security Act of 1974, as amended (ERISA). It is financed by negotiated employer contributions typically set for multiyear periods under collectively bargained agreements. The benefits earned by participants depend on the duration of participation in the Plan and the level of participants’ employment. The Plan operates as a trust to provide retirement benefits to participants who are covered employees of participating employers under collective bargaining agreements with the Moving Picture Machine Operators Union of Greater New York, Local 306 of the International Alliance of Theatrical Stage Employees and Moving Picture Operators of the United States and Canada (the “Union”).

Plan Administration: The administration of the Plan is the responsibility of a board of trustees composed of Union and Employer Trustees. The Union Trustees and Employer Trustees have equal voting rights. The investments of the Plan are managed by investment advisers and maintained by separate custodians.

Pension Benefits: Generally, participants with five years of vesting credit or ten years of service credit are entitled to regular pension benefits beginning at age sixty-five. The pension benefit amount varies depending on units of pension credits and the benefit rates per unit.

Participants may elect to receive benefits under various husband and wife options, which guarantee payments of benefits during the lives of both the participant and the participant’s spouse. Alternatively, a participant may elect other options whereby pension payments are guaranteed for a certain period from the effective date of the pension and if the pensioner dies prior to the end of the period, his or her beneficiary receives the remaining payments.

If an active employee dies and is vested, the employee’s beneficiary is entitled to a pre-retirement death benefit. A pre-retirement spouse’s benefit is also available for an inactive member who dies within five years of vesting. Active employees who become totally disabled and have accrued fifteen pension credits are entitled to a disability retirement benefit.

A full description of plan benefit provisions is available in the Plan document as amended and restated.

Funding: Employers make contributions for covered participants based on a percentage of wages. The contribution rates are determined by the collective bargaining agreements in effect at the time.

Contributions for the year ended December 31, 2024, did not meet the minimum funding requirements of ERISA as amended by the Pension Protection Act of 2006. The plan sponsor determined that, based on reasonable actuarial assumptions and upon exhaustion of all reasonable measures, the plan cannot reasonably be expected to emerge from critical status by the end of the Rehabilitation Period and that the Rehabilitation Plan can only be expected to forestall insolvency, as required by IRC §432(e)(3)(A)(ii). The Rehabilitation Plan is forestalling insolvency, and as a result, is meeting its scheduled progress as required by IRC §432(b) (3)(A)(ii). Since the Plan is meeting its scheduled progress, its employers are exempt from the excise taxes under IRC §4971.

Other: Although they have not expressed any intention to do so, the Trustees have the right to amend or terminate the Plan subject to the provisions set forth in ERISA. The Plan may be terminated only by joint agreement between the Employers (responsible for 50% or more of the contributions to the Plan) and the Union, subject to the provisions set forth in the agreement and declaration of trust. The Plan may also be terminated at any time by the unanimous written consent of the trustees.

**PENSION FUND OF THE MOVING PICTURE MACHINE
OPERATORS UNION LOCAL 306 IATSE**

**NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2024 AND 2023**

NOTE 2 – SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of Accounting: The financial statements of the Plan are prepared under the accrual method of accounting except for employer withdrawal liability and payroll audit contributions which, because of the uncertainty of collection, are recognized on the cash basis.

Payment of Benefits: Benefit payments to participants are recorded upon distribution.

Investment Valuation and Income Recognition: Investments are reported at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. (See Note 8 on Fair Value Measurements.)

Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded on the accrual basis. Dividends are recorded on the ex-dividend date. Net appreciation includes the Plan's gains and losses on investments bought and sold as well as held during the year. Unrealized gains or losses are the differences between the fair value of the investments held at year-end and those held at the beginning of the year. Realized gains or losses on the sale of investments are based on the historical costs of the individual investments sold for financial reporting purposes, whereas the revalued cost (fair value at the beginning of the year) is used for determining the realized gain or loss for Form 5500 purposes.

Use of Estimates: The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America 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 revenues and expenses during the reporting period. Actual results could differ from those estimates.

Employer Contributions: Employer contributions receivable and employer contribution income do not include estimates of amounts due from employers where reports were not received by the Plan office or any amounts due but unpaid as a result of payroll audits.

Actuarial Present Value of Accumulated Pension Plan Benefits: Accumulated plan benefits are those future periodic payments, including lump-sum distributions, which are attributable under the Plan's provisions to the service participants have rendered. Accumulated plan benefits include benefits expected to be paid to:

- a. Retired or terminated employees,
- b. Beneficiaries of employees who have died; and
- c. Present employees or their beneficiaries.

Benefits under the Plan are based on participants' years of service in covered employment and the value of a pension credit. Benefits payable under all circumstances – retirement, death, and disability – are included to the extent they are deemed attributable to participants' service rendered to the valuation date.

The actuarial present value of accumulated plan benefits is determined by an actuary from The Segal Company and is that amount that results from applying actuarial assumptions to adjust the accumulated plan benefits to reflect the time value of money (through discounts for interest) and the probability of payment (by means of decrements such as for death, disability, withdrawal, or retirement) between the valuation date and the expected date of payment.

**PENSION FUND OF THE MOVING PICTURE MACHINE
OPERATORS UNION LOCAL 306 IATSE**

**NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2024 AND 2023**

NOTE 2 – SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (continued)

Actuarial Present Value of Accumulated Pension Plan Benefits: (continued)

Age of spouse:	Females three years younger than male spouses.
Benefit election:	50% of all participants are assumed to elect the Life Annuity, 30% of all participants are assumed to elect the 50% Husband and Wife pension, and 20% of all participants are assumed to elect the 75% Joint and Survivor pension.
Net investment return:	6.00%
Administrative expenses:	\$315,000 for the year beginning January 1, 2024 (equivalent to \$305,256 payable at the beginning of the year), and \$275,000 for the year beginning January 1, 2025.
Actuarial value of assets:	The market value of assets less unrecognized returns in each of the last five years. Unrecognized return is equal to the difference between the actual market return and the projected market return, and is recognized over a five-year period. The actuarial value is further adjusted, if necessary, to be within 20% of the market value.
Actuarial cost method:	Unit Credit Actuarial Cost Method. Normal Cost and Actuarial Accrued Liability are calculated on an individual basis and are allocated by service.
Current liability assumptions:	
Interest	3.29% (previously 2.55%), within the permissible range prescribed under IRC Section 431(c)(6)(E).
Mortality	Mortality prescribed under IRS Regulations 1.431(c)(6)-1 and 1.430(h)(3)-1(a)(1): Pri-2012 employee and annuitant mortality tables, projected generationally using the Adjusted MP-2021 scale as described in the final IRS mortality regulations released in October 2023 (previously, RP-2014 employee and annuitant mortality tables, adjusted backward to the base year (2006) using scale MP-2014, projected forward generationally using scale MP-2021 was used).
Change in actuarial assumptions:	Current liability interest rate was changed from 2.55% to 3.29%. Administrative expenses were decreased from \$490,000 to \$315,000 for the year beginning January 1, 2024.

The foregoing actuarial assumptions are based on the presumption that the Plan will continue. If the Plan were to terminate, different actuarial assumptions and other factors might be applicable in determining the actuarial present value of accumulated plan benefit.

Current Expected Credit Losses: The Plan has adopted Accounting Standards Update (ASU) No. 2016-13, Financial Instruments – Credit Losses (Topic 326): Measurement of Credit Losses on Financial Instruments. The core principles of ASU 2016-13 (the “ASU”) significantly change the way organizations recognize credit losses by replacing the incurred loss model with an expected loss model. The financials assets held by the Plan that are subject to the ASU are accounts receivables.

The Plan assesses credit losses on accounts receivable on a regular basis to determine the allowance for doubtful accounts. Given the nature of the Plan’s financial assets and historical loss experience, the adoption of the ASU did not have a significant impact on the financial statements.

**PENSION FUND OF THE MOVING PICTURE MACHINE
OPERATORS UNION LOCAL 306 IATSE**

**NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2024 AND 2023**

NOTE 3 – EVALUATION OF SUBSEQUENT EVENTS

The Plan has evaluated subsequent events through October 8, 2025, the date the financial statements were available to be issued.

NOTE 4 – TAX STATUS

The Plan is a qualified plan under Section 401 (a) of the Internal Revenue Code (IRC) and the Trust is exempt from federal income taxes under provisions of Section 501(a) of the IRC. The Internal Revenue Service has determined and informed the Plan, by letter dated August 24, 2015, that the Plan is a tax qualified plan under applicable sections of the IRC.

Plan management believes that the Plan as designed is currently being operated in compliance with the applicable provisions of the IRC and, therefore, believes that the related trust is tax exempt. Consequently, no provision for income taxes has been included in the Plan's financial statements.

NOTE 5 – PLAN TERMINATION PRIORITIES

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

- Vested benefits insured by the Pension Benefit Guaranty Corporation (PBGC) up to the applicable limitations.
- All nonvested benefits.

Benefits under the plan are insured by the PBGC. Should the Plan terminate at some future time, its net assets generally will not be available on a pro rata basis to provide participants' benefits. Whether a particular participant's accumulated plan benefits will be paid depends on both the priority of those benefits and the level of benefits guaranteed by the PBGC at that time. Some benefits may be fully or partially provided for by the then existing assets and the PBGC guaranty, whereas other benefits may not be provided for at all.

A full description of the Plan's termination priorities is available in the Plan document, as amended and restated.

NOTE 6 – CONCENTRATION OF CREDIT RISK

Financial instruments that subject the Plan to concentration of credit risk include cash and short-term investments. While the Plan attempts to limit any financial exposure, its cash deposit balances may, at times, exceed federally insured limits. Short-term investments are not covered by the Federal Deposit Insurance Corporation.

NOTE 7 – RISKS AND UNCERTAINTIES

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

Plan contributions are made, and the actuarial present value of accumulated plan benefits are reported based on certain assumptions pertaining to interest rates, inflation rates and participant demographics, all of which are subject to change. Due to uncertainties inherent in the estimations and assumptions process, it is at least reasonably possible that changes in these estimates and assumptions in the near term would be material to the financial statements.

**PENSION FUND OF THE MOVING PICTURE MACHINE
OPERATORS UNION LOCAL 306 IATSE**

**NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2024 AND 2023**

NOTE 8 – FAIR VALUE MEASUREMENTS

Financial Accounting Standards Board (FASB) *Accounting Standards Codification* (ASC) 820, *Fair Value Measurements and Disclosures*, provides the framework for measuring fair value. That framework provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1 measurements) and the lowest priority to unobservable inputs (Level 3 measurements).

The three levels of the fair value hierarchy under FASB ASC 820 are described as follows:

- Level 1: Inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets that the plan has the ability to access.
- Level 2: Inputs to the valuation methodology include:
 - Quoted prices for similar assets or liabilities in active markets.
 - Quoted prices for identical or similar assets or liabilities in inactive markets.
 - Inputs other than quoted prices that are observable for the asset or liability.
 - Inputs that are derived principally from or corroborated by observable market data by correlation or other means.

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

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

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

The following is a description of the valuation methodologies used for assets at fair value. There have been no changes in the methodologies used at December 31, 2024 and 2023.

Interest bearing cash: Interest bearing cash is reported at cost, which approximates fair value.

U.S. government securities: Valued using pricing models maximizing the use of observable inputs for similar securities.

Corporate debt instruments: Valued using pricing models maximizing the use of observable inputs for similar securities. This includes basing value on yields currently available on comparable securities of issuers with similar credit ratings. When quoted prices are not available for identical or similar bonds, the bond is valued under a discounted cash flows approach that maximizes observable inputs, such as current yields of similar instruments, but includes adjustments for certain risks that may not be observable, such as credit and liquidity risks or a broker quote if available.

Common stocks: Valued at the closing price reported on the New York Stock Exchange and other exchanges.

Registered investment companies: Certain registered investment companies are valued at the closing price, reported in the active market on which they are traded. Others are valued at estimated fair value as determined by the investment manager based on the market value and estimated fair value of the underlying investments in the portfolio. In establishing the fair value of these investments, the investment manager takes into consideration information about the net asset value of shares held by the Plan at year end.

**PENSION FUND OF THE MOVING PICTURE MACHINE
OPERATORS UNION LOCAL 306 IATSE**

**NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2024 AND 2023**

NOTE 8 – FAIR VALUE MEASUREMENTS (continued)

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

The following table sets forth by level, within the fair value hierarchy, the Plan's assets at fair value as of December 31, 2024 and 2023:

December 31, 2024				
Investment	Level 1	Level 2	Level 3	Total
Interest bearing cash	\$ 2,709,981	\$ 0	\$ 0	\$ 2,709,981
U.S. government	0	12,267,724	0	12,267,724
Corporate debt instruments	0	1,020,462	0	1,020,462
Common stock	6,748,286	0	0	6,748,286
Registered investment companies	1,358,879	0	0	1,358,879
Total	\$ 10,817,146	\$ 13,288,186	\$ 0	\$ 24,105,332

December 31, 2023				
Investment	Level 1	Level 2	Level 3	Total
Interest bearing cash	\$ 35,313	\$ 0	\$ 0	\$ 35,313
U.S. government	0	2,225,176	0	2,225,176
Corporate debt instruments	0	168,520	0	168,520
Common stock	1,532,348	0	0	1,532,348
Registered investment companies	1,243,569	0	0	1,243,569
Total	\$ 2,811,230	\$ 2,393,696	\$ 0	\$ 5,204,926

NOTE 9 – ADMINISTRATIVE EXPENSES

	2024	2023
Professional fees:		
Third party administration	\$ 96,948	\$ 96,948
Special Financial Assistance	49,029	212,786
Actuarial	45,960	46,600
Legal	45,798	52,362
Auditing	27,000	27,000
Employer payroll audits	3,183	2,665
Insurance	21,027	20,814
Pension Benefit Guaranty Corporation premiums	16,613	18,410
Trustee meetings and educational seminars	2,800	2,200
Other general and administrative	2,666	2,456
	\$ 311,024	\$ 482,241

**PENSION FUND OF THE MOVING PICTURE MACHINE
OPERATORS UNION LOCAL 306 IATSE**

**NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2024 AND 2023**

NOTE 10 – SPECIAL FINANCIAL ASSISTANCE FEES

Special Financial Assistance professional fees consist of the following:

	2024	2023
Actuarial	\$ 42,973	\$ 193,104
Legal	5,250	12,313
Accounting	806	7,369
	\$ 49,029	\$ 212,786

NOTE 11 – TRANSACTIONS WITH PARTY IN INTEREST

The Welfare Fund of the Moving Picture Machine Operators Union Local 306 IATSE (the “Welfare Plan”) collected employers’ contributions on behalf of the Plan and transferred funds monthly to the Plan until June 5, 2023. Effective June 6, 2023, the Plan collects employers’ contributions on behalf of the Welfare Plan and transfers funds monthly to the Welfare Plan.

Additionally, certain common expenses (legal, collection, fiduciary insurance premiums, etc.) are shared between the Plan and the Welfare Plan using ratios based on employer contributions, total assets, and other methods. Total allocated expenses were (\$7,156) and \$756 for the years ended December 31, 2024 and 2023, respectively.

The Plan's related party transactions are summarized as follows:

Beginning balance	\$ (20,255)
Current period activity:	
Payments/receipts	34,098
Expense allocations	7,156
Contribution exchanges	(8,574)
Total Current Activity	32,680
Ending balance	\$ 12,425

NOTE 12 – SPECIAL FINANCING ASSISTANCE

On August 22, 2024, the Plan received special financing assistance from the Pension Benefit Guaranty Corporation (PBGC) amounting to \$20,651,764. This assistance is provided under the provisions of the American Rescue Plan Act of 2021 (ARPA), which created a Special Financial Assistance (SFA) program under which the PBGC may make one-time grants to eligible defined benefit pension funds. The purpose of the SFA is to temporarily extend (through 2051) the payment of unreduced benefits to Plan participant.

The Trustees had previously adopted a rehabilitation plan under the Pension Protection Act, and the Plan continues to receive employer contribution for active service.

SCHEDULE MB (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6059 of the Internal Revenue Code (the Code). ► File as an attachment to Form 5500 or 5500-SF.	<small>OMB No. 1210-0110</small> 2024 This Form is Open to Public Inspection
---	--	--

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

- **Round off amounts to nearest dollar.**
 ► **Caution:** A penalty of \$1,000 will be assessed for late filing of this report unless reasonable cause is established.

A Name of plan PENSION FUND OF MOVING PICTURE MACHINE OPERATORS UNION LOCAL 306	B Three-digit plan number (PN) ►	001
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF BOARD OF TRUSTEES, PENSION FUND OF THE MOVING PICTURE MACHINE OPERATOR	D Employer Identification Number (EIN) 13-6613842	

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

1a Enter the valuation date: Month 01 Day 01 Year 2024

b Assets		
(1) Current value of assets	1b(1)	6,181,470
(2) Actuarial value of assets for funding standard account.....	1b(2)	6,785,710
c (1) Accrued liability for plan using immediate gain methods	1c(1)	24,630,110
(2) Information for plans using spread gain methods:		
(a) Unfunded liability for methods with bases	1c(2)(a)	
(b) Accrued liability under entry age normal method.....	1c(2)(b)	
(c) Normal cost under entry age normal method	1c(2)(c)	
(3) Accrued liability under unit credit cost method.....	1c(3)	24,630,110
d Information on current liabilities of the plan:		
(1) Amount excluded from current liability attributable to pre-participation service (see instructions).....	1d(1)	
(2) "RPA '94" information:		
(a) Current liability	1d(2)(a)	31,231,541
(b) Expected increase in current liability due to benefits accruing during the plan year	1d(2)(b)	60,010
(c) Expected release from "RPA '94" current liability for the plan year	1d(2)(c)	2,687,819
(3) Expected plan disbursements for the plan year	1d(3)	3,002,819

Statement by Enrolled Actuary
 To the best of my knowledge, the information supplied in this schedule and accompanying schedules, statements and attachments, if any, is complete and accurate. Each prescribed assumption was applied in accordance with applicable law and regulations. In my opinion, each other assumption is reasonable (taking into account the experience of the plan and reasonable expectations) and such other assumptions, in combination, offer my best estimate of anticipated experience under the plan.

SIGN HERE	Jonathan Benenson <i>JDB</i> Signature of actuary JONATHAN D. BENENSON, ASA, FCA, MAAA Type or print name of actuary SEGAL Firm name 66 HUDSON BLVD E, 20TH FLOOR NEW YORK NY 10001-2192 Address of the firm	10/02/2025 Date 2308181 Most recent enrollment number 212-251-5000 Telephone number (including area code)
------------------	--	--

If the actuary has not fully reflected any regulation or ruling promulgated under the statute in completing this schedule, check the box and see instructions

- k** Has a change been made in funding method for this plan year? Yes No
- l** If line k is "Yes," was the change made pursuant to Revenue Procedure 2000-40 or other automatic approval? Yes No
- m** If line k is "Yes," and line l is "No," enter the date (MM/DD/YYYY) of the ruling letter (individual or class) approving the change in funding method 5m

6 Checklist of certain actuarial assumptions:

a Interest rate for "RPA '94" current liability.....	6a	3.29%
b Rates specified in insurance or annuity contracts.....	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
c Mortality table code for valuation purposes:		
(1) Males.....	6c(1)	9P
(2) Females.....	6c(2)	9FP
d Valuation liability interest rate.....	6d	6.00%
e Salary scale.....	6e	% <input checked="" type="checkbox"/> N/A
f Withdrawal liability interest rate:		
(1) Type of interest rate.....	6f(1)	<input type="checkbox"/> Single rate <input type="checkbox"/> ERISA 4044 <input checked="" type="checkbox"/> Other <input type="checkbox"/> N/A
(2) If "Single rate" is checked in (1), enter applicable single rate.....	6f(2)	%
g Estimated investment return on actuarial value of assets for year ending on the valuation date.....	6g	8.6%
h Estimated investment return on current value of assets for year ending on the valuation date.....	6h	11.8%
i Expense load included in normal cost reported in line 9b.....	6i	<input type="checkbox"/> N/A
(1) If expense load is described as a percentage of normal cost, enter the assumed percentage.....	6i(1)	%
(2) If expense load is a dollar amount that varies from year to year, enter the dollar amount included in line 9b.....	6i(2)	305,256
(3) If neither (1) nor (2) describes the expense load, check the box.....	6i(3)	<input type="checkbox"/>

7 New amortization bases established in the current plan year:

(1) Type of base	(2) Initial balance	(3) Amortization Charge/Credit
1	-300,364	-29,176

8 Miscellaneous information:

a If a waiver of a funding deficiency has been approved for this plan year, enter the date (MM/DD/YYYY) of the ruling letter granting the approval.....	8a	
b Demographic, benefit, and contribution information		
(1) Is the plan required to provide a projection of expected benefit payments? (See instructions) If "Yes," see instructions for required attachment.....		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
(2) Is the plan required to provide a Schedule of Active Participant Data? (See instructions).....		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
(3) Is the plan required to provide a projection of employer contributions and withdrawal liability payments? (See instructions) If "Yes," attach a schedule.....		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
c Are any of the plan's amortization bases operating under an extension of time under section 412(e) (as in effect prior to 2008) or section 431(d) of the Code?.....		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
d If line c is "Yes," provide the following additional information:		
(1) Was an extension granted automatic approval under section 431(d)(1) of the Code?.....		<input type="checkbox"/> Yes <input type="checkbox"/> No
(2) If line 8d(1) is "Yes," enter the number of years by which the amortization period was extended..	8d(2)	
(3) Was an extension approved by the Internal Revenue Service under section 412(e) (as in effect prior to 2008) or 431(d)(2) of the Code?.....		<input type="checkbox"/> Yes <input type="checkbox"/> No
(4) If line 8d(3) is "Yes," enter number of years by which the amortization period was extended (not including the number of years in line (2)).....	8d(4)	
(5) If line 8d(3) is "Yes," enter the date of the ruling letter approving the extension.....	8d(5)	
(6) If line 8d(3) is "Yes," is the amortization base eligible for amortization using interest rates applicable under section 6621(b) of the Code for years beginning after 2007?.....		<input type="checkbox"/> Yes <input type="checkbox"/> No

e If box 5h is checked or the plan received an amortization extension for this plan year under Code section 431(d), enter the difference between the amount necessary to satisfy the plan's minimum funding standard for this plan year and the amount that would have been necessary without using the shortfall method or extending the amortization period(s).		8e	
9 Funding standard account statement for this plan year:			
Charges to funding standard account:			
a Prior year funding deficiency, if any		9a	17,828,051
b Employer's normal cost for plan year as of valuation date		9b	338,678
c Amortization charges as of valuation date:		Outstanding balance	
(1) All bases except funding waivers and certain bases for which the amortization period has been extended	9c(1)	4,635,282	1,409,261
(2) Funding waivers	9c(2)	0	0
(3) Certain bases for which the amortization period has been extended	9c(3)	0	0
d Interest as applicable on lines 9a, 9b, and 9c		9d	1,174,559
e Total charges. Add lines 9a through 9d		9e	20,750,549
Credits to funding standard account:			
f Prior year credit balance, if any		9f	0
g Employer contributions. Total from column (b) of line 3		9g	565,275
h Amortization credits as of valuation date		Outstanding balance	
	9h	4,618,933	765,891
i Interest as applicable to end of plan year on lines 9f, 9g, and 9h		9i	61,499
j Full funding limitation (FFL) and credits:			
(1) ERISA FFL (accrued liability FFL)	9j(1)	19,914,557	
(2) "RPA '94" override (90% current liability FFL)	9j(2)	22,532,684	
(3) FFL credit	9j(3)		0
k(1) Waived funding deficiency	9k(1)		0
(2) Other credits	9k(2)		0
l Total credits. Add lines 9f through 9i, 9j(3), 9k(1), and 9k(2)		9l	1,392,665
m Credit balance: If line 9l is greater than line 9e, enter the difference		9m	
n Funding deficiency: If line 9e is greater than line 9l, enter the difference		9n	19,357,884
o Current year's accumulated reconciliation account:			
(1) Due to waived funding deficiency accumulated prior to the current plan year		9o(1)	0
(2) Due to amortization bases extended and amortized using the interest rate under section 6621(b) of the Code:			
(a) Reconciliation outstanding balance as of valuation date	9o(2)(a)		0
(b) Reconciliation amount (line 9c(3) balance minus line 9o(2)(a))	9o(2)(b)		0
(3) Total as of valuation date	9o(3)		0
10 Contribution necessary to avoid an accumulated funding deficiency. (see instructions.)		10	19,357,884
11 Has a change been made in the actuarial assumptions for the current plan year? If "Yes," see instructions			<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No



333 West 34th Street, 3rd Floor
New York, NY 10001-2402
segalco.com T:212.251.5000

March 29, 2024

Internal Revenue Service
Employee Plans Compliance Unit
Group 7602 (TEGE:EP:EPCU)
230 S. Dearborn Street
Room 1700 - 17th Floor
Chicago, IL 60604

To Whom It May Concern:

As required by ERISA Section 305 and the Internal Revenue Code (IRC) Section 432, we have completed the actuarial status certification as of January 1, 2024 for the following plan:

Name of Plan: Moving Picture Machine Operators Union Local 306 Pension Fund
Plan number: EIN 13-6613842 / PN 001
Plan sponsor: Board of Trustees, Moving Picture Machine Operators Union Local 306 Pension Fund
Address: 303 Merrick Road, Lynbrook, NY 11563
Phone number: 516.396.5500

As of January 1, 2024, the Plan is in critical and declining status.

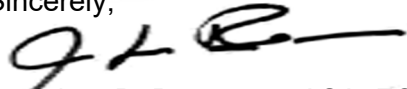
This certification does not reflect elections that the Trustees may make under the American Rescue Plan Act of 2021 (ARPA), enacted on March 11, 2021. Decisions that the Trustees may make to elect options available to them might also affect the Plan's "zone" status and minimum funding requirements for the current and future years. These decisions may be reflected in a future actuarial valuation.

This certification also notifies the IRS that the Plan is making the scheduled progress in meeting the requirements of its rehabilitation plan, based on information received from the sponsor and based on the annual standards of the rehabilitation plan.

If you have any questions on the attached certification, you may contact me at the following:

Segal
333 West 34th Street, 3rd Floor
New York, NY 10001-2402
Phone number: 212.251.5000

Sincerely,



Jonathan D. Benenson, ASA, FCA, MAAA, EA
Vice President and Consulting Actuary
Enrolled Actuary No. 23-08181

Section 3: Certificate of Actuarial Valuation

Exhibit L: Summary of plan provisions

(Schedule MB, Line 6)

This exhibit summarizes the major provisions of the Plan included in the valuation. It is not intended to be, nor should it be interpreted as, a complete statement of all plan provisions.

Plan year

January 1 through December 31

Pension credit year

January 1 through December 31

Plan status

Ongoing plan

Regular pension

- **Age Requirement:** 65
- **Service Requirement:** 10 pension credits including one earned during the contribution period
- **Amount:** \$30 for each pension credit with no maximum

Unreduced Early retirement

- **Age Requirement:** 60
- **Service Requirement:** 20 pension credits including one earned during the contribution period
- **Amount:** Regular pension accrued

Section 3: Certificate of Actuarial Valuation

- This subsidized pension has been eliminated for participants who terminated service on or after January 1, 2011 or worked under a collective bargaining agreement consistent with the Default Schedule under the Rehabilitation plan. A monthly benefit reduced for ages earlier than age 65 is payable to eligible participants.

Disability

- **Age Requirement:** None
- **Service Requirement:** 15 pension credits
- **Amount:** Regular pension accrued
- This pension has been eliminated for participants who terminated service on or after January 1, 2011 or worked under a collective bargaining agreement consistent with the Default Schedule under the Rehabilitation plan.

Vesting

- **Age Requirement:** None
- **Service Requirement:** Five years of Vesting Service.
- **Amount:** Regular or early pension accrued based on plan in effect when last active
- **Normal Retirement Age:** 65, or if later, the age of the participant on the fifth anniversary of his or her participation.

Spouse's pre-retirement death benefit

- **Age Requirement:** None
- **Service Requirement:** Five years of Vesting Service.
- **Amount:** 50% of the benefit participant would have received had he or she retired the day before death and elected the joint and survivor option. If the participant died prior to eligibility for an early retirement pension, the spouse's benefit is deferred to the date the participant would have reached his or her earliest retirement age under the plan.
- **Charge for Coverage:** None

Section 3: Certificate of Actuarial Valuation

Post-retirement death benefit

Husband and Wife: If married, pension benefits are paid in the form of a joint and survivor annuity unless this form is rejected by the participant and spouse. If not rejected, the benefit amount otherwise payable is reduced to reflect the joint and survivor coverage. If rejected, or if not married, benefits are payable for the life of the participant without reduction, or in any other available optional form elected by the employee in an actuarially equivalent amount.

Optional forms of benefits

Single Life Annuity; 50% Husband-and-Wife Pension; 75% Joint and Survivor Pension.

Participation

Earliest January 1st or July 1st following completion of a 12 consecutive month period during which a participant earned at least \$4,500 in base pay or completed at least 100 shifts in covered employment.

Pension credit

For employment before the contribution period, one pension credit for each \$18,000 earned in covered employment. $\frac{1}{4}$ of a pension credit for each \$4,500 earned in covered employment, provided that in any event any employee has completed 1,000 hours of service shall earn at least $\frac{1}{2}$ pension credit.

Vesting credit

One year of vesting service for each credit year during the contribution period in which the employee earned at least $\frac{1}{2}$ year of pension credit.

Contribution rate

Various contribution rates from 8% to 26.6% of gross wages

Changes in plan provisions

There were no changes in plan provisions reflected in this actuarial valuation.

10105834v1/01595.001

Pension Fund of the Moving Picture Machine Operators Union Local 306 Actuarial Valuation as of January 1, 2024. EIN 13-6613842/PN 001

Section 3: Certificate of Actuarial Valuation

Exhibit K: Statement of actuarial assumptions, methods and models

(Schedule MB, Line 6)

Mortality rates

Healthy: Pri-2012 Blue Collar Employee and Healthy Retiree Amount-Weighted Mortality Tables

Disabled: Pri-2012 Disabled Retiree Amount-Weighted Mortality Table

The underlying tables with generational projection using Scale MP-2019 to the ages of participants as of the measurement date reasonably reflect the mortality experience of the Plan as of the measurement date.

These mortality tables were then adjusted to future years using the generational projection using Scale MP-2019 to reflect future mortality improvement between the measurement date and those years.

The mortality rates were based on historical and current demographic data, adjusted to reflect estimated future experience and professional judgment. As part of the analysis, a comparison was made between the actual number of and liability change due to deaths and the projected number of and liability change based on the prior year's assumption over the past several years.

Termination rates

Age	Mortality Male ¹	Mortality Female ¹	Withdrawal ²
20	0.07	0.02	17.94
25	0.07	0.03	17.22
30	0.07	0.03	16.21
35	0.07	0.04	14.86
40	0.09	0.06	13.10
45	0.12	0.09	10.84
50	0.18	0.13	7.92
55	0.28	0.20	4.40
60	0.46	0.32	1.20

¹ Mortality rates shown for base table.

² Withdrawal rates do not apply at or beyond early retirement age.

Section 3: Certificate of Actuarial Valuation

The termination rates were based on historical and current demographic data, adjusted to reflect estimated future experience and professional judgment. As part of the analysis, a comparison was made between the actual number of terminations and the projected number based on the prior year's assumption over the past several years.

Retirement rates

Age	Annual Retirement Rates
60 – 64	15
65 – 67	25
68 – 69	50
70 & older	100

The retirement rates were based on historical and current demographic data, adjusted to reflect estimated future experience and professional judgment. As part of the analysis, a comparison was made between the actual number of retirements and the projected number based on the prior year's assumption over the past several years.

Description of weighted average retirement age

Age 65, determined as follows: The weighted average retirement age for each participant is calculated as the sum of the product of each potential current or future retirement age times the probability of surviving from current age to that age and then retiring at that age, assuming no other decrements. The overall weighted retirement age is the average of the individual retirement ages based on all the active participants included in the January 1, 2024 actuarial valuation.

Retirement age for inactive vested participants

60 with at least 20 years of service, or age 65, or completion of service requirement if later. The retirement age for inactive vested participants was based on historical and current demographic data, adjusted to reflect estimated future experience and professional judgement. As part of the analysis, a comparison was made between the actual number of retirements and the projected number based on the prior year's assumption over the past several years.

Future benefit accruals

One pension credit per year

Pension Fund of the Moving Picture Machine Operators Union Local 306 Actuarial Valuation as of January 1, 2024. EIN 13-6613842/PN 001

Section 3: Certificate of Actuarial Valuation

Unknown data for participants

Same as those exhibited by participants with similar known characteristics. If not specified, participants are assumed to be male.

Definition of active participants

Active participants are defined as those who earned at least \$4,500 in the most recent plan year and who have accumulated at least one pension credit, excluding those who have retired as of the valuation date.

Percent married

75%

Age of spouse

Spouses of male participants are three years younger and spouses of female participants are three years older.

Benefit election

50% of all participants are assumed to elect the Life Annuity, 30% of all participants are assumed to elect the 50% Husband and Wife, and 20% are assumed to elect the 75% Joint and Survivor Pension. The benefit elections were based on historical and current demographic data, adjusted to reflect the plan design, estimated future experience and professional judgment. As part of the analysis, a comparison was made between the assumed and the actual option election patterns over the past several years.

Delayed retirement factors

Active participants work enough hours each month to not qualify for delayed retirement adjustment. Inactive vested participants who are assumed to commence receipt of benefits after attaining normal retirement age qualify for delayed retirement increases.

Net investment return

6.00%

The net investment return assumption is a long-term estimate derived from historical data, current and recent market expectations, and professional judgment. As part of the analysis, a building block approach was used that reflects inflation expectations and

Section 3: Certificate of Actuarial Valuation

anticipated risk premiums for each of the portfolio's asset classes as provided by Segal Marco Advisors, as well as the Plan's target asset allocation.

Annual administrative expenses

\$315,000 for the year beginning January 1, 2024 (equivalent to \$305,256 payable at the beginning of the year) and \$275,000 for the year beginning January 1, 2025. The annual administrative expenses were based on historical and current data, adjusted to reflect estimated future experience and professional judgment.

Actuarial value of assets

The market value of assets less unrecognized returns in each of the last five years. Unrecognized return is equal to the difference between the actual market return and the projected return on the actuarial value, and is recognized over a five – year period. The actuarial value is further adjusted, if necessary, to be within 20% of the market value.

Actuarial cost method

Unit Credit Actuarial Cost Method. Normal Cost and Actuarial Accrued Liability are calculated on an individual basis and are allocated by service.

Benefits valued

Unless otherwise indicated, includes all benefits summarized in Exhibit L.

Current liability assumptions

- **Interest:** 3.29%, within the permissible range prescribed under IRC Section 431(c)(6)(E)
- **Mortality:** Mortality prescribed under IRS Regulations 1.431(c)(6)-1 and 1.430(h)(3)-1(a)(1): Pri-2012 employee and annuitant mortality tables, projected generationally using the Adjusted MP-2021 scale as described in the final IRS mortality regulations released in October 2023 (previously, RP-2014 employee and annuitant mortality tables, adjusted backward to the base year (2006) using scale MP-2014, projected forward generationally using scale MP-2021 was used).

Section 3: Certificate of Actuarial Valuation

Estimated rate of investment return

- On actuarial value of assets (Schedule MB, line 6g): 8.6%, for the Plan Year ending December 31, 2023
- On current (market) value of assets (Schedule MB, line 6h): 11.8%, for the Plan Year ending December 31, 2023

FSA contribution timing (Schedule MB, line 3a)

Unless otherwise noted, contributions are paid periodically throughout the year pursuant to collective bargaining agreements. The interest credited in the FSA is therefore assumed to be equivalent to a July 15 contribution date.

Actuarial models

Segal valuation results are based on proprietary actuarial modeling software. The actuarial valuation models generate a comprehensive set of liability and cost calculations that are prepared to meet regulatory, legislative and client requirements. Our Actuarial Technology and Systems unit, comprised of both actuaries and programmers, is responsible for the initial development and maintenance of these models. The models have a modular structure that allows for a high degree of accuracy, flexibility and user control. The client team programs the assumptions and the plan provisions, validates the models, and reviews test lives and results, under the supervision of the responsible Enrolled Actuary.

Justification for change in actuarial assumptions (Schedule MB, line 11)

- For purposes of determining current liability, the current liability interest rate was changed from 2.55% to 3.29% due to a change in the permissible range and recognizing that any rate within the permissible range satisfies the requirements of IRC Section 431(c)(6)(E) and the mortality tables and mortality improvement scales were changed in accordance with IRS Regulations 1.431(c)(6)-1 and 1.430(h)(3)-1.
- Based on past experience and future expectations, the following actuarial assumption was changed as of January 1, 2024:
 - Annual administrative expenses, previously \$490,000

Section 3: Certificate of Actuarial Valuation

Exhibit F: Schedule of active participant data

(Schedule MB, Line 8b(2))

The participant data is for the year ended December 31, 2023.

Pension Credits

Age	Total	1 - 4	5 - 9	10 - 14	15 - 19	20 - 24	25 - 29	30 - 34	35 & over
Under 40	5	5	—	—	—	—	—	—	—
40 - 44	4	1	2	1	—	—	—	—	—
45 - 49	2	—	—	—	—	1	1	—	—
50 - 54	3	1	1	1	—	—	—	—	—
55 - 59	6	1	—	1	—	2	2	—	—
60 & over	4	—	—	—	—	1	1	—	2
Totals	24	8	3	3	—	4	4	—	2

Note: Excludes 11 participants with less than one pension credit.

Section 3: Certificate of Actuarial Valuation

Schedule of FSA Bases (Charges) (Schedule MB, Line 9c)

Type of Base	Date Established	Outstanding Balance	Years Remaining	Amortization Amount
Assumption change	01/01/2010	\$431,489	1	\$431,489
Actuarial loss	01/01/2011	158,396	2	81,505
Assumption change	01/01/2012	210,188	3	74,182
Actuarial loss	01/01/2012	605,885	3	213,837
Actuarial loss	01/01/2013	899,953	4	245,018
Actuarial loss	01/01/2014	146,950	5	32,911
Assumption change	01/01/2014	265,533	5	59,468
Assumption change	01/01/2015	233,506	6	44,798
Actuarial loss	01/01/2015	240,066	6	46,057
Actuarial loss	01/01/2016	54,376	7	9,189
Actuarial loss	01/01/2017	144,499	8	21,952
Actuarial loss	01/01/2020	135,170	11	16,168
Assumption change	01/01/2020	1,109,271	11	132,687
Total		\$4,635,282		\$1,409,261

Section 3: Certificate of Actuarial Valuation

Schedule of FSA Bases (Credits) (Schedule MB, Line 9h)

Type of Base	Date Established	Outstanding Balance	Years Remaining	Amortization Amount
Actuarial gain	01/01/2010	\$116,139	1	\$116,139
Plan amendment	01/01/2011	375,088	2	193,006
Plan amendment	01/01/2012	29,320	3	10,348
Plan amendment	01/01/2013	16,145	4	4,396
Plan amendment	01/01/2014	9,116	5	2,042
Plan amendment	01/01/2015	36,447	6	6,992
Plan amendment	01/01/2016	27,483	7	4,644
Actuarial gain	01/01/2018	231,131	9	32,058
Actuarial gain	01/01/2019	201,708	10	25,854
Actuarial gain	01/01/2021	424,708	12	47,790
Actuarial gain	01/01/2022	799,454	13	85,195
Actuarial gain	01/01/2023	487,571	14	49,486
Assumption change	01/01/2023	1,564,259	14	158,765
Actuarial gain	01/01/2024	300,364	15	29,176
Total		\$4,618,933		\$765,891

Section 3: Certificate of Actuarial Valuation

Estimated rate of investment return

- On actuarial value of assets (Schedule MB, line 6g): 8.6%, for the Plan Year ending December 31, 2023
- On current (market) value of assets (Schedule MB, line 6h): 11.8%, for the Plan Year ending December 31, 2023

FSA contribution timing (Schedule MB, line 3a)

Unless otherwise noted, contributions are paid periodically throughout the year pursuant to collective bargaining agreements. The interest credited in the FSA is therefore assumed to be equivalent to a July 15 contribution date.

Actuarial models

Segal valuation results are based on proprietary actuarial modeling software. The actuarial valuation models generate a comprehensive set of liability and cost calculations that are prepared to meet regulatory, legislative and client requirements. Our Actuarial Technology and Systems unit, comprised of both actuaries and programmers, is responsible for the initial development and maintenance of these models. The models have a modular structure that allows for a high degree of accuracy, flexibility and user control. The client team programs the assumptions and the plan provisions, validates the models, and reviews test lives and results, under the supervision of the responsible Enrolled Actuary.

Justification for change in actuarial assumptions (Schedule MB, line 11)

- For purposes of determining current liability, the current liability interest rate was changed from 2.55% to 3.29% due to a change in the permissible range and recognizing that any rate within the permissible range satisfies the requirements of IRC Section 431(c)(6)(E) and the mortality tables and mortality improvement scales were changed in accordance with IRS Regulations 1.431(c)(6)-1 and 1.430(h)(3)-1.
- Based on past experience and future expectations, the following actuarial assumption was changed as of January 1, 2024:
 - Annual administrative expenses, previously \$490,000

Documentation Regarding Progress Under Rehabilitation Plan (Schedule MB, line 4c)

This certification also notifies the IRS that the Plan is making the scheduled progress in meeting the requirements of its rehabilitation plan, based on information received from the sponsor and based on the annual standards of the rehabilitation plan.

The rehabilitation plan's annual standard is for updated actuarial projections each year to show, based on reasonable assumptions, that the Fund is not expected to become insolvent before the end of the Plan year ending in 2019. Based on the actuarial assumptions and methods used in this certification, the Plan is projected to be insolvent in the year ending in 2026.

Exhibit 5: Solvency Projection

The table below presents the projected Market Value of Assets for the Plan Years beginning January 1, 2023 through 2026.

	Year Beginning January 1,			
	2023	2024	2025	2026
1. Market Value at beginning of year	\$7,153,137	\$6,168,632	\$4,136,593	\$1,825,000
2. Contributions	259,444	259,444	259,444	259,444
3. Withdrawal liability payments attributable to prior withdrawals	947,077	405,581	166,331	144,581
4. Benefit payments	2,451,909	2,689,886	2,598,495	2,498,145
5. Administrative expenses	481,841	300,000	306,000	312,120
6. Interest earnings	742,724	292,822	167,127	30,928
7. Market Value at end of year: (1)+(2)+(3)-(4)-(5)+(6)	\$6,168,632	\$4,136,593	\$1,825,000	\$0

Actuarial Status Certification as of January 1, 2024 under IRC Section 432
March 29, 2024

Illustration Supporting Actuarial Certification of Status (Schedule MB, line 4b)

This is to certify that Segal has prepared an actuarial status certification under Internal Revenue Code Section 432 for the Moving Picture Machine Operators Union Local 306 Pension Fund as of January 1, 2024 in accordance with generally accepted actuarial principles and practices. It has been prepared at the request of the Board of Trustees to assist in administering the Fund and meeting filing and compliance requirements under federal law. This certification may not otherwise be copied or reproduced in any form without the consent of the Board of Trustees and may only be provided to other parties in its entirety.

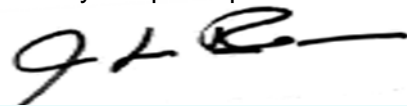
The measurements shown in this actuarial certification may not be applicable for other purposes. Future actuarial measurements may differ significantly from the current measurements presented in this report due to such factors as the following: plan experience differing from that anticipated by the economic or demographic assumptions; changes in economic or demographic assumptions; increases or decreases expected as part of the natural operation of the methodology used for these measurements (such as the end of an amortization period or additional cost or contribution requirements based on the plan's funded status); differences in statutory interpretation and changes in plan provisions or applicable law.

This certification is based on the January 1, 2023 actuarial valuation, dated March 28, 2024. This certification reflects the changes in the law made by the Multiemployer Pension Reform Act of 2014 (MPRA) and the American Rescue Plan Act of 2021 (ARPA). Additional assumptions required for the projections (including those under MPRA and ARPA), and sources of financial information used are summarized in Exhibit 6.

Segal does not practice law and, therefore, cannot and does not provide legal advice. Any statutory interpretation on which this certification is based reflects Segal's understanding as an actuarial firm.

This certification was based on the assumption that the Plan was qualified as a multiemployer plan for the year.

I am a member of the American Academy of Actuaries and I meet the Qualification Standards of the American Academy of Actuaries to render the actuarial opinion herein. To the best of my knowledge, the information supplied in this actuarial certification is complete and accurate. In my opinion, the projections are based on reasonable actuarial estimates, assumptions and methods that offer my best estimate of anticipated experience under the Plan. Furthermore, as required by IRC Section 432(b)(3)(B)(iii), the projected industry activity takes into account information provided by the plan sponsor.



Jonathan D. Benenson, ASA, FCA, MAAA, EA

EA# 23-08181

Title Vice President and Consulting Actuary

Email jbenenson@segalco.com

Certificate Contents

Exhibit 1	Status Determination as of January 1, 2024
Exhibit 2	Summary of Actuarial Valuation Projections
Exhibit 3	Funding Standard Account Projection
Exhibit 4	Funding Standard Account — Projected Bases Assumed Established After January 1, 2023
Exhibit 5	Solvency Projection
Exhibit 6	Actuarial Assumptions and Methodology

Actuarial Status Certification under IRC Section 432

Exhibit 1: Status Determination as of January 1, 2024

Status	Condition	Component Result	Final Result
Critical Status:			
1. Initial critical status tests:			
C1.	A funding deficiency is projected in four years?	Yes	Yes
C2. a.	A funding deficiency is projected in five years,	Yes	
	b. and the present value of vested benefits for non-actives is more than present value of vested benefits for actives,	Yes	
	c. and the normal cost plus interest on unfunded actuarial accrued liability (unit credit basis) is greater than contributions for current year?	Yes	Yes
C3. a.	A funding deficiency is projected in five years,	Yes	
	b. and the funded percentage is less than 65%?	Yes	Yes
C4. a.	The funded percentage is less than 65%,	Yes	
	b. and the present value of assets plus contributions is less than the present value of benefit payments and administrative expenses over seven years	Yes	Yes
C5.	The present value of assets plus contributions is less than the present value of benefit payments and administrative expenses over five years?	Yes	Yes
2. In Critical Status? (If any of C1-C5 is Yes, then Yes)			Yes
3. Determination of critical and declining status:			
C6. a.	Any of (C1) through (C5) are Yes?	Yes	Yes
	b. and either Insolvency is projected within 15 years?	Yes	Yes
	c. or		
	1) The ratio of inactive to active is at least 2 to 1,	Yes	
	2) and insolvency is projected within 20 years?	Yes	Yes
	d. or		
	1) The funded percentage is less than 80%,	Yes	
	2) and insolvency is projected within 20 years	Yes	Yes
In Critical and Declining Status?			Yes

Moving Picture Machine Operators Union Local 306 Pension Fund, EIN 13-6613842 / PN 001

Status	Condition	Component Result	Final Result
Endangered Status:			
	E1. a. Is not in critical status,	No	
	b. and the funded percentage is less than 80%?	Yes	No
	E2. a. Is not in critical status,	No	
	b. and a funding deficiency is projected in seven years?	Yes	No
In Endangered Status? (Yes when either (E1) or (E2) is Yes)			No
In Seriously Endangered Status? (Yes when BOTH (E1) and (E2) are Yes)			No
Neither Critical Status Nor Endangered Status:			
Neither Critical nor Endangered Status?			No

Documentation Regarding Progress Under Rehabilitation Plan (Schedule MB, line 4c)

This certification also notifies the IRS that the Plan is making the scheduled progress in meeting the requirements of its rehabilitation plan, based on information received from the sponsor and based on the annual standards of the rehabilitation plan.

The rehabilitation plan's annual standard is for updated actuarial projections each year to show, based on reasonable assumptions, that the Fund is not expected to become insolvent before the end of the Plan year ending in 2019. Based on the actuarial assumptions and methods used in this certification, the Plan is projected to be insolvent in the year ending in 2026.

Exhibit 2: Summary of Actuarial Valuation Projections

The actuarial factors as of January 1, 2024 (based on projections from the January 1, 2023 valuation certificate):

1. Financial Information			
a.	Market value of assets		\$6,168,632
b.	Actuarial value of assets		6,772,701
c.	Reasonably anticipated contributions (including withdrawal liability payments of \$405,581)		
1)	Upcoming year		665,025
2)	Present value for the next five years		2,021,590
3)	Present value for the next seven years		2,590,333
d.	Projected benefit payments		2,689,886
e.	Projected administrative expenses (beginning of year)		290,720
2. Liabilities			
a.	Present value of vested benefits for active participants		655,051
b.	Present value of vested benefits for non-active participants		24,071,721
c.	Total unit credit accrued liability		24,742,330
d.	Present value of payments		
		Benefit Payments	Administrative Expenses
1)	Next five years	\$10,914,675	\$1,347,956
2)	Next seven years	13,951,661	1,818,612
e.	Unit credit normal cost plus expenses		320,847
f.	Ratio of inactive participants to active participants		22.9524
3.	Funded Percentage (1.b)/(2.c)		27.3%
4. Funding Standard Account			
a.	Credit balance as of the end of prior year		(\$17,851,368)
b.	Years to projected funding deficiency		0
5.	Years to projected insolvency		3

Exhibit 3: Funding Standard Account Projection

The table below presents the Funding Standard Account Projection for the Plan Years beginning January 1.

	Year Beginning January 1,			
	2023	2024	2025	2026
1. Credit balance/(funding deficiency) (BOY)	(\$16,442,761)	(\$17,851,368)	(\$19,271,703)	(\$20,704,837)
2. Interest on (1)	(986,566)	(1,071,082)	(1,156,302)	(1,242,290)
3. Normal cost	30,127	30,127	30,127	30,127
4. Administrative expenses	474,843	290,720	296,534	302,465
5. Net amortization charges	1,062,711	653,272	347,222	486,027
6. Interest on (3), (4) and (5)	94,060	58,447	40,433	49,117
7. Expected contributions and withdrawal liability payments	1,206,521	665,025	425,775	404,025
8. Interest on (7)	33,179	18,288	11,709	11,111
9. Credit balance/(funding deficiency) (EOY): (1) + (2) – (3) – (4) – (5) – (6) + (7) + (8)	(\$17,851,368)	(\$19,271,703)	(\$20,704,837)	(\$22,399,727)

Exhibit 4: Funding Standard Account — Projected Bases Assumed Established after January 1, 2023
Schedule of Funding Standard Account Bases

Type of Base	Date Established	Base Established	Amortization Period	Amortization Payment
Actuarial gain	1/1/2024	(\$198,452)	15	(\$19,277)
Actuarial loss	1/1/2025	95,790	15	9,305
Actuarial loss	1/1/2026	281,035	15	27,298
Actuarial loss	1/1/2027	388,558	15	37,743
Actuarial gain	1/1/2028	(79,109)	15	(7,684)

Exhibit 5: Solvency Projection

The table below presents the projected Market Value of Assets for the Plan Years beginning January 1, 2023 through 2026.

	Year Beginning January 1,			
	2023	2024	2025	2026
1. Market Value at beginning of year	\$7,153,137	\$6,168,632	\$4,136,593	\$1,825,000
2. Contributions	259,444	259,444	259,444	259,444
3. Withdrawal liability payments attributable to prior withdrawals	947,077	405,581	166,331	144,581
4. Benefit payments	2,451,909	2,689,886	2,598,495	2,498,145
5. Administrative expenses	481,841	300,000	306,000	312,120
6. Interest earnings	742,724	292,822	167,127	30,928
7. Market Value at end of year: (1)+(2)+(3)-(4)-(5)+(6)	\$6,168,632	\$4,136,593	\$1,825,000	\$0

Exhibit 6: Actuarial Assumptions and Methodology

The actuarial assumptions and plan of benefits are as used in the January 1, 2023 actuarial valuation certificate, dated March 28, 2024, except as specifically described below. We also assumed that experience would emerge as projected, except as described below. The calculations are based on a current understanding of the requirements of ERISA Section 305 and IRC Section 432.

Asset Information:	<p>The financial information as of December 31, 2023 was based on an unaudited financial statement provided by the Fund Auditor.</p> <p>For projections after that date, the assumed administrative expenses were increased by 2% per year and the benefit payments were projected based on the January 1, 2023 actuarial valuation. The projected net investment return was assumed to be 6% of the average market value of assets for the 2024–2026 Plan Years. Any resulting investment gains or losses due to the operation of the asset valuation method are amortized over 15 years in the Funding Standard Account.</p>
Projected Industry Activity:	<p>The projected industry activity assumption takes into account information provided by the plan sponsor as required by Internal Revenue Code Section 432, historical and current contribution levels, projections in employment levels, and professional judgment. Based on this information, the number of active participants is assumed to remain level from the January 1, 2023 valuation and total base wages is assumed to remain the same level as the 2023 plan year.</p> <p>In addition to projections of industry activity directly linked to the level of ongoing employment, these determinations also project the following contribution amounts derived from withdrawal liability assessments, based on information from the Trustees of \$405,581 for 2024, \$166,331 for 2025 and \$144,581 for 2026.</p>
Future Normal Costs:	<p>Based on the assumed industry activity and the unit credit cost method, we have assumed that the Normal Cost in future years will be the same as in the 2023 plan year.</p>

Segal valuation results are based on proprietary actuarial modeling software. The actuarial valuation models generate a comprehensive set of liability and cost calculations that are presented to meet regulatory, legislative and client requirements. Deterministic cost projections are based on a proprietary forecasting model. Our Actuarial Technology and Systems unit, comprised of both actuaries and programmers, is responsible for the initial development and maintenance of these models. The models have a modular structure that allows for a high degree of accuracy, flexibility and user control. The client team programs the assumptions and the plan provisions, validates the models, and reviews test lives and results, under the supervision of the responsible actuary.

9914072v3/01595.515

Section 2: Actuarial Valuation Results

Schedule MB, line 6f(1) – Description of Withdrawal Liability Interest Rate

- The actuarial assumptions and methods are reasonable (taking into account the experience of the Plan and reasonable expectations) and, in combination, represent the actuary’s best estimate of anticipated experience under the Plan to determine the unfunded vested benefits for withdrawal liability purposes.
- The present value of vested benefits is based on a blend of two liability calculations:
 - The first calculation applies to benefits that could be settled immediately because assets on hand are sufficient to cover their market value. Since withdrawal liability is a final settlement of an employer’s obligation to the Plan, the discount rates used are based on estimated annuity purchase rates. ERISA Sec. 4044 interest rates promulgated by the PBGC for multiemployer plans terminating by mass withdrawal on the measurement date are used as a proxy for annuity purchase rates.
 - The second calculation applies to benefits that cannot be settled immediately because they are not currently funded. This calculation uses the interest rate determined by the plan actuary for minimum funding, based on the expected return on current and future assets.
- Reductions in accrued benefits or contribution surcharges for a plan in critical status (Red Zone) are disregarded in determining an employer’s allocation of the UVB. The Trustees have adopted a method for calculating the UVB effective for withdrawals that occur on and after January 1, 2011. The method is based on the PBGC’s Technical Update 10-3, which describes how to account for the effect of benefit reductions that are implemented as part of a Rehabilitation Plan (“Affected Benefits”) when a pension plan is in critical status.

Assumption	Description
Interest	For liabilities up to market value of assets, 5.06% for 20 years and 4.37% beyond (3.90% for 20 years and 3.65% beyond, in the prior year valuation). For liabilities in excess of market value of assets, same as used for the plan year ending December 31, 2023 (the corresponding interest rate as of a year earlier was used for the prior year’s value)
Administrative Expenses	Calculated as prescribed by PBGC formula (29 CFR Part 4044, Appendix C); not applicable to those liabilities determined using funding interest rates
Mortality	Same as used for plan funding as of December 31, 2023 (the corresponding mortality rates as of a year earlier were used for the prior year’s value)
Retirement Rates	Same as used for plan funding as of December 31, 2023 (the corresponding retirement rates as of a year earlier were used for the prior year’s value)

Schedule MB, Line 3(d) - Withdrawal Liability Amounts

Payment Date	Periodic Amounts	Lump Sum Amounts	Total Amounts
01/16/2024	\$21,750.00	\$0.00	\$21,750.00
02/20/2024	\$21,750.00	\$0.00	\$21,750.00
02/22/2024	\$6,489.75	\$0.00	\$6,489.75
02/27/2024	\$29,086.75	\$0.00	\$29,086.75
03/01/2024	\$568.75	\$0.00	\$568.75
04/04/2024	\$21,750.00	\$0.00	\$21,750.00
04/15/2024	\$21,750.00	\$0.00	\$21,750.00
05/01/2024	\$21,750.00	\$0.00	\$21,750.00
05/22/2024	\$29,086.75	\$0.00	\$29,086.75
05/30/2024	\$6,489.75	\$0.00	\$6,489.75
06/03/2024	\$568.75	\$0.00	\$568.75
06/06/2024	\$21,750.00	\$0.00	\$21,750.00

Schedule MB, Line 3(d) - Withdrawal Liability Amounts

Payment Date	Periodic Amounts	Lump Sum Amounts	Total Amounts
07/29/2024	\$21,750.00	\$0.00	\$21,750.00
08/30/2024	\$29,086.75	\$0.00	\$29,086.75
09/03/2024	\$568.75	\$0.00	\$568.75
09/12/2024	\$43,500.00	\$0.00	\$43,500.00
10/21/2024	\$21,750.00	\$0.00	\$21,750.00
12/02/2024	\$568.75	\$0.00	\$568.75
12/09/2024	\$29,086.75	\$0.00	\$29,086.75
12/19/2024	\$21,750.00	\$0.00	\$21,750.00
Total	\$370,851.50	\$0.00	\$370,851.50

**PENSION FUND OF THE
MOVING PICTURE MACHINE OPERATORS UNION LOCAL 306**

2024 Updated Rehabilitation Plan

December 3, 2024

Introduction

Section 305 of the Employee Retirement Income Security Act (“ERISA”) and section 432 of the Internal Revenue Code (“IRC”), as added by the Pension Protection Act of 2006 (“PPA”), require the Trustees of a multiemployer pension fund that has been certified by its actuary as being in Critical Status (also known as the “Red Zone”) to develop a Rehabilitation Plan. Generally, the Rehabilitation Plan should enable a fund to cease to be in Critical Status by the end of the rehabilitation period. However, if the Trustees determine, based upon the exhaustion of all reasonable measures, that a fund cannot reasonably be expected to emerge from Critical Status by the end of the rehabilitation period, the Rehabilitation Plan should be designed to enable the fund to cease to be in Critical Status at a later time or to forestall possible insolvency. The Rehabilitation Plan must be based on reasonably anticipated experience and on reasonable actuarial assumptions.

On March 31, 2010, the Pension Fund of the Moving Picture Machine Operators Union Local 306 (“the Fund”) was certified by its actuary to be in Critical Status for the Plan Year beginning January 1, 2010.

The Fund adopted a Rehabilitation Plan on November 17, 2010 (the “Initial Rehabilitation Plan”), and Updated Rehabilitation Plans in each year since 2010. ERISA requires the plan sponsor to update a rehabilitation plan annually. On March 29, 2024, the Fund’s actuary certified the Fund for the Plan Year beginning January 1, 2024 to be in Critical and Declining Status. Accordingly, the Trustees adopted this 2024 Updated Rehabilitation Plan on December 3, 2024 (the “2024 Updated Rehabilitation Plan”).

This 2024 Updated Rehabilitation Plan:

1. specifies the rehabilitation period;
2. describes alternatives the Trustees considered when preparing the Initial Rehabilitation Plan;
3. explains why the Trustees have concluded that, based on the Fund’s experience and

projections based thereon, there is no reasonable basis for altering the terms of the Rehabilitation Plan that is currently in effect, except with respect to contribution increases as described below;

4. includes remedies and an updated schedule of benefits and contributions (the Updated Default Schedule) that, if adopted by the bargaining parties, is projected to enable the Fund to postpone the projected date of insolvency. Collective bargaining agreements between the union and contributing employers that are agreed to on or after December 15, 2010 will not be accepted by the Trustees unless they include terms consistent with this schedule.
5. explains that the Updated Default Schedule will be put into effect automatically if the bargaining parties do not agree on an acceptable schedule in a timely manner; and
6. sets out annual standards to be achieved under the 2024 Updated Rehabilitation Plan and explains that the Rehabilitation Plan will be further updated from time to time.

Rehabilitation Period

The rehabilitation period is the period of ten Plan Years beginning January 1, 2013.

Rehabilitation Plan Standard

ERISA and the IRC generally provide for a 10-year rehabilitation period, at the end of which a plan must emerge from Critical Status. However, the laws also specifically provide that if the Trustees determine that the Plan cannot reasonably be expected to emerge from Critical Status by the end of the rehabilitation period, the rehabilitation plan may consist of reasonable measures to emerge from Critical Status at a later time or to forestall possible insolvency. In the prior Rehabilitation Plans, the Trustees have concluded that there are no reasonable measures that would permit the Fund to emerge from Critical Status at any time, and that the Fund's rehabilitation plan would consist of reasonable measures to forestall the Fund's insolvency. The measures adopted in the Initial and 2011 Updated Rehabilitation Plans were both projected to have the effect of forestalling the Fund's insolvency by two years, from the Plan Year ending in 2019 to the year ending in 2021. The Plan was projected to become insolvent during the plan year ending December 31, 2026. In August 2024, the Fund received Special Financial Assistance pursuant to the American Rescue Plan Act, improving its financial condition. As a result, the Trustees have determined that the goal of this 2024 Updated Rehabilitation shall be to forestall the Fund's insolvency past the year ending in 2045. The projected insolvency

date will change from time to time depending on the Fund's investment performance and on other variables including employer withdrawals from the Fund and the Fund's collection of withdrawal liability.

Alternatives Considered by the Trustees

The Board of Trustees considered several actions, options, and alternatives that would enable the Fund to emerge from Critical Status by the end of the rehabilitation period. The Trustees determined the measures considered for the purpose of emerging from Critical Status within the rehabilitation period were unreasonable, would be untenable or counterproductive, and would not be in the best interests of the Fund or its participants and beneficiaries. The measures considered included the following:

Secure a merger with another fund: A standard merger (not PBGC-assisted) was considered before the Fund entered Critical Status. In the 1990s, when the Fund's financial condition was more robust, the Fund made inquiries about merging with another Fund. That effort was rejected by the target Fund. In view of the Fund's financial condition, the Trustees concluded that there is no likelihood of finding a willing merger target.

Benefit changes and increased employer contributions for emergence by the end of the rehabilitation period: Actuarial projections indicated that the Default schedule of benefits, which maintains the prescribed "floor" of future benefit accruals and the elimination of all adjustable benefits, required a 21.5% annual contribution rate increase for each of the ten years of the rehabilitation period in order for the Fund to avoid insolvency and emerge from Critical Status by the end of the rehabilitation period. Actuarial projections also indicated that even if all future accruals were frozen and all non-protected and adjustable benefits were otherwise reduced to the extent permitted by law, the contribution rate would need to be increased by 21% per year for each of the ten years of the rehabilitation period in order for the Fund to avoid insolvency and emerge from Critical Status by the end of the rehabilitation period. Freezing accruals was rejected as an option because the Trustees determined that such an action would deter employers from agreeing in bargaining to make further contributions to the Plan.

The Trustees also considered the possibility of eliminating the early retirement subsidy prior to the adoption of the Initial Rehabilitation Plan, to the extent permitted by law. In view of the mass layoffs occurring in the industry and the modest actuarial effect that such an

elimination would have had on the Fund's projected insolvency, the Trustees concluded that such a measure would have been inequitable and unreasonable.

Suspension of Benefits or Partition under the Multiemployer Pension Reform Act

The Trustees also considered the possibility of making an application to suspend accrued benefits, including benefits in pay status, in order to avoid insolvency, as permitted under the Multiemployer Pension Reform Act of 2014 (MPRA). The Fund's actuary advised, however, that upon review of the matter, the level of benefit suspensions permitted under MPRA would not be sufficient to avoid insolvency. In consultation with the Fund's actuary, the Trustees also determined that at the present time, applying for partition of the Fund did not appear to be sufficiently likely to enable the Fund to emerge from Critical Status by the end of the Rehabilitation Period to justify the expense of such an application, but that they would continue to consider partition. The Trustees have accordingly not sought to file an application for suspensions or partition under MPRA.

Past and Projected Future Experience of the Fund

Over the nine years prior to adoption of the Initial Rehabilitation Plan, the number of active employees declined over 40% due to the technological changes in the industry that occurred and continue to occur. There were 160 active participants with a wage base of about \$7 million included in the January 1, 2010 actuarial valuation. As of January 1, 2023, the number of active participants had declined to 23, and in 2023, the total wages upon which contributions were made equaled \$1,185,054. For purposes of the most recent actuarial status certification of the Fund, the number of active participants and total base wages was projected to remain level.

In the Initial Rehabilitation Plan, it was calculated that the contribution rate per active participant would have to increase from about 15% of wages to over 100% of wages by the end of the 10-year rehabilitation period. The Board of Trustees concluded that such changes in contributions were not reasonable, were unrealistic, and involved considerable risk to the Fund and Fund participants and beneficiaries. The continued existence of the Fund and the Trustees' ability to discourage bargaining withdrawals would be jeopardized by the magnitude of the contribution rates required to emerge from Critical Status by the end of the rehabilitation period.

As of January 1, 2023, the default schedules set forth pursuant to the prior Rehabilitation Plans¹ have been adopted for approximately 86% of active participants. The Trustees have concluded that this level of adoption has not improved the Fund's condition to an extent sufficient to justify any revision of the Updated Default Schedule that is currently in place.

Projections performed in conjunction with the January 1, 2024 zone status certification determined that the Fund is expected to become insolvent during the Plan Year ending December 31, 2026. In that certification, insolvency was thus projected to occur one year later than projected last year. The Trustees have concluded that no change in the schedule of contribution rates set forth in the prior Rehabilitation Plans would be appropriate, except that in view of the receipt of Special Financial Assistance, they have determined that no contribution rate increases shall be required beyond those provided for in collective bargaining or participation agreements in effect as of March 11, 2021. Contribution rate increases taking effect after March 11, 2021 pursuant to agreements in effect as of that date must go into effect and be maintained, and contribution increases taking effect on or before March 11, 2021 must also be maintained, in order for an agreement to comply with this 2024 Updated Rehabilitation Plan.

Trustee Approved Rehabilitation Plan Remedies

The Board of Trustees concluded that annual contribution rate increases in excess of those called for under the attached 2024 Updated Default Schedule were not reasonable and could trigger mass withdrawals and significant losses to the Fund and its participants and beneficiaries. Therefore, the Trustees concluded that contributions required to emerge from critical status at a date after the end of the rehabilitation period would be unreasonable and a rehabilitation plan could not reasonably be expected to do any more than forestall insolvency.

Based on this conclusion, the Trustees have adopted the following measures, which they have determined to be the most the plan and the industry can reasonably tolerate to forestall insolvency of the Fund. As noted, this 2024 Updated Rehabilitation Plan is expected to delay the originally projected insolvency date by at least 26 years, from the year ending in 2019 to a date after the year ending in

¹ The contribution rates and other substantial provisions of those default schedules were identical, except that the table attached to the Initial Rehabilitation Plan's default schedule for purposes of calculating early retirement benefits was replaced with a corrected version in the 2011 Updated Rehabilitation Plan. That table has been in effect since the adoption of the 2011 Updated Rehabilitation Plan.

2045, based on reasonable assumptions.

Non-active Participants

For participants retiring on or after January 1, 2011, or terminating service on or after January 1, 2011 and before becoming covered by a collective bargaining agreement with terms consistent with the 2024 Updated Default Schedule or its predecessors, benefits have been or will be automatically reduced in accordance with the benefit changes described in the 2024 Updated Default Schedule and its predecessors.

2024 Updated Default Schedule

All benefits that are not protected under IRC section 411(d)(6) and all other adjustable benefits for participants retiring or terminating employment after having worked under a collective bargaining agreement with contribution rates consistent with the 2024 Updated Default Schedule or its predecessors are eliminated effective on the later date of:

- (1) the effective date of a new collective bargaining agreement that conforms with the 2024 Updated Default Schedule or its predecessors, or the automatic imposition of such Default Schedule, or
- (2) the earliest date that the plan amendment reducing benefits can take effect, allowing for legally required advance notice.

The benefit changes are detailed in the attached 2024 Updated Default Schedule.

Implementation of 2024 Updated Default Schedule

If a collective bargaining agreement providing for contributions under the Fund that was in effect on January 1, 2010 or that complies with the 2024 Updated Default Schedule expires and, after receiving the 2024 Updated Default Schedule, the bargaining parties fail to adopt contribution terms consistent with the Schedule, the Schedule will be implemented by the Fund as to the employer who was party to and the employees who were covered by such collective bargaining agreement effective 180 days after the date on which the collective bargaining agreement expired.

Annual Standards for Meeting the Rehabilitation Requirements and Updating of Rehabilitation Plan

Based on reasonable assumptions, the adoption of the Initial Rehabilitation Plan and the updates thereto are projected to forestall the Fund's insolvency from the Plan Year ending December 31, 2019 past the plan year ending December 31, 2045. The point of projected insolvency may vary each year as actual experience differs from the assumptions. The Trustees recognize the possibility that actual experience could be less favorable than the reasonable assumptions used for the 2024 Updated Rehabilitation Plan on an annual basis. Consequently, the annual standard for meeting the requirements of this 2024 Updated Rehabilitation Plan is for updated actuarial projections each year to show, based on reasonable assumptions, that under the Rehabilitation Plan (as amended from time to time) the Fund is not expected to become insolvent before the end of the Plan Year ending in 2045.

Annual Updating of Rehabilitation Plan

Each year the Fund's actuary will review and certify the status of the Fund under applicable ERISA and IRC funding rules, including whether the Fund is making the scheduled progress in meeting the requirements of this Updated Rehabilitation Plan. If the Trustees determine that it is necessary in light of updated information, the Trustees will further revise this 2024 Updated Rehabilitation Plan and present updated schedules to the bargaining parties.

Notwithstanding subsequent changes in benefit and contribution schedules, a schedule provided by the Trustees and relied upon by the bargaining parties in negotiating a collective bargaining agreement shall remain in effect for the duration of that collective bargaining agreement. However, a collective bargaining agreement that is renewed or extended will need to include terms consistent with a schedule in effect at the time of the renewal or extension.

Other Issues

The benefits of a beneficiary (e.g., surviving spouse) or an Alternate Payee under a QDRO will be determined on the same basis as those of the participant under this 2024 Updated Rehabilitation Plan.

ATTACHMENT A: 2024 UPDATED DEFAULT SCHEDULE

Affected Participants

The changes described in this schedule apply to participants whose benefit commencement date occurs after they have worked one hour under a collective bargaining agreement with contribution rates consistent with this schedule, or for an employer as to which this schedule is automatically implemented.

Benefit Changes

- The Regular Pension monthly benefit will continue to accrue at the rate of \$30 for each pension credit
- The Subsidized Early Retirement Pension is eliminated. A participant who is eligible and retires before age 65 will have a reduced benefit accrual rate determined by the reduction factors set forth in the attached table. The reduced accrual rate is determined as follows. First, the reduction factor that corresponds with the participant's age at retirement is multiplied by the unreduced accrual rate that would apply to the participant under the Plan. The resulting amount is then subtracted from the unreduced accrual rate to yield the reduced accrual rate.

For example, a participant who retired at age 64 and 11 months would have a reduction factor of 0.76%, according to the attached table. If the participant's unreduced accrual rate was \$30, multiplying that 0.76% reduction factor by \$30 unreduced accrual rate would yield \$0.228, which would be rounded up to \$0.23. Subtracting that \$0.23 from the \$30 unreduced accrual rate would yield a reduced accrual rate of \$29.77.

- The one-time 13th check is eliminated.
- The Disability Pension is eliminated for participants whose Disability Pension would otherwise become payable after the date these changes become effective.
- The \$10,000 pre-retirement death benefit is eliminated.
- The \$5,000 post-retirement death benefit is eliminated.
- The only allowable benefit payment forms are: 1) a 50% joint-and-survivor annuity (the

“automatic” form for married participants), 2) the legally required 75% joint-and-survivor annuity (for married participants), and 3) a life annuity payable over the participant’s life only.

Contributions

Contribution rates to increase 22% in the first year effective immediately upon implementation of this schedule, followed by an increase of 15% in the second year, an increase of 10% in the third year and 2% per year thereafter for the next 7 years; provided, however, that no contribution rate increases shall be required beyond those provided for in collective bargaining or participation agreements in effect as of March 11, 2021. Contribution rate increases taking effect after March 11, 2021 pursuant to agreements in effect as of that date must go into effect and be maintained, and contribution increases taking effect on or before March 11, 2021 must also be maintained, in order for an agreement to comply with this 2024 Updated Rehabilitation Plan.

10/03/25

03:42PM

STATEMENT 6
SCHEDULE H, PAGE 4, LINE 4I
SCHEDULE OF ASSETS (HELD AT END OF YEAR)
 PENSION FUND OF MOVING PICTURE MACHINE OPERATORS 13-6613842 001

<u>PARTY IN INTEREST</u>	<u>IDENTIFICATION</u>	<u>DESCRIPTION</u>	<u>COST</u>	<u>CURRENT AMOUNT</u>
	OPPENHEIMER	SEE ATTACHED	\$ 20,314,113.	\$ 20,081,191.
	OPPENHEIMER	SEE ATTACHED	3,222,481.	4,024,141.

Financial Professional

OPPENHEIM,W/WHALEY,E
5XV
(203) 328-1160

Office Serving Your Account

263 TRESSER BLVD.,
SUITE 500,
STAMFORD, CT 06901

For the Period: 12/01/24 - 12/31/24

Last Statement: 11/30/24

Account Number: A39-0036505

Special Message

Since you are receiving this monthly statement in paper format, we want you to also know that we provide electronic notifications for all documents not limited to only statements and confirms. You will be able to retrieve your documents at any time, and take comfort in knowing that your personal information is not being mailed. We encourage you to 'Go Green' as we all do our part to protect our environment. Please speak to your Advisor about our Client Access program. Thank you!

Oppenheimer is acting in a Brokerage capacity for this account.

BOARD OF TRUSTEES PENSION FUND
UNION LOCAL 306
ADMINISTRATIVE SERVICES ONLY
303 MERRICK RD-SUITE 300
LYNBROOK NY 11563-9010

Portfolio Summary

	<u>This Period</u>	<u>Previous Period</u>	<u>Estimated Annual Income</u>
	12/31/24	11/30/24	
Advantage Bank Deposits*	\$9,360.54	\$10,091.39	\$46.80
Equities	1,069,027.55	1,054,128.30	9,392.77
Mutual Funds	1,358,878.82	1,395,800.90	16,906.22
Government Bonds	1,519,119.35	1,584,865.25	53,293.75
Government Agency Bonds	22,147.37	22,641.86	1,025.56
Corporate Bonds	45,342.00	46,447.50	1,750.00
Cash Account Balance	265.00	0.00	
Total Asset Value	\$4,024,140.63	\$4,113,975.20	\$82,415.10

Net Value of Accrued Interest** **\$16,544.82** **\$12,452.73**

Total Asset Value does not include Direct Investments, Accrued Interest or unpriced securities.

** Eligible for FDIC insurance up to standard maximum insurance amounts; Not SIPC insured.*

*** Accrued Interest total as of the last business day of the month. (May not represent full month accrued interest.)*

Income Summary

<u>Reportable</u>	<u>This Period</u>	<u>Year to Date</u>
Government Accrued Int Receive	\$62.73	\$4,369.38
Advantage Bank Dep Interest	3.45	88.77
Corporate Accrued Int Received	0.00	691.25
Foreign Tax Withheld	-3.73	-99.54
Corporate Interest	0.00	4,300.00
Government Interest	773.37	66,069.94
Substitute Payment	0.00	586.56
Dividends	5,711.71	26,390.21
Total Reportable	\$6,547.53	\$102,396.57

BOARD OF TRUSTEES PENSION FUND
UNION LOCAL 306
ADMINISTRATIVE SERVICES ONLY

Financial Professional: OPPENHEIM,W/WHALEY,E - 5XV
Period Ending: 12/31/24
Account Number: A39-0036505

Portfolio Holdings

Some prices, current values and income estimates may be approximations. Unrealized gains and/or losses are computed from the cost basis data on file, which may not be accurate for tax reporting purposes. Items for which a cost basis is not available are indicated by the symbol 'N/A'. The total gains and/or losses do not include positions for which we do not have cost basis information.

Estimated Annual Income ("EAI") and Estimated Yield ("EY") are estimates only, and may not indicate actual income or performance of investments. EAI and EY for certain types of securities may include a return of principal or distributed capital gains. As EAI and EY are estimates, the actual income received may be different than the estimated amounts. EY is reported based upon the current price of the security, which may fluctuate.

Our standard default method to close a tax lot for the sale of a security is 'FIFO' (first in, first out), unless a specified tax lot is selected at the time of sale. As required by the IRS, corrections to tax lots may only be adjusted by settlement date for the sale. When closing a position using a method other than FIFO for tax accounting, please make sure to provide clear instructions to your financial professional at the time of sale. Please visit <https://www.irs.gov> for more information.


Advantage Bank Deposits

(COVERED BY FDIC)






As described in the ABD Program's Terms & Conditions, the current yield is based on the average daily balance during the prior month's interest cycle; interest cycles run from mid-month to mid-month. Client may elect to liquidate any cash investment option at any time by contacting his/her Financial Professional. Each bank deposit constitutes an obligation of a deposit bank and is not a cash balance held at Oppenheimer.

Description	Account Type	Quantity	Symbol	Unit Cost	Current Price	Total Cost Basis	Current Value	Est. Yield	Est. Ann. Inc.	Portfolio Percent
ADVANTAGE BANK DEPOSIT FDIC INSURED AT VARIOUS BKS	CASH	9,360.5400	ABDXX	1.000	1.000	9,360.54	9,360.54	0.5000%	46	0.23
TOTAL ADVANTAGE BANK DEPOSITS.....						9,360.54	9,360.54		46	0.23

Equities

Please note the following icon  appears to the right of the stock symbol of those securities which Oppenheimer has provided research coverage. If you wish to access such research you may visit the Client Access web site (www.opco.com) or speak with your Financial Professional.

Common Stock

Description	Account Type	Quantity	Symbol	Unit Cost	Current Price	Total Cost Basis	Current Value	Unrealized Gain/(Loss)	Est. Yield	Est. Ann. Inc.	Portfolio Percent
EATON CORP PLC	(N) CASH	25	ETN 	219.930	331.870	5,498.25	8,296.75	2,799	1.132%	94	0.21
LINDE PLC	(C) CASH	8	LIN	457.470	418.670	3,659.76	3,349.36	(310)	1.328%	44	0.08
SHARKNINJA INC COM SHS	(F) CASH	60	SN 	109.710	97.360	6,582.60	5,841.60	(741)			0.15
ALPHABET INC CAP STK CL A	(Q) CASH	240	GOOGL	22.325	189.300	5,358.14	45,432.00	40,074	0.422%	192	1.13
AMAZON COM INC	(F) CASH	210	AMZN 	60.033	219.390	12,607.10	46,071.90	33,465			1.14
AMEREN CORP	(T) CASH	110	AEE	77.730	89.140	8,550.30	9,805.40	1,255	3.006%	294	0.24
AMERICAN EXPRESS CO	(I) CASH	27	AXP	226.754	296.790	6,122.37	8,013.33	1,891	0.943%	75	0.20
AMGEN INC	(L) CASH	15	AMGN 	286.936	260.640	4,304.04	3,909.60	(394)	3.652%	142	0.10
APPLE INC	(M) CASH	235	AAPL 	71.333	250.420	16,763.44	58,848.70	42,085	0.399%	235	1.46

BOARD OF TRUSTEES PENSION FUND
UNION LOCAL 306
ADMINISTRATIVE SERVICES ONLY

Financial Professional: OPPENHEIM,W/WHALEY,E- 5XV
Period Ending: 12/31/24
Account Number: A39-0036505

Common Stock

Description	Account Type	Quantity	Symbol	Unit Cost	Current Price	Total Cost Basis	Current Value	Unrealized Gain/(Loss)	Est. Yield	Est. Ann. Inc.	Portfolio Percent
APPLOVIN CORP COM CL A	(M) CASH	58	APP	196.864	323.830	11,418.16	18,782.14	7,364			0.47
ARISTA NETWORKS INC COM SHS	(Q) CASH	188	ANET	36.904	110.530	6,937.97	20,779.64	13,842			0.52
AUTOZONE INC	(P) CASH	4	AZO	2,691.860	3,202.000	10,767.44	12,808.00	2,041			0.32
BANK OF AMERICA CORP	(I) CASH	430	BAC	18.128	43.950	7,795.04	18,898.50	11,103	2.366%	447	0.47
BELLRING BRANDS INC COMMON STOCK	(J) CASH	150	BRBR	71.633	75.340	10,745.00	11,301.00	556			0.28
BERKSHIRE HATHAWAY INC DEL CL B NEW	(I) CASH	50	BRKB	141.530	453.280	7,076.50	22,664.00	15,588			0.56
BLACKROCK INC	(I) CASH	7	BLK	1,041.650	1,025.110	7,291.55	7,175.77	(116)	1.990%	142	0.18
BRISTOL-MYERS SQUIBB CO	(L) CASH	60	BMJ	58.785	56.560	3,527.10	3,393.60	(134)	4.384%	148	0.08
BROADCOM INC	(Q) CASH	110	AVGO	65.318	231.840	7,185.06	25,502.40	18,317	1.017%	259	0.63
CATERPILLAR INC	(E) CASH	13	CAT	395.160	362.760	5,137.08	4,715.88	(421)	1.554%	73	0.12
COLGATE PALMOLIVE CO	(F) CASH	110	CL	93.083	90.910	10,239.15	10,000.10	(239)	2.199%	220	0.25
CONOCOPHILLIPS	(G) CASH	83	COP	49.527	99.170	4,110.77	8,231.11	4,120	3.146%	258	0.20
CORCEPT THERAPEUTICS INC	(L) CASH	220	CORT	56.970	50.390	12,533.60	11,085.80	(1,448)			0.28
COSTCO WHSL CORP NEW	(P) CASH	13	COST	192.660	916.270	2,504.58	11,911.51	9,407	0.506%	60	0.30
DANAHER CORPORATION	(D) CASH	23	DHR	87.109	229.550	2,003.51	5,279.65	3,276	0.470%	24	0.13
ENTERGY CORP NEW	(T) CASH	170	ETR	61.203	75.820	10,404.55	12,889.40	2,485	3.165%	408	0.32
EVERCORE INC CLASS A	(I) CASH	45	EVR	308.115	277.190	13,865.20	12,473.55	(1,392)	1.154%	144	0.31
EXXON MOBIL CORP	(G) CASH	150	XOM	79.513	107.570	11,927.00	16,135.50	4,209	3.681%	594	0.40
META PLATFORMS INC CL A	(Q) CASH	46	META	330.707	585.510	15,212.52	26,933.46	11,721	0.341%	92	0.67
GE HEALTHCARE TECHNOLOGIES INC COMMON STOCK	(L) CASH	80	GEHC	85.490	78.180	6,839.20	6,254.40	(585)	0.179%	11	0.16
GE VERNOVA INC	(T) CASH	30	GEV	336.503	328.930	10,095.10	9,867.90	(227)	0.304%	30	0.25
HOME DEPOT INC	(E) CASH	24	HD	149.781	388.990	3,594.76	9,335.76	5,741	2.313%	216	0.23

BOARD OF TRUSTEES PENSION FUND
UNION LOCAL 306
ADMINISTRATIVE SERVICES ONLY

Financial Professional: OPPENHEIM.W/WHALEY,E - 5XV
Period Ending: 12/31/24
Account Number: A39-0036505

Common Stock

Description	Account Type	Quantity	Symbol	Unit Cost	Current Price	Total Cost Basis	Current Value	Unrealized Gain/(Loss)	Est. Yield	Est. Ann. Inc.	Portfolio Percent
HOWMET AEROSPACE INC	(C) CASH	100	HWM	57.137	109.370	5,713.76	10,937.00	5,223	0.292%	32	0.27
ITRON INC	(T) CASH	70	ITRI	90.310	108.580	6,321.70	7,600.60	1,279			0.19
JPMORGAN CHASE & CO COM	(I) CASH	108	JPM	112.196	239.710	12,117.24	25,888.68	13,771	2.085%	540	0.64
LAM RESEARCH CORP COM NEW	(Q) CASH	120	LRCX	32.425	72.230	3,891.08	8,667.60	4,777	1.273%	110	0.22
LEIDOS HOLDINGS INC	(Q) CASH	65	LDOS	133.246	144.060	8,661.02	9,363.90	703	1.110%	104	0.23
LIBERTY MEDIA CORP LIBERTY FORMULA ONE CL C	(M) CASH	86	FWONK	78.825	92.660	6,779.02	7,968.76	1,190			0.20
LIFE TIME GROUP HOLDINGS INC COMMON STOCK	(H) CASH	385	LTH	24.638	22.120	9,485.70	8,516.20	(970)			0.21
ELI LILLY & CO	(L) CASH	25	LLY	286.562	772.000	7,164.07	19,300.00	12,136	0.777%	150	0.48
MANHATTAN ASSOCIATES INC	(J) CASH	15	MANH	145.586	270.240	2,183.80	4,053.60	1,870			0.10
MARRIOTT INTL INC NEW CL A	(K) CASH	33	MAR	190.018	278.940	6,270.61	9,205.02	2,934	0.903%	83	0.23
MARVELL TECHNOLOGY INC	(L) CASH	200	MRVL	92.610	110.450	18,522.00	22,090.00	3,568	0.217%	48	0.55
MASTERCARD INCORPORATED CL A	(P) CASH	31	MA	104.588	526.570	3,242.24	16,323.67	13,081	0.577%	94	0.41
MCKESSON CORP	(L) CASH	27	MCK	310.137	569.910	8,373.72	15,387.57	7,014	0.498%	76	0.38
MERCK & CO INC	(L) CASH	120	MRK	49.914	99.480	5,989.78	11,937.60	5,948	3.256%	388	0.30
MICROSOFT CORP	(Q) CASH	122	MSFT	113.755	421.500	13,878.21	51,423.00	37,545	0.787%	405	1.28
MICRON TECHNOLOGY INC	(Q) CASH	145	MU	77.208	84.160	11,195.20	12,203.20	1,008	0.546%	66	0.30
NASDAQ INC	(I) CASH	140	NDAQ	80.170	77.310	11,223.90	10,823.40	(401)	1.241%	134	0.27
NEW YORK TIMES CO CL A	(M) CASH	60	NYT	54.250	52.050	3,255.00	3,123.00	(132)	0.999%	31	0.08
NUCOR CORP	(E) CASH	60	NUE	56.363	116.710	3,381.78	7,002.60	3,621	1.885%	132	0.17
NVIDIA CORPORATION	(Q) CASH	480	NVDA	27.390	134.290	13,147.36	64,459.20	51,312	0.029%	19	1.60
ONTO INNOVATION INC	(D) CASH	19	ONTO	203.538	166.670	3,867.24	3,166.73	(701)			0.08
PALO ALTO NETWORKS INC	(Q) CASH	76	PANW	160.995	181.960	12,235.64	13,828.96	1,593			0.34
PEPSICO INC	(J) CASH	47	PEP	82.228	152.060	3,864.76	7,146.82	3,282	3.564%	254	0.18

BOARD OF TRUSTEES PENSION FUND
UNION LOCAL 306
ADMINISTRATIVE SERVICES ONLY

Financial Professional: OPPENHEIM,W/WHALEY,E - 5XV
Period Ending: 12/31/24
Account Number: A39-0036505

Common Stock

Description	Account Type	Quantity	Symbol	Unit Cost	Current Price	Total Cost Basis	Current Value	Unrealized Gain/(Loss)	Est Yield	Est Ann. Inc.	Portfolio Percent
POST HLDGS INC	(J) CASH	100	POST	111.862	114.460	11,186.26	11,446.00	260			0.28
PROCTER AND GAMBLE CO	(F) CASH	52	PG	92.529	167.650	4,811.55	8,717.80	3,906	2.401%	209	0.22
QUANTA SVCS INC	(E) CASH	60	PWR	102.610	316.050	6,156.60	18,963.00	12,806	0.126%	24	0.47
REGENERON PHARMACEUTICALS	(L) CASH	12	REGN	797.781	712.330	9,573.38	8,547.96	(1,025)			0.21
SERVICENOW INC	(Q) CASH	18	NOW	831.223	1,060.120	14,962.03	19,082.16	4,120			0.47
TJX COS INC NEW	(B) CASH	110	TJX	92.056	120.810	10,126.24	13,289.10	3,163	1.241%	165	0.33
TKO GROUP HOLDINGS INC CL A	(H) CASH	28	TKO	102.686	142.110	2,875.23	3,979.08	1,104			0.10
T-MOBILE US INC	(R) CASH	55	TMUS	238.614	220.730	13,123.80	12,140.15	(984)	1.386%	168	0.30
TARGA RES CORP	(G) CASH	70	TRGP	198.880	178.500	13,921.60	12,495.00	(1,427)	1.680%	210	0.31
TECK RESOURCES LTD CL B	(C) CASH	172	TECK	40.159	40.530	6,907.44	6,971.16	64	0.857%	59	0.17
TEXAS ROADHOUSE INC	(J) CASH	55	TXRH	197.060	180.430	10,838.30	9,923.65	(915)	1.352%	134	0.25
THE TRADE DESK INC COM CL A	(M) CASH	130	TTD	106.856	117.530	13,891.29	15,278.90	1,388			0.38
3M CO	(L) CASH	60	MMM	127.439	129.090	7,646.37	7,745.40	99	2.169%	168	0.19
TRAVELERS COMPANIES INC	(I) CASH	35	TRV	262.165	240.890	9,175.80	8,431.15	(745)	1.743%	147	0.21
UBER TECHNOLOGIES INC	(P) CASH	150	UBER	31.550	60.320	4,732.50	9,048.00	4,316			0.22
UNITEDHEALTH GROUP INC	(L) CASH	17	UNH	187.974	505.860	3,195.57	8,599.62	5,404	1.660%	142	0.21
VERTEX PHARMACEUTICALS INC	(L) CASH	30	VRTX	410.668	402.700	12,320.06	12,081.00	(239)			0.30
VERTIV HOLDINGS CO COM CL A	(Q) CASH	190	VRT	126.159	113.610	23,970.30	21,585.90	(2,384)	0.132%	28	0.54
VICI PPTYS INC REIT	(I) CASH	200	VICI	31.818	29.210	6,363.65	5,842.00	(522)	5.922%	346	0.15
WEC ENERGY GROUP INC	(T) CASH	55	WEC	99.321	94.040	5,462.66	5,172.20	(290)	3.796%	196	0.13
WELLS FARGO CO NEW	(I) CASH	170	WFC	49.781	70.240	8,462.81	11,940.80	3,478	2.277%	272	0.30

BOARD OF TRUSTEES PENSION FUND
UNION LOCAL 306
ADMINISTRATIVE SERVICES ONLY

Financial Professional: OPPENHEIM,W/WHALEY,E - 5XV
Period Ending: 12/31/24
Account Number: A39-0036505

Common Stock

Description	Account Type	Quantity	Symbol	Unit Cost	Current Price	Total Cost Basis	Current Value	Unrealized Gain/(Loss)	Est. Yield	Est. Ann. Inc.	Portfolio Percent
WELLTOWER INC REIT	(O) CASH	90	WELL	119.913	126.030	10,792.22	11,342.70	550	2.126%	241	0.28
SUB-TOTAL COMMON STOCK						641,917.33	1,069,027.55	427,110		9,392	26.57
TOTAL EQUITIES						641,917.33	1,069,027.55	427,110		9,392	26.57

COMMON STOCK HOLDINGS SUMMARY BY INDUSTRY CODE

(N) .78% PUBLIC SERVICES	(C) 1% BASIC INDUSTRY	(F) 6% CONSUMER GOODS
(Q) 29% TECHNOLOGY	(T) 4% UTILITIES	(I) 12% FINANCIAL
(L) 12% HEALTHCARE	(M) 9% MEDIA & COMMUNICATION	(P) 4% RETAIL SERVICES
(J) 4% FOOD & BEVERAGES	(E) 3% CONSTRUCTION & BLDG	(G) 3% ENERGY
(D) .79% CAPITAL GOODS	(H) 1% ENTERTAINMENT	(K) .86% GAMING/LODGING
(B) 1% APPAREL & ACCESSORIES	(R) 1% TELECOMMUNICATIONS	(O) 1% REAL ESTATE

Mutual Funds

Exchange Traded Funds

Description	Account Type	Quantity	Symbol	Unit Cost	Current Price	Total Cost Basis	Current Value	Unrealized Gain/(Loss)	Est. Yield	Est. Ann. Inc.	Portfolio Percent
VANGUARD INDEX FDS S&P 500 ETF SHS SBI/CBI ETF	CASH	2,522	VOO	295.926	538.810	746,326.07	1,358,878.82	612,553	1.244%	16,906	33.77
SUB-TOTAL EXCHANGE TRADED FUNDS						746,326.07	1,358,878.82	612,553		16,906	33.77
TOTAL MUTUAL FUNDS						746,326.07	1,358,878.82	612,553		16,906	33.77

For tax reporting purposes, Fixed Income ADJUSTED COST reflects calculations either by the "Straight-Line Basis" or "Fixed Income Cost Basis (FICB)" to reflect amortization of cost for Fixed Income securities purchased at a premium and/or accretion of cost for Fixed Income securities purchased at a discount. The formula is not applied to Foreign Bonds or Certificates of Deposit. In addition, call features may affect your fixed income securities. Please refer to the trade confirmation for the relevant security or call your Financial Professional for specific information.

Fixed Income

Government Bonds in Maturity Date Sequence

Description	Account Type	Quantity	CUSIP #	Unit Cost	Current Price	Adjusted Cost /Original Cost	Current Value	Unrealized Gain/(Loss)	Est. Yield	Est. Ann. Inc.	Portfolio Percent
UNITED STATES TREAS NTS B/E 2.75% DUE 08/31/25 NOTE	CASH	100,000	912828420	99.956	99.019	99,956.25 99,956.25	99,019.00	(937)	2.750%	2,750	2.46
UNITED STATES TREAS NTS B/E 2.25% DUE 11/15/25 NOTE	CASH	30,000	912828M56	99.952	98.288	29,985.70 29,985.70	29,486.40	(499)	2.250%	675	0.73

BOARD OF TRUSTEES PENSION FUND
UNION LOCAL 306
ADMINISTRATIVE SERVICES ONLY

Financial Professional: OPPENHEIM,W/WHALEY,E - 5XV
Period Ending: 12/31/24
Account Number: A39-0036505

Government Bonds in Maturity Date Sequence

Description	Account Type	Quantity	CUSIP #	Unit Cost	Current Price	Adjusted Cost /Original Cost	Current Value	Unrealized Gain/(Loss)	Est. Yield	Est. Ann. Inc.	Portfolio Percent
UNITED STATES TREAS BDS B/E 6% DUE 02/15/26 DEBENTURE	CASH	175,000	912810EW4	115.486	102.043	202,101.09 252,477.72	178,575.25	(23,526)	6.000%	10,500	4.44
UNITED STATES TREAS NTS B/E 1.625% DUE 02/15/26 NOTE	CASH	25,000	912828P46	99.354	97.141	24,838.69 24,838.69	24,285.25	(553)	1.625%	406	0.60
UNITED STATES TREAS NTS B/E 2% DUE 11/15/26 NOTE	CASH	60,000	912828U24	99.651	95.969	59,790.63 59,790.63	57,581.40	(2,209)	2.000%	1,200	1.43
UNITED STATES TREAS NTS B/E 2.375% DUE 05/15/27 NOTE	CASH	90,000	912828X88	96.565	95.758	86,908.75 86,908.75	86,182.20	(727)	2.375%	2,137	2.14
UNITED STATES TREAS NTS B/E 2.75% DUE 02/15/28 NOTE	CASH	175,000	9128283W8	99.784	95.473	174,623.18 174,654.69	167,077.75	(7,545)	2.750%	4,812	4.15
UNITED STATES TREAS NTS B/E 2.875% DUE 05/15/28 NOTE	CASH	75,000	9128284N7	99.691	95.508	74,768.75 74,768.75	71,631.00	(3,138)	2.875%	2,156	1.78
UNITED STATES TREAS NTS B/E 2.625% DUE 02/15/29 NOTE	CASH	35,000	9128286B1	99.799	93.481	34,929.69 34,929.69	32,718.35	(2,211)	2.625%	918	0.81
UNITED STATES TREAS NTS B/E 2.75% DUE 05/31/29 NOTE	CASH	50,000	91282CES6	99.499	93.484	49,749.61 49,749.61	46,742.00	(3,008)	2.750%	1,375	1.16
UNITED STATES TREAS NTS B/E 3.875% DUE 09/30/29 NOTE	CASH	100,000	91282CFLO	98.753	97.813	98,753.13 98,753.13	97,813.00	(940)	3.875%	3,875	2.43
UNITED STATES TREAS NTS B/E 1.5% DUE 02/15/30 NOTE	CASH	50,000	912828Z94	103.803	86.820	51,901.89 53,616.41	43,410.00	(8,492)	1.500%	750	1.08
UNITED STATES TREAS BDS B/E 5.375% DUE 02/15/31 DEBENTURE	CASH	135,000	912810FP8	122.964	104.856	166,002.08 184,470.55	141,555.60	(24,446)	5.375%	7,256	3.52
UNITED STATES TREAS NTS B/E 1.125% DUE 02/15/31 NOTE	CASH	95,000	91282CBL4	96.998	82.516	92,148.91 92,148.91	78,390.20	(13,759)	1.125%	1,068	1.95

BOARD OF TRUSTEES PENSION FUND
UNION LOCAL 306
ADMINISTRATIVE SERVICES ONLY

Financial Professional: OPPENHEIM,W/WHALEY,E - 5XV
Period Ending: 12/31/24
Account Number: A39-0036505

Government Bonds in Maturity Date Sequence

Description	Account Type	Quantity	CUSIP #	Unit Cost	Current Price	Adjusted Cost /Original Cost	Current Value	Unrealized Gain/(Loss)	Est. Yield	Est. Ann. Inc.	Portfolio Percent
UNITED STATES TREAS NTS B/E 2.875% DUE 05/15/32 NOTE	CASH	50,000	91282CEP2	96.350	89.809	<u>48,175.00</u> 48,175.00	44,904.50	(3,271)	2.875%	1,437	1.12
UNITED STATES TREAS NTS B/E 3.5% DUE 02/15/33 NOTE	CASH	30,000	91282CGM7	100.068	93.035	<u>30,020.46</u> 30,024.22	27,910.50	(2,110)	3.500%	1,050	0.69
UNITED STATES TREAS BDS B/E 3.875% DUE 08/15/40 DEBENTURE	CASH	45,000	912810QK7	126.647	90.078	<u>56,991.27</u> 62,164.84	40,535.10	(16,456)	3.875%	1,743	1.01
UNITED STATES TREAS BDS B/E 3% DUE 05/15/42 DEBENTURE	CASH	50,000	912810QW1	97.818	78.570	<u>48,909.38</u> 48,909.38	39,285.00	(9,624)	3.000%	1,500	0.98
UNITED STATES TREAS BDS B/E 2.75% DUE 11/15/42 DEBENTURE	CASH	35,000	912810QY7	100.185	74.820	<u>35,064.97</u> 35,084.22	26,187.00	(8,878)	2.750%	962	0.65
UNITED STATES TREAS BDS B/E 2.875% DUE 05/15/43 DEBENTURE	CASH	55,000	912810RB6	100.334	75.828	<u>55,183.86</u> 55,260.09	41,705.40	(13,478)	2.875%	1,581	1.04
UNITED STATES TREAS BDS B/E 2.5% DUE 02/15/45 DEBENTURE	CASH	70,000	912810RK6	105.465	69.465	<u>73,826.13</u> 74,917.42	48,625.50	(25,201)	2.500%	1,750	1.21
UNITED STATES TREAS BDS B/E 2.5% DUE 05/15/46 DEBENTURE	CASH	50,000	912810RS9	99.988	68.180	<u>49,994.46</u> 49,994.46	34,090.00	(15,904)	2.500%	1,250	0.85
UNITED STATES TREAS BDS B/E 2.25% DUE 08/15/46 DEBENTURE	CASH	95,000	912810RT7	112.088	64.641	<u>106,484.21</u> 108,132.11	61,408.95	(45,075)	2.250%	2,137	1.53
SUB-TOTAL GOVERNMENT BONDS		1,675,000				1,751,108.09	1,519,119.35	(231,987)		53,293	37.76

Due to credit market volatility this month, there may be some unreliable pricing of fixed income securities compared to prior months. Call your Financial Professional if you have any questions.

BOARD OF TRUSTEES PENSION FUND
UNION LOCAL 306
ADMINISTRATIVE SERVICES ONLY

Financial Professional: OPPENHEIM,W/WHALEY,E - 5XV
Period Ending: 12/31/24
Account Number: A39-0036505

Government Agency Bonds in Maturity Date Sequence

Description	Account Type	Quantity	CUSIP #	Unit Cost	Current Price	Adjusted Cost /Original Cost	Current Value	Unrealized Gain/(Loss)	Est. Yield	Est. Ann. Inc.	Portfolio Percent
GNMA PASS-THRU X SINGLE FAMILY 5% DUE 05/15/39 PL 698343X GNMA MTHLY 14 DAY DELAY PASS THROUGH SFAM AMORTIZED AMOUNT = 11,329 FACTOR = 0.01458695	CASH	776,657	36296QZG7	108.875	99.846	12,334.51 218,312.76	11,311.60	(1,023)	5.000%	566	0.28
GNMA PASS-THRU X SINGLE FAMILY 4% DUE 10/15/41 PL 709047X GNMA MTHLY 14 DAY DELAY PASS THROUGH SFAM AMORTIZED AMOUNT = 11,477 FACTOR = 0.09820364	CASH	116,878	36297DWG8	104.281	94.406	11,969.24 104,531.94	10,835.77	(1,133)	4.000%	459	0.27
SUB-TOTAL GOVERNMENT AGENCY BONDS		893,535				24,303.75	22,147.37	(2,156)		1,025	0.55

Due to credit market volatility this month, there may be some unreliable pricing of fixed income securities compared to prior months. Call your Financial Professional if you have any questions.

Corporate Bonds in Maturity Date Sequence

Description	Account Type	Quantity	CUSIP/ Rating	Unit Cost	Current Price	Adjusted Cost /Original Cost	Current Value	Unrealized Gain/(Loss)	Est. Yield	Est. Ann. Inc.	Portfolio Percent
MICROSOFT CORP B/E 3.5% DUE 02/12/35 NOTE CALL 08/12/34 @100	CASH	50,000	594918BC7 AAA / AAA	98.400	90.684	49,200.06 49,200.06	45,342.00	(3,858)	3.500%	1,750	1.12
SUB-TOTAL CORPORATE BONDS		50,000				49,200.06	45,342.00	(3,858)		1,750	1.12
TOTAL FIXED INCOME		2,618,535				1,824,611.90	1,586,608.72	(238,001)		56,069	39.43

Due to credit market volatility this month, there may be some unreliable pricing of fixed income securities compared to prior months. Call your Financial Professional if you have any questions.

Total Portfolio Holdings	Total Cost Basis	Current Value	Unrealized Gain/(Loss)	Est. Yield	Est. Ann. Inc.	Portfolio Percent
	\$3,222,215.84	\$4,023,875.63	\$801,662	2.048%	82,415	100%

Transactions/Activity Detail

Add: Cash P.1	265.00	265.00
Total:	\$3,222,480.84	4,024,140.63
	Total Cost	Total FMV

Date	Type	Quantity	Transaction	Description	Price/entry	Amount
** BUY AND SELL TRANSACTIONS **						
12-06	CASH	5	BOUGHT	EATON CORP PLC	372.38	1,862.10 DEBIT
12-06	CASH	10	BOUGHT	AMEREN CORP	92.49	925.30 DEBIT
12-06	CASH	10	BOUGHT	AMERICAN EXPRESS CO	302.86	3,029 DEBIT
12-06	CASH	15	BOUGHT	APPLE INC	242.64	3,640.20 DEBIT

Financial Professional

OPPENHEIM,W/WHALEY,E
5XV
(203) 328-1160

Office Serving Your Account

263 TRESSER BLVD.,
SUITE 500,
STAMFORD, CT 06901

For the Period: 12/01/24 - 12/31/24

Last Statement: 11/30/24

Account Number: G42-0158318

Special Message

Since you are receiving this monthly statement in paper format, we want you to also know that we provide electronic notifications for all documents not limited to only statements and confirms. You will be able to retrieve your documents at any time, and take comfort in knowing that your personal information is not being mailed. We encourage you to 'Go Green' as we all do our part to protect our environment. Please speak to your Advisor about our Client Access program. Thank you!

Oppenheimer is acting in a Brokerage capacity for this account.

PENSION FUND OF THE MOVING
PICTURES MACHINE OPERATORS
UNION LOCAL 306
ADMINISTRATIVE SERVICES ONLY
303 MERRICK RD-SUITE 300
LYNBROOK NY 11563-9010

Portfolio Summary

	This Period	Previous Period	Estimated Annual Income
	12/31/24	11/30/24	
Advantage Bank Deposits*	\$2,679,026.27	\$5,029,362.24	\$13,395.13
Equities	5,679,258.84	5,337,576.53	48,506.90
Government Bonds	10,585,532.57	9,421,206.45	402,908.32
Government Agency Bonds	140,923.72	146,946.76	3,103.37
Corporate Bonds	975,120.50	734,853.00	44,312.50
Cash Account Balance	21,329.26	0.00	
Total Asset Value	\$20,081,191.16	\$20,569,944.98	\$512,226.22
Net Value of Accrued Interest**	\$104,078.73	\$77,423.14	

Total Asset Value does not include Direct Investments, Accrued Interest or unpriced securities.

* Eligible for FDIC insurance up to standard maximum insurance amounts; Not SIPC insured.

** Accrued Interest total as of the last business day of the month. (May not represent full month accrued interest.)

Income Summary

Reportable	This Period	Year to Date
Advantage Bank Dep Interest	\$2,685.46	\$13,181.23
Foreign Tax Withheld	-20.62	-106.88
Corporate Interest	0.00	12,581.25
Government Interest	24,468.75	100,984.38
Substitute Payment	211.90	413.20
Dividends	9,487.40	14,303.22
Total Reportable	\$36,832.89	\$141,356.40
Non-Reportable		
Corporate Accrued Int Paid	\$-4,380.00	\$-16,451.46
Government Accrued Int Paid	-9,415.02	-76,185.12
Total Non-Reportable	\$-13,795.02	\$-92,636.58

PENSION FUND OF THE MOVING
PICTURES MACHINE OPERATORS
UNION LOCAL 306

Financial Professional: OPPENHEIM,W/WHALEY,E- 5XV
Period Ending: 12/31/24
Account Number: G42-0158318

Portfolio Holdings

Some prices, current values and income estimates may be approximations. Unrealized gains and/or losses are computed from the cost basis data on file, which may not be accurate for tax reporting purposes. Items for which a cost basis is not available are indicated by the symbol 'N/A'. The total gains and/or losses do not include positions for which we do not have cost basis information.

Estimated Annual Income ("EAI") and Estimated Yield ("EY") are estimates only, and may not indicate actual income or performance of investments. EAI and EY for certain types of securities may include a return of principal or distributed capital gains. As EAI and EY are estimates, the actual income received may be different than the estimated amounts. EY is reported based upon the current price of the security, which may fluctuate.

Our standard default method to close a tax lot for the sale of a security is 'FIFO' (first in, first out), unless a specified tax lot is selected at the time of sale. As required by the IRS, corrections to tax lots may only be adjusted by settlement date for the sale. When closing a position using a method other than FIFO for tax accounting, please make sure to provide clear instructions to your financial professional at the time of sale. Please visit <https://www.irs.gov> for more information.


Advantage Bank Deposits

(COVERED BY FDIC)




As described in the ABD Program's Terms & Conditions, the current yield is based on the average daily balance during the prior month's interest cycle; interest cycles run from mid-month to mid-month. Client may elect to liquidate any cash investment option at any time by contacting his/her Financial Professional. Each bank deposit constitutes an obligation of a deposit bank and is not a cash balance held at Oppenheimer.

Description	Account Type	Quantity	Symbol	Unit Cost	Current Price	Total Cost Basis	Current Value	Est. Yield	Est. Ann. Inc.	Portfolio Percent
ADVANTAGE BANK DEPOSIT FDIC INSURED AT VARIOUS BKS	CASH	2,679,026.2700	ABDXX	1.000	1.000	2,679,026.27	2,679,026.27	0.5000%	13,395	13.36
TOTAL ADVANTAGE BANK DEPOSITS.....						2,679,026.27	2,679,026.27		13,395	13.36

Equities

Please note the following icon  appears to the right of the stock symbol of those securities which Oppenheimer has provided research coverage. If you wish to access such research you may visit the Client Access web site (www.opco.com) or speak with your Financial Professional.

Common Stock

Description	Account Type	Quantity	Symbol	Unit Cost	Current Price	Total Cost Basis	Current Value	Unrealized Gain/(Loss)	Est. Yield	Est. Ann. Inc.	Portfolio Percent
ARCH CAP GROUP LTD ORD	(I) CASH	520	ACGL	109.655	92.350	57,020.82	48,022.00	(8,999)			0.24
EATON CORP PLC	(N) CASH	130	ETN 	330.451	331.870	42,958.70	43,143.10	184	1.132%	488	0.22
LINDE PLC	(C) CASH	59	LIN	469.769	418.670	27,716.39	24,701.53	(3,015)	1.328%	328	0.12
SHARKNINJA INC COM SHS	(F) CASH	500	SN 	105.338	97.360	52,669.28	48,680.00	(3,989)			0.24
ALPHABET INC CAP STK CLA	(O) CASH	1,130	GOOGL	168.572	189.300	190,487.10	213,909.00	23,422	0.422%	904	1.07
AMAZON COM INC	(F) CASH	1,040	AMZN 	186.384	219.390	193,839.46	228,165.60	34,326			1.14
AMEREN CORP	(T) CASH	535	AEE	85.583	89.140	45,787.30	47,689.90	1,903	3.006%	1,433	0.24
AMERICAN EXPRESS CO	(I) CASH	220	AXP	270.577	296.790	59,527.10	65,293.80	5,767	0.943%	616	0.33

PENSION FUND OF THE MOVING
PICTURES MACHINE OPERATORS
UNION LOCAL 306

Financial Professional: OPPENHEIM,W/WHALEY,E - 5XV
Period Ending: 12/31/24
Account Number: G42-0158318

Common Stock

Description	Account Type	Quantity	Symbol	Unit Cost	Current Price	Total Cost Basis	Current Value	Unrealized Gain/(Loss)	Est. Yield	Est. Ann. Inc.	Portfolio Percent
AMGEN INC	(L) CASH	143	AMGN	327.485	260.640	46,830.49	37,271.52	(9,559)	3.652%	1,361	0.19
APPLE INC	(M) CASH	1,310	AAPL	229.160	250.420	300,200.56	328,050.20	27,850	0.399%	1,310	1.64
APPLOVIN CORP COM CL A	(M) CASH	400	APP	100.218	323.830	40,087.50	129,532.00	89,445			0.65
ARISTA NETWORKS INC COM SHS	(Q) CASH	752	ANET	92.162	110.530	69,305.85	83,118.56	13,813			0.41
AUTOZONE INC	(P) CASH	17	AZO	3,175.449	3,202.000	53,982.64	54,434.00	451			0.27
BANK OF AMERICA CORP	(I) CASH	1,400	BAC	42.385	43.950	59,339.50	61,530.00	2,191	2.366%	1,456	0.31
BELLRING BRANDS INC COMMON STOCK	(J) CASH	820	BRBR	62.904	75.340	51,581.95	61,778.80	10,197			0.31
BERKSHIRE HATHAWAY INC DEL CL B NEW	(I) CASH	200	BRKB	463.329	453.280	92,665.90	90,656.00	(2,010)			0.45
BLACKROCK INC	(I) CASH	50	BLK	943.602	1,025.110	47,180.12	51,255.50	4,075	1.990%	1,020	0.26
BOSTON SCIENTIFIC CORP	(L) CASH	535	BSX	83.150	89.320	44,485.40	47,786.20	3,301			0.24
BROADCOM INC	(Q) CASH	470	AVGO	168.831	231.840	79,351.00	108,964.80	29,614	1.017%	1,109	0.54
CATERPILLAR INC	(E) CASH	55	CAT	354.388	362.760	19,491.35	19,951.80	460	1.554%	310	0.10
CHART INDS INC	(C) CASH	100	GTLS	187.600	190.840	18,760.00	19,084.00	324			0.10
CHEVRON CORP NEW	(G) CASH	130	CVX	147.267	144.840	19,144.80	18,829.20	(316)	-4.501%	847	0.09
COCA COLA CO	(J) CASH	595	KO	70.235	62.260	41,790.25	37,044.70	(4,746)	3.115%	1,154	0.18
COLGATE PALMOLIVE CO	(F) CASH	690	CL	100.281	90.910	69,194.20	62,727.90	(6,466)	2.199%	1,380	0.31
CONOCOPHILLIPS	(G) CASH	430	COP	111.274	99.170	47,848.10	42,643.10	(5,205)	3.146%	1,341	0.21
CORCEPT THERAPEUTICS INC	(L) CASH	820	CORT	59.075	50.390	48,441.80	41,319.80	(7,122)			0.21
COSTCO WHSL CORP NEW	(P) CASH	65	COST	922.996	916.270	59,994.79	59,557.55	(437)	0.506%	301	0.30
DANAHER CORPORATION	(D) CASH	185	DHR	264.424	229.550	48,918.60	42,466.75	(6,452)	0.470%	199	0.21
DYCOM INDS INC	(T) CASH	155	DY	195.276	174.060	30,267.80	26,979.30	(3,289)			0.13
ENTERGY CORP NEW	(T) CASH	800	ETR	64.825	75.820	51,860.24	60,656.00	8,796	3.165%	1,920	0.30
EVERCORE INC CLASS A	(I) CASH	220	EVR	260.040	277.190	57,208.95	60,981.80	3,773	1.154%	704	0.30
EXXON MOBIL CORP	(G) CASH	675	XOM	117.701	107.570	79,448.70	72,609.75	(6,839)	3.681%	2,673	0.36

PENSION FUND OF THE MOVING
PICTURES MACHINE OPERATORS
UNION LOCAL 306

Financial Professional: OPPENHEIM,W/WHALEY,E - 5XV
Period Ending: 12/31/24
Account Number: G42-0158318

Common Stock

Description	Account Type	Quantity	Symbol	Unit Cost	Current Price	Total Cost Basis	Current Value	Unrealized Gain/(Loss)	Est. Yield	Est. Ann. Inc.	Portfolio Percent
META PLATFORMS INC CL A	(Q) CASH	250	META	550.848	585.510	137,712.05	146,377.50	8,665	0.341%	500	0.73
GE HEALTHCARE TECHNOLOGIES INC COMMON STOCK	(L) CASH	490	GEHC	87.369	78.180	42,810.80	38,308.20	(4,503)	0.179%	68	0.19
GE VERNOVA INC	(T) CASH	190	GEV	263.819	328.930	50,125.61	62,496.70	12,371	0.304%	190	0.31
HOME DEPOT INC	(E) CASH	111	HD	382.086	388.990	42,411.60	43,177.89	766	2.313%	999	0.22
HOWMET AEROSPACE INC	(C) CASH	595	HWM	101.790	109.370	60,565.50	65,075.15	4,510	0.292%	190	0.32
ITRON INC	(T) CASH	520	ITRI	109.368	108.580	56,871.38	56,461.60	(410)			0.28
JPMORGAN CHASE & CO COM	(I) CASH	400	JPM	223.933	239.710	89,573.55	95,884.00	6,310	2.085%	2,000	0.48
LAM RESEARCH CORP COM NEW	(Q) CASH	555	LRCX	79.948	72.230	44,371.45	40,087.65	(4,284)	1.273%	510	0.20
LEIDOS HOLDINGS INC	(Q) CASH	290	LDOS	160.119	144.060	46,434.61	41,777.40	(4,657)	1.110%	464	0.21
LIBERTY MEDIA CORP LIBERTY FORMULA ONE CL C	(M) CASH	630	FWONK	79.426	92.660	50,038.70	58,375.80	8,337			0.29
LIFE TIME GROUP HOLDINGS INC COMMON STOCK	(H) CASH	1,900	LTH	24.370	22.120	46,303.35	42,028.00	(4,275)			0.21
ELI LILLY & CO	(L) CASH	90	LLY	907.531	772.000	81,677.82	69,480.00	(12,198)	0.777%	540	0.35
MANHATTAN ASSOCIATES INC	(J) CASH	215	MANH	270.127	270.240	58,077.45	58,101.60	24			0.29
MARRIOTT INTL INC NEW CL A	(K) CASH	165	MAR	253.109	278.940	41,763.02	46,025.10	4,262	0.903%	415	0.23
MARVELL TECHNOLOGY INC	(L) CASH	720	MRVL	81.284	110.450	58,524.70	79,524.00	20,999	0.217%	172	0.40
MASTERCARD INCORPORATED CL A	(P) CASH	125	MA	490.469	526.570	61,308.70	65,821.25	4,513	0.577%	380	0.33
MCKESSON CORP	(L) CASH	84	MCK	585.995	569.910	49,223.59	47,872.44	(1,351)	0.498%	238	0.24
MERCK & CO INC	(L) CASH	325	MRK	115.006	99.480	37,377.00	32,331.00	(5,046)	3.256%	1,053	0.16
METLIFE INC	(I) CASH	350	MET	78.755	81.880	27,564.45	28,658.00	1,094	2.662%	763	0.14
MICROSOFT CORP	(Q) CASH	700	MSFT	419.027	421.500	293,319.10	295,050.00	1,731	0.787%	2,324	1.47
MICRON TECHNOLOGY INC	(Q) CASH	600	MU	100.023	84.160	60,014.01	50,496.00	(9,518)	0.546%	276	0.25
NASDAQ INC	(I) CASH	800	NDAQ	73.377	77.310	58,701.96	61,848.00	3,146	1.241%	768	0.31

PENSION FUND OF THE MOVING
PICTURES MACHINE OPERATORS
UNION LOCAL 306

Financial Professional: OPPENHEIM,W/WHALEY,E - 5XV
Period Ending: 12/31/24
Account Number: G42-0158318

Common Stock

Description	Account Type	Quantity	Symbol	Unit Cost	Current Price	Total Cost Basis	Current Value	Unrealized Gain/(Loss)	Est. Yield	Est. Ann. Inc.	Portfolio Percent
NEW YORK TIMES CO CL A	(M) CASH	540	NYT	55.621	52.050	30,035.40	28,107.00	(1,928)	0.999%	280	0.14
NUCOR CORP	(E) CASH	280	NUJ	151.736	116.710	42,486.20	32,678.80	(9,807)	1.885%	616	0.16
NVIDIA CORPORATION	(Q) CASH	2,430	NVDA	129.919	134.290	315,703.20	326,324.70	10,622	0.029%	97	1.63
ONTO INNOVATION INC	(D) CASH	265	ONTO	202.888	166.670	53,765.40	44,167.55	(9,598)			0.22
PALO ALTO NETWORKS INC	(Q) CASH	380	PANW	180.678	181.960	68,657.80	69,144.80	487			0.34
POST HLDGS INC	(J) CASH	530	POST	114.636	114.460	60,757.24	60,663.80	(93)			0.30
PROCTER AND GAMBLE CO	(F) CASH	270	PG	169.392	167.650	45,736.00	45,265.50	(471)	2.401%	1,087	0.23
QUANTA SVCS INC	(E) CASH	210	PWR	280.944	316.050	58,998.40	66,370.50	7,372	0.126%	84	0.33
REGENERON PHARMACEUTICALS	(L) CASH	65	REGN	998.234	712.330	64,885.25	46,301.45	(18,584)			0.23
SAREPTA THERAPEUTICS INC	(L) CASH	195	SRPT	134.267	121.590	26,182.25	23,710.05	(2,472)			0.12
SERVICENOW INC	(Q) CASH	80	NOW	892.546	1,060.120	71,403.75	84,809.60	13,406			0.42
TJX COS INC NEW	(B) CASH	600	TJX	119.629	120.810	71,777.60	72,486.00	708	1.241%	900	0.36
TKO GROUP HOLDINGS INC CL A	(H) CASH	200	TKO	140.865	142.110	28,173.00	28,422.00	249			0.14
T-MOBILE US INC	(R) CASH	315	TMUS	207.374	220.730	65,323.00	69,529.95	4,207	1.386%	963	0.35
TARGA RES CORP	(G) CASH	300	TRGP	170.634	178.500	51,190.47	53,550.00	2,360	1.680%	900	0.27
TECK RESOURCES LTD CL B	(C) CASH	950	TECK	48.355	40.530	45,938.15	38,503.50	(7,435)	0.857%	330	0.19
TEXAS ROADHOUSE INC	(J) CASH	335	TXRH	177.473	180.430	59,453.70	60,444.05	990	1.352%	817	0.30
TG THERAPEUTICS INC	(L) CASH	1,200	TGTX	32.300	30.100	38,760.00	36,120.00	(2,640)			0.18
THE TRADE DESK INC COM CL A	(M) CASH	590	TTD	110.088	117.530	64,952.37	69,342.70	4,390			0.35
THERMO FISHER SCIENTIFIC INC	(D) CASH	60	TMO	587.424	520.230	35,245.45	31,213.80	(4,032)	0.299%	93	0.16
3M CO	(L) CASH	310	MMM	133.104	129.090	41,262.40	40,017.90	(1,245)	2.169%	868	0.20
TRAVELERS COMPANIES INC	(I) CASH	290	TRV	235.861	240.890	68,399.77	69,858.10	1,458	1.743%	1,218	0.35
UBER TECHNOLOGIES INC	(P) CASH	365	UBER	72.459	60.320	26,447.85	22,016.80	(4,431)			0.11
UNITEDHEALTH GROUP INC	(L) CASH	75	UNH	590.138	505.860	44,260.35	37,939.50	(6,321)	1.660%	630	0.19

PENSION FUND OF THE MOVING
PICTURES MACHINE OPERATORS
UNION LOCAL 306

Financial Professional: OPPENHEIM,W/WHALEY,E - 5XV
Period Ending: 12/31/24
Account Number: G42-0158318

Common Stock

Description	Account Type	Quantity	Symbol	Unit Cost	Current Price	Total Cost Basis	Current Value	Unrealized Gain/(Loss)	Est. Yield	Est. Ann. Inc.	Portfolio Percent
VERRA MOBILITY CORP CL A COM STK	(S) CASH	900	VRRM	27.768	24.180	24,992.00	21,762.00	(3,230)			0.11
VERTEX PHARMACEUTICALS INC	(L) CASH	107	VRTX	478.808	402.700	51,232.52	43,088.90	(8,144)			0.21
VERTIV HOLDINGS CO COM CL A	(Q) CASH	750	VRT	93.548	113.610	70,161.50	85,207.50	15,046	0.132%	112	0.42
VICI PPTYS INC REIT	(I) CASH	1,460	VICI	32.546	29.210	47,518.12	42,646.60	(4,872)	5.922%	2,525	0.21
WEC ENERGY GROUP INC	(T) CASH	415	WEC	94.424	94.040	39,186.11	39,026.60	(160)	3.796%	1,481	0.19
WELLS FARGO CO NEW	(I) CASH	930	WFC	61.069	70.240	56,794.56	65,323.20	8,529	2.277%	1,488	0.33
WELLTOWER INC REIT	(O) CASH	485	WELL	127.475	126.030	61,825.43	61,124.55	(701)	2.126%	1,299	0.30
SUB-TOTAL COMMON STOCK						5,473,662.28	5,679,258.84	205,594		48,506	28.32
TOTAL EQUITIES						5,473,662.28	5,679,258.84	205,594		48,506	28.32

COMMON STOCK HOLDINGS SUMMARY BY INDUSTRY CODE

(I) 13% FINANCIAL	(N) .76% PUBLIC SERVICES	(C) 2% BASIC INDUSTRY	(F) 6% CONSUMER GOODS	(Q) 27% TECHNOLOGY
(T) 5% UTILITIES	(L) 10% HEALTHCARE	(M) 10% MEDIA & COMMUNICATION	(P) 3% RETAIL SERVICES	(J) 4% FOOD & BEVERAGES
(E) 2% CONSTRUCTION & BLDG.	(G) 3% ENERGY	(D) 2% CAPITAL GOODS	(H) 1% ENTERTAINMENT	(K) .81% GAMING/LODGING
(B) 1% APPAREL & ACCESSORIES	(R) 1% TELECOMMUNICATIONS	(S) 38% TRANSPORTATION	(O) 1% REAL ESTATE	

For tax reporting purposes, Fixed Income ADJUSTED COST reflects calculations either by the "Straight-Line Basis" or "Fixed Income Cost Basis (FICB)" to reflect amortization of cost for Fixed Income securities purchased at a premium and/or accretion of cost for Fixed Income securities purchased at a discount. The formula is not applied to Foreign Bonds or Certificates of Deposit. In addition, call features may affect your fixed income securities. Please refer to the trade confirmation for the relevant security or call your Financial Professional for specific information.

Fixed Income

Government Bonds in Maturity Date Sequence

Description	Account Type	Quantity	CUSIP #	Unit Cost	Current Price	Adjusted Cost /Original Cost	Current Value	Unrealized Gain/(Loss)	Est. Yield	Est. Ann. Inc.	Portfolio Percent
UNITED STATES TREAS NTS B/E 3.75% DUE 04/15/26 NOTE	CASH	300,000	91282CGV7	99.800	99.363	299,400.29 299,406.25	298,089.00	(1,311)	3.750%	11,250	1.49
UNITED STATES TREAS NTS B/E 3.625% DUE 05/15/26 NOTE	CASH	300,000	91282CHB0	99.576	99.172	298,729.69 298,729.69	297,516.00	(1,214)	3.625%	10,875	1.48
UNITED STATES TREAS NTS B/E 4.125% DUE 06/15/26 NOTE	CASH	100,000	91282CHH7	99.828	99.824	99,828.13 99,828.13	99,824.00	(4)	4.125%	4,125	0.50

PENSION FUND OF THE MOVING
PICTURES MACHINE OPERATORS
UNION LOCAL 306

Financial Professional: OPPENHEIM,W/WHALEY,E - 5XV
Period Ending: 12/31/24
Account Number: G42-0158318

Government Bonds in Maturity Date Sequence

Description	Account Type	Quantity	CUSIP #	Unit Cost	Current Price	Adjusted Cost /Original Cost	Current Value	Unrealized Gain/(Loss)	Est. Yield	Est. Ann. Inc.	Portfolio Percent
UNITED STATES TREAS NTS B/E 3.75% DUE 08/31/26 NOTE	CASH	300,000	91282CLH2	99.677	99.203	<u>299,031.25</u> 299,031.25	297,609.00	(1,422)	3.750%	11,250	1.48
UNITED STATES TREAS NTS B/E 4.625% DUE 11/15/26 NOTE	CASH	200,000	91282CJK8	101.409	100.645	<u>202,819.24</u> 203,312.50	201,290.00	(1,529)	4.625%	9,250	1.00
UNITED STATES TREAS NTS B/E 4.125% DUE 02/15/27 NOTE	CASH	450,000	91282CKA8	100.361	99.719	<u>451,626.68</u> 451,882.81	448,735.50	(2,891)	4.125%	18,562	2.24
UNITED STATES TREAS NTS B/E 2.75% DUE 04/30/27 NOTE	CASH	250,000	91282CEN7	97.531	96.668	<u>243,828.13</u> 243,828.13	241,670.00	(2,158)	2.750%	6,875	1.20
UNITED STATES TREAS NTS B/E 3.25% DUE 06/30/27 NOTE	CASH	450,000	91282CEW7	99.017	97.645	<u>445,578.13</u> 445,578.13	439,402.50	(6,176)	3.250%	14,625	2.19
UNITED STATES TREAS NTS B/E 3.75% DUE 08/15/27 NOTE	CASH	300,000	91282CLG4	100.027	98.719	<u>300,083.56</u> 300,093.75	296,157.00	(3,927)	3.750%	11,250	1.48
UNITED STATES TREAS NTS B/E 3.125% DUE 08/31/27 NOTE	CASH	400,000	91282CFH9	98.496	97.109	<u>393,984.39</u> 393,984.39	388,436.00	(5,548)	3.125%	12,500	1.94
UNITED STATES TREAS NTS B/E 4.125% DUE 09/30/27 NOTE	CASH	300,000	91282CFM8	100.012	99.594	<u>300,037.82</u> 300,046.88	298,782.00	(1,256)	4.125%	12,375	1.49
UNITED STATES TREAS NTS B/E 3.5% DUE 01/31/28 NOTE	CASH	350,000	91282CGH8	99.508	97.695	<u>348,281.26</u> 348,281.26	341,932.50	(6,349)	3.500%	12,250	1.70
UNITED STATES TREAS NTS B/E 3.625% DUE 03/31/28 NOTE	CASH	250,000	91282CGT2	99.812	97.930	<u>249,531.25</u> 249,531.25	244,825.00	(4,706)	3.625%	9,062	1.22
UNITED STATES TREAS NTS B/E 3.5% DUE 04/30/28 NOTE	CASH	300,000	91282CHA2	99.500	97.465	<u>298,500.00</u> 298,500.00	292,395.00	(6,105)	3.500%	10,500	1.46
UNITED STATES TREAS NTS B/E 3.625% DUE 05/31/28 NOTE	CASH	250,000	91282CHE4	99.812	97.797	<u>249,531.25</u> 249,531.25	244,492.50	(5,039)	3.625%	9,062	1.22

PENSION FUND OF THE MOVING
PICTURES MACHINE OPERATORS
UNION LOCAL 306

Financial Professional: OPPENHEIM,W/WHALEY,E - 5XV
Period Ending: 12/31/24
Account Number: G42-0158318

Government Bonds in Maturity Date Sequence

Description	Account Type	Quantity	CUSIP #	Unit Cost	Current Price	Adjusted Cost /Original Cost	Current Value	Unrealized Gain/(Loss)	Est. Yield	Est. Ann. Inc.	Portfolio Percent
UNITED STATES TREAS NTS B/E 4.125% DUE 07/31/28 NOTE	CASH	200,000	91282CH07	100.062	99.297	<u>200,125.00</u> 200,125.00	198,594.00	(1,531)	4.125%	8,250	0.99
UNITED STATES TREAS NTS B/E 3.125% DUE 11/15/28 NOTE	CASH	200,000	9128285M8	98.531	95.676	<u>197,062.50</u> 197,062.50	191,352.00	(5,711)	3.125%	6,250	0.95
UNITED STATES TREAS NTS B/E 3.75% DUE 12/31/28 NOTE	CASH	300,000	91282CJR3	100.416	97.742	<u>301,248.44</u> 301,343.75	293,226.00	(8,022)	3.750%	11,250	1.46
UNITED STATES TREAS NTS B/E 2.875% DUE 04/30/29 NOTE	CASH	250,000	91282CEM9	99.546	94.113	<u>248,867.19</u> 241,367.19	235,282.50	(13,585)	2.875%	7,187	1.17
UNITED STATES TREAS NTS B/E 3.25% DUE 06/30/29 NOTE	CASH	200,000	91282CEV9	98.843	95.410	<u>197,687.50</u> 197,687.50	190,820.00	(6,868)	3.250%	6,500	0.95
UNITED STATES TREAS NTS B/E 3.625% DUE 08/31/29 NOTE	CASH	200,000	91282CLK5	99.875	96.813	<u>199,750.00</u> 199,750.00	193,626.00	(6,124)	3.625%	7,250	0.97
UNITED STATES TREAS NTS B/E 4.125% DUE 10/31/29 NOTE	CASH	150,000	91282CLR0	99.656	98.836	<u>149,484.38</u> 149,484.38	148,254.00	(1,230)	4.125%	6,187	0.74
UNITED STATES TREAS NTS B/E 3.5% DUE 01/31/30 NOTE	CASH	150,000	91282CGJ4	99.875	95.926	<u>149,812.50</u> 149,812.50	143,889.00	(5,924)	3.500%	5,250	0.72
UNITED STATES TREAS NTS B/E 3.625% DUE 03/31/30 NOTE	CASH	200,000	91282CGS4	99.579	96.363	<u>199,159.38</u> 199,159.38	192,726.00	(6,433)	3.625%	7,250	0.96
UNITED STATES TREAS NTS B/E 3.75% DUE 12/31/30 NOTE	CASH	200,000	91282CJQ5	100.178	96.336	<u>200,356.85</u> 200,375.00	192,672.00	(7,685)	3.750%	7,500	0.96
UNITED STATES TREAS NTS TIPS B/E 1.25% DUE 07/15/31 NOTE AMORTIZED AMOUNT = 176,658 FACTOR = 1.17772000	CASH	150,000	91282CCM1	90.765	88.032	<u>160,345.22</u> 159,508.06	155,515.57	(4,830)	0.125%	220	0.78
UNITED STATES TREAS NTS B/E 3.75% DUE 08/31/31 NOTE	CASH	300,000	91282CLJ8	100.305	95.801	<u>300,916.67</u> 300,956.25	287,403.00	(13,514)	3.750%	11,250	1.43

PENSION FUND OF THE MOVING
PICTURES MACHINE OPERATORS
UNION LOCAL 306

Financial Professional: OPPENHEIM,W/WHALEY,E - 5XV
Period Ending: 12/31/24
Account Number: G42-0158318

Government Bonds in Maturity Date Sequence

Description	Account Type	Quantity	CUSIP #	Unit Cost	Current Price	Adjusted Cost /Original Cost	Current Value	Unrealized Gain/(Loss)	Est. Yield	Est. Ann. Inc.	Portfolio Percent
UNITED STATES TREAS NTS B/E 4.125% DUE 10/31/31 NOTE	CASH	150,000	91282CLU3	99.281	97.875	<u>148,921.88</u> 148,921.88	146,812.50	(2,109)	4.125%	6,187	0.73
UNITED STATES TREAS NTS B/E 2.875% DUE 05/15/32 NOTE	CASH	250,000	91282CEP2	94.826	89.809	<u>237,065.63</u> 237,065.63	224,522.50	(12,543)	2.875%	7,187	1.12
UNITED STATES TREAS NTS B/E 4.125% DUE 11/15/32 NOTE	CASH	400,000	91282CFV8	101.188	97.535	<u>404,752.92</u> 404,937.50	390,140.00	(14,613)	4.125%	16,500	1.94
UNITED STATES TREAS NTS B/E 3.5% DUE 02/15/33 NOTE	CASH	300,000	91282CGM7	98.192	93.035	<u>294,578.13</u> 294,578.13	279,105.00	(15,473)	3.500%	10,500	1.39
UNITED STATES TREAS NTS B/E 3.875% DUE 08/15/34 NOTE	CASH	350,000	91282CLF6	100.188	94.578	<u>350,658.86</u> 350,678.13	331,023.00	(19,636)	3.875%	13,562	1.65
UNITED STATES TREAS BDS B/E 3.5% DUE 02/15/39 DEBENTURE	CASH	350,000	912810QA9	96.033	87.731	<u>336,117.19</u> 336,117.19	307,058.50	(29,059)	3.500%	12,250	1.53
UNITED STATES TREAS BDS B/E 4.25% DUE 05/15/39 DEBENTURE	CASH	100,000	912810QB7	99.687	94.934	<u>99,687.50</u> 99,687.50	94,934.00	(4,754)	4.250%	4,250	0.47
UNITED STATES TREAS BDS B/E 3.875% DUE 08/15/40 DEBENTURE	CASH	300,000	912810QK7	98.193	90.078	<u>294,581.25</u> 294,581.25	270,234.00	(24,347)	3.875%	11,625	1.35
UNITED STATES TREAS BDS B/E 4.25% DUE 11/15/40 DEBENTURE	CASH	100,000	912810QL5	95.087	94.082	<u>95,087.45</u> 95,078.13	94,082.00	(1,005)	4.250%	4,250	0.47
UNITED STATES TREAS BDS B/E 4% DUE 11/15/42 DEBENTURE	CASH	275,000	912810TM0	98.039	90.074	<u>269,609.38</u> 269,609.38	247,703.50	(21,906)	4.000%	11,000	1.23
UNITED STATES TREAS BDS B/E 4.125% DUE 08/15/44 DEBENTURE	CASH	200,000	912810UD8	98.650	90.594	<u>197,300.00</u> 197,300.00	181,188.00	(16,112)	4.125%	8,250	0.90
UNITED STATES TREAS BDS B/E 3% DUE 05/15/45 DEBENTURE	CASH	250,000	912810RM2	82.906	75.645	<u>207,265.63</u> 207,265.63	189,112.50	(18,153)	3.000%	7,500	0.94

PENSION FUND OF THE MOVING
PICTURES MACHINE OPERATORS
UNION LOCAL 306

Financial Professional: OPPENHEIM,W/WHALEY,E - 5XV
Period Ending: 12/31/24
Account Number: G42-0158318

Government Bonds in Maturity Date Sequence

Description	Account Type	Quantity	CUSIP #	Unit Cost	Current Price	Adjusted Cost /Original Cost	Current Value	Unrealized Gain/(Loss)	Est. Yield	Est. Ann. Inc.	Portfolio Percent
UNITED STATES TREAS BDS B/E 3% DUE 05/15/47 DEBENTURE	CASH	300,000	912810RX8	81.359	73.996	244,078.13 244,078.13	221,988.00	(22,090)	3.000%	9,000	1.11
UNITED STATES TREAS BDS B/E 3.125% DUE 05/15/48 DEBENTURE	CASH	250,000	912810SC3	81.862	75.012	204,656.25 204,656.25	187,530.00	(17,126)	3.125%	7,812	0.93
UNITED STATES TREAS BDS B/E 3.375% DUE 11/15/48 DEBENTURE	CASH	500,000	912810SE9	86.204	78.215	431,020.98 430,959.96	391,075.00	(39,946)	3.375%	16,875	1.95
UNITED STATES TREAS BDS B/E 4% DUE 11/15/52 DEBENTURE	CASH	200,000	912810TL2	97.468	87.254	194,937.50 194,937.50	174,508.00	(20,430)	4.000%	8,000	0.87
SUB-TOTAL GOVERNMENT BONDS		11,275,000				10,995,925.38	10,585,532.57	(410,394)		402,908	52.75

Due to credit market volatility this month, there may be some unreliable pricing of fixed income securities compared to prior months. Call your Financial Professional if you have any questions.

Government Agency Bonds in Maturity Date Sequence

Description	Account Type	Quantity	CUSIP #	Unit Cost	Current Price	Adjusted Cost /Original Cost	Current Value	Unrealized Gain/(Loss)	Est. Yield	Est. Ann. Inc.	Portfolio Percent
UNITED STATES TREAS BDS 2 125% DUE 02/15/40 DEB AMORTIZED AMOUNT = 146,041 FACTOR = 1.46041000	CASH	100,000	912810QF8	99.987	96.496	146,023.31 145,824.21	140,923.72	(5,100)	2.125%	3,103	0.70
SUB-TOTAL GOVERNMENT AGENCY BONDS		100,000				146,023.31	140,923.72	(5,100)		3,103	0.70

Due to credit market volatility this month, there may be some unreliable pricing of fixed income securities compared to prior months. Call your Financial Professional if you have any questions.

Corporate Bonds in Maturity Date Sequence

Description	Account Type	Quantity	CUSIP/ Rating	Unit Cost	Current Price	Adjusted Cost /Original Cost	Current Value	Unrealized Gain/(Loss)	Est. Yield	Est. Ann. Inc.	Portfolio Percent
PARKER-HANNIFIN CORP B/E 4.25% DUE 09/15/27 NOTE CALL 08/15/27 @100	CASH	150,000	701094AR5 BAA1 / BBB+	99.792	98.935	149,688.00 149,688.00	148,402.50	(1,286)	4.250%	6,375	0.74
AUTOZONE INC B/E 4.5% DUE 02/01/28 NOTE CALL 01/01/28 @100	CASH	150,000	053332BC5 BAA1 / BBB	100.340	99.091	150,511.25 150,564.00	148,636.50	(1,875)	4.500%	6,750	0.74

PENSION FUND OF THE MOVING
PICTURES MACHINE OPERATORS
UNION LOCAL 306

Financial Professional: OPPENHEIM,W/WHALEY,E - 5XV
Period Ending: 12/31/24
Account Number: G42-0158318

Corporate Bonds in Maturity Date Sequence

Description	Account Type	Quantity	CUSIP/ Rating	Unit Cost	Current Price	Adjusted Cost /Original Cost	Current Value	Unrealized Gain/(Loss)	Est. Yield	Est. Ann. Inc.	Portfolio Percent
MCDONALDS CORP B/E 4.8% DUE 08/14/28 MTN CALL 07/14/28 @100	CASH	150,000	58013MFU3 BAA1 / BBB+	101.297	100.173	151,946.42 151,977.00	150,259.50	(1,687)	4.800%	7,200	0.75
MARSH & MCLENNAN COS INC B/E 4.375% DUE 03/15/29 NOTE CALL 12/15/28 @100	CASH	150,000	571748BG6 A3 / A-	100.724	98.243	151,086.03 151,166.00	147,364.50	(3,722)	4.375%	6,562	0.73
CINTAS CORP NO 2 B/E 4% DUE 05/01/32 NOTE CALL 02/01/32 @100	CASH	150,000	17252MAQ3 A3 / A-	97.281	93.602	145,921.50 145,921.50	140,403.00	(5,519)	4.000%	6,000	0.70
T MOBILE USA INC B/E 5.2% DUE 01/15/33 NOTE CALL 10/15/32 @100	CASH	100,000	87264ACV5 BAA2 / BBB	102.093	99.011	102,093.85 102,107.00	99,011.00	(3,083)	5.200%	5,200	0.49
EATON CORP OHIO B/E 4.15% DUE 03/15/33 NOTE CALL 12/15/32 @100	CASH	150,000	278062AH7 A3 / A-	97.933	94.029	146,900.00 146,900.00	141,043.50	(5,857)	4.150%	6,225	0.72
SUB-TOTAL CORPORATE BONDS		1,000,000				998,147.05	975,120.50	(23,029)		44,312	4.87
Due to credit market volatility this month, there may be some unreliable pricing of fixed income securities compared to prior months. Call your Financial Professional if you have any questions.											
TOTAL FIXED INCOME		12,375,000				12,140,095.74	11,701,576.79	(438,523)		450,324	58.32

Total Portfolio Holdings	Total Cost Basis	Current Value	Unrealized Gain/(Loss)	Est. Yield	Est. Ann. Inc.	Portfolio Percent
	\$20,292,784.29	\$20,059,861.90	\$(232,929)	2.553%	512,226	100%

Transactions/Activity Detail

Date	Type	Quantity	Transaction	Description	Cost Value	Fair Market Value	Unrealized Gain/(Loss)	Est. Yield	Est. Ann. Inc.	Portfolio Percent	
** BUY AND SELL TRANSACTIONS											
12-06	CASH	20	BOUGHT	ARCH CAP GROUP LTD		99.03	1,981.50	DEBIT			
12-06	CASH	10	BOUGHT	EATON CORP PLC		372.93	3,729.70	DEBIT			
12-06	CASH	5	BOUGHT	LINDE PLC		450.17	2,251.05	DEBIT			
12-06	CASH	50	BOUGHT	ALPHABET INC		173.52	8,678	DEBIT			
12-06	CASH	60	BOUGHT	AMAZON COM INC		218.50	13,112.40	DEBIT			

2024

FEDERAL STATEMENTS

PAGE 1

13-6613842

CLIENT 306PENFD

BOARD OF TRUSTEES PENSION FUND OF UNION OF GREATER NE

PLAN NO. 001

10/03/25

11:09AM

STATEMENT 7

SCHEDULE R, PAGE 3, LINE 14B

EXPLANATION OF CHANGE IN NUMBER FROM PREVIOUSLY REPORTED

PENSION FUND OF MOVING PICTURE MACHINE OPERATORS 13-6613842 001

NEW INFORMATION BECAME AVAILABE IN CURRENT YEAR

2024

FEDERAL STATEMENTS

PAGE 2

13-6613842

CLIENT 306PENFD

BOARD OF TRUSTEES PENSION FUND OF UNION OF GREATER NE

PLAN NO. 001

10/03/25

11:09AM

STATEMENT 8

SCHEDULE R, PAGE 3, LINE 14C

EXPLANATION OF CHANGE IN NUMBER FROM PREVIOUSLY REPORTED

PENSION FUND OF MOVING PICTURE MACHINE OPERATORS 13-6613842 001

NEW INFORMATION BECAME AVAILABE IN CURRENT YEAR

10/07/25

02:31PM

Statement 7

Schedule H, Page 4, Line 4j

Schedule Of Reportable Transactions

PENSION FUND OF MOVING PICTURE MACHINE OPERATORS 13-6613842 001

<u>Identity Of Party</u>	<u>Description</u>	<u>Purchase Price</u>	<u>Selling Price</u>	<u>Lease Rental</u>	<u>Expenses</u>	<u>Cost Of Asset</u>	<u>Current Value</u>	<u>Net Gain (Loss)</u>
Apple Inc	Common stock	\$ 322,919.					\$ 322,919.	
Microsoft Corp.	Common stock	334,275.					334,275.	
NVIDIA Corp.	Common stock	334,525.					334,525.	
US TREAS BDS B/E	3.375% DUE 11/15/48	330,277.					330,277.	
US TREAS BDS B/E	3.5% DUE 02/15/39	336,735.					336,735.	
US TREAS NTS B/E	2.875% DUE 04/30/29	494,922.					494,922.	
US TREAS NTS B/E	3.125% DUE 08/31/27	397,905.					397,905.	
US TREAS NTS B/E	3.25% DUE 06/30/27	448,153.					448,153.	
US TREAS NTS B/E	3.5% DUE 01/31/28	349,299.					349,299.	
US TREAS NTS B/E	3.75% DUE 08/31/26	400,384.					400,384.	
US TREAS NTS B/E	3.875% DUE 08/15/34	351,189.					351,189.	
US TREAS NTS B/E	4.125% DUE 02/15/27	657,282.					657,282.	
US TREAS NTS B/E	4.125% DUE 07/31/28	405,989.					405,989.	

Form 5500	Annual Return/Report of Employee Benefit Plan	OMB Nos. 1210-0110 1210-0089
Department of the Treasury Internal Revenue Service	<p>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>▶ Complete all entries in accordance with the instructions to the Form 5500.</p>	2024
Department of Labor Employee Benefits Security Administration		This Form is Open to Public Inspection
Pension Benefit Guaranty Corporation		

Part I Annual Report Identification Information

For calendar plan year 2024 or fiscal plan year beginning _____ and ending _____

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

a single-employer plan a DFE (specify) _____

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

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

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

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

special extension (enter description) _____

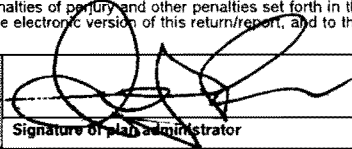
E If this is a retroactively adopted plan permitted by SECURE Act section 201, check here ▶

Part II Basic Plan Information – enter all requested information

<p>1 a Name of plan</p> <p>PENSION FUND OF MOVING PICTURE MACHINE OPERATORS UNION OF GREATER NEW YORK, LOCAL 306</p>	<p>1b Three-digit plan number (PN).... ▶ 001</p>
<p>2 a 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)</p> <p>BOARD OF TRUSTEES PENSION FUND OF UNION OF GREATER NEW YORK LOCAL 306 303 MERRICK ROAD LYNBROOK, NY 11563</p>	<p>1c Effective date of plan 01/23/1951</p> <p>2b Employer Identification Number (EIN) 13-6613842</p> <p>2c Plan Sponsor's telephone number 877-999-3555</p> <p>2d Business code (see instructions) 711100</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.

SIGN HERE		10/13/25	Employer Trustee Ronald Canner
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE