

Form 5500

Annual Return/Report of Employee Benefit Plan

OMB Nos. 1210-0110 1210-0089

2024

This Form is Open to Public Inspection

Department of the Treasury Internal Revenue Service

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.

Department of Labor Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Part I Annual Report Identification Information

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

- A This return/report is for: [X] a multiemployer plan [] a multiple-employer plan... B This return/report is: [] a single-employer plan [] a DFE... C If the plan is a collectively-bargained plan, check here... [X] D Check box if filing under: [X] Form 5558 [] automatic extension... E If this is a retroactively adopted plan permitted by SECURE Act section 201, check here... []

Part II Basic Plan Information—enter all requested information

1a Name of plan: ELECTRICAL WORKERS BENEFIT PLAN
1b Three-digit plan number (PN): 501
1c Effective date of plan: 01/01/1964
2a Plan sponsor's name (employer, if for a single-employer plan): BOARD OF TRUSTEES OF ELECTRICAL WORKERS BENEFIT TRUST FUND
2b Employer Identification Number (EIN): 35-0851694
2c Plan Sponsor's telephone number: 317-923-4577
2d Business code (see instructions): 238210

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

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

Table with 4 columns: SIGN HERE, Signature of plan administrator, Date, Enter name of individual signing as plan administrator. Includes rows for employer/plan sponsor and 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	2790
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)	2135
	6a(2)	2634
	6b	675
	6c	
	6d	3309
	6e	
	6f	
	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	104

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

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

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

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

a Pension Schedules	b General Schedules
(1) <input type="checkbox"/> R (Retirement Plan Information)	(1) <input checked="" type="checkbox"/> H (Financial Information)
(2) <input 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 checked="" type="checkbox"/> A (Insurance Information) – Number Attached <u>2</u>
(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 checked="" 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 A
(Form 5500)**

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration
Pension Benefit Guaranty Corporation

Insurance Information

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

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

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

OMB No. 1210-0110

2024

This Form is Open to Public Inspection

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

A Name of plan ELECTRICAL WORKERS BENEFIT PLAN	B Three-digit plan number (PN) ▶ 501
C Plan sponsor's name as shown on line 2a of Form 5500 BOARD OF TRUSTEES OF ELECTRICAL WORKERS BENEFIT TRUST FUND	D Employer Identification Number (EIN) 35-0851694

Part I Information Concerning Insurance Contract Coverage, Fees, and Commissions Provide information for each contract on a separate Schedule A. Individual contracts grouped as a unit in Parts II and III can be reported on a single Schedule A.

1 Coverage Information:

(a) Name of insurance carrier
SIERRA HEALTH AND LIFE INSURANCE COMPANY, INC.

(b) EIN	(c) NAIC code	(d) Contract or identification number	(e) Approximate number of persons covered at end of policy or contract year	Policy or contract year	
				(f) From	(g) To
94-0734860	71420	H2001	863	01/01/2024	12/31/2024

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

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

3 Persons receiving commissions and fees. (Complete as many entries as needed to report all persons).

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

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

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

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

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

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

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

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

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

Part II Investment and Annuity Contract Information
 Where individual contracts are provided, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

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

6 Contracts With Allocated Funds:

a State the basis of premium rates ▶

b Premiums paid to carrier **6b**

c Premiums due but unpaid at the end of the year **6c**

d If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, enter amount. **6d**
 Specify nature of costs ▶

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

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

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

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

b Balance at the end of the previous year			7b	
c Additions: (1) Contributions deposited during the year	7c(1)			
	7c(2)			
	7c(3)			
	7c(4)			
	7c(5)			
	(6) Total additions			
d Total of balance and additions (add lines 7b and 7c(6))			7d	
e Deductions:				
	7e(1)			
	7e(2)			
	7e(3)			
	7e(4)			
(5) Total deductions		7e(5)	0	
f Balance at the end of the current year (subtract line 7e(5) from line 7d).....			7f	

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

8 Benefit and contract type (check all applicable boxes)

- a** Health (other than dental or vision) **b** Dental **c** Vision **d** Life insurance
e Temporary disability (accident and sickness) **f** Long-term disability **g** Supplemental unemployment **h** Prescription drug
i Stop loss (large deductible) **j** HMO contract **k** PPO contract **l** Indemnity contract
m Other (specify) ▶

9 Experience-rated contracts:

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

10 Nonexperience-rated contracts:

a Total premiums or subscription charges paid to carrier	10a	1388940
b If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, other than reported in Part I, line 2 above, report amount. Specify nature of costs.	10b	

Part IV Provision of Information

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

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

**SCHEDULE A
(Form 5500)**

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration
Pension Benefit Guaranty Corporation

Insurance Information

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

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

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

OMB No. 1210-0110

2024

This Form is Open to Public Inspection

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

A Name of plan ELECTRICAL WORKERS BENEFIT PLAN		B Three-digit plan number (PN) ▶ 501
C Plan sponsor's name as shown on line 2a of Form 5500 BOARD OF TRUSTEES OF ELECTRICAL WORKERS BENEFIT TRUST FUND		D Employer Identification Number (EIN) 35-0851694

Part I Information Concerning Insurance Contract Coverage, Fees, and Commissions Provide information for each contract on a separate Schedule A. Individual contracts grouped as a unit in Parts II and III can be reported on a single Schedule A.

1 Coverage Information:

(a) Name of insurance carrier
THE UNION LABOR LIFE INSURANCE COMPANY

(b) EIN	(c) NAIC code	(d) Contract or identification number	(e) Approximate number of persons covered at end of policy or contract year	Policy or contract year	
				(f) From	(g) To
13-1423090	69744	SL10192	2849	01/01/2024	12/31/2024

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

(a) Total amount of commissions paid 0	(b) Total amount of fees paid 0
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3 Persons receiving commissions and fees. (Complete as many entries as needed to report all persons).

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

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

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

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

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

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	(c) Amount	(d) Purpose	

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(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
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(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

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

Part II Investment and Annuity Contract Information
 Where individual contracts are provided, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

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

6 Contracts With Allocated Funds:

a State the basis of premium rates ▶

b Premiums paid to carrier **6b**

c Premiums due but unpaid at the end of the year **6c**

d If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, enter amount. **6d**
 Specify nature of costs ▶

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

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

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

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

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

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

8 Benefit and contract type (check all applicable boxes)

- a** Health (other than dental or vision)
- b** Dental
- c** Vision
- d** Life insurance
- e** Temporary disability (accident and sickness)
- f** Long-term disability
- g** Supplemental unemployment
- h** Prescription drug
- i** Stop loss (large deductible)
- j** HMO contract
- k** PPO contract
- l** Indemnity contract
- m** Other (specify) ▶

9 Experience-rated contracts:

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

10 Nonexperience-rated contracts:

a	Total premiums or subscription charges paid to carrier	10a	348484
b	If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, other than reported in Part I, line 2 above, report amount.	10b	

Specify nature of costs.

Part IV Provision of Information

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

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

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

A Name of plan ELECTRICAL WORKERS BENEFIT PLAN	B Three-digit plan number (PN) ▶	501
C Plan sponsor's name as shown on line 2a of Form 5500 BOARD OF TRUSTEES OF ELECTRICAL WORKERS BENEFIT TRUST FUND	D Employer Identification Number (EIN) 35-0851694	

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

NEWTOWER TRUST COMPANY

30-0872552

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

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

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

ANTHEM INSURANCE COMPANIES, INC.

35-0781558

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
12 13 15 49	NONE	1347812	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)

HELLO HEART

82-3489727

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	237258	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)

CONIFER

52-1964905

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	226160	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)

SWORD HEALTH

37-1849452

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	194630	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)

LAURA DUKE

35-0851694

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	EMPLOYEE	130330	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)

UNITED ACTUARIAL SERVICES

35-2156428

(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 50	NONE	130114	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)

DELTA DENTAL PLAN OF INDIANA

35-1545647

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
12 13 50	NONE	124725	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)

PNC BANK

22-1146430

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
19 50 62 68	NONE	121256	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	0	Yes <input type="checkbox"/> No <input type="checkbox"/>

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

BRIDGEWAY BENEFIT TECHNOLOGES, LLC

52-1796473

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49 50	NONE	94149	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)

KARA FUNK

35-0851694

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	EMPLOYEE	87132	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)

WHITNEY KING

35-0851694

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	EMPLOYEE	81657	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)

AMY SCHEIBLE

35-0851694

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	EMPLOYEE	76050	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)

DAVID RAY

35-0851694

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
14 50	ADMINISTRATOR	68824	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)

SIERRA

68-0370668

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 51 68	NONE	67205	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	0	Yes <input type="checkbox"/> No <input type="checkbox"/>

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

JULIE BOWEN

35-0851694

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	EMPLOYEE	66557	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)

LISA SMITH

35-0851694

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	EMPLOYEE	62985	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)

LEDBETTER PARTNERS LLC

03-0599899

(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 50	NONE	62178	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)

DEROY & DEVEREAUX

38-2251232

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 51 68	NONE	56386	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	0	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)

LINDSEY WHEELER

35-0851694

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30 50	EMPLOYEE	52636	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)

FARR MILLER & WASHINGTON

52-1979573

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 51 68	NONE	50498	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	0	Yes <input type="checkbox"/> No <input type="checkbox"/>

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

LEGACY PROFESSIONALS LLP

32-0043599

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
10 15 50	NONE	35573	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)

TRILOGY CONSULTING GROUP INC

36-4016705

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	35000	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)

SAVRX

86-1323040

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
12 50	NONE	34650	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)

MARINER INSTITUTIONAL LLC

59-3676225

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
27 50	NONE	34000	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)

SEGal CONSULTING

13-1975125

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
23 50	NONE	25000	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	0	Yes <input type="checkbox"/> No <input type="checkbox"/>

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

PART D ADVISORS

85-3689655

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	20899	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)

NATIONAL INVESTMENT SERVICES LLC

84-3937993

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 51	NONE	11790	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)

MEDEXPERT INTERNATIONAL, INC.

94-3360248

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	6000	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

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

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

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

Part I Service Provider Information (continued)

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

(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 D (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small>	DFE/Participating Plan 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.
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For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024

A Name of plan <u>ELECTRICAL WORKERS BENEFIT PLAN</u>	B Three-digit plan number (PN)	<u>501</u>
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 <u>BOARD OF TRUSTEES OF ELECTRICAL WORKERS BENEFIT TRUST FUND</u>	D Employer Identification Number (EIN) <u>35-0851694</u>	

Part I	Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs) (Complete as many entries as needed to report all interests in DFEs)
---------------	--

a Name of MTIA, CCT, PSA, or 103-12 IE:	<u>BGO DAILY VALUE FUND</u>		
b Name of sponsor of entity listed in (a):	<u>NEWTOWER TRUST COMPANY</u>		
c EIN-PN	<u>83-6177544-001</u>	d Entity code	<u>C</u>
e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	<u>3146344</u>		
a Name of MTIA, CCT, PSA, or 103-12 IE:	<u>NIS INTERMEDIATE FIXED INCOME FUND</u>		
b Name of sponsor of entity listed in (a):	<u>NATIONAL INVESTMENT SERVICES</u>		
c EIN-PN	<u>20-0065449-001</u>	d Entity code	<u>C</u>
e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	<u>10175665</u>		
a Name of MTIA, CCT, PSA, or 103-12 IE:			
b Name of sponsor of entity listed in (a):			
c EIN-PN		d Entity code	
e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)			
a Name of MTIA, CCT, PSA, or 103-12 IE:			
b Name of sponsor of entity listed in (a):			
c EIN-PN		d Entity code	
e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)			
a Name of MTIA, CCT, PSA, or 103-12 IE:			
b Name of sponsor of entity listed in (a):			
c EIN-PN		d Entity code	
e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)			
a Name of MTIA, CCT, PSA, or 103-12 IE:			
b Name of sponsor of entity listed in (a):			
c EIN-PN		d Entity code	
e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)			

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.	OMB No. 1210-0110 2024 This Form is Open to Public Inspection
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For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024	
A Name of plan ELECTRICAL WORKERS BENEFIT PLAN	B Three-digit plan number (PN) ▶ 501
C Plan sponsor's name as shown on line 2a of Form 5500 BOARD OF TRUSTEES OF ELECTRICAL WORKERS BENEFIT TRUST FUND	D Employer Identification Number (EIN) 35-0851694

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	6245374	
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	4651257	4949637
(2) Participant contributions	1b(2)		
(3) Other	1b(3)	1420361	1635299
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	14318536	22798948
(2) U.S. Government securities	1c(2)	19717044	24405144
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)	21341417	17724107
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)	26772627	29025929
(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)	3242092	13322009
(10) Value of interest in pooled separate accounts	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	89455664	100059625
(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	65750	42412
f Total assets (add all amounts in lines 1a through 1e).....	1f	187230122	213963110
Liabilities			
g Benefit claims payable.....	1g	4515000	3557000
h Operating payables.....	1h	149569	217183
i Acquisition indebtedness.....	1i		
j Other liabilities.....	1j	205473	208090
k Total liabilities (add all amounts in lines 1g through 1j).....	1k	4870042	3982273
Net Assets			
l Net assets (subtract line 1k from line 1f).....	1l	182360080	209980837

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)	51705798	
(B) Participants.....	2a(1)(B)	2717789	
(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)		54423587
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit).....	2b(1)(A)	1032818	
(B) U.S. Government securities.....	2b(1)(B)	561828	
(C) Corporate debt instruments.....	2b(1)(C)	859432	
(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)		2454078
(2) Dividends:			
(A) Preferred stock.....	2b(2)(A)		
(B) Common stock.....	2b(2)(B)	405156	
(C) Registered investment company shares (e.g. mutual funds).....	2b(2)(C)	2680445	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		3085601
(3) Rents.....	2b(3)		
(4) Net gain (loss) on sale of assets:			
(A) Aggregate proceeds.....	2b(4)(A)	32226005	
(B) Aggregate carrying amount (see instructions).....	2b(4)(B)	31539304	
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result.....	2b(4)(C)		686701
(5) Unrealized appreciation (depreciation) of assets:			
(A) Real estate.....	2b(5)(A)		
(B) Other.....	2b(5)(B)	3680819	
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		79917
(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)		10395136
c Other income	2c		1463351
d Total income. Add all income amounts in column (b) and enter total	2d		76269190

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	42785465	
(2) To insurance carriers for the provision of benefits	2e(2)	2059344	
(3) Other	2e(3)	1993823	
(4) Total benefit payments. Add lines 2e(1) through (3)	2e(4)		46838632
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)	659914	
(2) Contract administrator fees	2i(2)		
(3) Recordkeeping fees	2i(3)	1573	
(4) IQPA audit fees	2i(4)	34000	
(5) Investment advisory and investment management fees	2i(5)	219879	
(6) Bank or trust company trustee/custodial fees	2i(6)	121256	
(7) Actuarial fees	2i(7)	130114	
(8) Legal fees	2i(8)	62178	
(9) Valuation/appraisal fees	2i(9)		
(10) Other trustee fees and expenses	2i(10)	33483	
(11) Other expenses	2i(11)	547404	
(12) Total administrative expenses. Add lines 2i(1) through (11)	2i(12)		1809801
j Total expenses. Add all expense amounts in column (b) and enter total	2j		48648433

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		27620757
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: LEGACY PROFESSIONALS LLP

(2) EIN: 32-0043599

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

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

Part IV Compliance Questions

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

During the plan year:

	Yes	No	Amount
a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)		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		500000
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.			

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 _____.

Electrical Workers Benefit Trust Fund

Financial Statements

December 31, 2024

Electrical Workers Benefit Trust Fund

Financial Statements with Supplementary Information

December 31, 2024 and 2023

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Report of Independent Auditors

To the Participants and Trustees of
Electrical Workers Benefit Trust Fund

Opinion

We have audited the financial statements of Electrical Workers Benefit Trust Fund (the Plan), an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (ERISA), which comprise the statements of net assets available for benefits and of benefit obligations as of December 31, 2024 and 2023, and the related statements of changes in net assets available for benefits and of changes in benefit obligations for the years then ended, and the related notes to the financial statements.

In our opinion, the accompanying financial statements present fairly, in all material respects, the net assets available for benefits and benefit obligations of Electrical Workers Benefit Trust Fund as of December 31, 2024 and 2023, and the changes in its net assets available for benefits and benefit obligations for the years then ended, in accordance with accounting principles generally accepted in the United States of America.

Basis for Opinion

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

Responsibilities of Management for the Financial Statements

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

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

Responsibilities of Management for the Financial Statements (continued)

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

Auditors' Responsibilities for the Audit of the Financial Statements

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

In performing an audit in accordance with GAAS, we:

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

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

Legacy Professionals LLP

Schererville, Indiana

September 4, 2025

Electrical Workers Benefit Trust Fund

Statements of Net Assets Available for Benefits

December 31, 2024 and 2023

	<u>2024</u>	<u>2023</u>
Assets		
Investments - at fair value		
U.S. Government and Government		
Agency obligations	\$ 24,405,144	\$ 19,717,044
Corporate obligations	17,724,107	21,341,417
Common stocks	29,025,929	26,772,627
Mutual funds	100,059,625	89,455,664
Collective investment funds	13,322,009	3,242,092
Money market funds	10,675,320	14,318,536
Total investments	<u>195,212,134</u>	<u>174,847,380</u>
Receivables		
Employer contributions	4,639,589	4,161,868
Amounts due under reciprocal agreements	164,575	135,203
Redirected contributions from		
Supplemental Unemployment Benefit Plan	145,473	354,186
Due from related organizations	116,172	158,992
Prescription drug rebates	778,115	542,987
Accrued interest and dividends	636,146	637,236
Other	8,720	8,720
Total receivables	<u>6,488,790</u>	<u>5,999,192</u>
Property and equipment - net	<u>42,412</u>	<u>65,750</u>
Prepaid expenses	<u>96,146</u>	<u>72,426</u>
Cash	<u>12,123,628</u>	<u>6,245,374</u>
Total assets	<u>213,963,110</u>	<u>187,230,122</u>
Liabilities and Net Assets		
Liabilities		
Accounts payable and accrued expenses	197,508	132,658
Fees mandated by ACA	19,675	16,911
Deferred participant contributions	208,090	205,473
Total liabilities	<u>425,273</u>	<u>355,042</u>
Net assets available for benefits	<u>\$ 213,537,837</u>	<u>\$ 186,875,080</u>

See accompanying notes to financial statements.

Electrical Workers Benefit Trust Fund

Statements of Changes in Net Assets Available for Benefits

Years Ended December 31, 2024 and 2023

	<u>2024</u>	<u>2023</u>
Additions		
Investment income		
Net appreciation in		
fair value of investments	\$ 14,842,573	\$ 14,288,091
Interest and dividend income	<u>5,539,679</u>	<u>4,100,862</u>
	20,382,252	18,388,953
Less investment expenses	<u>(341,135)</u>	<u>(267,895)</u>
Investment income - net	20,041,117	18,121,058
Employer contributions	51,705,798	44,762,481
Participant contributions	2,717,789	2,788,449
Prescription drug rebates	1,436,748	1,032,945
Stop-loss refunds	-	14,713
Subrogation recoveries	15,866	65,112
Gain on disposal of property and equipment	4,883	11,879
Experience-rated interest credit	5,725	11,686
Miscellaneous income	<u>129</u>	<u>-</u>
Total additions	<u>75,928,055</u>	<u>66,808,323</u>
Deductions		
Cost of benefits		
Medical, dental, vision and other	37,465,516	28,882,365
Prescription drug	6,277,949	4,791,946
Retiree Medicare supplement premiums	1,705,623	1,421,053
Claims discount arrangement fees	1,573,972	1,242,097
Member screenings	419,851	222,460
Stop-loss insurance premiums	<u>353,721</u>	<u>286,195</u>
Total cost of benefits	47,796,632	36,846,116
Fees mandated by ACA	19,675	16,746
Administrative expenses - net	<u>1,448,991</u>	<u>1,190,251</u>
Total deductions	<u>49,265,298</u>	<u>38,053,113</u>
Net increase	26,662,757	28,755,210
Net assets available for benefits		
Beginning of year	<u>186,875,080</u>	<u>158,119,870</u>
End of year	<u>\$ 213,537,837</u>	<u>\$ 186,875,080</u>

See accompanying notes to financial statements.

Electrical Workers Benefit Trust Fund

Statements of Benefit Obligations

December 31, 2024 and 2023

	<u>2024</u>	<u>2023</u>
Amounts currently payable		
Claims payable and claims incurred but not reported	\$ 3,557,000	\$ 4,515,000
Other obligations for current benefit coverage, at estimated amounts		
Accumulated eligibility credits	<u>22,574,000</u>	<u>16,455,000</u>
Postretirement benefit obligations		
Current retirees	37,918,087	32,227,625
Other participants fully eligible for benefits	30,635,420	26,168,733
Other participants not yet fully eligible for benefits	<u>82,641,746</u>	<u>80,683,462</u>
Total postretirement benefit obligations	<u>151,195,253</u>	<u>139,079,820</u>
Total benefit obligations	<u>\$ 177,326,253</u>	<u>\$ 160,049,820</u>

See accompanying notes to financial statements.

Electrical Workers Benefit Trust Fund
Statements of Changes in Benefit Obligations

Years Ended December 31, 2024 and 2023

	<u>2024</u>	<u>2023</u>
Amounts currently payable		
Balance at beginning of year	\$ 4,515,000	\$ 3,670,000
Increase (decrease) during the year attributable to changes in		
Claims payable and claims incurred but not reported	<u>(958,000)</u>	<u>845,000</u>
Balance at end of year	<u>3,557,000</u>	<u>4,515,000</u>
Other obligations for current benefit coverage, at estimated amounts		
Balance at beginning of year	16,455,000	16,122,000
Increase during the year attributable to changes in		
Accumulated eligibility credits	<u>6,119,000</u>	<u>333,000</u>
Balance at end of year	<u>22,574,000</u>	<u>16,455,000</u>
Postretirement benefit obligations		
Balance at beginning of year	139,079,820	110,124,354
Increase (decrease) during the year attributable to		
Benefits earned and other changes	20,612,588	23,453,688
Estimated net benefits paid	(5,671,466)	(4,779,753)
Interest cost	6,953,991	5,781,529
Plan amendments	3,592,173	(842,559)
Changes in actuarial assumptions	<u>(13,371,853)</u>	<u>5,342,561</u>
Balance at end of year	<u>151,195,253</u>	<u>139,079,820</u>
Total benefit obligations	<u>\$ 177,326,253</u>	<u>\$ 160,049,820</u>

See accompanying notes to financial statements.

Electrical Workers Benefit Trust Fund

Notes to Financial Statements

December 31, 2024 and 2023

Note 1. Summary of Significant Accounting Policies

Method of Accounting - The accompanying financial statements of Electrical Workers Benefit Trust Fund (the Plan) have been prepared using the accrual basis of accounting.

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

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

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

Contributions Receivable - Employer contributions including reciprocal contributions due and not received prior to year end are recorded as contributions receivable. Employer contributions due as determined by payroll compliance audits are recorded upon settlement with the employer. An allowance for uncollectible accounts is considered unnecessary and is not provided.

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

Deferred Participant Contributions - Participant contributions received in advance of the corresponding eligibility period are recognized as deferred income.

Benefit Obligations - Benefit obligations are determined by the Plan's actuary using accepted actuarial principles, based on paid and incurred claims cost studies, Plan benefits, claims experience and other data as considered necessary.

The obligation for accumulated eligibility credits represents an estimate of claims which will be due the following year for participants who had been credited with sufficient hours prior to December 31 to maintain eligibility after year end.

Note 1. Summary of Significant Accounting Policies (continued)

Health Reimbursement Arrangement (HRA) Accounts - Included in net assets available for benefits are amounts available to reimburse participants for qualifying expenses, totaling \$16,701,689 and \$12,801,394 as of December 31, 2024 and 2023, respectively. There were no claims payable from HRA accounts as of either December 31, 2024 or 2023.

Revenue Recognition - Revenue derived from employer contributions is recognized in the period in which covered work is performed, based on the number of hours worked in covered employment and the contribution rate set forth in the collective bargaining agreement. Employers are required to remit contributions monthly. The Plan carries out its purpose described in Note 2 within a jurisdiction primarily located throughout various counties in central Indiana.

Reciprocal Contributions - The Plan has entered into reciprocity agreements with other multiemployer welfare plans for its participants who perform work outside the geographic jurisdiction of the local union. Participants who are normally employed within the territory of one local union (home local) may be temporarily employed within the territory of another local union. When a participant works in the territory of a reciprocating local union, the other plan is required to make contributions to the participant's home local benefit plans on the participant's behalf. The Plan's contribution revenue includes monies received pursuant to reciprocity agreements. The Plan uses the same recognition and measurement criteria for such revenue as for all other employer contribution revenue. Amounts paid to other plans under the terms of reciprocity agreements are not reflected in the statements of changes in net assets available for benefits, as the amounts received are not revenue earned by the Plan, and the corresponding payments are not an expense of the Plan. The Plan recognizes a liability upon receiving reciprocal contributions on behalf of non-participants working within the jurisdiction of the local union, and recognizes a decrease in that liability upon remitting those contributions to the appropriate plan. Employer contributions included reciprocal contributions of \$1,125,466 and \$794,102 for the years ended December 31, 2024 and 2023, respectively, from various other welfare plans under the terms of reciprocity agreements. The Plan remitted a total of \$2,466,387 and \$1,353,397 in reciprocal contributions to various other welfare plans under the terms of reciprocity agreements for the years ended December 31, 2024 and 2023, respectively.

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

Stop-Loss Insurance - The Plan maintains a stop-loss insurance arrangement in an effort to limit its exposure for self-insured benefits. Under the terms of the contract, individual participant claims incurred in excess of specific limits within the contract year are reimbursed to the Plan. The specific limit was \$1,000,000 under the policies in effect for the years ended December 31, 2024 and 2023.

Note 1. Summary of Significant Accounting Policies (continued)

Subrogation Recoveries - Claims that are reimbursed pursuant to subrogation matters are recorded upon settlement. Subrogation matters involve third parties considered to be responsible for claims paid by the Plan from whom the Plan seeks reimbursement.

Experience-Rated Interest Credit - Ullico Inc. issued experience-rated interest credits to plans that participated in the IBEW Stop-Loss Program through The Union Labor Life Insurance Company during the policy years from January 1, 2022 through December 31, 2023. The Plan received a dividend for its allocated portion of the credits for participation during that period. Interest credits were determined solely at the discretion of the insurance company.

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

Leases - The Plan's arrangement for shared office space with a related party is described in Note 8. Under generally accepted accounting principles, the Plan must determine if an arrangement is a lease at inception. Upon evaluating the Plan's leasing arrangements, Plan management has determined that because both the Plan and the lessor have the right to terminate the lease without the other party's permission and face only an insignificant penalty for doing so, the lease would not be considered enforceable or create enforceable rights and obligations beyond the 30-day notice period. Therefore, the Plan has accounted for the office lease agreement as a short-term lease, and neither a right-of-use asset nor a lease liability was recorded on the statements of net assets available for benefits, although the Plan has provided certain disclosures regarding its leasing arrangement.

Reclassifications - Certain prior year amounts have been reclassified to conform to the current year presentation

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

Subsequent Events - Subsequent events have been evaluated through September 4, 2025, which is the date the financial statements were available to be issued.

Note 2. Description of the Plan

The Plan was established during 1949 as the result of a collective bargaining agreement to provide health care and death and disability benefits for eligible participants and their dependents. The Plan is a multiemployer health and welfare plan subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA), as amended.

Note 2. Description of the Plan (continued)

The Plan provides health (medical, vision, dental and prescription drug), life insurance, short and long-term disability, and accidental death and dismemberment benefits for eligible participants and their covered dependents.

To become initially eligible for benefits, participants must be employed by a contributing employer or employers, working within the jurisdiction of Local Union No. 481 International Brotherhood of Electrical Workers, and must be credited with contributions for not less than 700 hours within six consecutive months. Participants who have worked 700 hours become eligible for benefits on the first day of the second calendar month. Continued eligibility is maintained as long as the participant received credit for 140 hours of employer contributions in the first month of the three months immediately preceding the month for which eligibility is sought. Participant contributions are allowed for continued eligibility under certain circumstances.

Participants are provided an hour bank maintained specifically for continued eligibility. Contributions in excess of 140 hours per month are credited to a participant's eligibility bank, up to a maximum of 840 hours in total.

The Plan also includes a flexible spending program, through Health Reimbursement Arrangement (HRA) accounts. The HRA is an account the Plan sets up and maintains on behalf of a participant to track contributions, reimbursements and a participant's available balance. Each account is funded exclusively through contributions made on a participant's behalf by an employer that contributes to the Plan under a collective bargaining agreement. The amount of contributions is determined by the Board of Trustees and is subject to change or discontinuance at any time. The HRA benefit to which a participant is entitled is the benefit that can be provided from the participant's HRA account. Participants are not vested in contributions made on their behalf, and their available balance may be used only for qualifying health care expenses not otherwise covered under the Plan or to make self-payments to maintain eligibility. No earnings are credited to a participant's account. Any unused amount each year may be accumulated in the participant's HRA account for future periods if the participant maintains eligibility. Balances are not portable and are forfeited if the participant terminates coverage from the Plan, their HRA account has no activity for 36 months, termination of the Plan or HRA program, death of the participant with no surviving dependents, or permanently opting out of participation in the HRA program. There were no forfeitures of unused amounts during either 2024 or 2023. In general, forfeited amounts are available to pay future expenses of the Plan.

All benefits except Medicare retiree benefits are self-funded. Medicare retiree benefits are provided through an insurance contract with Labor First.

Retired participants are entitled to the same benefits as active participants provided they meet certain requirements, as defined by the Plan. At age 65, a participant is eligible for similar benefits under a Medicare carve-out provision. Medicare eligible participants are also eligible to enroll in a Medicare Advantage plan through Labor First. Retired participants are able to continue eligibility through monthly payments to the Plan.

Note 2. Description of the Plan (continued)

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

Participants should refer to the summary plan description, recent Plan amendments and Summaries of Material Modifications for more complete information.

Note 3. Priorities upon Termination

It is the intent of the Trustees to continue the Plan in full force and effect; however, to safeguard against any unforeseen contingencies, the right to discontinue the Plan is reserved to the Trustees. Termination shall not permit any part of the Plan to be used for or diverted to purposes other than the exclusive benefit of the participants.

Note 4. Tax Status

The Plan obtained a notice of exemption dated January 25, 1974, in which the Internal Revenue Service stated that the trust established under the Plan, as then designed, was in compliance with the applicable requirements of the Internal Revenue Code. The Plan has been amended since receiving the notice of exemption. The Trustees believe that the Plan is currently designed and being operated in compliance with the applicable requirements of the Internal Revenue Code, and therefore believe that the Plan was qualified and the related trust was tax-exempt as of the financial statement date.

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

Note 5. Fair Value Measurements

The *Fair Value Measurements and Disclosure* Topic of the FASB Accounting Standards Codification established a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1 measurements) and the lowest priority to unobservable inputs (Level 3 measurements). The following describes the three levels of the fair value hierarchy.

Note 5. Fair Value Measurements (continued)

Basis of Fair Value Measurement

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

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

	<u>Total</u>	<u>Fair Value Measurements at 12/31/24 Using</u>		
		<u>Quoted Prices</u> in Active Markets for Identical Assets (Level 1)	<u>Significant</u> Other Observable Inputs (Level 2)	<u>Significant</u> Unobservable Inputs (Level 3)
U.S. Government and Government Agency obligations	\$ 24,405,144	\$ 19,661,711	\$ 4,743,433	\$ -
Corporate obligations	17,724,107	-	17,724,107	-
Common stocks	29,025,929	29,025,929	-	-
Mutual funds	100,059,625	100,059,625	-	-
Money market funds	10,675,320	-	10,675,320	-
	181,890,125	<u>\$ 148,747,265</u>	<u>\$ 33,142,860</u>	<u>\$ -</u>
Investments measured at net asset value:				
Collective investment funds	13,322,009			
Total	<u>\$ 195,212,134</u>			

Note 5. Fair Value Measurements (continued)

		<u>Fair Value Measurements at 12/31/23 Using</u>		
		<u>Quoted Prices</u>		
		<u>in Active</u>	<u>Significant</u>	
		<u>Markets for</u>	<u>Other</u>	<u>Significant</u>
		<u>Identical</u>	<u>Observable</u>	<u>Unobservable</u>
		<u>Assets</u>	<u>Inputs</u>	<u>Inputs</u>
	<u>Total</u>	<u>(Level 1)</u>	<u>(Level 2)</u>	<u>(Level 3)</u>
U.S. Government and				
Government Agency obligations	\$ 19,717,044	\$ 14,567,536	\$ 5,149,508	\$ -
Corporate obligations	21,341,417	-	21,341,417	-
Common stocks	26,772,627	26,772,627	-	-
Mutual funds	89,455,664	89,455,664	-	-
Money market funds	14,318,536	-	14,318,536	-
Total	171,605,288	<u>\$ 130,795,827</u>	<u>\$40,809,461</u>	<u>\$ -</u>
Investments measured at net asset value:				
Collective investment fund	3,242,092			
Total	<u>\$ 174,847,380</u>			

Level 1 Measurements

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

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

Level 2 Measurements

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

Money market funds are valued at cost, which approximates fair value.

Note 5. Fair Value Measurements (continued)

Measurements Using Net Asset Value as a Practical Expedient

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

The collective investment funds are direct filing entities (DFEs) and file a Form 5500 annual report with the U.S. Department of Labor. The Plan is not required to disclose the significant investment strategies of DFE investments. Redemptions are processed daily upon written notice of seven to thirty days.

Note 6. Property and Equipment

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

	<u>2024</u>	<u>2023</u>
Office furniture and equipment	\$ 229,351	\$ 229,083
Less - accumulated depreciation	<u>(186,939)</u>	<u>(163,333)</u>
Net property and equipment	<u>\$ 42,412</u>	<u>\$ 65,750</u>

Depreciation expense was \$30,673 for the year ended December 31, 2024 and \$44,200 for 2023.

Note 7. Participation in Multiemployer Plans

Defined Benefit Pension Plans

All shared full-time employees are covered by up to two multiemployer defined benefit pension plans. The risk of participating in multiemployer defined benefit pension plans is different from single employer plans. Assets contributed to a multiemployer defined benefit pension plan by one employer may be used to provide benefits to employees of other participating employers. If a participating employer stops contributing to the plan, the unfunded obligations of the plan may be borne by the remaining participating employers.

Note 7. Participation in Multiemployer Plans (continued)

Defined Benefit Pension Plans (continued)

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

Pension Plan	EIN/PN	Pension Protection Act Zone Status		FIP/RP Status Pending / Implemented	Contributions		Most Recently Available Annual Report (Form 5500)
		2024	2023		2024	2023	
Indiana Electrical Workers Pension Trust Fund, I.B.E.W.	35-1102579/001	Green as of 7/1/2024	Green as of 7/1/2023	N/A	\$ 91,464	\$ 81,139	6/30/2024
Other					10,166	9,333	
				Total	<u>\$ 101,630</u>	<u>\$ 90,472</u>	

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

Defined Contribution Retirement Plan

All shared full-time employees are covered by a multiemployer defined contribution retirement plan. The Plan's share of contributions to the defined contribution plan was \$34,443 for the year ended December 31, 2024 and \$30,554 for 2023.

Welfare Plan that Provides Postretirement Benefits

The Plan's shared full-time employees are covered by a multiemployer health and welfare plan that provides medical benefits to retirees and to eligible employees working under collective bargaining agreements, and their dependents. The Plan's share of contributions to this plan for the years ended December 31, 2024 and 2023 was \$117,148 and \$108,302 respectively.

Note 8. Related Organizations

The Plan is related to several entities which include a pension plan, an annuity plan, a supplemental unemployment benefit plan and an apprenticeship and training fund. The Plan is also related to a local union, a building corporation, a labor management cooperative and a credit union.

The Plan shares office facilities, equipment and staff with three related organizations: International Brotherhood of Electrical Workers Local 481 Defined Contribution Plan and Trust; Indiana Electrical Workers Pension Trust Fund, I.B.E.W.; and IBEW 481 Supplemental Unemployment Benefit Plan (SUB Plan). The shared operating expenses, including rent, are normally paid initially by the Plan and are allocated to the related organizations on a periodic basis. Administrative expenses are shown net of reimbursements made to the Plan from related organizations totaling \$1,084,808 and \$901,232 for 2024 and 2023, respectively. Amounts due to or from related organizations at year end represent amounts owed for shared expenses.

The Plan leases office space from the related building corporation. The lease, which was effective November 1, 2020 and expired October 31, 2023, required the Plan to pay monthly rent with annual increases. The Plan renewed its lease effective November 1, 2023 through expiration on October 31, 2025. The lease provides for a 30-day notice period for termination by either the lessor or lessee.

Total monthly rent at January 1, 2025 was \$5,598. Future minimum payments required under this lease, before allocations to the related organizations, totaled \$55,980.

The Plan's net allocated rent expense for the years ended December 31, 2024 and 2023 was \$26,870 and \$24,631 respectively.

Note 9. Funding Policy

The Plan is primarily funded by contributions from employers and participants. Employer contributions to the Plan are made under various negotiated collective bargaining agreements. Most participants are covered by one collective bargaining agreement. Per that agreement, the employer contribution rate in effect from January 1, 2023 through December 31, 2024 was \$11.13 per hour worked. Effective May 29, 2023, a total of \$1.00 per hour worked was segregated from employer contributions received on behalf of participants to fund the HRA accounts. Prior to that, a total of \$.60 per hour worked was segregated from employer contributions received on behalf of participants to fund the HRA accounts.

Participant contributions are allowed to provide COBRA benefits, benefits to retired and disabled participants, and to certain eligible spouses and dependents. The monthly participant contribution rates ranged from \$287 to \$2,066 for 2024 and 2023, depending on the coverage option.

Note 9. Funding Policy (continued)

In addition, the first \$6,500 of employer contributions to the SUB Plan are credited to each participant's account in the SUB Plan. Once a participant's balance in the SUB Plan reaches the limit, employer contributions are redirected to this Plan. Redirected contributions to the Plan from the SUB Plan totaled \$1,736,773 in 2024 and \$1,615,961 in 2023, and are included in employer contributions in the statements of changes in net assets available for benefits.

Note 10. Major Employers

Contributions from three employers accounted for approximately 54% and 48% of total employer contributions for the years ended December 31, 2024 and 2023, respectively. In the event these employers suspend contributions, the Plan would terminate coverage to the employers' participants, as set forth in the Plan document. The Plan would retain the risk of meeting current fixed administrative expenses until the appropriate adjustments were made.

Note 11. Postretirement Benefit Obligations

The postretirement benefit obligation represents the actuarial present value of those estimated future benefits that are attributed by the terms of the Plan to employees' service rendered to the date of the financial statements, reduced by the actuarial present value of contributions expected to be received in the future from current Plan participants. Postretirement benefits include future benefits expected to be paid to or for currently retired or terminated employees and their beneficiaries and dependents.

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

Retiree contributions are expected to fund approximately 34% and 37% of the estimated cost of their postretirement benefits as of December 31, 2024 and 2023, respectively.

Note 11. Postretirement Benefit Obligations (continued)

The following significant assumptions were used in the valuations as of December 31, 2024 and 2023:

- Weighted-average discount rate:
 - 2024 - 5.75%
 - 2023 - 5.00%

- Health trend rates:
 - Medical:
 - 7.90% graded to 4% over 15 years

 - Prescription drug:
 - 2024 - 9.20% graded to 4% over 15 years
 - 2023 - 9.00% graded to 4% over 15 years

- Retirement age:
 - Age 55, with all participants retired by age 65

- Mortality:
 - 2024 - 105% male and 120% female of the Pri-2012 Blue Collar Mortality Tables for employees and healthy annuitants projected forward using the MP-2021 projection scale
 - 2023 - 105% male and 110% female of the Pri-2012 Blue Collar Mortality Tables for employees and healthy annuitants projected forward using the MP-2021 projection scale

The health care cost trend rate assumption has a significant effect on the amounts reported in the accompanying financial statements. If the assumed rate increased by one percentage point in each year, it would increase the obligations as of December 31, 2024 and 2023 by \$20,386,523 and \$20,054,685 respectively.

Changes in the weighted-average discount rate and health trend rates decreased postretirement benefit obligations by \$13,371,853 in 2024. Changes in the weighted-average discount rate and health trend rates increased postretirement benefit obligations by \$5,342,561 in 2023. Medical, prescription drug, dental and self-payment trend rates were updated for both years to better reflect the Plan's projection for future medical inflation.

Plan amendments reflecting a change in various benefits increased obligations by \$3,592,173 for the year ended December 31, 2024. Plan amendments reflecting a change in various benefits decreased obligations by \$842,559 for the year ended December 31, 2023.

The foregoing 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 the postretirement benefit obligation.

Note 12. Risks and Uncertainties

The Plan invests in various investment securities. In general, investments are exposed to various risks, such as interest rate, credit and overall market volatility risk. Due to the level of risk associated with certain investments, it is reasonably possible that changes in the values of the investments will occur in the near term and that such changes could materially affect the amounts reported in the statements of net assets available for benefits. The current economic environment has increased the degree of uncertainty.

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

Note 13. Party-in-Interest Transactions

The Plan invests in certain funds that are managed by the Plan's custodian. These transactions qualify as party-in-interest transactions under ERISA.

Note 14. Concentration of Cash

Cash consists of monies held in checking and highly liquid interest-bearing accounts without significant withdrawal restrictions. The Plan places its cash with financial institutions deemed to be creditworthy. Balances are insured by the FDIC up to \$250,000 per financial institution. At December 31, 2024, the Plan's cash exceeded insured limits by approximately \$12,060,000.

Note 15. Reconciliation of Financial Statements to Form 5500

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

	<u>2024</u>	<u>2023</u>
Net assets available for benefits per the financial statements	\$ 213,537,837	\$ 186,875,080
Less - benefit obligations currently payable	<u>(3,557,000)</u>	<u>(4,515,000)</u>
Net assets available for benefits per the Form 5500	<u>\$ 209,980,837</u>	<u>\$ 182,360,080</u>

Note 15. Reconciliation of Financial Statements to Form 5500 (continued)

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

Benefits paid to or for participants per the financial statements	\$ 47,796,632
Add - amounts currently payable at end of year	3,557,000
Less - amounts currently payable at beginning of year	<u>(4,515,000)</u>
Benefits paid to or for participants per the Form 5500	<u>\$ 46,838,632</u>

REPORT OF INDEPENDENT AUDITORS ON SUPPLEMENTAL SCHEDULES

To the Participants and Trustees of
Electrical Workers Benefit Trust Fund

We have audited the financial statements of Electrical Workers Benefit Trust Fund (the Plan) as of and for the years ended December 31, 2024 and 2023, and our report thereon dated September 4, 2025, which expressed an unmodified opinion on those financial statements, appears on pages 1 and 2. Our audits were conducted for the purpose of forming an opinion on the financial statements as a whole. Supplemental Schedules 1 and 2 are presented for purposes of additional analysis and are not a required part of the financial statements but are supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audits of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with GAAS.

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

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

Schererville, Indiana

September 4, 2025

FOOTNOTES

STATEMENT 1

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

SCHEDULE C	OTHER SERVICE PROVIDER SERVICE CODES	STATEMENT 2
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NAME	SERVICE CODES
ANTHEM INSURANCE COMPANIES, INC.	12
ANTHEM INSURANCE COMPANIES, INC.	13
ANTHEM INSURANCE COMPANIES, INC.	15
ANTHEM INSURANCE COMPANIES, INC.	49
PNC BANK	19
PNC BANK	50
PNC BANK	62
PNC BANK	68

CODES TO SCHEDULE C, LINE 2(B)

SCHEDULE H	OTHER RECEIVABLES	STATEMENT 3
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DESCRIPTION	BEGINNING	ENDING
ACCRUED INVESTMENT INCOME	637,236.	636,146.
DUE FROM RELATED ENTITIES - NET	158,992.	116,172.
PRESCRIPTION DRUG REBATES	542,987.	778,115.
PREPAID EXPENSES	72,426.	96,146.
OTHER	8,720.	8,720.
TOTAL TO SCHEDULE H, LINE 1B(3)	1,420,361.	1,635,299.

SCHEDULE H	OTHER PLAN LIABILITIES	STATEMENT 4	
DESCRIPTION		BEGINNING	ENDING
DEFERRED PARTICIPANT CONTRIBUTIONS		205,473.	208,090.
TOTAL TO SCHEDULE H, LINE 1J		205,473.	208,090.

SCHEDULE H	OTHER INCOME	STATEMENT 5	
DESCRIPTION		AMOUNT	
PRESCRIPTION DRUG REBATES		1,436,748.	
SUBROGATION RECOVERIES		15,866.	
EXPERIENCE-RATED INTEREST CREDIT		5,725.	
GAIN ON DISPOSAL OF PROPERTY AND EQUIPMENT		4,883.	
MISCELLANEOUS INCOME		129.	
TOTAL TO SCHEDULE H, LINE 2C		1,463,351.	

SCHEDULE H	OTHER PAYMENTS TO PROVIDE BENEFITS	STATEMENT 6	
DESCRIPTION		AMOUNT	
CLAIMS DISCOUNT ARRANGEMENT FEE		1,573,972.	
MEMBER SCREENINGS		419,851.	
TOTAL TO SCHEDULE H, LINE 2E(3)		1,993,823.	

SCHEDULE H

OTHER ADMINISTRATIVE EXPENSES

STATEMENT 7

DESCRIPTION	AMOUNT
AUTOMOBILE EXPENSES	6,337.
COMPUTER EXPENSE	180,240.
CONSULTING EXPENSE	64,101.
DEPRECIATION	30,673.
DUES AND SUBSCRIPTIONS	1,630.
INSURANCE EXPENSE	30,950.
OFFICE SUPPLIES AND EXPENSE	81,852.
POSTAGE	26,451.
PRINTING	14,499.
RENT	26,870.
REPAIRS AND MAINTENANCE	855.
TELEPHONE	6,501.
FEEs MANDATED BY ACA	19,675.
MISCELLANEOUS EXPENSE	352.
DEPENDENT AUDIT	20,899.
PAYROLL TAXES	35,519.
TOTAL TO SCHEDULE H, LINE 2I(11)	547,404.



ELEC WKRS BEN TR FD DEROY
 CUSTODY STATEMENT

January 1, 2024 - December 31, 2024

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Detail

5% Report by asset-single transaction

							Valuation	Threshold	
							\$11,262,236.48	\$563,111.82	
Asset description	Tran type	Settle date	Shares/units	Purchase/sale Cost/proceeds	Broker commission	Other expense	Cost of asset	Previous annual market	Net gain/loss

**NO
 ACTIVITY
 THIS PERIOD**



ELEC WKRS BEN TR FD DEROY
 CUSTODY STATEMENT

January 1, 2024 - December 31, 2024

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Detail

5% Report by asset-aggregate

							Valuation	Threshold	
							\$11,262,236.48	\$563,111.82	
Asset description	Tran type	Settle date	Shares/units	Purchase/sale Cost/proceeds	Broker commission	Other expense	Cost of asset	Previous annual market	Net gain/loss
FEDERATED HERMES GOVT OBLIG PREM SHS #117	PUR	01/31/24	166,043.430	\$166,043.43	\$0.00	\$0.00	\$166,043.43	\$166,043.43	\$0.00
	SAL	02/29/24	3,503.620	3,503.62	0.00	0.00	3,503.62	3,503.62	0.00
	PUR	03/31/24	39,020.340	39,020.34	0.00	0.00	39,020.34	39,020.34	0.00
	PUR	04/30/24	16,305.040	16,305.04	0.00	0.00	16,305.04	16,305.04	0.00
	PUR	05/31/24	129,734.250	129,734.25	0.00	0.00	129,734.25	129,734.25	0.00
	SAL	06/30/24	1,778.340	1,778.34	0.00	0.00	1,778.34	1,778.34	0.00
	PUR	07/31/24	36,992.360	36,992.36	0.00	0.00	36,992.36	36,992.36	0.00
	SAL	08/31/24	58,566.100	58,566.10	0.00	0.00	58,566.10	58,566.10	0.00
	SAL	09/30/24	70,390.850	70,390.85	0.00	0.00	70,390.85	70,390.85	0.00
	PUR	10/31/24	139,119.740	139,119.74	0.00	0.00	139,119.74	139,119.74	0.00
	SAL	11/30/24	60,275.400	60,275.40	0.00	0.00	60,275.40	60,275.40	0.00
	PUR	12/31/24	62,367.730	62,367.73	0.00	0.00	62,367.73	62,367.73	0.00
7 PURCHASES FOR				\$589,582.89	TOTAL ISSUE AGGREGATE		\$784,097.20		
5 SALES FOR				\$194,514.31					



ELEC WKRS BEN TR FD-PCA
 CUSTODY STATEMENT

January 1, 2024 - December 31, 2024

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Detail

5% Report by asset-single transaction

							Valuation	Threshold	
							\$41,456,211.96	\$2,072,810.59	
Asset description	Tran type	Settle date	Shares/units	Purchase/sale Cost/proceeds	Broker commission	Other expense	Cost of asset	Previous annual market	Net gain/loss

**NO
 ACTIVITY
 THIS PERIOD**



ELEC WKRS BEN TR FD-PCA
CUSTODY STATEMENT

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Detail

5% Report by asset-aggregate

								Valuation	Threshold	
								\$41,456,211.96	\$2,072,810.59	
Asset description	Tran type	Settle date	Shares/units	Purchase/sale Cost/proceeds	Broker commission	Other expense	Cost of asset	Previous annual market	Net gain/loss	
USA TREASURY NOTES	PUR	01/22/24	190,000.000	\$179,201.18	\$0.00	\$0.00	\$179,201.18	\$179,201.18	\$0.00	
01.625% DUE 05/15/2026	PUR	01/22/24	235,000.000	221,615.97	0.00	0.00	221,615.97	221,615.97	0.00	
	PUR	01/22/24	525,000.000	495,140.62	0.00	0.00	495,140.62	495,140.62	0.00	
	PUR	01/26/24	165,000.000	155,525.37	0.00	0.00	155,525.37	155,525.37	0.00	
	PUR	03/21/24	135,000.000	126,736.53	0.00	0.00	126,736.53	126,736.53	0.00	
	PUR	04/25/24	50,000.000	46,820.40	0.00	0.00	46,820.40	46,820.40	0.00	
	SAL	04/30/24	360,000.000	336,839.08	0.00	0.00	342,048.58	339,493.05	- 5,209.50	
	SAL	05/31/24	480,000.000	450,656.26	0.00	0.00	456,064.77	452,657.40	- 5,408.51	
	SAL	07/31/24	645,000.000	613,808.19	0.00	0.00	612,837.03	608,258.37	971.16	
	PUR	09/05/24	195,000.000	187,824.60	0.00	0.00	187,824.60	187,824.60	0.00	
	PUR	09/05/24	100,000.000	96,328.10	0.00	0.00	96,328.10	96,328.10	0.00	
	PUR	09/18/24	125,000.000	120,893.63	0.00	0.00	120,893.63	120,893.63	0.00	
	SAL	09/30/24	350,000.000	338,898.45	0.00	0.00	333,540.77	331,550.78	5,357.68	
	PUR	10/25/24	210,000.000	202,190.52	0.00	0.00	202,190.52	202,190.52	0.00	
	SAL	10/30/24	265,000.000	254,896.81	0.00	0.00	252,815.93	251,469.84	2,080.88	
	PUR	11/04/24	185,000.000	177,939.64	0.00	0.00	177,939.64	177,939.64	0.00	
	SAL	11/27/24	670,000.000	644,482.43	0.00	0.00	639,707.43	636,637.23	4,775.00	
	SAL	12/27/24	245,000.000	236,157.02	0.00	0.00	233,922.87	232,800.18	2,234.15	
11 PURCHASES FOR				\$2,010,216.56	TOTAL ISSUE AGGREGATE			\$4,885,954.80		
7 SALES FOR				\$2,875,738.24						
USA TREASURY NOTE	PUR	01/08/24	155,000.000	\$147,655.67	\$0.00	\$0.00	\$147,655.67	\$147,655.67	\$0.00	
02.875% DUE 08/15/2028	SAL	01/22/24	100,000.000	94,902.34	0.00	0.00	94,496.72	95,658.41	405.62	
	SAL	02/06/24	185,000.000	175,280.28	0.00	0.00	174,818.92	176,968.07	461.36	
	SAL	02/20/24	125,000.000	117,890.63	0.00	0.00	118,120.90	119,573.02	- 230.27	
	SAL	02/22/24	5,000.000	4,716.59	0.00	0.00	4,724.84	4,782.92	- 8.25	
	SAL	02/22/24	25,000.000	23,573.24	0.00	0.00	23,624.18	23,914.60	- 50.94	
	PUR	02/28/24	440,000.000	413,582.80	0.00	0.00	413,582.80	413,582.80	0.00	
	SAL	05/01/24	65,000.000	60,414.46	0.00	0.00	61,337.13	61,893.28	- 922.67	
	SAL	06/14/24	110,000.000	103,872.63	0.00	0.00	103,801.30	104,742.48	71.33	
	PUR	06/28/24	580,000.000	547,148.45	0.00	0.00	547,148.45	547,148.45	0.00	
	SAL	06/28/24	185,000.000	174,846.68	0.00	0.00	174,574.91	175,700.43	271.77	
	PUR	08/05/24	155,000.000	150,519.52	0.00	0.00	150,519.52	150,519.52	0.00	
	SAL	08/19/24	200,000.000	193,015.62	0.00	0.00	189,129.29	190,270.23	3,886.33	
	PUR	09/06/24	120,000.000	116,789.06	0.00	0.00	116,789.06	116,789.06	0.00	



ELEC WKRS BEN TR FD-PCA
 CUSTODY STATEMENT

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Detail

								Valuation	Threshold
<i>5% Report by asset-aggregate (continued)</i>								\$41,456,211.96	\$2,072,810.59
Asset description	Tran type	Settle date	Shares/units	Purchase/sale Cost/proceeds	Broker commission	Other expense	Cost of asset	Previous annual market	Net gain/loss
	5			\$1,375,695.50					
	PURCHASES FOR				TOTAL ISSUE AGGREGATE			\$2,324,207.97	
	9			\$948,512.47					
	SALES FOR								



ELEC WKRS BEN TR FD -FARR MILLER
 CUSTODY STATEMENT

January 1, 2024 - December 31, 2024

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Detail

5% Report by asset-single transaction

							Valuation	Threshold	
							\$7,268,410.43	\$363,420.52	
Asset description	Tran type	Settle date	Shares/units	Purchase/sale Cost/proceeds	Broker commission	Other expense	Cost of asset	Previous annual market	Net gain/loss

**NO
 ACTIVITY
 THIS PERIOD**



ELEC WKRS BEN TR FD -FARR MILLER
 CUSTODY STATEMENT

January 1, 2024 - December 31, 2024

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Detail

5% Report by asset-aggregate

							Valuation	Threshold	
							\$7,268,410.43	\$363,420.52	
Asset description	Tran type	Settle date	Shares/units	Purchase/sale Cost/proceeds	Broker commission	Other expense	Cost of asset	Previous annual market	Net gain/loss
FEDERATED HERMES GOVT OBLIG PREM SHS #117	SAL	01/31/24	3,990.380	\$3,990.38	\$0.00	\$0.00	\$3,990.38	\$3,990.38	\$0.00
	PUR	02/29/24	14,372.250	14,372.25	0.00	0.00	14,372.25	14,372.25	0.00
	PUR	03/31/24	13,880.170	13,880.17	0.00	0.00	13,880.17	13,880.17	0.00
	PUR	04/30/24	241,579.640	241,579.64	0.00	0.00	241,579.64	241,579.64	0.00
	SAL	05/31/24	656.500	656.50	0.00	0.00	656.50	656.50	0.00
	PUR	06/30/24	18,188.310	18,188.31	0.00	0.00	18,188.31	18,188.31	0.00
	SAL	07/31/24	86,118.560	86,118.56	0.00	0.00	86,118.56	86,118.56	0.00
	SAL	08/31/24	66,574.580	66,574.58	0.00	0.00	66,574.58	66,574.58	0.00
	PUR	09/30/24	17,010.260	17,010.26	0.00	0.00	17,010.26	17,010.26	0.00
	SAL	10/31/24	142,952.020	142,952.02	0.00	0.00	142,952.02	142,952.02	0.00
	SAL	11/30/24	1,745.880	1,745.88	0.00	0.00	1,745.88	1,745.88	0.00
	PUR	12/31/24	16,237.830	16,237.83	0.00	0.00	16,237.83	16,237.83	0.00
6 PURCHASES FOR				\$321,268.46	TOTAL ISSUE AGGREGATE		\$623,306.38		
6 SALES FOR				\$302,037.92					



ELEC WKRS BEN TR FD QUEST
CUSTODY STATEMENT

January 1, 2024 - December 31, 2024

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Detail

5% Report by asset-single transaction

Asset description	Tran type	Settle date	Shares/units	Purchase/sale Cost/proceeds	Broker commission	Other expense	Cost of asset	Valuation	Threshold
								Previous annual market	Net gain/loss
								\$0.00	\$0.00

**NO
ACTIVITY
THIS PERIOD**



ELEC WKRS BEN TR FD QUEST
 CUSTODY STATEMENT

January 1, 2024 - December 31, 2024

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Detail

5% Report by asset-aggregate

							Valuation	Threshold	
							\$0.00	\$0.00	
Asset description	Tran type	Settle date	Shares/units	Purchase/sale Cost/proceeds	Broker commission	Other expense	Cost of asset	Previous annual market	Net gain/loss

**NO
 ACTIVITY
 THIS PERIOD**



ELEC WKRS BEN TR FD - RPF
 CUSTODY STATEMENT

January 1, 2024 - December 31, 2024

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Detail

5% Report by asset-single transaction

Valuation	Threshold
\$70,262,420.29	\$3,513,121.01

Asset description	Tran type	Settle date	Shares/units	Purchase/sale Cost/proceeds	Broker commission	Other expense	Cost of asset	Previous annual market	Net gain/loss
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**NO
 ACTIVITY
 THIS PERIOD**



ELEC WKRS BEN TR FD - RPF
CUSTODY STATEMENT

January 1, 2024 - December 31, 2024

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Detail

5% Report by asset-aggregate

							Valuation	Threshold	
							\$70,262,420.29	\$3,513,121.01	
Asset description	Tran type	Settle date	Shares/units	Purchase/sale Cost/proceeds	Broker commission	Other expense	Cost of asset	Previous annual market	Net gain/loss
FEDERATED HERMES GOVT OBLIG PREM SHS #117	SAL	01/31/24	219,300.880	\$219,300.88	\$0.00	\$0.00	\$219,300.88	\$219,300.88	\$0.00
	PUR	02/29/24	292,834.350	292,834.35	0.00	0.00	292,834.35	292,834.35	0.00
	SAL	03/31/24	218,637.820	218,637.82	0.00	0.00	218,637.82	218,637.82	0.00
	PUR	04/30/24	777,823.240	777,823.24	0.00	0.00	777,823.24	777,823.24	0.00
	SAL	05/31/24	206,103.930	206,103.93	0.00	0.00	206,103.93	206,103.93	0.00
	SAL	06/30/24	220,892.130	220,892.13	0.00	0.00	220,892.13	220,892.13	0.00
	SAL	07/31/24	212,462.690	212,462.69	0.00	0.00	212,462.69	212,462.69	0.00
	SAL	08/31/24	187,277.930	187,277.93	0.00	0.00	187,277.93	187,277.93	0.00
	PUR	09/30/24	797,332.020	797,332.02	0.00	0.00	797,332.02	797,332.02	0.00
	SAL	10/31/24	197,971.260	197,971.26	0.00	0.00	197,971.26	197,971.26	0.00
	SAL	11/30/24	184,249.260	184,249.26	0.00	0.00	184,249.26	184,249.26	0.00
	SAL	12/31/24	194,199.130	194,199.13	0.00	0.00	194,199.13	194,199.13	0.00
3 PURCHASES FOR				\$1,867,989.61	TOTAL ISSUE AGGREGATE		\$3,709,084.64		
9 SALES FOR				\$1,841,095.03					



ELEC WKRS BEN TR FD-MUTUAL FUNDS
 CUSTODY STATEMENT

January 1, 2024 - December 31, 2024

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Detail

5% Report by asset-single transaction

							Valuation	Threshold	
							\$17,879,793.73	\$893,989.68	
Asset description	Tran type	Settle date	Shares/units	Purchase/sale Cost/proceeds	Broker commission	Other expense	Cost of asset	Previous annual market	Net gain/loss

**NO
 ACTIVITY
 THIS PERIOD**



ELEC WKRS BEN TR FD-MUTUAL FUNDS
 CUSTODY STATEMENT

January 1, 2024 - December 31, 2024

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Detail

5% Report by asset-aggregate

							Valuation	Threshold	
							\$17,879,793.73	\$893,989.68	
Asset description	Tran type	Settle date	Shares/units	Purchase/sale Cost/proceeds	Broker commission	Other expense	Cost of asset	Previous annual market	Net gain/loss

**NO
 ACTIVITY
 THIS PERIOD**



ELEC WKRS BEN TR FD - CASH MGMT
 CUSTODY STATEMENT

January 1, 2024 - December 31, 2024

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Detail

5% Report by asset-single transaction

							Valuation	Threshold	
							\$15,187,153.05	\$759,357.65	
Asset description	Tran type	Settle date	Shares/units	Purchase/sale Cost/proceeds	Broker commission	Other expense	Cost of asset	Previous annual market	Net gain/loss
FEDERATED HERMES GOVT OBLIG PREM SHS #117	PUR	01/31/24	1,258,718.760	\$1,258,718.76	\$0.00	\$0.00	\$1,258,718.76	\$1,258,718.76	\$0.00
FEDERATED HERMES GOVT OBLIG PREM SHS #117	SAL	07/31/24	9,936,892.920	9,936,892.92	0.00	0.00	9,936,892.92	9,936,892.92	\$0.00
FEDERATED HERMES GOVT OBLIG PREM SHS #117	PUR	10/31/24	1,991,052.450	1,991,052.45	0.00	0.00	1,991,052.45	1,991,052.45	\$0.00
2 PURCHASES FOR				\$3,249,771.21	TOTAL ISSUE AGGREGATE		\$13,186,664.13		
1 SALES FOR				\$9,936,892.92					



ELEC WKRS BEN TR FD - CASH MGMT
CUSTODY STATEMENT

January 1, 2024 - December 31, 2024

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Detail

5% Report by asset-aggregate

							Valuation	Threshold	
							\$15,187,153.05	\$759,357.65	
Asset description	Tran type	Settle date	Shares/units	Purchase/sale Cost/proceeds	Broker commission	Other expense	Cost of asset	Previous annual market	Net gain/loss
FEDERATED HERMES GOVT OBLIG PREM SHS #117	PUR	01/31/24	1,258,718.760	\$1,258,718.76	\$0.00	\$0.00	\$1,258,718.76	\$1,258,718.76	\$0.00
	PUR	02/29/24	62,610.380	62,610.38	0.00	0.00	62,610.38	62,610.38	0.00
	PUR	03/31/24	60,018.700	60,018.70	0.00	0.00	60,018.70	60,018.70	0.00
	PUR	04/30/24	64,367.340	64,367.34	0.00	0.00	64,367.34	64,367.34	0.00
	PUR	05/31/24	62,482.450	62,482.45	0.00	0.00	62,482.45	62,482.45	0.00
	PUR	06/30/24	64,951.100	64,951.10	0.00	0.00	64,951.10	64,951.10	0.00
	SAL	07/31/24	9,936,892.920	9,936,892.92	0.00	0.00	9,936,892.92	9,936,892.92	0.00
	PUR	08/31/24	42,594.540	42,594.54	0.00	0.00	42,594.54	42,594.54	0.00
	PUR	09/30/24	21,277.370	21,277.37	0.00	0.00	21,277.37	21,277.37	0.00
	PUR	10/31/24	1,991,052.450	1,991,052.45	0.00	0.00	1,991,052.45	1,991,052.45	0.00
	PUR	11/30/24	19,979.540	19,979.54	0.00	0.00	19,979.54	19,979.54	0.00
	PUR	12/31/24	25,871.200	25,871.20	0.00	0.00	25,871.20	25,871.20	0.00
11 PURCHASES FOR				\$3,673,923.83	TOTAL ISSUE AGGREGATE		\$13,610,816.75		
1 SALES FOR				\$9,936,892.92					



ELEC WKRS BEN TR FD-PCA
CUSTODY STATEMENT

January 1, 2024 - December 31, 2024

Detail

Portfolio

Interest bearing cash

Description	Value last statement	Current market value		% of total portfolio	Unrealized gain/loss	Total original value at PNC		Current yield	Estimated annual income	Accrued income
		Quantity	Current price per unit			Avg. original value at PNC per unit	Current yield			
FEDERATED HERMES GOVT OBLIG	\$292,350.19		① \$292,350.19	0.69 %		\$292,350.19	4.39 %	\$12,807.71	\$2,051.84	
PREM SHS #117	292,350.190		\$1.0000			\$1.00				

US government securities

Σ ① \$10,675,320.11 Interest Bearing Cash

Description (Cusip)	Value last statement	Current market value		% of total portfolio	Unrealized gain/loss	Total original value at PNC		Current yield	Estimated annual income	Accrued income
		Quantity	Current price per unit			Avg. original value at PNC per unit	Current yield			
FEDERAL HOME LOAN MTG CORP GOLD POOL G15965 03.000% DUE 10/01/2031 RATING: N/A (3128MEZ61)	\$55,249.21		\$55,219.85	0.14 %	-\$29.36	\$59,345.04	3.13 %	\$1,726.66	\$148.68	
FEDERAL HOME LOAN MTG CORP POOL SD3129 05.000% DUE 10/01/2052 RATING: N/A (3132DQPN0)	181,099.89 182,871.910		176,904.80 96.7370	0.42 %	-4,195.09	180,157.42 98.52	5.17 %	9,143.60	787.37	
FEDERAL HOME LOAN MTG CORP POOL SD8268 05.500% DUE 11/01/2052 RATING: N/A (3132DWFH1)	141,486.98 140,442.080		138,655.66 98.7280	0.33 %	-2,831.32	139,339.38 99.21	5.58 %	7,724.31	665.15	
FEDERAL HOME LOAN MTG CORP POOL SD8279 06.000% DUE 11/01/2052 RATING: N/A (3132DWFU2)	212,596.48 208,782.036		210,126.59 100.6440	0.50 %	-2,469.89	211,955.80 101.52	5.97 %	12,526.92	1,078.71	



ELEC WKRS BEN TR FD-PCA
CUSTODY STATEMENT

January 1, 2024 - December 31, 2024

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Detail

US government securities

Description (Cusip)	Value last statement Quantity	Current market value		% of total portfolio	Unrealized gain/loss	Total original value at PNC		Current yield	Estimated annual income	Accrued income
		Current price per unit				Avg. original value at PNC per unit				
FEDERAL HOME LOAN MTG CORP POOL SB8508 02.000% DUE 02/01/2036 RATING: N/A (3132D6NZ9)	307,019.80 336,460.047	299,543.65 89.0280		0.71 %	- 7,476.15	307,019.80 91.25		2.25 %	6,729.20	579.46
FEDERAL HOME LOAN MTG CORP POOL QF2389 05.500% DUE 10/01/2052 RATING: N/A (3133BPUN6)	145,473.32 144,480.740	142,982.47 98.9630		0.34 %	- 2,490.85	145,959.40 101.02		5.56 %	7,946.44	684.28
FEDERAL HOME LOAN MTG CORP POOL RA7211 04.000% DUE 04/01/2052 RATING: N/A (3133KPAL2)	208,961.22 220,903.256	202,411.44 91.6290		0.48 %	- 6,549.78	200,107.30 90.59		4.37 %	8,836.13	760.89
FEDERAL NATL MTG ASSN POOL AS5327 03.000% DUE 07/01/2030 RATING: N/A (3138WE4M8)	60,200.85 62,615.297	60,373.04 96.4190		0.15 %	172.19	64,691.85 103.32		3.12 %	1,878.46	161.76
FEDERAL NATL MTG ASSN POOL AS8018 03.000% DUE 09/01/2031 RATING: N/A (3138WH4C3)	56,802.69 59,254.656	56,768.33 95.8040		0.14 %	- 34.36	61,217.45 103.31		3.14 %	1,777.64	153.07
FEDERAL NATL MTG ASSN POOL BK0922 04.500% DUE 07/01/2048 RATING: N/A (3140HEAY8)	146,156.82 148,224.566	141,480.35 95.4500		0.34 %	- 4,676.47	141,207.05 95.27		4.72 %	6,670.11	574.37



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Description (Cusip)	Value last statement Quantity	Current market value		% of total portfolio	Unrealized gain/loss	Total original value at PNC		Current yield	Estimated annual income	Accrued income
		Current price per unit	Current			Avg. original value at PNC per unit	Estimated			
FEDERAL NATL MTG ASSN POOL BQ7629 01.500% DUE 11/01/2035 RATING: N/A (3140KTPP4)	116,911.49 133,782.828	115,596.39 86.4060	0.28 %	- 1,315.10	136,845.18 102.29	1.74 %	2,006.74	172.80		
FEDERAL NATL MTG ASSN POOL BV7928 04.500% DUE 08/01/2052 RATING: N/A (3140MMY28)	359,412.26 370,658.034	349,315.54 94.2420	0.83 %	- 10,096.72	362,402.32 97.77	4.78 %	16,679.61	1,436.30		
FEDERAL NATL MTG ASSN POOL CA4088 03.500% DUE 09/01/2034 RATING: N/A (3140QBRJ9)	60,139.10 61,411.546	58,539.94 95.3240	0.14 %	- 1,599.16	64,981.07 105.81	3.68 %	2,149.40	185.09		
FEDERAL NATL MTG ASSN POOL CA4881 02.500% DUE 12/01/2034 RATING: N/A (3140QCM78)	53,393.44 57,380.841	52,684.79 91.8160	0.13 %	- 708.65	60,249.86 105.00	2.73 %	1,434.52	123.53		
FEDERAL NATL MTG ASSN POOL CA6638 02.500% DUE 08/01/2050 RATING: N/A (3140QELU4)	124,956.80 145,946.881	120,344.88 82.4580	0.29 %	- 4,611.92	153,843.76 105.41	3.04 %	3,648.67	314.19		
FEDERAL NATL MTG ASSN POOL CB4847 05.500% DUE 10/01/2052 RATING: N/A (3140QQL52)	208,571.61 207,148.487	204,983.79 98.9550	0.49 %	- 3,587.82	205,756.70 99.33	5.56 %	11,393.17	981.08		



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Description (Cusip)	Value last statement Quantity	Current market value		% of total portfolio	Unrealized gain/loss	Total original value at PNC		Current yield	Estimated annual income	Accrued income
		Current price per unit	Current			Avg. original value at PNC per unit	Estimated			
FEDERAL NATL MTG ASSN POOL FM6733 02.500% DUE 02/01/2035 RATING: N/A (3140XAPT3)	151,080.17 159,895.200	151,265.66 94.6030	0.36 %	185.49	167,939.92 105.03	2.65 %	3,997.38	344.22		
FEDERAL NATL MTG ASSN POOL FM7599 03.500% DUE 01/01/2051 RATING: N/A (3140XBNR7)	187,880.98 202,556.191	181,218.92 89.4660	0.43 %	- 6,662.06	185,380.86 91.52	3.92 %	7,089.47	610.48		
FEDERAL NATL MTG ASSN POOL FM8248 02.500% DUE 08/01/2051 RATING: N/A (3140XCEW4)	153,365.56 177,073.990	147,391.08 83.2370	0.35 %	- 5,974.48	185,346.64 104.67	3.01 %	4,426.85	381.20		
FEDERAL NATL MTG ASSN POOL FM1221 03.500% DUE 07/01/2049 RATING: N/A (3140X4LB0)	34,126.76 36,665.094	32,905.46 89.7460	0.08 %	- 1,221.30	37,965.53 103.55	3.90 %	1,283.28	110.50		
FEDERAL NATL MTG ASSN POOL FM3522 03.000% DUE 02/01/2035 RATING: N/A (3140X64G3)	69,035.99 72,014.517	68,904.21 95.6810	0.17 %	- 131.78	76,616.68 106.39	3.14 %	2,160.44	186.04		
FEDERAL NATL MTG ASSN POOL FM4138 02.500% DUE 09/01/2050 RATING: N/A (3140X7S42)	124,132.20 143,253.700	118,903.44 83.0020	0.29 %	- 5,228.76	151,199.79 105.55	3.02 %	3,581.34	308.39		



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		Current price per unit				Avg. original value at PNC per unit				
FEDERAL NATL MTG ASSN POOL FM5328 01.500% DUE 01/01/2031 RATING: N/A (3140X84N4)	92,716.00 100,355.026	93,205.73 92.8760		0.22 %	489.73	102,965.83 102.60		1.62 %	1,505.33	129.63
FEDERAL NATL MTG ASSN POOL FM5792 01.500% DUE 12/01/2035 RATING: N/A (3140X9NJ0)	199,680.69 228,512.058	197,429.85 86.3980		0.47 %	- 2,250.84	232,725.22 101.84		1.74 %	3,427.68	295.16
FEDERAL NATL MTG ASSN POOL FM5798 02.000% DUE 01/01/2036 RATING: N/A (3140X9NQ4)	247,002.13 273,792.760	243,754.96 89.0290		0.58 %	- 3,247.17	284,273.87 103.83		2.25 %	5,475.86	471.53
FEDERAL NATL MTG ASSN POOL MA2484 04.000% DUE 12/01/2045 RATING: N/A (31418BXN1)	49,036.24 50,863.778	47,232.10 92.8600		0.12 %	- 1,804.14	54,503.70 107.16		4.31 %	2,034.55	175.20
FEDERAL NATL MTG ASSN POOL MA2498 03.000% DUE 01/01/2031 RATING: N/A (31418BX43)	52,631.64 54,816.627	52,694.13 96.1280		0.13 %	62.49	57,361.79 104.64		3.13 %	1,644.50	141.61
FEDERAL NATL MTG ASSN POOL MA2803 02.500% DUE 11/01/2031 RATING: N/A (31418CDH4)	69,487.57 73,656.549	69,548.72 94.4230		0.17 %	61.15	73,875.17 100.30		2.65 %	1,841.41	158.57



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		Current price per unit				Avg. original value at PNC per unit				
FEDERAL NATL MTG ASSN POOL MA3664 04.000% DUE 05/01/2049 RATING: N/A (31418DCA8)	203,832.66 212,518.288	196,813.19 92.6100		0.47 %	- 7,019.47	194,188.57 91.37		4.32 %	8,500.73	732.01
FEDERAL NATL MTG ASSN POOL MA3835 03.500% DUE 11/01/2049 RATING: N/A (31418DHM7)	205,013.40 221,253.385	197,643.44 89.3290		0.47 %	- 7,369.96	197,883.49 89.44		3.92 %	7,743.87	666.83
FEDERAL NATL MTG ASSN POOL MA4261 02.000% DUE 02/01/2036 RATING: N/A (31418DWX6)	87,217.20 96,806.886	85,824.14 88.6550		0.21 %	- 1,393.06	101,284.20 104.62		2.26 %	1,936.14	166.72
FEDERAL NATL MTG ASSN POOL MA4285 02.000% DUE 03/01/2031 RATING: N/A (31418DXP2)	141,636.06 151,151.022	142,030.57 93.9660		0.34 %	394.51	157,102.56 103.94		2.13 %	3,023.02	260.32
FEDERAL NATL MTG ASSN POOL MA4785 05.000% DUE 10/01/2052 RATING: N/A (31418EJ76)	293,116.65 295,898.088	286,497.41 96.8230		0.68 %	- 6,619.24	283,444.40 95.79		5.17 %	14,794.90	1,274.01
USA TREASURY BD 05.250% DUE 02/15/2029 RATING: AAA (912810FG8)	307,169.84 290,000	300,596.60 103.6540		0.71 %	- 6,573.24	307,169.84 105.92		5.07 %	15,225.00	5,750.75
USA TREASURY NOTES 00.625% DUE 08/15/2030 RATING: AAA (91282CAE1)	173,241.04 205,000	166,478.45 81.2090		0.40 %	- 6,762.59	173,241.04 84.51		0.77 %	1,281.25	483.95



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Description (Cusip)	Value last statement Quantity	Current	% of total	Unrealized gain/loss	Total original	Current	Estimated	Accrued
		market value Current price per unit			value at PNC Avg. original value at PNC per unit			
USA TREASURY NOTES 00.375% DUE 09/30/2027 RATING: AAA (91282CAL5)	632,382.45 705,000	634,408.35 89.9870	1.50 %	2,025.90	632,382.45 89.70	0.42 %	2,643.75	675.46
USA TREASURY NOTES 01.125% DUE 02/15/2031 RATING: AAA (91282CBL4)	1,546,016.06 1,855,000	1,530,838.75 82.5250	3.61 %	- 15,177.31	1,546,226.74 83.35	1.37 %	20,868.75	7,882.49
USA TREASURY NOTES 01.8750% DUE 02/15/2032 RATING: AAA (91282CDY4)	2,452,535.28 2,870,000	2,413,928.30 84.1090	5.70 %	- 38,606.98	2,419,402.32 84.30	2.23 %	53,812.50	20,325.92
USA TREASURY NOTES 04.125% DUE 07/31/2028 RATING: AAA (91282CHQ7)	401,176.19 395,000	392,274.50 99.3100	0.93 %	- 8,901.69	401,176.19 101.56	4.16 %	16,293.75	6,818.58
USA TREASURY NOTES 03.875% DUE 08/15/2033 RATING: AAA (91282CHT1)	1,339,381.28 1,370,000	1,303,856.40 95.1720	3.08 %	- 35,524.88	1,339,812.85 97.80	4.08 %	53,087.50	20,052.07
USA TREASURY NOTES 04.375% DUE 05/15/2034 RATING: AAA (91282CKQ3)	764,757.32 755,000	743,395.65 98.4630	1.76 %	- 21,361.67	764,757.32 101.29	4.45 %	33,031.25	4,220.66
USA TREASURY NOTES 01.625% DUE 05/15/2026 RATING: AAA (912828R36)	926,449.71 975,000	941,060.25 96.5190	2.22 %	14,610.54	930,917.52 95.48	1.69 %	15,843.75	2,057.06
USA TREASURY NOTES 02.375% DUE 05/15/2027 RATING: AAA (912828X88)	2,321,695.56 2,450,000	2,346,291.50 95.7670	5.54 %	24,595.94	2,362,192.38 96.42	2.48 %	58,187.50	7,554.73



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Description (Cusip)	Value last statement Quantity	Current market value	% of total portfolio	Unrealized gain/loss	Total original value at PNC	Current yield	Estimated annual income	Accrued income
		Current price per unit			Avg. original value at PNC per unit			
USA TREASURY NOTES 01.625% DUE 08/15/2029 RATING: AAA (912828YB0)	352,498.89 395,000	350,578.30 88.7540	0.83 %	- 1,920.59	351,210.77 88.91	1.84 %	6,418.75	2,424.47
USA TREASURY NOTES 01.750% DUE 11/15/2029 RATING: AAA (912828YS3)	190,998.83 215,000	190,670.60 88.6840	0.45 %	- 328.23	190,998.83 88.84	1.98 %	3,762.50	488.50
USA TREASURY NOTES 01.625% DUE 11/30/2026 RATING: AAA (912828YU8)	813,998.09 865,000	823,670.30 95.2220	1.95 %	9,672.21	807,922.98 93.40	1.71 %	14,056.25	1,235.71
USA TREASURY NOTES 00.625% DUE 05/15/2030 RATING: AAA (912828ZQ6)	1,040,836.08 1,265,000	1,037,983.10 82.0540	2.45 %	- 2,852.98	1,031,396.53 81.53	0.77 %	7,906.25	1,026.50
USA TREASURY NOTES 01.500% DUE 01/31/2027 RATING: AAA (912828Z78)	386,809.39 410,000	387,741.10 94.5710	0.92 %	931.71	386,809.39 94.34	1.59 %	6,150.00	2,573.64
USA TREASURY NOTES 01.500% DUE 02/15/2030 RATING: AAA (912828Z94)	287,076.49 325,000	282,204.00 86.8320	0.67 %	- 4,872.49	283,030.11 87.09	1.73 %	4,875.00	1,841.37
USA TREASURY NOTES 02.750% DUE 02/15/2028 RATING: AAA (9128283W8)	1,309,370.28 1,360,000	1,298,596.00 95.4850	3.07 %	- 10,774.28	1,309,370.28 96.28	2.89 %	37,400.00	14,126.63
USA TREASURY NOTES 02.875% DUE 05/15/2028 RATING: AAA (9128284N7)	836,409.78 875,000	835,800.00 95.5200	1.98 %	- 609.78	823,415.37 94.10	3.01 %	25,156.25	3,266.14



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		Quantity	Current price per unit			Avg. original value at PNC per unit				
USA TREASURY NOTE 02.875% DUE 08/15/2028 RATING: AAA (9128284V9)	1,872,031.91	1,965,000	1,869,225.90	4.41 %	- 2,806.01	1,861,506.80	94.73	3.03 %	56,493.75	21,338.67
USA TREASURY NOTES 03.125% DUE 11/15/2028 RATING: AAA (9128285M8)	152,572.03	155,000	148,317.95	0.35 %	- 4,254.08	152,572.03	98.43	3.27 %	4,843.75	628.88
USA TREASURY NTS 02.375% DUE 05/15/2029 RATING: AAA (9128286T2)	1,671,456.82	1,805,000	1,663,794.85	3.93 %	- 7,661.97	1,669,166.03	92.47	2.58 %	42,868.75	5,565.83
Total US government securities	\$24,578,287.18		\$24,360,905.37	57.43 %	- \$217,381.81	\$24,783,815.37		2.70 %	\$656,944.58	\$145,557.16

Σ ② \$24,405,144.05 US Gov't Securities

Corporate debt

Description (Cusip)	Value last statement	Current market value		% of total portfolio	Unrealized gain/loss	Total original value at PNC		Current yield	Estimated annual income	Accrued income
		Quantity	Current price per unit			Avg. original value at PNC per unit				
AT&T INC SER WI CALL 11/15/2029 04.300% DUE 02/15/2030 RATING: BAA2 (00206RGQ9)	\$97,921.00	100,000	\$96,848.00	0.23 %	- \$1,073.00	\$112,075.28	\$112.08	4.44 %	\$4,300.00	\$1,624.44
ABBVIE INC CALL 01/15/2031 UNSC 04.950% DUE 03/15/2031 RATING: A3 (00287YDT3)	169,823.20	170,000	169,966.00	0.41 %	142.80	169,823.20	99.90	4.96 %	8,415.00	2,477.75



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		Current price per unit	Current			Avg. original value at PNC per unit				
ALLSTATE CORP CALL 09/15/2030 UNSC 01.450% DUE 12/15/2030 RATING: A3 (020002BJ9)	157,519.05 195,000	158,772.90 81.4220	0.38 %	1,253.85	150,958.39 77.41	1.79 %	2,827.50	125.67		
AMAZON.COM INC CALL 02/12/2031 UNSC 02.100% DUE 05/12/2031 RATING: A1 (023135BZ8)	125,034.95 145,000	123,843.05 85.4090	0.30 %	- 1,191.90	137,059.30 94.52	2.46 %	3,045.00	414.46		
AMERICAN ELECTRIC POWER CALL 12/01/2032 UNSC 05.625% DUE 03/01/2033 RATING: BAA2 (025537AX9)	83,343.20 80,000	80,816.80 101.0210	0.20 %	- 2,526.40	79,704.00 99.63	5.57 %	4,500.00	1,500.00		
AMERICAN EXPRESS CO CALL 10/30/2030 UNSC VAR% DUE 10/30/2031 RATING: A2 (025816DN6)	124,714.05 115,000	122,921.20 106.8880	0.29 %	- 1,792.85	116,106.35 100.96	6.08 %	7,462.35	1,264.45		
AMERICAN EXPRESS CO CALL 02/16/2027 UNSC VAR% DUE 02/16/2028 RATING: A2 (025816DP1)	145,156.45 145,000	145,836.65 100.5770	0.35 %	680.20	145,156.45 100.11	5.07 %	7,392.10	2,772.04		
AMERICAN HONDA FINANCE UNSC 04.900% DUE 03/13/2029 RATING: A3 (02665WFE6)	115,163.90 115,000	114,605.55 99.6570	0.28 %	- 558.35	115,163.90 100.14	4.92 %	5,635.00	1,690.50		



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		Current price per unit				Avg. original value at PNC per unit				
AMERIPRISE FINANCIAL INC CALL 11/15/2028 UNSC 05.700% DUE 12/15/2028 RATING: A3 (03076CAN6)	141,182.85 135,000	139,090.50 103.0300		0.33 %	- 2,092.35	135,653.40 100.48		5.54 %	7,695.00	342.00
AUTOMATIC DATA PROCESSNG CALL 06/09/2034 UNSC 04.450% DUE 09/09/2034 RATING: AA3 (053015AH6)	169,389.70 170,000	161,843.40 95.2020		0.39 %	- 7,546.30	169,389.70 99.64		4.68 %	7,565.00	2,353.56
AUTOZONE INC CALL 06/15/2029 UNSC 05.100% DUE 07/15/2029 RATING: BAA1 (053332BJ0)	122,613.60 120,000	120,698.40 100.5820		0.29 %	- 1,915.20	122,613.60 102.18		5.08 %	6,120.00	3,111.00
BANK OF AMERICA CREDIT CARD TR SERIES 2023 A1 CLASS A1 04.790% DUE 05/15/2028 RATING: N/A (05522RDG0)	135,469.80 135,000	135,594.00 100.4400		0.32 %	124.20	134,969.44 99.98		4.77 %	6,466.50	287.40
BANK OF AMERICA CORP SER MTN CALL 06/14/2028 @ 100 VAR% DUE 06/14/2029 RATING: A1 (06051GJZ3)	202,301.45 230,000	208,741.10 90.7570		0.50 %	6,439.65	210,667.15 91.59		2.30 %	4,800.10	226.67
BANK OF AMERICA CORP CALL 07/22/2032 UNSC VAR% DUE 07/22/2033 RATING: A1 (06051GKY4)	123,653.75 125,000	122,602.50 98.0820		0.29 %	- 1,051.25	122,569.65 98.06		5.12 %	6,268.75	2,768.70



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		Current price per unit				Avg. original value at PNC per unit				
BANK OF MONTREAL SEDOL 2KQJ430 ISIN US06368LGV27 05.203% DUE 02/01/2028 RATING: A2 (06368LGV2)	142,611.00 140,000	141,087.80 100.7770		0.34 %	- 1,523.20	139,905.76 99.93		5.17 %	7,284.20	3,035.08
BANK OF NOVA SCOTIA CALL 09/08/2027 UNSC VAR% DUE 09/08/2028 RATING: A2 (06418GAL1)	245,000.00 245,000	242,540.20 98.9960		0.58 %	- 2,459.80	245,000.00 100.00		4.45 %	10,789.80	3,296.88
BRISTOL-MYERS SQUIBB CO CALL 12/01/2030 UNSC 05.750% DUE 02/01/2031 RATING: A2 (110122DY1)	165,983.30 155,000	161,209.30 104.0060		0.39 %	- 4,774.00	155,749.80 100.48		5.53 %	8,912.50	3,713.54
CDW LLC/CDW FINANCE CALL 10/01/2022 COGT 04.250% DUE 04/01/2028 RATING: BAA3 (12513GBD0)	131,581.65 135,000	130,819.05 96.9030		0.31 %	- 762.60	131,581.65 97.47		4.39 %	5,737.50	1,434.37
CIGNA GROUP/THE CALL 04/15/2029 UNSC 05.000% DUE 05/15/2029 RATING: BAA1 (125523CT5)	174,805.75 175,000	174,858.25 99.9190		0.42 %	52.50	174,805.75 99.89		5.01 %	8,750.00	1,118.06
CNH INDUSTRIAL CAP LLC COGT 03.950% DUE 05/23/2025 RATING: BAA2 (12592BAN4)	142,412.08 145,000	144,491.05 99.6490		0.35 %	2,078.97	143,900.08 99.24		3.97 %	5,727.50	604.57



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Description (Cusip)	Value last statement Quantity	Current market value		% of total portfolio	Unrealized gain/loss	Total original value at PNC		Current yield	Estimated annual income	Accrued income
		Current price per unit	Current			Avg. original value at PNC per unit	Estimated			
CNH EQUIPMENT TRUST SERIES 2022 A CLASS A3 02.830% DUE 07/15/2027 RATING: N/A (12660DAC1)	78,868.86 80,966.720	80,228.30 99.0880	0.19 %	1,359.44	80,960.74 99.99	2.97 %	2,380.42	105.80		
CNH EQUIPMENT TRUST SERIES 2022 B CLASS A3 03.890% DUE 11/15/2027 RATING: AAA (12663JAC5)	86,204.61 87,709.710	87,272.92 99.5020	0.21 %	1,068.31	87,696.33 99.98	3.91 %	3,411.91	151.64		
CNH EQUIPMENT TRUST SERIES 2023 A CLASS A3 04.810% DUE 08/15/2028 RATING: N/A (12664QAC8)	199,704.00 200,000	200,764.00 100.3820	0.48 %	1,060.00	199,966.30 99.98	4.80 %	9,620.00	427.56		
CANADIAN IMPERIAL BANK SEDOL 2MSZQV2 ISIN US13607PHT49 VAR% DUE 09/11/2027 RATING: A2 (13607PHT4)	235,000.00 235,000	233,921.35 99.5410	0.56 %	- 1,078.65	235,000.00 100.00	4.53 %	10,593.80	3,236.99		
CAPITAL ONE FINANCIAL CO CALL 11/02/2026 UNSC VAR% DUE 11/02/2027 RATING: BAA1 (14040HCH6)	152,909.90 170,000	160,638.10 94.4930	0.38 %	7,728.20	158,008.62 92.95	1.99 %	3,192.60	523.23		
CAPITAL ONE MULTI-ASSET EXECUT SERIES 2022 A3 CLASS A 04.950% DUE 10/15/2027 RATING: N/A (14041NGB1)	175,474.25 175,000	175,645.75 100.3690	0.42 %	171.50	174,972.54 99.98	4.94 %	8,662.50	385.00		



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		Current price per unit	Current			Avg. original value at PNC per unit	at PNC			
CHASE ISSUANCE TRUST SERIES 2022 A1 CLASS A 03.970% DUE 09/15/2027 NOT RATED (161571HS6)	98,651.00 100,000	99,682.00 99.6820		0.24 %	1,031.00	99,983.31 99.98		3.99 %	3,970.00	176.44
CISCO SYSTEMS INC CALL 11/26/2033 UNSC 05.050% DUE 02/26/2034 RATING: A1 (17275RBT8)	109,940.00 110,000	109,602.90 99.6390		0.26 %	- 337.10	109,940.00 99.95		5.07 %	5,555.00	1,928.82
CITIGROUP INC SUB 03.875% DUE 03/26/2025 RATING: BAA2 (172967JL6)	242,399.07 247,000	246,342.98 99.7340		0.59 %	3,943.91	259,464.00 105.05		3.89 %	9,571.25	2,525.75
CITIGROUP INC SR UNSEC VAR% DUE 01/10/2028 RATING: A3 (172967LD1)	120,873.75 125,000	122,530.00 98.0240		0.29 %	1,656.25	131,885.91 105.51		3.97 %	4,858.75	2,361.89
CITIGROUP INC CALL 05/24/2032 UNSC VAR% DUE 05/24/2033 RATING: A3 (172967NU1)	122,383.75 125,000	120,812.50 96.6500		0.29 %	- 1,571.25	122,501.02 98.00		5.09 %	6,137.50	630.80
CITIGROUP INC CALL 09/19/2029 UNSC VAR% DUE 09/19/2030 RATING: A3 (17327CAT0)	145,000.00 145,000	140,896.50 97.1700		0.34 %	- 4,103.50	145,000.00 100.00		4.68 %	6,585.90	1,866.00



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		Current price per unit	Current			Avg. original value at PNC per unit	at PNC			
COCA-COLA CONSOLIDATED CALL 05/01/2029 UNSC 05.250% DUE 06/01/2029 RATING: BAA1 (191098AM4)	99,843.00 100,000	101,393.00 101.3930		0.24 %	1,550.00	99,843.00 99.84		5.18 %	5,250.00	437.50
COMMONWEALTH EDISON CO CALL 03/01/2034 MORT 05.300% DUE 06/01/2034 RATING: A1 (202795JZ4)	104,624.10 105,000	105,256.20 100.2440		0.25 %	632.10	104,624.10 99.64		5.29 %	5,565.00	463.75
CON EDISON CO OF NY INC CALL 03/15/2031 UNSC 02.400% DUE 06/15/2031 RATING: A3 (209111GA5)	124,662.40 145,000	124,502.80 85.8640		0.30 %	- 159.60	140,081.60 96.61		2.80 %	3,480.00	154.67
CROWN CASTLE INTL CORP CALL 04/01/2030 UNSC 03.300% DUE 07/01/2030 RATING: BAA3 (22822VAR2)	103,103.25 115,000	104,487.85 90.8590		0.25 %	1,384.60	114,240.18 99.34		3.64 %	3,795.00	1,897.50
DEUTSCHE BANK NY SEDOL BMWB9M9 ISIN US251526CK32 VAR% DUE 05/28/2032 RATING: BAA1 (251526CK3)	125,308.50 150,000	128,563.50 85.7090		0.31 %	3,255.00	150,000.00 100.00		3.55 %	4,552.50	417.31
DIAMONDBACK ENERGY INC CALL 12/30/2029 UNSC 05.150% DUE 01/30/2030 RATING: BAA2 (25278XAY5)	153,899.95 155,000	155,330.15 100.2130		0.37 %	1,430.20	153,899.95 99.29		5.14 %	7,982.50	3,348.22



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		Current price per unit	Current			Avg. original value at PNC per unit	at PNC			
DISCOVER CARD EXECUTION NOTE T SERIES 2022 A3 CLASS A3 03.560% DUE 07/15/2027 RATING: AAA (254683CW3)	191,154.60 195,000	194,005.50 99.4900	194,005.50	0.46 %	2,850.90	194,975.80 99.99	194,975.80	3.58 %	6,942.00	308.53
DOW CHEMICAL CO/THE CALL 08/30/2028 UNSC 04.800% DUE 11/30/2028 RATING: BAA1 (260543CY7)	141,646.40 140,000	139,211.80 99.4370	139,211.80	0.33 %	-2,434.60	161,841.90 115.60	161,841.90	4.83 %	6,720.00	578.67
DUKE ENERGY CORP CALL 03/15/2031 UNSC 02.550% DUE 06/15/2031 RATING: BAA2 (26441CBL8)	156,133.80 180,000	153,682.20 85.3790	153,682.20	0.37 %	-2,451.60	156,133.80 86.74	156,133.80	2.99 %	4,590.00	204.00
DUKE ENERGY PROGRESS LLC CALL 05/15/2031 MORT 02.000% DUE 08/15/2031 RATING: AA3 (26442UAL8)	131,766.80 160,000	132,406.40 82.7540	132,406.40	0.32 %	639.60	150,631.50 94.14	150,631.50	2.42 %	3,200.00	1,208.89
ENBRIDGE INC SEDOL 2KVSF95 ISIN US29250NBR52 05.700% DUE 03/08/2033 RATING: BAA2 (29250NBR5)	103,940.00 100,000	101,039.00 101.0390	101,039.00	0.24 %	-2,901.00	100,096.72 100.10	100,096.72	5.65 %	5,700.00	1,789.17
ENBRIDGE INC SEDOL 2L82YF6 ISIN US29250NCA19 05.250% DUE 04/05/2027 RATING: BAA2 (29250NCA1)	120,015.90 120,000	121,428.00 101.1900	121,428.00	0.29 %	1,412.10	120,015.90 100.01	120,015.90	5.19 %	6,300.00	1,505.00



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		Current price per unit	Current			Avg. original value at PNC per unit	at PNC			
ENERGY TRANSFER OPERATNG CALL 01/15/2029 COGT 05.250% DUE 04/15/2029 RATING: BAA2 (29278NAG8)	181,346.40 180,000	180,640.80 100.3560	180,640.80	0.43 %	- 705.60	203,768.31 113.20	203,768.31	5.24 %	9,450.00	1,995.00
EXELON CORP CALL 02/15/2028 UNSC 05.150% DUE 03/15/2028 RATING: BAA2 (30161NBJ9)	142,301.60 140,000	140,816.20 100.5830	140,816.20	0.34 %	- 1,485.40	139,570.40 99.69	139,570.40	5.13 %	7,210.00	2,122.94
FEDERAL HOME LOAN MTG CORP SERIES 4774 CLASS LP 03.500% DUE 09/15/2046 RATING: N/A (3137F4VQ2)	44,238.68 46,132.899	44,438.90 96.3280	44,438.90	0.11 %	200.22	46,817.68 101.48	46,817.68	3.64 %	1,614.65	134.55
FISERV INC CALL 07/01/2028 UNSC 04.200% DUE 10/01/2028 RATING: BAA2 (337738AR9)	146,593.50 150,000	145,888.50 97.2590	145,888.50	0.35 %	- 705.00	165,747.20 110.50	165,747.20	4.32 %	6,300.00	1,575.00
FORD CREDIT AUTO OWNER TRUST SERIES 2022 D CLASS A3 05.270% DUE 05/15/2027 RATING: AAA (345295AD1)	117,826.75 117,544.640	118,057.13 100.4360	118,057.13	0.28 %	230.38	117,528.02 99.99	117,528.02	5.25 %	6,194.60	275.32
FORD CREDIT AUTO OWNER TRUST SERIES 2024 C CLASS A3 04.760% DUE 07/15/2029 RATING: N/A (34532UAD1)	259,998.23 260,000	257,420.80 99.0080	257,420.80	0.61 %	- 2,577.43	259,998.23 100.00	259,998.23	4.12 %	10,582.00	470.31



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		Current price per unit	Current			Avg. original value at PNC per unit	at PNC			
FOX CORP SER WI CALL 10/25/2028 04.709% DUE 01/25/2029 RATING: BAA2 (35137LAH8)	143,832.85	143,225.20	98.7760	0.34 %	- 607.65	162,711.02	112.21	4.77 %	6,828.05	2,958.82
GM FINANCIAL SECURITIZED TERM SERIES 2023 2 CLASS A3 04.470% DUE 02/16/2028 RATING: AAA (362583AD8)	134,130.60	134,995.95	99.9970	0.32 %	865.35	134,996.29	100.00	4.48 %	6,034.50	251.44
GLOBAL PAYMENTS INC UNSC 04.950% DUE 08/15/2027 RATING: BAA3 (37940XAP7)	224,343.75	225,306.00	100.1360	0.54 %	962.25	224,112.36	99.61	4.95 %	11,137.50	4,207.50
GOLDMAN SACHS GROUP INC CALL 10/21/2026 UNSC VAR% DUE 10/21/2027 RATING: A2 (38141GYM0)	324,705.10	336,816.90	94.8780	0.80 %	12,111.80	314,855.75	88.69	2.06 %	6,915.40	1,344.66
HF SINCLAIR CORP SER WI CALL 09/16/2024 05.000% DUE 02/01/2028 RATING: BAA3 (403949AQ3)	213,942.20	212,379.15	98.7810	0.51 %	- 1,563.05	213,942.20	99.51	5.07 %	10,750.00	4,479.17
HSBC HOLDINGS PLC SEDOL 2KDKJS6 ISIN US404280DG12 VAR% DUE 08/11/2028 RATING: A3 (404280DG1)	199,824.00	200,826.00	100.4130	0.48 %	1,002.00	200,586.30	100.29	5.19 %	10,420.00	9,262.22



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		Current price per unit	Current			Avg. original value at PNC per unit	at PNC			
HP ENTERPRISE CO CALL 09/15/2029 UNSC 04.550% DUE 10/15/2029 RATING: BAA2 (42824CBT5)	179,809.20 180,000	175,462.20 97.4790	0.42 %	- 4,347.00	179,809.20 99.89	4.67 %	8,190.00	2,161.25		
HUNTINGTON BANCSHARES CALL 08/04/2027 UNSC VAR% DUE 08/04/2028 RATING: BAA1 (446150BB9)	121,160.00 125,000	123,720.00 98.9760	0.30 %	2,560.00	124,698.30 99.76	4.49 %	5,553.75	2,267.78		
HYUNDAI AUTO RECEIVABLES TRUST SERIES 2022 C CLASS A3 05.390% DUE 06/15/2027 RATING: N/A (44933DAD3)	86,531.59 86,170.530	86,619.48 100.5210	0.21 %	87.89	86,170.11 100.00	5.37 %	4,644.59	219.33		
INTEL CORP CALL 01/10/2028 UNSC 04.875% DUE 02/10/2028 RATING: BAA1 (458140CE8)	211,043.70 210,000	208,929.00 99.4900	0.50 %	- 2,114.70	211,043.70 100.50	4.90 %	10,237.50	4,009.69		
INTERCONTINENTAL EXCHANGE CALL 03/01/2030 UNSC 02.100% DUE 06/15/2030 RATING: N/A (45866FAK0)	163,563.84 190,000	164,596.49 86.6297	0.39 %	1,032.65	154,754.10 81.45	2.43 %	3,990.00	177.33		
JP MORGAN CHASE & CO SR UNSEC CALL 04/22/30 @ 100 VAR% DUE 04/22/2031 RATING: A1 (46647PBL9)	207,537.60 240,000	211,430.40 88.0960	0.50 %	3,892.80	225,271.24 93.86	2.87 %	6,052.80	1,160.12		



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		Current price per unit	Current			Avg. original value at PNC per unit	at PNC			
JPMORGAN CHASE & CO CALL 07/24/2028 UNSC VAR% DUE 07/24/2029 RATING: A1 (46647PDU7)	162,353.60 160,000	161,609.60 101.0060	161,609.60	0.39 %	- 744.00	159,695.60 99.81	159,695.60	5.25 %	8,478.40	3,697.52
JPMORGAN CHASE & CO CALL 07/22/2027 UNSC VAR% DUE 07/22/2028 RATING: A1 (46647PEL6)	159,987.65 160,000	160,508.80 100.3180	160,508.80	0.38 %	521.15	159,987.65 99.99	159,987.65	4.97 %	7,966.40	3,518.49
JOHN DEERE OWNER TRUST SERIES 2022 B CLASS A3 03.740% DUE 02/16/2027 RATING: AAA (47800AAC4)	63,060.82 64,097.920	63,818.45 99.5640	63,818.45	0.16 %	757.63	64,091.79 99.99	64,091.79	3.76 %	2,397.26	106.54
JOHN DEERE OWNER TRUST SERIES 2022 C CLASS A3 05.090% DUE 06/15/2027 RATING: AAA (47800BAC2)	125,755.31 125,765.370	126,131.35 100.2910	126,131.35	0.30 %	376.04	125,755.62 99.99	125,755.62	5.08 %	6,401.46	284.51
KEYCORP SER MTN CALL 05/23/2024 VAR% DUE 05/23/2025 RATING: BAA2 (49326EEL3)	117,318.00 120,000	120,106.80 100.0890	120,106.80	0.29 %	2,788.80	114,726.35 95.61	114,726.35	5.72 %	6,859.73	724.08
KINDER MORGAN INC CALL 01/01/2029 UNSC 05.000% DUE 02/01/2029 RATING: BAA2 (494553AD2)	124,845.00 125,000	124,575.00 99.6600	124,575.00	0.30 %	- 270.00	124,845.00 99.88	124,845.00	5.02 %	6,250.00	2,604.17



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		Current price per unit	Current			Avg. original value at PNC per unit	Estimated			
KROGER CO CALL 10/15/2030 UNSC 01.700% DUE 01/15/2031 RATING: BAA1 (501044DQ1)	125,271.00 155,000	127,698.30 82.3860	0.31 %	2,427.30	117,906.10 76.07	2.07 %	2,635.00	1,215.03		
KROGER CO CALL 06/15/2034 UNSC 05.000% DUE 09/15/2034 RATING: BAA1 (501044DV0)	89,772.30 90,000	87,165.90 96.8510	0.21 %	-2,606.40	89,772.30 99.75	5.17 %	4,500.00	1,550.00		
LYB INT FINANCE III CALL 09/01/2025 COGT 01.250% DUE 10/01/2025 RATING: BAA2 (50249AAF0)	142,908.12 153,000	148,977.63 97.3710	0.36 %	6,069.51	149,538.56 97.74	1.29 %	1,912.50	478.12		
LLOYDS BANKING GROUP PLC SEDOL 2KDKJK8 ISIN US53944YAT01 VAR% DUE 08/11/2026 RATING: A3 (53944YAT0)	197,342.00 200,000	199,564.00 99.7820	0.48 %	2,222.00	200,000.00 100.00	4.73 %	9,432.00	8,384.00		
MPLX LP CALL 12/01/2032 UNSC 05.000% DUE 03/01/2033 RATING: BAA2 (55336VBV1)	156,734.40 160,000	153,665.60 96.0410	0.37 %	-3,068.80	155,029.64 96.89	5.21 %	8,000.00	2,666.67		
MARATHON PETROLEUM CORP CALL 04/01/2025 UNSC 04.700% DUE 05/01/2025 RATING: BAA2 (56585ABH4)	201,623.66 203,000	202,766.55 99.8850	0.48 %	1,142.89	204,790.15 100.88	4.71 %	9,541.00	1,590.17		



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		Current price per unit	Current			Avg. original value at PNC per unit	at PNC			
MARRIOTT INTERNATIONAL CALL 04/15/2029 UNSC 04.875% DUE 05/15/2029 RATING: BAA2 (571903BP7)	128,465.80 130,000	129,520.30 99.6310		0.31 %	1,054.50	128,465.80 98.82		4.90 %	6,337.50	809.79
MERCEDES-BENZ AUTO RECEIVABLES SERIES 2022 1 CLASS A3 05.210% DUE 08/16/2027 RATING: AAA (58768PAC8)	94,254.26 94,125.310	94,554.52 100.4560		0.23 %	300.26	94,106.69 99.98		5.19 %	4,903.93	217.95
MERCEDES-BENZ AUTO RECEIVABLES SERIES 2023 1 CLASS A3 04.510% DUE 11/15/2027 RATING: N/A (58770AAC7)	56,678.01 57,043.080	57,049.93 100.0120		0.14 %	371.92	57,036.23 99.99		4.51 %	2,572.64	114.34
MORGAN STANLEY SER GMTN CALL 1/24/28 @ 100 VAR% DUE 01/24/2029 RATING: A1 (61744YAP3)	286,104.00 300,000	289,308.00 96.4360		0.69 %	3,204.00	323,968.96 107.99		3.92 %	11,316.00	4,935.03
MORGAN STANLEY CALL 01/21/2032 UNSC VAR% DUE 01/21/2033 RATING: A1 (61747YEL5)	102,079.20 120,000	102,812.40 85.6770		0.25 %	733.20	94,219.65 78.52		3.44 %	3,531.60	1,569.60
NEXTERA ENERGY CAPITAL CALL 08/01/2029 COGT 02.750% DUE 11/01/2029 RATING: BAA1 (65339KBM1)	85,088.20 95,000	86,154.55 90.6890		0.21 %	1,066.35	90,655.85 95.43		3.04 %	2,612.50	435.42



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		Current price per unit				Avg. original value at PNC per unit				
NEXTERA ENERGY CAPITAL UNSC 06.051% DUE 03/01/2025 RATING: BAA1 (65339KBP4)	227,004.75 225,000	225,398.25 100.1770		0.54 %	- 1,606.50	226,371.07 100.61		6.05 %	13,614.75	4,538.25
NISOURCE INC CALL 06/01/2029 UNSC 05.200% DUE 07/01/2029 RATING: BAA2 (65473PAS4)	169,738.50 170,000	171,295.40 100.7620		0.41 %	1,556.90	169,738.50 99.85		5.17 %	8,840.00	4,591.89
NISSAN AUTO RECEIVABLES OWNER SERIES 2022 B CLASS A3 04.460% DUE 05/17/2027 RATING: AAA (65480JAC4)	85,597.68 86,236.690	86,215.99 99.9760		0.21 %	618.31	86,218.84 99.98		4.47 %	3,846.16	170.94
NISSAN AUTO RECEIVABLES OWNER SERIES 2023 A CLASS A3 05.090% DUE 11/15/2027 RATING: AAA (65480WAD3)	185,059.20 185,000	185,595.70 100.3220		0.44 %	536.50	184,967.31 99.98		4.90 %	9,083.50	403.71
ORACLE CORP CALL 01/01/2030 UNSC 02.950% DUE 04/01/2030 RATING: BAA2 (68389XBV6)	121,844.25 135,000	121,865.85 90.2710		0.29 %	21.60	134,736.79 99.81		3.27 %	3,982.50	995.62
PHILLIPS 66 CO CALL 04/15/2031 COGT 05.250% DUE 06/15/2031 RATING: A3 (718547AU6)	123,757.20 120,000	120,320.40 100.2670		0.29 %	- 3,436.80	123,757.20 103.13		5.24 %	6,300.00	280.00



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Description (Cusip)	Value last statement	Current market value		% of total portfolio	Unrealized gain/loss	Total original value at PNC		Current yield	Estimated annual income	Accrued income
		Quantity	Current price per unit			Avg. original value at PNC per unit				
PROLOGIS LP CALL 01/15/2030 UNSC 02.250% DUE 04/15/2030 RATING: A3 (74340XBM2)	104,901.60	120,000	104,972.40 87.4770	0.25 %	70.80	109,775.68 91.48	2.58 %	2,700.00	570.00	
RTX CORPORATION CALL 06/01/2031 UNSC 01.900% DUE 09/01/2031 RATING: BAA1 (75513ECM1)	161,422.10	190,000	155,435.20 81.8080	0.37 %	- 5,986.90	161,422.10 84.96	2.33 %	3,610.00	1,203.33	
REALTY INCOME CORP CALL 01/15/2026 UNSC 03.200% DUE 01/15/2027 RATING: A3 (756109BZ6)	184,497.27	195,000	189,058.35 96.9530	0.45 %	4,561.08	192,045.42 98.48	3.31 %	6,240.00	2,877.33	
ROYAL BANK OF CANADA SER GMTN CALL 07/23/2026 VAR% DUE 07/23/2027 RATING: A1 (78016HZX1)	164,997.70	165,000	165,757.35 100.4590	0.40 %	759.65	164,997.70 100.00	5.05 %	8,363.85	3,670.80	
SOUTHERN CO SER 21-B CALL 12/15/2027 01.750% DUE 03/15/2028 RATING: BAA1 (842587DH7)	124,482.40	140,000	126,998.20 90.7130	0.30 %	2,515.80	134,843.85 96.32	1.93 %	2,450.00	721.39	
STATE STREET CORP CALL 01/26/2025 UNSC VAR% DUE 01/26/2026 RATING: AA3 (857477BZ5)	119,431.20	120,000	119,984.40 99.9870	0.29 %	553.20	119,661.30 99.72	4.86 %	5,828.40	2,509.45	



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Description (Cusip)	Value last statement Quantity	Current market value		% of total portfolio	Unrealized gain/loss	Total original value at PNC		Current yield	Estimated annual income	Accrued income
		Current price per unit	Current			Avg. original value at PNC per unit	at PNC			
STATE STREET CORP CALL 05/18/2025 UNSC VAR% DUE 05/18/2026 RATING: AA3 (857477CB7)	85,087.55	85,130.90	85,130.90	0.21 %	43.35	84,813.20	99.78	5.10 %	4,338.40	518.20
SYSCO CORPORATION CALL 01/01/2030 COGT 05.950% DUE 04/01/2030 RATING: BAA1 (871829BL0)	116,911.30	114,573.80	114,573.80	0.28 %	- 2,337.50	137,693.60	125.18	5.72 %	6,545.00	1,636.25
T-MOBILE USA INC CALL 04/15/2024 COGT 03.375% DUE 04/15/2029 RATING: BAA2 (87264ABV6)	153,301.50	154,004.40	154,004.40	0.37 %	702.90	149,480.55	90.59	3.62 %	5,568.75	1,175.63
TAKE-TWO INTERACTIVE SOF CALL 05/12/2029 UNSC 05.400% DUE 06/12/2029 RATING: BAA2 (874054AM1)	195,958.45	197,763.15	197,763.15	0.47 %	1,804.70	195,958.45	100.49	5.33 %	10,530.00	555.75
TORONTO-DOMINION BANK SEDOL BM9HQS5 ISIN US89115A2S07 05.532% DUE 07/17/2026 RATING: A2 (89115A2S0)	188,515.00	187,149.70	187,149.70	0.45 %	- 1,365.30	185,047.60	100.03	5.47 %	10,234.20	4,662.25
TORONTO-DOMINION BANK SEDOL 2MSQMP1 ISIN US89116CQJ98 VAR% DUE 09/10/2034 RATING: A3 (89116CQJ9)	85,000.00	83,160.60	83,160.60	0.20 %	- 1,839.40	85,000.00	100.00	5.26 %	4,374.10	1,348.68



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Description (Cusip)	Value last statement Quantity	Current market value		% of total portfolio	Unrealized gain/loss	Total original value at PNC		Current yield	Estimated annual income	Accrued income
		Current price per unit	Current			Avg. original value at PNC per unit	at PNC			
TOYOTA AUTO RECEIVABLES OWNER SERIES 2023 B CLASS A3 04.710% DUE 02/15/2028 RATING: AAA (891941AD8)	189,707.40 190,000	190,583.30 100.3070	230,768.20 100.3340	0.45 %	875.90	189,989.38 99.99	229,933.30 99.97	4.70 %	8,949.00	397.73
TOYOTA MOTOR CREDIT CORP UNSC 05.100% DUE 03/21/2031 RATING: A1 (89236TLZ6)	229,933.30 230,000	230,768.20 100.3340	230,768.20 100.3340	0.55 %	834.90	229,933.30 99.97	229,933.30 99.97	5.09 %	11,730.00	3,258.33
TOYOTA AUTO RECEIVABLES OWNER SERIES 2024 B CLASS A3 05.330% DUE 01/16/2029 RATING: AAA (89237NAD9)	574,918.00 575,000	582,843.00 101.3640	582,843.00 101.3640	1.38 %	7,925.00	574,918.00 99.99	574,918.00 99.99	5.26 %	30,647.50	1,362.11
TRUIST FINANCIAL CORPORATION SER MTN CALL 06/07/2028 @ 100 VAR% DUE 06/07/2029 RATING: BAA1 (89788MAE2)	151,224.50 175,000	157,886.75 90.2210	157,886.75 90.2210	0.38 %	6,662.25	161,192.14 92.11	161,192.14 92.11	2.10 %	3,302.25	220.15
UBS GROUP AG SER 144A SEDOL ISIN US902613AS79 04.703% DUE 08/05/2027 RATING: A3 (902613AS7)	197,154.00 200,000	199,118.00 99.5590	199,118.00 99.5590	0.47 %	1,964.00	200,000.00 100.00	200,000.00 100.00	4.73 %	9,406.00	3,814.66
UNITED PARCEL SERVICE CALL 02/22/2034 UNSC 05.150% DUE 05/22/2034 RATING: A2 (911312CD6)	89,854.20 90,000	89,806.50 99.7850	89,806.50 99.7850	0.22 %	- 47.70	89,854.20 99.84	89,854.20 99.84	5.17 %	4,635.00	502.12



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Description (Cusip)	Value last statement Quantity	Current market value		% of total portfolio	Unrealized gain/loss	Total original value at PNC		Current yield	Estimated annual income	Accrued income
		Current price per unit				Avg. original value at PNC per unit				
US BANCORP CALL 06/12/2028 UNSC VAR% DUE 06/12/2029 RATING: A3 (91159HJM3)	111,911.80 110,000	112,484.90 102.2590		0.27 %	573.10	111,911.80 101.74		5.65 %	6,352.50	335.27
US BANCORP CALL 06/10/2033 UNSC VAR% DUE 06/12/2034 RATING: A3 (91159HJN1)	154,728.00 150,000	152,910.00 101.9400		0.37 %	- 1,818.00	147,183.86 98.12		5.73 %	8,754.00	462.02
UNITEDHEALTH GROUP INC CALL 02/15/2030 UNSC 02.000% DUE 05/15/2030 RATING: A2 (91324PDX7)	146,931.00 170,000	146,529.80 86.1940		0.35 %	- 401.20	156,549.14 92.09		2.33 %	3,400.00	434.44
UNITEDHEALTH GROUP INC CALL 11/15/2031 UNSC 04.950% DUE 01/15/2032 RATING: A2 (91324PFH0)	122,853.60 120,000	118,646.40 98.8720		0.28 %	- 4,207.20	122,853.60 102.38		5.01 %	5,940.00	2,574.00
VALERO ENERGY CORP CALL 09/01/2031 UNSC 02.800% DUE 12/01/2031 RATING: BAA2 (91913YBC3)	152,654.40 180,000	153,520.20 85.2890		0.37 %	865.80	149,774.15 83.21		3.29 %	5,040.00	420.00
VERIZON MASTER TRUST SERIES 2022 4 CLASS A 03.830% DUE 11/20/2028 RATING: AAA (92348KAS2)	190,657.35 195,000	194,159.55 99.5690		0.46 %	3,502.20	194,990.15 99.99		3.42 %	6,630.00	202.58



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Corporate debt

Description (Cusip)	Value last statement Quantity	Current market value		% of total portfolio	Unrealized gain/loss	Total original value at PNC		Current yield	Estimated annual income	Accrued income
		Current price per unit	Current			Avg. original value at PNC per unit	at PNC			
VERIZON MASTER TRUST SERIES 2024-3 CLASS A1A 05.340% DUE 04/22/2030 RATING: AAA (92348KCQ4)	199,955.72 200,000	203,368.00 101.6840	0.48 %	3,412.28	199,955.72 99.98	5.26 %	10,680.00	326.33		
VISA INC CALL 01/15/2030 UNSC 02.050% DUE 04/15/2030 RATING: AA3 (92826CAM4)	136,195.40 155,000	135,545.95 87.4490	0.32 %	- 649.45	148,361.20 95.72	2.35 %	3,177.50	670.81		
WELLS FARGO & COMPANY SER MTN CALL 03/24/2027 VAR% DUE 03/24/2028 RATING: A1 (95000U2V4)	100,172.10 105,000	101,842.65 96.9930	0.25 %	1,670.55	102,061.90 97.20	3.64 %	3,702.30	997.56		
WELLS FARGO & COMPANY CALL 07/25/2033 UNSC VAR% DUE 07/25/2034 RATING: A1 (95000U3F8)	106,901.55 105,000	104,860.35 99.8670	0.25 %	- 2,041.20	103,206.35 98.29	5.57 %	5,834.85	2,528.43		
WELLS FARGO & COMPANY CALL 04/22/2027 UNSC VAR% DUE 04/22/2028 RATING: A1 (95000U3L5)	129,997.75 130,000	132,138.50 101.6450	0.32 %	2,140.75	129,997.75 100.00	5.62 %	7,419.10	1,421.99		
WESTPAC BKG CORP SEDOL BDBGH51 ISIN US961214DF70 VAR% DUE 11/23/2031 RATING: A3 (961214DF7)	253,294.80 260,000	255,902.40 98.4240	0.61 %	2,607.60	256,708.61 98.73	4.40 %	11,237.20	1,217.36		



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Corporate debt

Description (Cusip)	Value last statement Quantity	Current market value		% of total portfolio	Unrealized gain/loss	Total original value at PNC		Current yield	Estimated annual income	Accrued income
		Current price per unit	Current			Avg. original value at PNC per unit	at PNC			
WESTPAC BANKING CORP SEDOL ISIN US961214FT56 05.050% DUE 04/16/2029 (961214FT5) RATING: AA2	124,768.75 125,000	126,365.00 101.0920		0.30 %	1,596.25	124,768.75 99.82		5.00 %	6,312.50	1,315.10
Total corporate debt	\$17,722,880.81	\$17,768,345.67		41.89 %	\$45,464.86	\$18,026,327.58		4.37 %	\$775,663.00	\$189,658.59
Total portfolio	\$42,593,518.18	\$42,421,601.23		100.00 %	- \$171,916.95	\$43,102,493.14		3.41 %	\$1,445,415.29	\$337,267.59
		\$17,768,345.67								
		² <44,238.68>								
		\$17,724,106.99								



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Portfolio

Interest bearing cash

Description	Value last statement	Current market value		% of total portfolio	Unrealized gain/loss	Total original value at PNC		Current yield	Estimated annual income	Accrued income
		Quantity	Current price per unit			Avg. original value at PNC per unit				
FEDERATED HERMES GOVT OBLIG PREM SHS #117	\$654,132.73	654,132.730	① \$654,132.73 \$1.0000	4.94 %		\$654,132.73 \$1.00	4.39 %	\$28,657.22	\$2,344.14	

Corporate stock - common

Description (Symbol)	Value last statement	Current market value		% of total portfolio	Unrealized gain/loss	Total original value at PNC		Current yield	Estimated annual income	Accrued income
		Quantity	Current price per unit			Avg. original value at PNC per unit				
AMDOCS LIMITED (DOX) ISIN BG0022569080 SEDOL 2256908	\$193,025.09	2,240	\$190,713.60 \$85.1400	1.45 %	-\$2,311.49	\$202,857.47 \$90.56	2.26 %	\$4,291.84	\$1,072.96	
PENTAIR PLC (PNR) SEDOL BLS09M3 ISIN IE00BLS09M33	204,315.10	2,810	282,798.40 100.6400	2.14 %	78,483.30	137,747.05 49.02	1.00 %	2,810.00		
WILLIS TOWERS WATSON PLC (WTW) SEDOL BDB6Q21 ISIN IE00BDB6Q211	183,312.00	760	238,062.40 313.2400	1.80 %	54,750.40	174,133.76 229.12	1.13 %	2,675.20	668.80	
CHUBB LTD (CB) SEDOL B3BQMF6 ISIN CH0044328745	259,900.00	1,150	317,745.00 276.3000	2.40 %	57,845.00	136,060.40 118.31	1.32 %	4,186.00	1,046.50	
AGILENT TECHNOLOGIES (IPO) (A)	177,104.74	1,290	173,298.60 134.3400	1.31 %	-3,806.14	163,386.00 126.66	0.74 %	1,279.68	319.92	
ALLETE INC (ALE)	143,114.40	2,340	151,632.00 64.8000	1.15 %	8,517.60	143,034.21 61.13	4.36 %	6,598.80		
ALLSTATE CORP (ALL)	188,973.00	1,350	260,266.50 192.7900	1.97 %	71,293.50	86,049.42 63.74	1.91 %	4,968.00	1,242.00	
ALPHABET INC/CA-CL C (GOOG)	147,976.50	1,050	199,962.00 190.4400	1.51 %	51,985.50	58,382.09 55.60	0.43 %	840.00		



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Corporate stock - common

Description (Symbol)	Value last statement	Current	% of total portfolio	Unrealized gain/loss	Total original	Current yield	Estimated annual income	Accrued income
		market value			value at PNC			
	Quantity	Current price per unit			Avg. original value at PNC per unit			
AUTOZONE INC (AZO)	323,201.25	400,250.00	3.03 %	77,048.75	146,202.42			
	125	3,202.0000			1,169.62			
BECTON DICKINSON & CO (BDX)	275,379.03	260,900.50	1.98 %	- 14,478.53	196,643.76	1.84 %	4,784.00	
	1,150	226.8700			170.99			
BLUE BIRD CORP (BLBD)	119,432.80	171,130.90	1.30 %	51,698.10	87,493.17			
	4,430	38.6300			19.75			
BRUNSWICK CORP (BC)	124,385.12	95,726.40	0.73 %	- 28,658.72	124,385.12	2.60 %	2,486.40	
	1,480	64.6800			84.04			
THE CIGNA GROUP (CI)	218,598.50	201,582.20	1.53 %	- 17,016.30	190,497.80	2.03 %	4,088.00	
	730	276.1400			260.96			
CVS HEALTH CORPORATION (CVS)	191,452.97	155,768.30	1.18 %	- 35,684.67	191,452.97	5.93 %	9,230.20	
	3,470	44.8900			55.17			
CACI INTL INC (CACI)	205,877.79	250,517.20	1.90 %	44,639.41	206,129.06			
CL A	620	404.0600			332.47			
CARLISLE COMPANIES INC (CSL)	224,949.60	265,564.80	2.01 %	40,615.20	182,261.85	1.09 %	2,880.00	
	720	368.8400			253.14			
CHEVRON CORPORATION (CVX)	275,946.00	267,954.00	2.03 %	- 7,992.00	192,860.42	4.51 %	12,062.00	
	1,850	144.8400			104.25			
DT MIDSTREAM INC-W/I (DTM)	140,562.00	255,037.95	1.93 %	114,475.95	106,686.25	2.96 %	7,541.10	1,885.28
	2,565	99.4300			41.59			
DELL TECHNOLOGIES -C (DELL)	152,631.46	215,498.80	1.63 %	62,867.34	148,067.33	1.55 %	3,328.60	
	1,870	115.2400			79.18			
DELTA AIR LINES INC (DAL)	258,419.63	382,965.00	2.90 %	124,545.37	229,427.34	1.00 %	3,798.00	
	6,330	60.5000			36.24			
DISCOVER FINANCIAL W/I (DFS)	245,032.00	377,641.40	2.86 %	132,609.40	125,060.52	1.62 %	6,104.00	
	2,180	173.2300			57.37			
ELECTRONIC ART (EA)	129,931.52	121,429.00	0.92 %	- 8,502.52	129,931.52	0.52 %	630.80	
	830	146.3000			156.54			
EXXON MOBIL CORP (XOM)	259,948.00	279,682.00	2.12 %	19,734.00	186,641.93	3.69 %	10,296.00	
	2,600	107.5700			71.79			
FISERV INC (FI)	282,949.20	437,544.60	3.31 %	154,595.40	226,343.48			
	2,130	205.4200			106.26			



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Corporate stock - common

Description (Symbol)	Value last statement	Current market value	% of total portfolio	Unrealized gain/loss	Total original value at PNC	Current yield	Estimated annual income	Accrued income
		Current price per unit			Avg. original value at PNC per unit			
HCA HEALTHCARE INC (HCA)	313,988.80 1,160	348,174.00 300.1500	2.63 %	34,185.20	98,089.37 84.56	0.88 %	3,062.40	
HOWMET AEROSPACE INC (HWM)	123,393.60 2,280	249,363.60 109.3700	1.89 %	125,970.00	37,311.55 16.36	0.30 %	729.60	
JPMORGAN CHASE & CO (JPM)	260,253.00 1,530	366,756.30 239.7100	2.77 %	106,503.30	92,824.50 60.67	2.09 %	7,650.00	
JBT MAREL CORPORATION (JBTM)	185,430.66 1,860	236,406.00 127.1000	1.79 %	50,975.34	189,190.28 101.72	0.32 %	744.00	
LKQ CORP (LKQ)	186,141.58 4,320	158,760.00 36.7500	1.20 %	- 27,381.58	186,141.58 43.09	3.27 %	5,184.00	
L3 HARRIS TECHNOLOGIES INC (LHX)	172,708.40 820	172,429.60 210.2800	1.31 %	- 278.80	94,506.08 115.25	2.21 %	3,804.80	
LAM RESEARCH CORP (LRCX)	180,149.80 2,300	166,129.00 72.2300	1.26 %	- 14,020.80	18,883.04 8.21	1.28 %	2,116.00	529.00
MASCO CORP (MAS)	215,005.80 3,210	232,949.70 72.5700	1.76 %	17,943.90	115,545.52 36.00	1.60 %	3,723.60	
MICROSOFT CORP (MSFT)	142,895.20 380	160,170.00 421.5000	1.21 %	17,274.80	92,745.12 244.07	0.79 %	1,261.60	
MICRON TECHNOLOGY INC (MU)	181,065.80 2,120	178,419.20 84.1600	1.35 %	- 2,646.60	117,065.26 55.22	0.55 %	975.20	243.80
MONDELEZ INTERNATIONAL (MDLZ)	236,121.80 3,260	194,719.80 59.7300	1.48 %	- 41,402.00	150,234.42 46.08	3.15 %	6,128.80	1,532.20
MORGAN STANLEY (MS)	276,952.50 2,970	373,388.40 125.7200	2.82 %	96,435.90	108,694.70 36.60	2.95 %	10,989.00	
ORACLE CORP (ORCL)	182,393.90 1,730	288,287.20 166.6400	2.18 %	105,893.30	127,101.75 73.47	0.97 %	2,768.00	
PNC FINANCIAL SERVICES GROUP INC (PNC)	192,374.37 1,210	233,348.50 192.8500	1.77 %	40,974.13	133,443.72 110.28	3.32 %	7,744.00	
TXNM ENERGY INC (TXNM)	131,971.60 2,940	144,559.80 49.1700	1.10 %	12,588.20	131,971.60 44.89	3.32 %	4,792.20	
PEPSICO INC (PEP)	185,125.60 1,090	165,745.40 152.0600	1.26 %	- 19,380.20	120,030.00 110.12	3.57 %	5,907.80	1,476.95



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Corporate stock - common

Description (Symbol)	Value last statement	Current market value	% of total portfolio	Unrealized gain/loss	Total original value at PNC	Current yield	Estimated annual income	Accrued income
		Current price per unit			Avg. original value at PNC per unit			
PROGRESSIVE CORP OHIO (PGR)	132,202.40 830	198,876.30 239,6100	1.51 %	66,673.90	101,178.41 121.90	0.17 %	332.00	
RAYMOND JAMES FINANCIAL INC (RJF)	264,255.00 2,370	368,132.10 155.3300	2.78 %	103,877.10	85,092.53 35.90	1.29 %	4,740.00	
RTX CORPORATION (RTX)	184,855.58 2,197	254,236.84 115.7200	1.92 %	69,381.26	109,280.74 49.74	2.18 %	5,536.44	
RELIANCE INC (RS)	338,412.80 1,210	325,804.60 269.2600	2.47 %	- 12,608.20	82,503.30 68.18	1.64 %	5,324.00	
RYMAN HOSPITALITY PPTYS INC (RHP)	132,689.40 1,190	124,164.60 104.3400	0.94 %	- 8,524.80	132,689.40 111.50	4.27 %	5,295.50	1,368.50
UNITED PARKS & RESORTS INC. (PRKS)	216,074.70 4,090	229,817.10 56.1900	1.74 %	13,742.40	162,032.53 39.62	0.72 %	1,636.00	
SONOS INC (SONO)	189,973.30 12,540	188,601.60 15.0400	1.43 %	- 1,371.70	217,772.80 17.37			
TERADYNE INCORPORATED (TER)	141,076.00 1,300	163,696.00 125.9200	1.24 %	22,620.00	132,884.35 102.22	0.39 %	624.00	
TRUIST FINANCIAL CORP (TFC)	228,569.55 5,250	227,745.00 43.3800	1.72 %	- 824.55	228,569.55 43.54	4.80 %	10,920.00	
VICI PROPERTIES INC (VICI)	168,517.68 5,286	154,404.06 29.2100	1.17 %	- 14,113.62	115,900.52 21.93	5.93 %	9,144.78	2,286.20
VISHAY INTERTECHNOLOGY INC (VSH)	193,917.30 8,090	137,044.60 16.9400	1.04 %	- 56,872.70	191,969.51 23.73	2.37 %	3,236.00	
WASTE MANAGEMENT INC (WM)	159,399.00 890	179,593.10 201.7900	1.36 %	20,194.10	40,506.96 45.51	1.49 %	2,670.00	
WEBSTER FINANCIAL CORP (WBS)	188,156.29 3,730	205,970.60 55.2200	1.56 %	17,814.31	175,924.02 47.16	2.90 %	5,968.00	
ZIMMER BIOMET HOLDINGS, INC (ZBH)	239,749.00 1,970	208,091.10 105.6300	1.58 %	- 31,657.90	250,973.60 127.40	0.91 %	1,891.20	472.80



ELEC WKRS BEN TR FD DEROY
 CUSTODY STATEMENT

January 1, 2024 - December 31, 2024

Detail

Corporate stock - common

Description (Symbol)	Value last statement	Quantity	Current market value	% of total portfolio	Unrealized gain/loss	Total original value at PNC	Current yield	Estimated annual income	Accrued income
			Current price per unit			Avg. original value at PNC per unit			
Total corporate stock - common	\$10,870,238.11		③ \$12,589,455.65	95.06 %	\$1,719,217.54	\$7,612,792.05	1.75 %	\$219,777.54	\$14,144.91
Total portfolio	\$11,524,370.84		\$13,243,588.38	100.00 %	\$1,719,217.54	\$8,266,924.78	1.88 %	\$248,434.76	\$16,489.05

③ \$29,025,928.76 Common Stock



ELEC WKRS BEN TR FD -FARR MILLER
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Portfolio

Interest bearing cash

Description	Value last statement	Current market value	% of total portfolio	Unrealized gain/loss	Total original value at PNC	Current yield	Estimated annual income	Accrued income
		Current price per unit			Avg. original value at PNC per unit			
FEDERATED HERMES GOVT OBLIG PREM SHS #117	\$203,942.87 203,942.870	① \$203,942.87 \$1.0000	2.45 %		\$203,942.87 \$1.00	4.39 %	\$8,934.63	\$745.27

Corporate stock - common

Description (Symbol)	Value last statement	Current market value	% of total portfolio	Unrealized gain/loss	Total original value at PNC	Current yield	Estimated annual income	Accrued income
		Current price per unit			Avg. original value at PNC per unit			
ACCENTURE PLC CLASS A (ACN)	\$320,172.84	\$334,200.50	4.02 %	\$14,027.66	\$189,030.69	1.69 %	\$5,624.00	
SEDOL B4BNMY3 ISIN IE00B4BNMY34	950	\$351.7900			\$198.98			
MEDTRONIC PLC (MDT)	109,977.30	106,639.80	1.29 %	-3,337.50	102,287.99	3.51 %	3,738.00	934.50
SEDOL BTN1Y11 ISIN IE00BTN1Y115	1,335	79.8800			76.62			
ABBOTT LABORATORIES INC (ABT)	296,638.65	304,831.45	3.66 %	8,192.80	193,843.37	2.09 %	6,360.20	
	2,695	113.1100			71.93			
ADOBE INC (ADBE)	165,211.63	146,744.40	1.77 %	-18,467.23	165,211.63	0.02 %	16.50	
	330	444.6800			500.64			
ALPHABET INC/CA-CL A (GOOGL)	290,555.20	393,744.00	4.73 %	103,188.80	83,985.21	0.43 %	1,664.00	
	2,080	189.3000			40.38			
AMAZON COM INC (AMZN)	220,313.00	318,115.50	3.82 %	97,802.50	179,478.34			
	1,450	219.3900			123.78			
APPLE INC (AAPL)	243,550.45	316,781.30	3.81 %	73,230.85	103,493.97	0.40 %	1,265.00	
	1,265	250.4200			81.81			
BECTON DICKINSON & CO (BDX)	247,487.45	230,273.05	2.77 %	-17,214.40	202,010.23	1.84 %	4,222.40	
	1,015	226.8700			199.02			
DANAHER CORP (DHR)	188,542.10	187,083.25	2.25 %	-1,458.85	92,844.70	0.48 %	880.20	220.05
	815	229.5500			113.92			



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Corporate stock - common

Description (Symbol)	Current market value		% of total portfolio	Unrealized gain/loss	Total original value at PNC		Current yield	Estimated annual income	Accrued income
	Value last statement	Current price per unit			Avg. original value at PNC per unit				
DISNEY WALT CO (DIS)	207,667.00 2,300	256,105.00 111,3500	3.08 %	48,438.00	238,758.06 103.81	0.90 %	2,300.00	1,150.00	
DONALDSON INC (DCI)	247,349.75 3,785	254,919.75 67,3500	3.07 %	7,570.00	164,093.70 43.35	1.61 %	4,087.80		
FEDEX CORPORATION (FDX)	236,526.95 935	263,043.55 281,3300	3.16 %	26,516.60	162,372.97 173.66	1.97 %	5,161.20	1,290.30	
GOLDMAN SACHS GROUP INC (GS)	358,766.10 930	532,536.60 572,6200	6.40 %	173,770.50	217,143.65 233.49	2.10 %	11,160.00		
JOHNSON & JOHNSON (JNJ)	281,348.30 1,795	259,592.90 144,6200	3.12 %	- 21,755.40	217,622.41 121.24	3.43 %	8,903.20		
LOWES COMPANIES INC (LOW)	204,746.00 920	227,056.00 246,8000	2.73 %	22,310.00	100,681.66 109.44	1.87 %	4,232.00		
MICROSOFT CORP (MSFT)	502,013.40 1,335	562,702.50 421,5000	6.76 %	60,689.10	74,453.08 55.77	0.79 %	4,432.20		
MONDELEZ INTERNATIONAL (MDLZ)	249,159.20 3,440	205,471.20 59,7300	2.47 %	- 43,688.00	191,774.76 55.75	3.15 %	6,467.20	1,616.80	
NVIDIA CORP (NVDA)	80,347.65 645	86,617.05 134,2900	1.04 %	6,269.40	80,347.65 124.57	0.03 %	25.80		
OTIS WORLDWIDE CORP-W/I (OTIS)	170,440.35 1,905	176,422.05 92,6100	2.12 %	5,981.70	131,134.41 68.84	1.69 %	2,971.80		
PNC FINANCIAL SERVICES GROUP INC (PNC)	321,313.75 2,075	400,163.75 192,8500	4.81 %	78,850.00	227,627.70 109.70	3.32 %	13,280.00		
PEPSICO INC (PEP)	172,387.60 1,015	154,340.90 152,0600	1.86 %	- 18,046.70	109,223.91 107.61	3.57 %	5,501.30	1,375.33	
PROCTER & GAMBLE CO (PG)	267,435.50 1,825	305,961.25 167,6500	3.68 %	38,525.75	175,425.69 96.12	2.41 %	7,347.45		
RTX CORPORATION (RTX)	252,840.70 3,005	347,738.60 115,7200	4.18 %	94,897.90	219,477.12 73.04	2.18 %	7,572.60		
S&P GLOBAL INC (SPGI)	226,867.80 515	256,485.45 498,0300	3.08 %	29,617.65	200,005.21 388.36	0.74 %	1,874.60		
STARBUCKS CORP (SBUX)	251,066.15 2,615	238,618.75 91,2500	2.87 %	- 12,447.40	189,483.97 72.46	2.68 %	6,380.60		



ELEC WKRS BEN TR FD -FARR MILLER
CUSTODY STATEMENT

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Detail

Corporate stock - common

Description (Symbol)	Value last statement	Current market value		% of total portfolio	Unrealized gain/loss	Total original value at PNC		Current yield	Estimated annual income	Accrued income
		Quantity	Current price per unit			Avg. original value at PNC per unit				
STRYKER CORP (SYK)	226,092.30	755	271,837.75	3.27 %	45,745.45	90,668.91	120.09	0.94 %	2,536.80	634.20
TRUIST FINANCIAL CORP (TFC)	228,904.00	6,200	268,956.00	3.23 %	40,052.00	226,072.72	36.46	4.80 %	12,896.00	
VALMONT INDUSTRIES INC (VMI)	314,070.95	1,345	412,471.15	4.96 %	98,400.20	216,053.41	160.63	0.79 %	3,228.00	807.00
VISA INC (V) CLASS A SHARES	261,035.96	970	306,558.80	3.69 %	45,522.84	232,719.95	239.92	0.75 %	2,289.20	
Total corporate stock - common	\$7,142,828.03		\$8,126,012.25	97.55 %	\$983,184.22	\$4,777,327.07		1.68 %	\$136,418.05	\$8,028.18
Total portfolio	\$7,346,770.90		\$8,329,955.12	100.00 %	\$983,184.22	\$4,981,269.94		1.75 %	\$145,352.68	\$8,773.45



ELEC WKRS BEN TR FD SIERRA
CUSTODY STATEMENT

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Detail

Portfolio

Cash and cash equivalents
Mutual funds - money market

Description	Market value last period	Current market value		% of total portfolio	Total original value at PNC		Current yield	Estimated annual income	Accrued income
		Quantity	price per unit		Avg. original value at PNC per unit	Unrealized gain/loss			
FEDERATED HERMES GOVT OBLIG	\$2,214,306.79		① \$2,214,306.79	21.04 %	\$2,214,306.79		4.39 %	\$97,007.65	\$910.06
PREM SHS #117	2,214,306.790		\$ 1.0000		\$ 1.00				

Equities

Stocks
Consumer discretionary

Description (Symbol)	Market value last period	Current market value		% of total portfolio	Total original value at PNC		Current yield	Estimated annual income	Accrued income
		Quantity	price per unit		Avg. original value at PNC per unit	Unrealized gain/loss			
AMAZON COM INC (AMZN)	\$458,865.43		\$657,950.61	6.26 %	\$350,392.17	\$307,558.44			
	2,999		\$219.3900		\$ 116.84				
BOOKING HOLDINGS INC (BKNG)	162,698.01		228,547.32	2.18 %	136,811.63	91,735.69	0.71 %	1,610.00	
	46		4,968.4200		2,974.17				
HOME DEPOT INC (HD)	191,666.00		184,381.26	1.76 %	191,666.00	- 7,284.74	2.32 %	4,266.00	
	474		388.9900		404.36				
O REILLY AUTOMOTIVE INC (ORLY)	153,912.96		192,099.60	1.83 %	149,602.19	42,497.41			
	162		1,185.8000		923.47				
ROSS STORES INC (ROST)	164,973.50		180,313.84	1.72 %	133,174.72	47,139.12	0.98 %	1,752.24	
	1,192		151.2700		111.72				
TJX COMPANIES INC NEW (TJX)	167,378.15		215,525.04	2.05 %	144,402.49	71,122.55	1.25 %	2,676.00	
	1,784		120.8100		80.94				
Total consumer discretionary			\$1,658,817.67	15.76 %	\$1,106,049.20	\$552,768.47	0.62 %	\$10,304.24	



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Consumer staples

Description (Symbol)	Current market value		% of total portfolio	Total original value at PNC		Current yield	Estimated annual income	Accrued income
	Market value last period	Current price per unit		Avg. original value at PNC per unit	Unrealized gain/loss			
COLGATE-PALMOLIVE CO (CL)	\$112,347.43 1,391	\$126,455.81 \$90.9100	1.21 %	\$110,765.00 \$79.63	\$15,690.81	2.20 %	\$2,782.00	
PEPSICO INC (PEP)	153,200.83 902	137,158.12 152.0600	1.31 %	159,406.21 176.73	- 22,248.09	3.57 %	4,888.84	1,506.76
Total consumer staples		\$263,613.93	2.51 %	\$270,171.21	-\$6,557.28	2.91 %	\$7,670.84	\$1,506.76

Energy

Description (Symbol)	Current market value		% of total portfolio	Total original value at PNC		Current yield	Estimated annual income	Accrued income
	Market value last period	Current price per unit		Avg. original value at PNC per unit	Unrealized gain/loss			
SCHLUMBERGER LTD (SLB) SEDOL 2779201 ISIN AN8068571086	\$166,680.15 3,341	\$128,093.94 \$38.3400	1.22 %	\$161,792.85 \$48.43	-\$33,698.91	2.87 %	\$3,675.10	\$1,138.23

Financial

Description (Symbol)	Current market value		% of total portfolio	Total original value at PNC		Current yield	Estimated annual income	Accrued income
	Market value last period	Current price per unit		Avg. original value at PNC per unit	Unrealized gain/loss			
FACTSET RESH SYS INC (FDS)	\$63,447.65 133	\$63,877.24 \$480.2800	0.61 %	\$57,231.43 \$430.31	\$6,645.81	0.87 %	\$553.28	
INTERCONTINENTAL EXCHANGE INC (ICE)	171,095.19 1,332	198,481.32 149.0100	1.89 %	145,155.71 108.98	53,325.61	1.21 %	2,397.60	
MASTERCARD INC CL A (MA)	320,771.55 752	395,980.64 526.5700	3.77 %	274,369.43 364.85	121,611.21	0.58 %	2,286.08	
PROGRESSIVE CORP OHIO (PGR)	104,532.32 656	157,184.16 239.6100	1.50 %	92,817.95 141.49	64,366.21	0.17 %	262.40	
VISA INC (V) CLASS A SHARES	151,784.05 583	184,251.32 316.0400	1.76 %	128,716.71 220.78	55,534.61	0.75 %	1,375.88	
Total financial		\$999,774.68	9.50 %	\$698,291.23	\$301,483.45	0.69 %	\$6,875.24	



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Health care

Description (Symbol)	Current market value		% of total portfolio	Total original value at PNC		Current yield	Estimated annual income	Accrued income
	Market value last period	Current price per unit		Avg. original value at PNC per unit	Unrealized gain/loss			
DANAHER CORP (DHR)	\$135,333.90 585	\$134,286.75 \$229.5500	1.28 %	\$119,274.89 \$203.89	\$15,011.86	0.48 %	\$631.80	\$194.67
INTUITIVE SURGICAL INC (ISRG)	145,402.16 431	224,964.76 521.9600	2.14 %	132,660.50 307.80	92,304.26			
ELI LILLY & CO (LLY)	191,197.76 328	253,216.00 772.0000	2.41 %	142,290.18 433.81	110,925.82	0.78 %	1,968.00	
THERMO FISHER SCIENTIFIC INC (TMO)	187,899.66 354	184,161.42 520.2300	1.75 %	175,717.88 496.38	8,443.54	0.30 %	552.24	169.65
VERTEX PHARMACEUTICALS INC (VRTX)	175,349.54 418	168,328.60 402.7000	1.60 %	175,352.35 419.50	-7,023.75			
Total health care		\$964,957.53	9.17 %	\$745,295.80	\$219,661.73	0.33 %	\$3,152.04	\$364.32

Industrials

Description (Symbol)	Current market value		% of total portfolio	Total original value at PNC		Current yield	Estimated annual income	Accrued income
	Market value last period	Current price per unit		Avg. original value at PNC per unit	Unrealized gain/loss			
EATON CORP PLC (ETN)	\$93,197.34 387	\$128,433.69 \$331.8700	1.23 %	\$69,393.49 \$179.31	\$59,040.20	1.14 %	\$1,455.12	
SEDOL B8KQN82 ISIN IE00B8KQN827								
COPART INC (CPRT)	76,440.56 1,552	89,069.28 57.3900	0.85 %	65,834.33 42.42	23,234.95			
ILLINOIS TOOL WORKS INC (ITW)	80,677.52 308	78,096.48 253.5600	0.75 %	73,261.78 237.86	4,834.70	2.37 %	1,848.00	462.00
ROCKWELL AUTOMATION INC (ROK)	63,245.22 212	60,587.48 285.7900	0.58 %	57,479.64 271.13	3,107.84	1.84 %	1,110.88	
UBER TECHNOLOGIES INC (UBER)	270,711.20 3,925	236,756.00 60.3200	2.25 %	245,582.07 62.57	-8,826.07			
VERALTO CORP-W/I (VLTO)	79,500.66 909	92,581.65 101.8500	0.88 %	77,884.04 85.68	14,697.61	0.38 %	345.42	99.99
Total industrials		\$685,524.58	6.51 %	\$589,435.35	\$96,089.23	0.69 %	\$4,759.42	\$561.99



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Information technology

Description (Symbol)	Market value last period Quantity	Current market value	% of total portfolio	Total original value at PNC	Unrealized gain/loss	Current yield	Estimated annual income	Accrued income
		Current price per unit		Avg. original value at PNC per unit				
ASML HOLDING NV-NY (ASML) SEDOL B908F01 ISIN USN070592100	\$102,909.28 154	\$106,734.32 \$693.0800	1.02 %	\$102,909.28 \$668.24	\$3,825.04	0.83 %	\$878.72	
ADOBE INC (ADBE)	247,567.42 416	184,986.88 444.6800	1.76 %	181,064.41 435.25	3,922.47	0.02 %	20.80	
ADVANCED MICRO DEVICES INC (AMD)	183,616.37 1,213	146,518.27 120.7900	1.40 %	133,036.54 109.68	13,481.73			
AMPHENOL CORP NEW (APH) CL A	210,186.00 4,201	291,759.45 69.4500	2.78 %	170,710.53 40.64	121,048.92	0.96 %	2,772.66	859.16
APPLE INC (AAPL)	365,340.34 1,895	474,545.90 250.4200	4.51 %	248,982.12 131.39	225,563.78	0.40 %	1,895.00	
INTUIT SOFTWARE (INTU)	193,581.15 310	194,835.00 628.5000	1.86 %	156,006.33 503.25	38,828.67	0.67 %	1,289.60	
MICROSOFT CORP (MSFT)	533,254.51 1,418	597,687.00 421.5000	5.68 %	274,363.90 193.49	323,323.10	0.79 %	4,707.76	
MICROCHIP TECHNOLOGY INC (MCHP)	102,335.64 1,136	65,149.60 57.3500	0.62 %	99,870.66 87.91	- 34,721.06	3.18 %	2,067.52	
MOTOROLA SOLUTIONS INC (MSI)	151,222.47 483	223,257.09 462.2300	2.13 %	144,619.60 299.42	78,637.49	0.95 %	2,105.88	648.55
NVIDIA CORP (NVDA)	66,521.26 1,342	180,217.18 134.2900	1.72 %	32,237.24 24.02	147,979.94	0.03 %	53.68	
ORACLE CORP (ORCL)	211,045.51 1,410	234,962.40 166.6400	2.24 %	211,045.51 149.68	23,916.89	0.97 %	2,256.00	
QUALCOMM (QCOM)	164,405.86 1,113	170,979.06 153.6200	1.63 %	152,019.06 136.58	18,960.00	2.22 %	3,784.20	
SALESFORCE INC (CRM)	206,533.26 782	261,446.06 334.3300	2.49 %	166,851.78 213.37	94,594.28	0.48 %	1,251.20	385.60
Total information technology		\$3,133,078.21	29.77 %	\$2,073,716.96	\$1,059,361.25	0.74 %	\$23,083.02	\$1,893.31



ELEC WKRS BEN TR FD SIERRA
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Description (Symbol)	Current market value		% of total portfolio	Total original value at PNC		Current yield	Estimated annual income	Accrued income
	Market value last period	Current price per unit		Avg. original value at PNC per unit	Unrealized gain/loss			
<i>Telecommunication services</i>								
ALPHABET INC/CA-CL C (GOOG)	Quantity \$234,366.59	1,663 \$316,701.72	3.01 %	\$164,354.98 \$98.83	\$152,346.74	0.43 %	\$1,330.40	
DISNEY WALT CO (DIS)	144,909.55 1,436	159,898.60 111.3500	1.52 %	149,868.90 104.37	10,029.70	0.90 %	1,436.00	888.50
Total telecommunication services		\$476,600.32	4.53 %	\$314,223.88	\$162,376.44	0.58 %	\$2,766.40	\$888.50
Total stocks		\$8,310,460.86	78.96 %	\$5,958,976.48	\$2,351,484.38	0.75 %	\$62,286.30	\$6,353.11
Total equities		\$8,310,460.86	78.96 %	\$5,958,976.48	\$2,351,484.38	0.75 %	\$62,286.30	\$6,353.11
Total portfolio		\$10,524,767.65	100.00 %	\$8,173,283.27	\$2,351,484.38	1.51 %	\$159,293.95	\$7,263.17



ELEC WKRS BEN TR FD - RPF
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Portfolio

Interest bearing cash

Description	Value last statement	Current market value	% of total portfolio	Unrealized gain/loss	Total original value at PNC	Current yield	Estimated annual income	Accrued income
		Current price per unit			Avg. original value at PNC per unit			
FEDERATED HERMES GOVT OBLIG	\$432,670.53	① \$432,670.53	0.56 %		\$432,670.53	4.39 %	\$ 18,955.08	\$1,898.33
PREM SHS #117	432,670.530	\$ 1.0000			\$ 1.00			

Registered investment companies

Description (Symbol)	Value last statement	Current market value	% of total portfolio	Unrealized gain/loss	Total original value at PNC	Current yield	Estimated annual income	Accrued income
		Current price per unit			Avg. original value at PNC per unit			
BAIRD INTERMEDIATE BD FD (BIMIX)	\$23,196,051.71	\$23,086,248.76	29.56 %	- \$109,802.95	\$25,110,911.62	3.89 %	\$896,924.37	
INSTL FD #70	2,247,930.746	\$ 10.2700			\$ 11.17			
BLACKROCK MULTI-ASSET INCOME (BKMIX)	3,706,485.68	3,744,327.74	4.80 %	37,842.06	4,188,170.65	6.12 %	228,964.34	20,106.00
FUND CL K	371,092.938	10.0900			11.29			
FIDELITY 500 INDEX FD-AI (FXAIX)	31,708,858.34	39,033,055.14	49.98 %	7,324,196.80	23,821,635.37	1.25 %	486,121.06	
	191,160.464	204.1900			124.62			
PIMCO ALL ASSET FUND INSTL (PAAIX)	3,549,139.48	3,486,615.08	4.47 %	- 62,524.40	4,115,038.58	5.93 %	206,554.55	73,115.80
FD #034	322,237.993	10.8200			12.77			
VANGUARD SMALL CAP GROWTH INDEX (VSGIX)	7,191,295.19	8,324,882.91	10.66 %	1,133,587.72	2,258,522.48	0.55 %	45,410.37	
FUND	105,605.517	78.8300			21.39			
Total registered investment companies	\$69,351,830.40	④ \$77,675,129.63	99.45 %	\$8,323,299.23	\$59,494,278.70	2.40 %	\$1,863,974.69	\$93,221.80
Total portfolio	\$69,784,500.93	\$78,107,800.16	100.00 %	\$8,323,299.23	\$59,926,949.23	2.41 %	\$1,882,929.77	\$95,120.13

Σ ④ \$100,059,625.17 Registered Investment Companies



ELEC WKRS BEN TR FD-MUTUAL FUNDS
CUSTODY STATEMENT

January 1, 2024 - December 31, 2024

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Detail

Portfolio

Interest bearing cash

Description	Value last statement	Current market value		% of total portfolio	Unrealized gain/loss	Total original value at PNC		Current yield	Estimated annual income	Accrued income
		Quantity	Current price per unit			Avg. original value at PNC per unit	Estimated annual income			
FEDERATED HERMES GOVT OBLIG PREM SHS #117	\$10,206.19	10,206.190	① \$10,206.19 \$1.0000	0.06 %		\$10,206.19 \$1.00	4.39 %	\$447.13	\$38.68	

Registered investment companies

Description (Symbol)	Value last statement	Current market value		% of total portfolio	Unrealized gain/loss	Total original value at PNC		Current yield	Estimated annual income	Accrued income
		Quantity	Current price per unit			Avg. original value at PNC per unit	Estimated annual income			
BLACKROCK MULTI-ASSET INCOME (BKMIX) FUND CL K	\$5,315,850.85	532,222.401	\$5,370,124.03 \$10.0900	26.48 %	\$54,273.18	\$5,783,807.69 \$10.87	6.12 %	\$328,381.22	\$28,836.08	
FIDELITY 500 INDEX FD-AI (FXAIX)	7,951,496.82	47,936.502	9,788,154.34 204.1900	48.26 %	1,836,657.52	6,658,754.09 138.91	1.25 %	121,902.52		
PIMCO ALL ASSET FUND INSTL (PAAIX) FD #034	5,206,429.56	472,708.787	5,114,709.08 10.8200	25.22 %	- 91,720.48	5,818,500.30 12.31	5.93 %	303,006.33	107,257.62	
Total registered investment companies	\$18,473,777.23		④ \$20,272,987.45	99.95 %	\$1,799,210.22	\$18,261,062.08	3.72 %	\$753,290.07	\$136,093.70	
Total portfolio	\$18,483,983.42		\$20,283,193.64	100.00 %	\$1,799,210.22	\$18,271,268.27	3.72 %	\$753,737.20	\$136,132.38	



ELEC WKRS BEN TR FD - CASH MGMT
CUSTODY STATEMENT

January 1, 2024 - December 31, 2024

Detail

Portfolio

Interest bearing cash

Description	Value last statement	Current market value		% of total portfolio	Unrealized gain/loss	Total original value at PNC		Current yield	Estimated annual income	Accrued income
		Quantity	Current price per unit			Avg. original value at PNC per unit				
FEDERATED HERMES GOVT OBLIG PREM SHS #117	\$6,867,710.81	6,867,710.81	① \$6,867,710.81	76.49 %		\$6,867,710.81	\$1.00	4.39 %	\$300,870.91	\$26,030.26

Registered investment companies

Description (Symbol)	Value last statement	Current market value		% of total portfolio	Unrealized gain/loss	Total original value at PNC		Current yield	Estimated annual income	Accrued income
		Quantity	Current price per unit			Avg. original value at PNC per unit				
FEDERATED HERMES ULTRASHORT (FULIX) BOND FUND	\$2,089,390.24	227,778.650	④ \$2,111,508.09	23.52 %	\$22,117.85	\$2,065,505.68	\$9.07	5.16 %	\$108,878.19	\$9,070.03
Total portfolio	\$8,957,101.05		\$8,979,218.90	100.00 %	\$22,117.85	\$8,933,216.49		4.56 %	\$409,749.10	\$35,100.29

Electrical Workers Benefit Trust fund
Schedule of Investments Held
Year Ended December 31, 2024

	Historical Cost	Market Value
Common Collective Trusts		
BGO Daily Value Fund	3,500,000	3,146,344
NIS Commingled Funds	10,000,000	10,175,665
Total Common Collective Trusts	<u>13,500,000</u>	<u>13,322,009</u>
Interest Bearing Cash		
PNC Bank - Sweep Checking	12,123,628	12,123,628
Ferederated Hermes Government Obligations FD #117	10,675,320	10,675,320
Total, Schedule H, Part I Line 1c(1)(b)	<u>22,798,948</u>	<u>22,798,948</u>