

Form 5500 Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Annual Return/Report of Employee Benefit Plan This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6057(b) and 6058(a) of the Internal Revenue Code (the Code). ▶ Complete all entries in accordance with the instructions to the Form 5500.	OMB Nos. 1210-0110 1210-0089 2024 This Form is Open to Public Inspection
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Part I	Annual Report Identification Information
For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024	
A	This return/report is for: ☒ a multiemployer plan ☐ a multiple-employer plan (Filers checking this box must provide participating employer information in accordance with the form instructions.) ☐ a single-employer plan ☐ a DFE (specify) _____
B	This return/report is: ☐ the first return/report ☐ the final return/report ☐ an amended return/report ☐ a short plan year return/report (less than 12 months)
C	If the plan is a collectively-bargained plan, check here.▶ ☒
D	Check box if filing under: ☒ Form 5558 ☐ automatic extension ☐ the DFVC program ☐ special extension (enter description)
E	If this is a retroactively adopted plan permitted by SECURE Act section 201, check here.▶ ☐

Part II	Basic Plan Information—enter all requested information
1a	Name of plan HEATING PIPING AND REFRG. MED. FUND
1b	Three-digit plan number (PN) ▶ 501
1c	Effective date of plan 03/01/1950
2a	Plan sponsor's name (employer, if for a single-employer plan) Mailing address (include room, apt., suite no. and street, or P.O. Box) City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions) BOARD OF TRUSTEES, HEATING PIPING AND REFRIGERATION MEDICAL FUND 8700 ASHWOOD DRIVE CAPITOL HEIGHTS, MD 20743
2b	Employer Identification Number (EIN) 53-0207840
2c	Plan Sponsor's telephone number 800-618-2878
2d	Business code (see instructions) 238220

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

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

SIGN HERE	Filed with authorized/valid electronic signature.	10/14/2025	SIDNEY BONILLA
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	Filed with authorized/valid electronic signature.	10/15/2025	THOMAS BELLO
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

3a Plan administrator's name and address ☒ 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 5785
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) 4725 6a(2) 5187 6b 826 6c 6d 6013 6e 6f 6013 6g(1) 6g(2) 6h
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	7 225

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 4C 4D 4E 4F 4L 4U

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

a Pension Schedules

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

b General Schedules

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

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

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

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

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

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

Receipt Confirmation Code _____

SCHEDULE A (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Insurance Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500. ▶ Insurance companies are required to provide the information pursuant to ERISA section 103(a)(2).	OMB No. 1210-0110 2024 This Form is Open to Public Inspection
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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 HEATING PIPING AND REFRG. MED. FUND	B Three-digit plan number (PN) ▶	501
C Plan sponsor's name as shown on line 2a of Form 5500 BOARD OF TRUSTEES, HEATING PIPING AND REFRIGERATION MEDICAL FUND	D Employer Identification Number (EIN) 53-0207840	

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.
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1 Coverage Information:

(a) Name of insurance carrier AMALGAMATED LIFE					
(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
13-5501223	60216	SL 1145	5037	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	(b) Total amount of fees paid

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

Part II Investment and Annuity Contract Information

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

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

6 Contracts With Allocated Funds:

a State the basis of premium rates ▶

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

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

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 ☐ paid in cash, or ☐ credited.)		9c(2)	
d Status of policyholder reserves at end of year: (1) Amount held to provide benefits after retirement		9d(1)	
(2) Claim reserves		9d(2)	
(3) Other reserves		9d(3)	
e Dividends or retroactive rate refunds due. (Do not include amount entered in line 9c(2).)		9e	

10 Nonexperience-rated contracts:

a Total premiums or subscription charges paid to carrier	10a	577801
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 C (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	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.	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 HEATING PIPING AND REFRG. MED. FUND	B Three-digit plan number (PN) 501
C Plan sponsor's name as shown on line 2a of Form 5500 BOARD OF TRUSTEES, HEATING PIPING AND REFRIGERATION MEDICAL FUND	D Employer Identification Number (EIN) 53-0207840

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

- a

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

X

YesNo
- 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
M&T BANK
16-0538020

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation
BLACKROCK ADVISORS, LLC
23-2784752

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

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

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

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

SARFINO AND RHOADES, LLP

52-0961657

(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 50	AUDITOR	58426	Yes ☐ No ☒	Yes ☐ No ☐	0	Yes ☐ No ☐

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

O'DONOGHUE AND O'DONOGHUE

52-0120528

(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	ATTORNEY	130547	Yes ☐ No ☒	Yes ☐ No ☐	0	Yes ☐ No ☐

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

THE SEGAL COMPANY

13-1835864

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
11 50	ACTUARY	154022	Yes ☐ No ☒	Yes ☐ No ☐	0	Yes ☐ No ☐

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

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

BENEFITS ADMINISTRATION CORPORATION

52-1139156

(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 12 13 38 50	CONTRACT ADMINISTRATOR	422235	Yes ☒ No ☐	Yes ☐ No ☒	615313	Yes ☐ No ☒

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

ASB CAPITAL MANAGEMENT LLC

80-0618452

(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	INVESTMENT MANAGEMENT	140425	Yes ☐ No ☒	Yes ☐ No ☐	0	Yes ☐ No ☐

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

GALLAGHER FIDUCIARY ADVISORS

36-4291971

(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	INVESTMENT ADVISOR	22393	Yes ☐ No ☒	Yes ☐ No ☐	0	Yes ☐ No ☐

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

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

NCAS

1501 S. CLINTON STREET, 7TH FLOOR
BALTIMORE, MD 21224

(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?
13 50	ADMINISTRATOR	336930	Yes ☐ No ☒	Yes ☐ No ☐	0	Yes ☐ No ☐

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

NOVAK FRANCELIA

61-1436956

(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 50	AUDITOR	9815	Yes ☐ No ☒	Yes ☐ No ☐	0	Yes ☐ No ☐

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

CVS CAREMARK

05-0340626

(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?
13 50	ADMINISTRATOR	112095	Yes ☐ No ☒	Yes ☐ No ☐	0	Yes ☐ No ☐

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

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

SILVER SCRIPTS INSURANCE COMPANY

20-2833904

(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?
13 50	ADMINISTRATOR	151150	Yes ☐ No ☒	Yes ☐ No ☐	0	Yes ☐ No ☐

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

WESTERN ASSET MANAGEMENT COMPANY

385 EAST COLORADO BLVD.
PASADENA, CA 91101

(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	INVESTMENT MANGEMENT	52885	Yes ☐ No ☒	Yes ☐ No ☐	0	Yes ☐ No ☐

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

DELTA DENTAL OF PENNSYLVANIA

23-1667011

(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?
13 50	ADMINISTRATOR	215550	Yes ☐ No ☒	Yes ☐ No ☐	0	Yes ☐ No ☐

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

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

SEGAL SELECT INSURANCE SERVICES INC

46-0619194

(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?
53 50	INSURANCE AGENT	6680	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☐ No ☒

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

AMALGAMATED BANK

275 7TH AVENUE
NEW YORK, NY 10001

13-4920330

(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 51 52	INVESTMENT MANAGEMENT	5000	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☒ No ☐

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

MARATHON HEALTH, LLC

26-0103977

(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	SERVICE PROVIDER	2149520	Yes ☐ No ☒	Yes ☐ No ☐	0	Yes ☐ No ☐

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

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

WPAS, INC.

91-1363171

(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?
13 50	SERVICE PROVIDER	1098607	Yes ☒ No ☐	Yes ☐ No ☒	907125	Yes ☐ No ☒

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

CHANGE HEALTHCARE

20-5716594

(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	SERVICE PROVIDER	22463	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

NATIONAL VISION ADMINISTRATORS

74-3033381

(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?
13 50	SERVICE PROVIDER	372476	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

Part I Service Provider Information (continued)

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
ZELIS CLAIMS INTEGRITY 84-2694744	13 50	SERVICE PROVIDER FAILED TO RESPOND TO SCHEDULE C INFORMATION REQUEST LETTER INQUIRING ABOUT ANY INDIRECT COMPENSATION RECEIVED DURING THE PLAN YEAR.
AMERICAN HEALTH HOLDING, INC 31-1368946	13 50	SERVICE PROVIDER FAILED TO RESPOND TO SCHEDULE C INFORMATION REQUEST LETTER INQUIRING ABOUT ANY INDIRECT COMPENSATION RECEIVED DURING THE PLAN YEAR.

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) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration		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.		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 HEATING PIPING AND REFRG. MED. FUND				B Three-digit plan number (PN) ▶ 501	
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 BOARD OF TRUSTEES, HEATING PIPING AND REFRIGERATION MEDICAL FUND				D Employer Identification Number (EIN) 53-0207840	
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: LONGVIEW BROAD MARKET 3000 IDX FUND					
b Name of sponsor of entity listed in (a): AMALGAMATED BANK					
c EIN-PN 46-2044954-020		d Entity code C		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 30216770	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code			

a Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)

Part II Information on Participating Plans (to be completed by DFEs, other than DCGs)

(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)

a Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN

SCHEDULE H (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Financial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110
		2024
		This Form is Open to Public Inspection
For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024		
A Name of plan HEATING PIPING AND REFRG. MED. FUND		B Three-digit plan number (PN) ▶ 501
C Plan sponsor's name as shown on line 2a of Form 5500 BOARD OF TRUSTEES, HEATING PIPING AND REFRIGERATION MEDICAL FUND		D Employer Identification Number (EIN) 53-0207840

Part I	Asset and Liability Statement		
1 Current value of plan assets and liabilities at the beginning and end of the plan year. Combine the value of plan assets held in more than one trust. Report the value of the plan's interest in a commingled fund containing the assets of more than one plan on a line-by-line basis unless the value is reportable on lines 1c(9) through 1c(14). Do not enter the value of that portion of an insurance contract which guarantees, during this plan year, to pay a specific dollar benefit at a future date. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 1b(1), 1b(2), 1c(8), 1g, 1h, and 1i. CCTs, PSAs, and 103-12 IEs also do not complete lines 1d and 1e. See instructions.			
Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a	10942044	6690062
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	15251211	10739426
(2) Participant contributions.....	1b(2)		
(3) Other	1b(3)	488950	583431
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	619398	55529358
(2) U.S. Government securities	1c(2)	9967698	13523227
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)	30905859	32912251
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)		
(5) Partnership/joint venture interests	1c(5)	8704143	8989150
(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)	24417594	30216770
(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)	11442938	12059445
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)		
(15) Other.....	1c(15)	12857273	9811461

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	9656	9753
f Total assets (add all amounts in lines 1a through 1e).....	1f	125606764	181064334
Liabilities			
g Benefit claims payable	1g	14257600	18340900
h Operating payables	1h	645707	2204463
i Acquisition indebtedness.....	1i		
j Other liabilities.....	1j		26306971
k Total liabilities (add all amounts in lines 1g through 1j)	1k	14903307	46852334
Net Assets			
l Net assets (subtract line 1k from line 1f).....	1l	110703457	134212000

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)	88504675	
(B) Participants	2a(1)(B)	973521	
(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)		89478196
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit).....	2b(1)(A)	590438	
(B) U.S. Government securities	2b(1)(B)	437424	
(C) Corporate debt instruments	2b(1)(C)	1277583	
(D) Loans (other than to participants)	2b(1)(D)		
(E) Participant loans	2b(1)(E)		
(F) Other	2b(1)(F)	299187	
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		2604632
(2) Dividends:			
(A) Preferred stock.....	2b(2)(A)		
(B) Common stock	2b(2)(B)		
(C) Registered investment company shares (e.g. mutual funds).....	2b(2)(C)	566264	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		566264
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets:			
(A) Aggregate proceeds	2b(4)(A)	77092529	
(B) Aggregate carrying amount (see instructions).....	2b(4)(B)	77151431	
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)		-58902
(5) Unrealized appreciation (depreciation) of assets:			
(A) Real estate	2b(5)(A)		
(B) Other	2b(5)(B)	6119428	
(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)		
(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)		
c Other income	2c		4773
d Total income. Add all income amounts in column (b) and enter total	2d		98714391

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	38907608	
(2) To insurance carriers for the provision of benefits	2e(2)	27134816	
(3) Other	2e(3)		
(4) Total benefit payments. Add lines 2e(1) through (3)	2e(4)		66042424
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions)	2g		
h Interest expense	2h		
i Administrative expenses:			
(1) Salaries and allowances	2i(1)		
(2) Contract administrator fees	2i(2)	5904189	
(3) Recordkeeping fees	2i(3)		
(4) IQPA audit fees	2i(4)	68241	
(5) Investment advisory and investment management fees	2i(5)	231787	
(6) Bank or trust company trustee/custodial fees	2i(6)	86341	
(7) Actuarial fees	2i(7)	154022	
(8) Legal fees	2i(8)	130547	
(9) Valuation/appraisal fees	2i(9)		
(10) Other trustee fees and expenses	2i(10)		
(11) Other expenses	2i(11)	2588297	
(12) Total administrative expenses. Add lines 2i(1) through (11)	2i(12)		9163424
j Total expenses. Add all expense amounts in column (b) and enter total	2j		75205848

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		23508543
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: **SARFINO AND RHOADES, LLP**

(2) EIN: **52-0961657**

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.)		☒	
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.)		☒	
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.)		☒	
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.)		☒	
e Was this plan covered by a fidelity bond?	☒		3000000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		☒	
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?		☒	
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?		☒	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	☒		
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.)	☒		
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?		☒	
l Has the plan failed to provide any benefit when due under the plan?		☒	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)			
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 _____.

HEATING, PIPING AND REFRIGERATION
MEDICAL FUND
DECEMBER 31, 2024 AND 2023

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Wilmington Trust

INDEPENDENT AUDITORS' REPORT

To the Board of Trustees
Heating, Piping and Refrigeration
Medical Fund
Capitol Heights, Maryland

Opinion

We have audited the accompanying financial statements of Heating, Piping and Refrigeration Medical Fund, 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 financial statements referred to above present fairly, in all material respects, the net assets available for benefits and benefit obligations of Heating, Piping and Refrigeration Medical Fund as of December 31, 2024 and 2023, and the changes in its net assets available for benefits and changes in 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. 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 Heating, Piping and Refrigeration Medical Fund 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 these 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 Heating, Piping and Refrigeration Medical Fund's ability to continue as a going concern for one year after the date the financial statements are available to be issued.

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

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 generally accepted auditing standards 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 generally accepted auditing standards, 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 Heating, Piping and Refrigeration Medical Fund's internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about Heating, Piping and Refrigeration Medical Fund's ability to continue as a going concern for a reasonable period of time.

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

Supplemental Schedules Required by ERISA

Our audits were conducted for the purpose of forming an opinion on the financial statements as a whole. The supplemental schedules of assets held as of December 31, 2024, and reportable transactions for the year ended December 31, 2024 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 generally accepted auditing standards.

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.

Sarunio and Rhodes, LLP

October 15, 2025

HEATING, PIPING AND REFRIGERATION
MEDICAL FUND
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS

	DECEMBER 31,	
	2024	2023
ASSETS		
Investments, at fair value		
Corporate obligations	\$ 32,912,251	\$ 30,905,859
Collective trust fund	30,216,770	24,417,594
U.S. government and agency obligations	13,523,227	9,967,698
Mutual fund	12,059,445	11,442,938
Municipal obligations	9,811,461	12,857,273
Limited partnership and alternative investment	8,989,150	8,704,143
Short-term investment	3,830	619,398
Total investments	<u>\$ 107,516,134</u>	<u>\$ 98,914,903</u>
Receivables:		
Employer contributions	\$ 10,739,426	\$ 15,251,211
Interest	527,905	488,950
Other	55,526	-
Total receivables	<u>\$ 11,322,857</u>	<u>\$ 15,740,161</u>
Other Assets:		
Cash	\$ 62,215,590	\$ 10,942,044
Prepaid expenses	9,753	9,656
Property and equipment, net	-	-
Total other assets	<u>\$ 62,225,343</u>	<u>\$ 10,951,700</u>
TOTAL ASSETS	<u>\$ 181,064,334</u>	<u>\$ 125,606,764</u>
LIABILITIES		
Due to related funds	\$ 26,306,971	\$ -
Accounts payable	2,001,194	443,031
Payable under reciprocity agreements	203,269	202,676
TOTAL LIABILITIES	<u>\$ 28,511,434</u>	<u>\$ 645,707</u>
NET ASSETS AVAILABLE FOR BENEFITS	<u>\$ 152,552,900</u>	<u>\$ 124,961,057</u>

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

HEATING, PIPING AND REFRIGERATION
MEDICAL FUND
STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS

	FOR THE YEARS ENDED DECEMBER 31,	
	2024	2023
ADDITIONS:		
Contributions:		
Employer contributions	\$ 88,504,675	\$ 76,102,304
Participant contributions	973,521	1,830,492
Total contributions	<u>\$ 89,478,196</u>	<u>\$ 77,932,796</u>
Investment income:		
Interest and dividends	\$ 3,170,897	\$ 2,134,506
Net appreciation in fair value of investments	6,060,526	7,577,795
Totals	<u>\$ 9,231,423</u>	<u>\$ 9,712,301</u>
Less, investment expenses	<u>(231,787)</u>	<u>(218,723)</u>
Net investment income	\$ 8,999,636	\$ 9,493,578
Other income	4,773	-
TOTAL ADDITIONS	<u>\$ 98,482,605</u>	<u>\$ 87,426,374</u>
DEDUCTIONS:		
Claims paid	\$ 61,380,097	\$ 68,699,460
Administrative expenses	2,277,565	1,701,038
Administrative service, provider network and related fees	7,233,100	5,809,442
TOTAL DEDUCTIONS	<u>\$ 70,890,762</u>	<u>\$ 76,209,940</u>
NET INCREASE	\$ 27,591,843	\$ 11,216,434
NET ASSETS, AVAILABLE FOR BENEFITS:		
BEGINNING OF YEAR	<u>124,961,057</u>	<u>113,744,623</u>
END OF YEAR	<u>\$ 152,552,900</u>	<u>\$ 124,961,057</u>

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

**HEATING, PIPING AND REFRIGERATION
MEDICAL FUND
STATEMENTS OF BENEFIT OBLIGATIONS**

	DECEMBER 31,	
	<u>2024</u>	<u>2023</u>
AMOUNTS CURRENTLY PAYABLE:		
Health claims payable	\$ 845,067	\$ 962,927
Claims incurred but not reported	<u>17,495,833</u>	<u>13,294,673</u>
TOTAL AMOUNTS CURRENTLY PAYABLE	\$ 18,340,900	\$ 14,257,600
OTHER OBLIGATIONS FOR CURRENT BENEFIT COVERAGE, AT PRESENT VALUE OF ESTIMATED AMOUNTS:		
Accumulated eligibility credits	<u>39,267,800</u>	<u>34,968,000</u>
TOTAL OBLIGATIONS OTHER THAN POSTRETIREMENT BENEFIT OBLIGATIONS	\$ 57,608,700	\$ 49,225,600
POSTRETIREMENT BENEFIT OBLIGATIONS, NET OF AMOUNTS CURRENTLY PAYABLE:		
Current retirees, beneficiaries, and dependents	\$ 209,817,180	\$ 196,341,484
Other participants fully eligible for benefits	180,011,586	226,791,468
Other participants not yet fully eligible for benefits	<u>236,194,801</u>	<u>307,377,870</u>
TOTAL POSTRETIREMENT BENEFIT OBLIGATIONS, NET OF AMOUNTS CURRENTLY PAYABLE	\$ 626,023,567	\$ 730,510,822
TOTAL BENEFIT OBLIGATIONS	\$ 683,632,267	\$ 779,736,422

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

**HEATING, PIPING AND REFRIGERATION
MEDICAL FUND
STATEMENTS OF CHANGES IN BENEFIT OBLIGATIONS**

	FOR THE YEARS ENDED DECEMBER 31,	
	2024	2023
AMOUNTS CURRENTLY PAYABLE:		
Balance at beginning of year	\$ 14,257,600	\$ 11,800,660
Claims reported and approved for payment	65,463,397	71,156,400
Claims paid	<u>(61,380,097)</u>	<u>(68,699,460)</u>
BALANCE AT END OF YEAR	<u>\$ 18,340,900</u>	<u>\$ 14,257,600</u>
OTHER OBLIGATIONS FOR CURRENT BENEFIT COVERAGE, AT PRESENT VALUE OF ESTIMATED AMOUNTS:		
Balance at beginning of year	\$ 34,968,000	\$ 33,890,000
Net changes during year:		
Future benefits based on participants' accumulated eligibility	<u>4,299,800</u>	<u>1,078,000</u>
BALANCE AT END OF YEAR	<u>\$ 39,267,800</u>	<u>\$ 34,968,000</u>
TOTAL OBLIGATIONS OTHER THAN POSTRETIREMENT BENEFIT OBLIGATIONS	<u>\$ 57,608,700</u>	<u>\$ 49,225,600</u>
POSTRETIREMENT BENEFIT OBLIGATIONS, NET OF AMOUNTS CURRENTLY PAYABLE:		
Balance at beginning of year	\$ 730,510,822	\$ 422,890,239
Change during the year attributable to:		
Benefits earned and other changes	58,599,520	28,977,576
Actuarial experience loss	528,125	-
Changes in actuarial assumptions	(163,561,505)	278,545,326
Plan amendments	<u>(53,395)</u>	<u>97,681</u>
BALANCE AT END OF YEAR	<u>\$ 626,023,567</u>	<u>\$ 730,510,822</u>
TOTAL BENEFIT OBLIGATIONS AT END OF YEAR	<u><u>\$ 683,632,267</u></u>	<u><u>\$ 779,736,422</u></u>

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

**HEATING, PIPING AND REFRIGERATION
MEDICAL FUND
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2024 AND 2023**

Note 1. Description of Plan

The following description of the Heating, Piping and Refrigeration Medical Fund (the “Plan”) is provided for general information purposes only. Participants should refer to the Plan agreement for a description of the Plan’s provisions.

General - The Plan is a multiemployer defined benefit health and welfare plan covering eligible steamfitters pursuant to collective bargaining agreements (CBA), paid employees of the Steamfitters Local Union No. 602 of the United Association of Journeymen and Apprentices of the Plumbing and Pipe Fitting Industry of the United States and Canada, and paid employees of the Heating, Piping and Refrigeration Training Fund. The Plan was established pursuant to an Agreement and Declaration of Trust, effective March 1, 1950, between the Steamfitters Local Union No. 602 of the United Association of Journeymen and Apprentices of the Plumbing and Pipe Fitting Industry of the United States and Canada, on one part, and the Mechanical Contractors Association of Metropolitan Washington, on the other part. The Plan is operated and administered by the Board of Trustees. The Plan provides benefits for eligible participants and their dependents and is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA), as amended. Plan assets are held in a voluntary employees’ beneficiary association (VEBA) trust.

Benefits - The Plan provides coverage for hospitalization, major medical, surgical, dental, medical prescription, mental health, substance abuse and vision benefits to eligible employees, retirees, and their dependents, life insurance benefits to eligible employees and retirees, and weekly income benefits to eligible employees.

The Plan also provides health benefits to participants during periods of unemployment, provided they have accumulated credit amounts (expressed in hours) in excess of the hours required for current coverage, and also provides continuation of certain benefits upon termination of employment through the Consolidated Omnibus Budget Reconciliation Act (COBRA).

Self-insured Benefits - All of the Plan’s benefits are self-insured and processed by the Plan’s third-party claims processor under an administrative services only (ASO) arrangement. The ultimate responsibility of payments to participants or providers remains with the Plan.

The Plan utilizes a pharmacy benefit manager (PBM) which periodically makes refunds to the Plan based on the Plan’s actual utilization pattern of certain drugs.

**HEATING, PIPING AND REFRIGERATION
MEDICAL FUND
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2024 AND 2023**

Note 1. Description of Plan - (Continued)

Eligibility - The Plan was amended August 1, 2022 to allow participants to become initially eligible for benefits after working 120 hours of covered employment. Once the eligibility requirements are met, certain eligible dependents are also covered under the Plan. Generally, a participant will remain eligible by working 300 hours in a Work Quarter as defined in the Plan agreement.

The Plan also provides benefits for eligible participants during periods of unemployment, upon termination of employment through COBRA, and for eligible retirees. Participants should refer to the Plan agreement for a complete description of the eligibility requirements.

Stop Loss Coverage - The Plan has entered into a stop-loss insurance arrangement in an effort to limit its exposure for self-insured benefits (individual participant claims over a specific dollar amount).

Contributions - Employer contributions include participating employer and reciprocal contributions. Under the terms of the CBA, the contribution rate is \$8.76 per hour through July 31, 2024, and \$9.05 per hour effective August 1, 2024. Participants may contribute specified amounts, determined periodically by the Plan's actuary, to extend coverage to eligible dependents. The costs of the postretirement benefit plan are shared by the Plan's participating employers and retirees.

Retiree monthly contribution rates were as follows as of December 31, 2024 and 2023:

<u>Retirees Age</u>	<u>2024</u>	<u>2023</u>
55-59	\$ 469.00	\$ 924.00
60-61:		
Retired before January 1, 2014	\$ 141.00	\$ 277.00
Retired on or after January 1, 2014	\$ 238.00	\$ 468.00
62 until eligible for Medicare:		
Retired before January 1, 2014	\$ 93.00	\$ 183.00
Retired on or after January 1, 2014	\$ 238.00	\$ 468.00
Eligible for Medicare:		
Retired before June 1, 1994	\$ 11.00	\$ 21.00
Retired on or after June 1, 1994		
through May 31, 2004	\$ 21.00	\$ 41.00
Retired on or after June 1, 2004	\$ 47.00	\$ 91.00

HEATING, PIPING AND REFRIGERATION
MEDICAL FUND
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2024 AND 2023

Note 2. Significant Accounting Policies

Basis of Accounting - The accompanying financial statements are prepared on the accrual basis of accounting.

Use of Estimates - The preparation of financial statements in accordance with accounting principles generally accepted in the United States of America (GAAP) requires management to make estimates and assumptions that affect the reported amount of assets, liabilities, benefit obligations and changes therein, and disclosure of contingent assets and liabilities. Actual results could differ from those estimates.

Employer Contributions Receivable - This amount represents employer contributions related to work performed in the Plan year and received after the close of the Plan year. Additional amounts that may be due from delinquent contributing employers are not included. The amount of any delinquencies is estimated not to have a material effect on the financial statements.

Investment Valuation and Income Recognition - Investments are reported at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. The Plan's Board of Trustees determines the Plan's valuation policies and procedures. See Note 6 for discussion of fair value measurements.

Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded on an accrual basis. Dividends are recorded on the ex-dividend date. Net appreciation (depreciation) includes the gains and losses on investments bought and sold as well as held during the year.

Property and Equipment - Property and equipment is stated at cost, net of accumulated depreciation and amortization. The Plan capitalizes property and equipment exceeding \$1,000 and provides for depreciation and amortization using the straight-line method. Startup costs for the medical clinic, including computers and related equipment, office furniture and leasehold improvements, are amortized over 3 years, which is the term of the original contract.

Payment of Benefits - Health claims payments are recorded when paid by the Plan's third-party claims processor.

Stop Loss - Premiums for stop loss insurance are included in the administrator service, provider network and related fees section in the accompanying statements of changes in net assets available for benefits. Stop loss refunds totaling \$2,161,734 have been netted with claims paid in the accompanying statement of changes in net assets for the year ended December 31, 2024.

HEATING, PIPING AND REFRIGERATION
MEDICAL FUND
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2024 AND 2023

Note 2. Significant Accounting Policies - (Continued)

Refunds and rebates - Refunds from the Plan's PBM are recorded when received and netted with benefits paid on the statements of changes in net assets available for benefits. The Plan received rebates of \$12,553,956 and \$10,540,042 during the years ended December 31, 2024 and 2023, respectively.

Expenses - The Plan pays administrative expenses that consist primarily of administrative fees paid to the third-party administrator and professional fees. Expenses, including certain investment related expenses incurred in connection with the general administration of the Plan, are recorded as deductions in the accompanying statements of changes in net assets available for benefits. These transactions are considered exempt party in interest transactions under ERISA.

Medicare Subsidy - The Medicare Prescription Drug, Improvement and Modernization Act of 2003 (MMA) added a prescription drug benefit under Medicare Part D and provides a federal subsidy to sponsors of retiree health care benefit plans that provide a prescription drug benefit to Medicare-eligible retirees. In order for a plan to receive a subsidy, the benefit it provides must be at least actuarially equivalent to the Medicare Part D Standard Benefit. The Plan's prescription drug benefit is at least actuarially equivalent, so the Plan is eligible to receive the subsidy. However, the Plan has implemented an "Employee Group Waiver Plan" (EGWP) for prescription drugs for Medicare-eligible retirees and no longer directly receives the Medicare Part D subsidy.

Note 3. Postretirement Benefits - A postretirement benefit obligation has been recognized for retiree medical benefits for eligible participants and their dependents upon retirement. These benefit obligations represent the actuarial present value of the cost of those estimated future benefits that are attributed by the terms of the Plan to participant 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 retirees of the Plan. The obligations represent the amounts that are expected to be funded by contributions from participating employers and from existing assets of the Plan. Postretirement benefits include future benefits expected to be paid to or for (1) currently retired or terminated participants and their beneficiaries and dependents and (2) active participants and their beneficiaries and dependents after retirement from service with participating employers.

HEATING, PIPING AND REFRIGERATION
MEDICAL FUND
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2024 AND 2023

Note 3. Postretirement Benefits - (Continued)

The actuarial present value of the expected postretirement benefit obligation is determined by an independent actuary and is the amount that results from applying actuarial assumptions to historical claims-cost data to estimate future annual incurred claims 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, disability, withdrawal, or retirement) between the valuation date and the expected date of payment.

For measurement purposes, a 6.75% health care cost-trend rate (annual rate of increase in the per capita cost of covered medical claims) was assumed for 2025, decreasing to 4.50% for 2034 and thereafter, and a 10.00% annual rate of increase in the per capita cost of covered prescription drug claims was assumed for 2025, decreasing to 4.50% for 2047 and thereafter. As of December 31, 2023, the health care cost-trend rate assumed for 2024 was as follows: a 7.00% annual rate of increase in the per capita cost of covered medical claims was assumed for 2024, decreasing to 4.50% for 2034 and thereafter, and 10.00% annual rate of increase in the per capita cost of covered prescription drug claims was assumed for 2024, decreasing to 4.50% for 2046 and thereafter.

The weighted-average health care cost-trend rate assumption has a significant effect on the amounts reported as postretirement benefit obligations. If the assumed rates increased by one percentage point in each year, it would increase the obligation for postretirement benefit obligations as of December 31, 2024 and 2023 by \$118,462,086 and \$154,372,207, respectively.

The other significant actuarial assumptions used in determining the present value of postretirement benefit obligations as of December 31, 2024 and 2023 were (a) life expectancy of participants (The postretirement mortality rates: 110% of PRI-2012 Blue Collar Mortality Table projected generationally with 75% of scale MP-2021 for both 2024 and 2023, PRI-2012 Disabled Retiree Amount-weighted Table for both 2024 and 2023), (b) retirement age assumptions (retirement ages were assumed to range from 55 to 70 with varying assumed frequencies), (c) discount rate (5.75% and 5.10% as of December 31, 2024 and 2023, respectively).

In 2024, the new Health Care Cost Containment Corporation contract terms for prescription drug benefits with CVS effective January 1, 2025 are included as a plan change.

HEATING, PIPING AND REFRIGERATION
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NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2024 AND 2023

Note 3. Postretirement Benefits - (Continued)

In 2023, the new Health Care Cost Containment Corporation contract terms for prescription drug benefits with CVS effective January 1, 2024 are included as a plan change. These cost savings were partially offset by the increase in obligations due to the other changes.

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

The Plan's excess of benefit obligations over net assets as of December 31, 2024 and 2023, relates primarily to the postretirement benefit obligation, the funding of which is not covered by the contribution rate provided by the current bargaining agreement. It is expected that the deficiency will be funded through future increases in collectively bargained contribution rates.

Note 4. Other Benefit Obligations - Obligations for health claims incurred but not reported and for accumulated eligibility credits at December 31, 2024 and 2023 are presented at estimated amounts as determined by an independent actuary. Claims incurred but not reported represent the estimate of claims paid in 2025 and 2024 that relate to claims incurred prior to December 31, 2024 and 2023, respectively. The amounts are paid by the Plan only if claims are submitted and approved for payment.

Accumulated eligibility credits represent an obligation of the Plan arising from prior participant service for which participating employer contributions have been received. This benefit obligation is generally determined by applying the average cost of benefits per eligible participants to accumulated eligibility credits and by taking into consideration other appropriate assumptions such as medical cost inflation.

Note 5. Related Parties and Parties in Interest Transactions - As described in note 2, the Plan paid certain expenses related to plan operations and investment activity to various service providers. These transactions are exempt party in interest transactions under ERISA.

**HEATING, PIPING AND REFRIGERATION
MEDICAL FUND
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2024 AND 2023**

Note 5. Related Parties and Parties in Interest Transactions - (Continued)

The Plan was a party to a shared banking relationship with related entities in which the Plan maintains a master depository account that is held under its name and Employer Identification Number (EIN). Employer contributions are deposited into the master depository account when received and transferred to the related entities by the Plan's Third-Party Administrator. There is a collective banking resolution in place which outlines this shared banking arrangement and includes the Trustees of the Steamfitters Local 602 Retirement Savings Plan and Heating Piping and Refrigeration Pension Fund as authorized signors on the depository account and gives them unrestricted access to their portion of these funds, with no legal or contractual restrictions on their use. As of December 31, 2024, the balance in the depository account was \$55,525,528 of which \$26,272,620 was due to the related funds as reported on the statements of net assets available for benefits.

Note 6. Fair Value Measurements - The framework for measuring fair value provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (level 1 measurements) and the lowest priority to unobservable inputs (level 3 measurements). The three levels of the fair value hierarchy are described as follows:

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

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

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

HEATING, PIPING AND REFRIGERATION
MEDICAL FUND
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2024 AND 2023

Note 6. Fair Value Measurement - (Continued)

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

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

Corporate and municipal obligations - Corporate and municipal bonds are valued based on yields currently available on comparable securities of issuers with similar credit ratings. When quoted prices are not available for identical or similar bonds, the bond is valued under a discounted cash flows approach that maximizes observable inputs, such as current yields of similar instruments, but includes adjustments for certain risks that may not be observable, such as credit and liquidity risks.

U.S. government and agency obligations - Valued at the closing price reported in the active market in which the individual security is traded.

Short-term investments - Short-term cash investments are valued at cost, which approximates fair value in the active market.

Mutual fund - Valued at the net asset values on the last business day of the plan year.

Collective trust fund - Valued at the net asset values on the last business day of the plan year.

The following tables set forth by level, within the fair value hierarchy, the Plan's investments at fair value:

HEATING, PIPING AND REFRIGERATION
MEDICAL FUND
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2024 AND 2023

Note 6. Fair Value Measurement - (Continued)

The following tables set forth by level, within the fair value hierarchy, the Plan's investments at fair value:

Investments at Fair Value as of December 31, 2024				
	Level 1	Level 2	Level 3	Total
Corporate obligations	\$ -	\$ 32,912,251	\$ -	\$ 32,912,251
Collective trust fund	30,216,770	-	-	30,216,770
Municipal obligations	-	9,811,461	-	9,811,461
Mutual Fund	12,059,445	-	-	12,059,445
U.S. government and agency obligations	13,523,227	-	-	13,523,227
Short-term investment	-	3,830	-	3,830
Total in the fair value hierarchy	<u>\$ 55,799,442</u>	<u>\$ 42,727,542</u>	<u>\$ -</u>	<u>\$ 98,526,984</u>
Investment measured at NAV				8,989,150
Total investments				<u>\$ 107,516,134</u>

Investments at Fair Value as of December 31, 2023				
	Level 1	Level 2	Level 3	Total
Corporate obligations	\$ -	\$ 30,905,859	\$ -	\$ 30,905,859
Collective trust fund	24,417,594	-	-	24,417,594
Municipal obligations	-	12,857,273	-	12,857,273
Mutual Fund	11,442,938	-	-	11,442,938
U.S. government and agency obligations	9,967,698	-	-	9,967,698
Short-term investment	-	619,398	-	619,398
Total in the fair value hierarchy	<u>\$ 45,828,230</u>	<u>\$ 44,382,529</u>	<u>\$ -</u>	<u>\$ 90,210,760</u>
Investment measured at NAV				8,704,143
Total investments				<u>\$ 98,914,903</u>

Transfers Between Levels

The availability of observable market data is monitored to assess the appropriate classification of financial instruments within the fair value hierarchy. Changes in economic conditions or model-based valuation techniques may require the transfer of financial instruments from one fair value level to another. In such instances, the transfer is reported at the beginning of the reporting period.

HEATING, PIPING AND REFRIGERATION
MEDICAL FUND
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2024 AND 2023

Note 6. Fair Value Measurement - (Continued)

Investment in a Certain Entity That Calculates Net Asset Value per Share

The following tables provide additional information for the Plan's investment in a certain entity that calculates net asset value per share:

	Fair Value Dec. 31, 2024	Unfunded Commitments	Redemption Frequency	Redemption Notice Period
Total Return Unconstrained Bond Fund (a)	\$ 8,989,150	\$ -	Daily	N/A
Total	<u>\$ 8,989,150</u>	<u>\$ -</u>		

	Fair Value Dec. 31, 2023	Unfunded Commitments	Redemption Frequency	Redemption Notice Period
Total Return Unconstrained Bond Fund (a)	\$ 8,704,143	\$ -	Daily	N/A
Total	<u>\$ 8,704,143</u>	<u>\$ -</u>		

- a. This class includes investments whose underlying assets are primarily invested in notes and debentures and investments in affiliated companies. The objective of the investment is to maximize long-term return, consistent with prudent investment management. The fair value of the investment has been estimated using the net asset value per share of the investment.

Note 7. Property and Equipment - Property and Equipment consists of startup costs related to the medical clinic. The principal categories of property and equipment, as shown in the statements of net assets available for benefits, are as follows:

	2024	2023
Leasehold improvements	\$ 505,127	\$ 505,127
Office furniture	35,046	35,046
Computers and related	<u>24,528</u>	<u>24,528</u>
Subtotals	\$ 564,701	\$ 564,701
Less, Accumulated depreciation and amortization	<u>(564,701)</u>	<u>(564,701)</u>
Total property and equipment	<u>\$ -</u>	<u>\$ -</u>

There was no depreciation and amortization expense for the years ended December 31, 2024 and 2023.

HEATING, PIPING AND REFRIGERATION
MEDICAL FUND
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2024 AND 2023

Note 8. **Commitment** - In September 2021, the Plan entered into a management and professional services agreement with Marathon Health, LLC (“Marathon”) which went through September 2024. The agreement automatically renews for one year terms and is still in effect. The Plan is obligated to pay Marathon a monthly fee of \$152,850 to run the health clinic. Marathon will invoice the Plan separately for other services requested including lab services, pharmaceuticals, and customization services. The contract calls for annual fee increases of three percent (3%).

Note 9. **Tax Status** - The VEBA trust funding certain benefits of the Plan received an exemption letter from the IRS dated September 10, 1951, stating that the trust is tax-exempt under the provisions of Section 501(c)(9) of the Internal Revenue Code (IRC).

However, as a result of the Plan’s funding policy, from time to time the trust may be subject to income taxes. No federal or state income taxes have been recorded in 2024 or 2023 for unrelated business taxable income.

In addition, the Plan and the trust are required to operate in conformity with the IRC to maintain the tax-exempt status of the trust. The Plan administrator believes that the Plan is being operated in compliance with the applicable requirements of the IRC and, therefore, believes that the related trust is tax-exempt.

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

Note 10. **Reciprocity Agreement** - The Plan participates in reciprocity agreements whereby the Plan is required to remit funds received and is entitled to receive funds from participating employers on behalf of temporary employees to and from the employees’ participating local unions. Reciprocal payments received are included in employer contributions in the statements of changes in net assets available for benefits. Payments made to other plans for reciprocal contributions collected on behalf of those plans are not included in the statements of changes in net assets available for benefits as they do not represent an expense of the Plan. For the years ended December 31, 2024 and 2023, reciprocal payments made to other plans were \$955,890 and \$902,941, respectively.

HEATING, PIPING AND REFRIGERATION
MEDICAL FUND
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2024 AND 2023

Note 11. **Priorities Upon Termination of the Plan** - Although it has not expressed an interest to do so, the Plan's Board of Trustees, as sponsor, has the right, subject to the provisions of any pertinent collective bargaining agreement, to terminate or amend the Plan subject to the provisions of ERISA. In the event of termination of the Plan, remaining assets will be applied in a uniform and nondiscriminatory manner toward the provision of benefits for or on account of the participants. No assets of the Plan may revert to the employers or be used for purposes other than for the exclusive benefit of the Plan's participants.

Note 12. **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 as of December 31:

	<u>2024</u>	<u>2023</u>
Net assets available for benefits per the financial statements	\$ 152,552,900	\$ 124,961,057
Benefit obligations currently payable	<u>(18,340,900)</u>	<u>(14,257,600)</u>
Net assets available for benefits per the Form 5500	<u>\$ 134,212,000</u>	<u>\$ 110,703,457</u>

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

	<u>2024</u>	<u>2023</u>
Claims paid as reported within the financial statements	\$ 61,380,097	\$ 68,699,460
Add: Amounts payable at end of year	18,340,900	14,257,600
Less: Amounts payable at beginning of year	<u>(14,257,600)</u>	<u>(11,800,660)</u>
Benefits paid to participants as reported within the Form 5500	<u>\$ 65,463,397</u>	<u>\$ 71,156,400</u>

Claims that have been processed and approved for payment at year-end, but not paid and claims incurred but not reported are not considered liabilities under GAAP and, therefore, are not presented as liabilities or claims paid in the accompanying financial statements, but are recorded on the Form 5500 as a liability.

HEATING, PIPING AND REFRIGERATION
MEDICAL FUND
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2024 AND 2023

Note 13. **Concentration of Credit Risk** - Financial instruments, which potentially subject the Plan to concentrations of credit risk, include cash deposits with financial institutions. Cash balances with commercial banks are covered by the Federal Deposit Insurance Corporation (FDIC) up to specified limits. At December 31, 2024, the Plan's uninsured cash balances totaled \$63,671,284. The Plan believes it is not exposed to a significant risk on its cash accounts.

Note 14. **Risks and Uncertainties** - The Plan invests in various investment securities. Investment securities are exposed to various risks such as interest rate, market and credit risks. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in the values of investment securities will occur in the near term and that such changes could materially affect the amounts reported in the statements of net assets available for benefits.

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 15. **Reclassifications** - Certain amounts reported in the prior year financial statements have been reclassified to conform to the current year presentation.

Note 16. **Subsequent Events** - In preparation of these financial statements, the Plan has evaluated subsequent events through October 15, 2025, which is the date the financial statements were available to be issued.

HEATING, PIPING AND REFRIGERATION

MEDICAL FUND

SCHEDULE OF ASSETS HELD

DECEMBER 31, 2024

Form 5500, Schedule H, Line 41

EIN: 53-0207840

Plan No. 501

(a)	(b) IDENTITY OF ISSUER/BORROWER	(c) DESCRIPTION OF INVESTMENT			(d) COST	(e) CURRENT VALUE
		PAR	RATE	DUE DATE		
U.S. GOVERNMENT AND AGENCY OBLIGATIONS:						
	FHLMC PL	7	7.000%	08/01/27	\$ 7	\$ 7
	U.S Treasury Notes	550,000	3.875%	10/15/27	546,240	544,220
	U.S Treasury Note	430,000	4.125%	11/15/27	429,085	428,104
	U.S Treasury Notes	1,260,000	4.125%	10/31/29	1,251,330	1,245,485
	U.S Treasury Bonds	760,000	4.125%	11/30/29	756,722	751,366
	U.S Treasury Notes	4,705,000	3.625%	09/30/31	4,699,342	4,470,973
	U.S Treasury Notes	5,266,000	4.125%	10/31/31	5,207,415	5,154,413
	U.S Treasury Notes	70,000	4.125%	11/30/31	69,609	68,506
	U.S Treasury Notes	595,000	4.500%	12/01/31	596,813	595,494
	FHLMC PL	382	7.375%	07/01/32	387	391
	FHLMC PL	138	7.000%	07/01/33	142	138
	GNMA PL	957	5.500%	03/15/34	959	954
	FHLMC GD PL	372	4.500%	08/01/34	371	366
	U.S Treasury Notes	273,000	3.875%	08/15/34	269,952	258,132
	FHLMC GD PL	47	5.500%	06/01/35	47	48
	FNMA Pool	561	5.000%	08/01/35	561	556
	FHLMC PL	47	7.233%	01/01/36	47	49
	FHLMC PL	818	6.000%	07/01/36	832	848
	FHLMC PL	717	6.500%	09/01/36	744	732
	FHLMC GD PL	115	7.000%	10/01/36	118	120
	FHLMC GD PL	24	6.500%	09/01/37	25	25
	FHLMC GD PL	243	5.500%	10/01/37	243	246
	FHLMC GD PL	527	6.000%	11/01/37	534	546
	GNMA SER 98 CMO	1,535	2.100%	08/16/52	1,547	1,508
	Totals				\$ 13,833,072	\$ 13,523,227

CORPORATE OBLIGATIONS:

	Sempra Energy	50,000	3.300%	04/01/25	\$ 49,912	\$ 49,795
	McDonald's Corp Mtn	60,000	3.375%	05/26/25	59,909	59,678
	PayPal Holdings Inc	25,000	1.650%	06/01/25	24,995	24,675
	National Rural Mtn	50,000	3.450%	06/15/25	49,987	49,714
	Dupont Ei Nemours	30,000	1.700%	07/15/25	29,973	29,525
	Charter Comm Opt LLC	12,000	4.908%	07/23/25	12,509	11,986
	American Express Co	100,000	3.950%	08/01/25	99,900	99,597
	Paccar Finl Corp Mtn	200,000	3.550%	08/11/25	199,858	198,816
	Eversource Energy	35,000	0.800%	08/15/25	34,935	34,111
	Nisource Inc	25,000	0.950%	08/15/25	24,938	24,384
	Public Service	50,000	0.800%	08/15/25	49,888	48,778
	Fnb Corp	25,000	5.150%	08/25/25	24,965	24,947
	Simon Prop Gp LP	50,000	3.500%	09/01/25	53,698	49,647
	Roper Technologi	75,000	1.000%	09/15/25	74,901	73,170
	Avalon Commun Mtn	300,000	3.500%	11/15/25	330,714	296,955
	Dowdupont Inc	40,000	4.493%	11/15/25	40,000	39,900

HEATING, PIPING AND REFRIGERATION

MEDICAL FUND

SCHEDULE OF ASSETS HELD

DECEMBER 31, 2024

(a)	(b) IDENTITY OF ISSUER/BORROWER	(c) DESCRIPTION OF INVESTMENT			(d) COST	(e) CURRENT VALUE
		PAR	RATE	DUE DATE		
CORPORATE OBLIGATIONS (Continued):						
	McCormick & Co Inc	30,000	3.250%	11/15/25	29,779	29,561
	Peacehealth Obli	25,000	1.375%	11/15/25	25,000	24,224
	McKesson Corp	35,000	0.900%	12/03/25	34,986	33,837
	General Motors Finl	50,000	1.250%	01/08/26	49,904	48,171
	Citigroup Inc	25,000	3.700%	01/12/26	24,967	24,750
	Energy Tran Ptnr	25,000	4.750%	01/15/26	24,819	24,965
	John Deere Cap	50,000	0.700%	01/15/26	49,956	48,095
	Southern Power	75,000	0.900%	01/15/26	74,816	72,039
	Royal Bk Ca Mtn Conv	100,000	0.875%	01/20/26	99,922	96,243
	Citigroup Inc V-D	100,000	2.014%	01/25/26	100,000	99,778
	Bank of NY Mello Mtn	50,000	0.750%	01/28/26	49,893	48,032
	Constellation Brands	130,000	5.000%	02/02/26	129,778	129,847
	Ibm Corp	100,000	4.500%	02/06/26	99,803	99,926
	Bp Cap Markets Amer	35,000	3.410%	02/11/26	35,000	34,571
	Wells Fargo Mtn V-Q	50,000	2.164%	02/11/26	50,000	49,847
	Altria Group Inc	13,000	4.400%	02/14/26	12,973	12,936
	Federal Realty I	50,000	1.250%	02/15/26	49,670	47,998
	McCormick & Co Inc	50,000	0.900%	02/15/26	49,868	47,892
	Hubbell Inc	60,000	3.350%	03/01/26	63,754	59,020
	Mplx LP	30,000	1.750%	03/01/26	29,936	28,965
	Southern Calif Ediso	300,000	5.350%	03/01/26	300,000	301,965
	Stanley Black	35,000	3.400%	03/01/26	34,950	34,428
	Union Pac Corp	150,000	2.750%	03/01/26	143,666	146,878
	Capital One Finl V-D	300,000	2.636%	03/03/26	300,000	298,725
	National Rural Util	150,000	4.450%	03/13/26	149,894	149,675
	Cigna Corp	75,000	1.250%	03/15/26	74,978	71,929
	Legg Mason Inc	100,000	4.750%	03/15/26	115,496	99,988
	At&t Inc	440,000	1.700%	03/25/26	439,265	424,164
	Kellogg Co	50,000	3.250%	04/01/26	49,948	49,179
	Bank of Amer Crp Mtn	75,000	VAR-CPN	04/02/26	75,000	74,709
	Toyota Auto Rece Abs	33,745	0.710%	04/15/26	33,745	33,499
	American Express V-D	150,000	4.990%	05/01/26	150,000	150,038
	Citigroup Inc	25,000	3.400%	05/01/26	24,950	24,569
	Amazon.com Inc	208,000	1.000%	05/12/26	207,101	199,014
	Charles Schwab Corp	50,000	1.150%	05/13/26	49,884	47,740
	Eversource Energy	150,000	4.750%	05/15/26	149,912	149,879
	Fmc Corp	250,000	5.150%	05/18/26	249,905	250,270
	Astrazeneca Finance	50,000	1.200%	05/28/26	49,937	47,794
	Centerpoint Ener	75,000	1.450%	06/01/26	74,825	71,636
	CVS Health Corp	35,000	2.875%	06/01/26	34,699	33,988
	Realty Income Corp	100,000	4.875%	06/01/26	105,077	100,242
	General Motors Finl	100,000	1.500%	06/10/26	99,818	95,305
	Carmax Auto Own Abs	28,904	0.550%	06/15/26	28,899	28,686
	Autozone Inc	150,000	5.050%	07/15/26	149,817	150,854
	Crown Castle Int	275,000	1.050%	07/15/26	274,137	259,831

HEATING, PIPING AND REFRIGERATION

MEDICAL FUND

SCHEDULE OF ASSETS HELD

DECEMBER 31, 2024

(a)	(b) IDENTITY OF ISSUER/BORROWER	(c) DESCRIPTION OF INVESTMENT			(d) COST	(e) CURRENT VALUE
		PAR	RATE	DUE DATE		
CORPORATE OBLIGATIONS (Continued):						
	Morgan Stan Mtn V-D	75,000	4.679%	07/17/26	75,000	74,920
	Bk Ny Mellon Mtn V-D	75,000	4.414%	07/24/26	75,000	74,801
	Capital One Finl Co	35,000	3.750%	07/28/26	34,876	34,349
	Air Lease Corp	30,000	1.875%	08/15/26	29,768	28,596
	Dominion Resources	50,000	2.850%	08/15/26	49,983	48,537
	American Honda Mtn	200,000	1.300%	09/09/26	199,846	189,048
	Caterpillar Finl Mtn	250,000	1.150%	09/14/26	249,565	236,605
	American Tower Corp	75,000	1.450%	09/15/26	74,610	70,904
	Texas Instruments	200,000	1.250%	09/15/26	200,000	189,162
	Citigroup Inc V-D	100,000	5.610%	09/29/26	100,000	100,539
	Dte Energy Co	50,000	2.850%	10/01/26	49,949	48,440
	Enbridge Inc	100,000	1.600%	10/04/26	99,995	94,654
	Bank of NY Mello Mtn	100,000	1.050%	10/15/26	99,924	94,063
	Us Bancorp V-D	250,000	5.727%	10/21/26	250,000	251,682
	American Express Co	50,000	1.650%	11/04/26	49,921	47,374
	Consolidated Edison	55,000	2.900%	12/01/26	54,776	53,151
	Duke Energy Carolina	25,000	2.950%	12/01/26	24,940	24,276
	Thermo Fisher Scien	200,000	5.000%	12/05/26	199,862	201,908
	Goldman Sachs Gp V-D	40,000	1.093%	12/09/26	40,000	38,613
	Comcast Corp	40,000	2.350%	01/15/27	39,952	38,239
	Jp Morgan Chase V-Q	30,000	3.960%	01/29/27	30,000	29,767
	Jp Morgan Chase V-Q	50,000	1.040%	02/04/27	50,000	48,037
	Paccar Finl Corp Mtn	270,000	2.000%	02/04/27	269,668	256,702
	Eversource Energy	40,000	2.900%	03/01/27	39,961	38,395
	Honeywell Intl Inc	175,000	1.100%	03/01/27	174,962	162,862
	Berkshire Hath	250,000	2.300%	03/15/27	249,953	239,468
	Xcel Energy Inc	100,000	1.750%	03/15/27	99,777	93,642
	Amphenol Corp	300,000	5.050%	04/05/27	300,881	302,607
	Diamondback Energy	200,000	5.200%	04/18/27	199,912	201,918
	Boeing	140,000	6.259%	05/01/27	140,000	143,331
	American Express Abs	150,000	3.390%	05/17/27	149,967	149,334
	Aon Corp/Aon Global	75,000	2.850%	05/28/27	74,958	71,703
	Atmos Energy Corp	50,000	3.000%	06/15/27	49,863	48,142
	Goldman Sachs Gp	50,000	4.387%	06/15/27	50,000	49,702
	Southwest Airlines	65,000	5.125%	06/15/27	67,686	65,290
	Targa Resources	50,000	5.200%	07/01/27	49,925	50,294
	Intuit Inc	50,000	1.350%	07/15/27	49,953	46,128
	PNC Financial V-D	200,000	5.102%	07/23/27	200,000	200,966
	ERP Operating LP	250,000	3.250%	08/01/27	241,255	240,763
	Visa Inc	30,000	0.750%	08/15/27	29,968	27,360
	Gm Financial Sec Abs	224,751	4.820%	08/16/27	224,714	225,023
	American Water Cap	250,000	2.950%	09/01/27	226,038	238,980
	Agilent Tech	250,000	4.200%	09/09/27	249,665	246,923
	Jp Morgan Chase V-Q	100,000	1.470%	09/22/27	100,000	94,596
	General Motors Co	50,000	6.800%	10/01/27	50,034	52,220

HEATING, PIPING AND REFRIGERATION

MEDICAL FUND

SCHEDULE OF ASSETS HELD

DECEMBER 31, 2024

(a)	(b) IDENTITY OF ISSUER/BORROWER	(c) DESCRIPTION OF INVESTMENT			(d) COST	(e) CURRENT VALUE
		PAR	RATE	DUE DATE		
CORPORATE OBLIGATIONS (Continued):						
	BMW Vehicle LEA ABS	225,000	4.180%	10/25/27	224,979	223,220
	Dollar General Corp	50,000	4.625%	11/01/27	49,952	49,683
	Lockheed Martin Corp	75,000	5.100%	11/15/27	74,875	76,154
	Nissan Auto Lea ABS	250,000	4.920%	11/15/27	249,998	251,698
	Philip Morris Intl	50,000	5.125%	11/17/27	49,757	50,601
	State Street Cor V-Q	50,000	1.684%	11/18/27	50,000	47,346
	Phillips 66	200,000	4.950%	12/01/27	199,536	201,630
	Manuf & Traders Trst	250,000	4.700%	01/27/28	249,648	247,500
	Us Bancorp Mtn V-D	50,000	2.215%	01/27/28	50,000	47,406
	At&t Inc	70,000	1.650%	02/01/28	67,645	63,652
	Autozone Inc	50,000	4.500%	02/01/28	49,951	49,548
	Simon Prop Gp In	60,000	1.750%	02/01/28	59,858	54,887
	State Street Crp V-D	50,000	2.203%	02/07/28	50,000	47,533
	Becton Dickinson	100,000	4.693%	02/13/28	100,000	99,507
	Energy Transfer LP	50,000	5.550%	02/15/28	49,987	50,759
	Texas Instruments	85,000	4.600%	02/15/28	84,853	85,157
	Kimco Realty Corp	35,000	1.900%	03/01/28	34,844	31,972
	Coca-Cola Co/The	75,000	1.500%	03/05/28	74,688	68,286
	Ameren Corp	50,000	1.750%	03/15/28	50,042	45,235
	Exelon Co	250,000	5.150%	03/15/28	249,580	251,458
	Realty Income Corp	60,000	2.100%	03/15/28	52,856	55,143
	Waste Mngt Inc	100,000	4.500%	03/15/28	99,777	99,382
	Charles Schwab	50,000	2.000%	03/20/28	49,916	45,799
	Brixmor Operatin	40,000	2.250%	04/01/28	39,927	36,551
	Extra Space Storage	250,000	5.700%	04/01/28	249,558	255,215
	Public Storage	40,000	1.850%	05/01/28	39,971	36,474
	Hershey Company	200,000	4.250%	05/04/28	199,714	198,096
	Capital One Finl V-D	50,000	4.927%	05/10/28	50,000	49,839
	Amazon.com Inc	75,000	1.650%	05/12/28	74,956	68,300
	Georgia Pwr Co	100,000	4.650%	05/16/28	99,874	99,578
	Dte Energy Co	150,000	4.875%	06/01/28	149,922	149,475
	Hca Inc	125,000	5.200%	06/01/28	124,795	125,306
	Nvidia Corp	75,000	1.550%	06/15/28	74,762	68,106
	Morgan Stanley V-Q	25,000	3.591%	07/22/28	25,000	24,108
	Harley-Davidson Abs	200,000	5.690%	08/15/28	199,955	202,260
	Best Buy Co Inc	90,000	4.450%	10/01/28	104,208	88,456
	Sun Communities Oper	50,000	2.300%	11/01/28	49,915	45,074
	Humana Inc	300,000	5.750%	12/01/28	299,490	305,529
	Pnc Financial V-D	100,000	5.354%	12/02/28	100,000	101,419
	Cubesmart LP	50,000	2.250%	12/15/28	49,758	44,975
	Realty Income Corp	150,000	4.700%	12/15/28	148,424	149,248
	Corporate Office Pro	50,000	2.000%	01/15/29	49,987	43,990
	Us Bancorp V-D	125,000	4.653%	02/01/29	125,000	123,734
	John Deere Cap Mtn	65,000	3.450%	03/07/29	64,799	61,844
	Abbvie Inc	150,000	4.800%	03/15/29	149,670	149,886

HEATING, PIPING AND REFRIGERATION

MEDICAL FUND

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(a)	(b) IDENTITY OF ISSUER/BORROWER	(c) DESCRIPTION OF INVESTMENT			(d) COST	(e) CURRENT VALUE
		PAR	RATE	DUE DATE		
CORPORATE OBLIGATIONS (Continued):						
	Toyota Auto Rec Abs	200,000	4.880%	03/15/29	199,999	201,390
	Johnson Controls	200,000	5.500%	04/19/29	199,474	203,550
	Bank of Amer ABS	150,000	4.930%	05/15/29	149,992	151,449
	Hyundai Auto BS	250,000	4.410%	05/15/29	249,982	248,963
	John Deere Cap MTN	150,000	4.850%	06/11/29	149,757	150,552
	Toyota Auto Rec Abs	100,000	4.400%	06/15/29	99,994	99,706
	Erp Operating LP	50,000	3.000%	07/01/29	49,790	46,143
	Broadcom INC	150,000	5.050%	07/12/29	149,804	150,570
	Pepsico Inc	75,000	2.625%	07/29/29	74,777	68,750
	Philip Morris Intl	35,000	3.375%	08/15/29	34,533	32,838
	Huntington Banc V-D	100,000	6.208%	08/21/29	100,000	103,239
	Cadence Design	200,000	4.300%	09/10/29	199,716	196,068
	Evergy Inc	50,000	2.900%	09/15/29	49,914	45,494
	Hewlett Packard Ente	225,000	4.550%	10/15/29	224,762	219,328
	Cardinal Health Inc	250,000	5.000%	11/12/29	249,915	248,443
	State Street Crp	200,000	5.684%	11/21/29	200,000	205,568
	Conservation Fund	30,000	3.474%	12/15/29	30,000	27,563
	Plains All Amer	70,000	3.550%	12/15/29	69,861	65,107
	Ally Finl Inc V-A	200,000	6.848%	01/03/30	200,000	207,334
	United Airlines Abs	25,225	3.100%	01/07/30	25,225	23,910
	Consumers Energy Co	100,000	4.700%	01/15/30	99,775	99,304
	Philip Morris Intl	325,000	5.125%	02/15/30	323,266	326,716
	Waste Management Inc	200,000	4.625%	02/15/30	199,716	198,169
	CVS Health Corp	200,000	5.125%	02/21/30	199,487	195,790
	Avalonbay Cmnty Mtn	50,000	2.300%	03/01/30	49,947	43,997
	Astrazeneca Fin LLC	200,000	4.900%	03/03/30	199,180	200,808
	Barclays Conv	200,000	5.690%	03/12/30	200,000	201,938
	Marsh & McLennan Cos	170,000	4.650%	03/15/30	169,635	167,900
	General Mtrs Finl Co	75,000	5.850%	04/06/30	75,137	76,560
	United Airlines Abs	16,125	2.875%	04/07/30	16,125	15,060
	Northern Trust Corp	40,000	1.950%	05/01/30	39,848	34,538
	Altria Group Inc	50,000	3.400%	05/06/30	50,930	45,872
	Apple Inc	250,000	4.150%	05/10/30	249,323	247,580
	Camden Prop Trust	35,000	2.800%	05/15/30	34,975	31,411
	Meta Platforms	150,000	4.800%	05/15/30	149,661	151,248
	Capital One Abs	154,235	3.660%	05/17/30	154,224	153,407
	Merck & Co Inc	240,000	4.300%	05/17/30	239,712	235,536
	Nextera Energy Capl	45,000	2.250%	06/01/30	44,983	38,907
	Schlumberger Invst	50,000	2.650%	06/26/30	49,804	44,558
	Gatx Corp	50,000	4.000%	06/30/30	49,894	47,333
	Synchrony Financ	100,000	5.935%	08/02/30	100,000	100,918
	American Airline Abs	31,938	3.650%	08/15/30	31,937	30,396
	S&p Global Inc	25,000	1.250%	08/15/30	24,879	20,682
	CVS Health Corp	30,000	1.750%	08/21/30	29,951	24,421
	Morgan Stank MTN V-D	200,000	4.654%	10/12/30	200,000	195,714

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		PAR	RATE	DUE DATE		
CORPORATE OBLIGATIONS (Continued):						
	Extra Space Storage	50,000	2.200%	10/15/30	-	42,543
	Jpmorgan Chase V-D	100,000	4.603%	10/22/30	100,000	98,907
	Goldman Sachs GP V-D	200,000	4.692%	10/23/30	200,000	195,806
	Essex Portfolio LP	30,000	1.650%	01/15/31	29,711	24,402
	Kroger Co	75,000	1.700%	01/15/31	74,828	61,790
	Cubesmart LP	25,000	2.000%	02/15/31	24,769	20,746
	Republic Svcs Inc	30,000	1.450%	02/15/31	29,855	24,331
	Bristol-Myers	300,000	5.100%	02/22/31	299,529	301,932
	Ford Motor Cred	300,000	6.050%	03/05/31	299,187	299,358
	Charles Schwab Corp	225,000	1.650%	03/11/31	170,775	184,219
	Fiserv Inc	125,000	5.350%	03/15/31	124,788	127,062
	Home Depot Inc	60,000	1.375%	03/15/31	59,642	48,589
	Williams Cos Inc	50,000	2.600%	03/15/31	50,487	43,056
	Hca Inc	150,000	5.450%	04/01/31	149,768	149,699
	Unitedhealth Grp	60,000	2.300%	05/15/31	59,995	51,018
	Gatx Corp	25,000	1.900%	06/01/31	24,812	20,326
	Johnson & Johnson	200,000	4.900%	06/01/31	199,820	201,262
	Assured Guaranty	55,000	3.150%	06/15/31	54,844	48,559
	Volkswagen Auto Abs	300,000	4.670%	06/20/31	299,998	300,108
	Waste Management	200,000	4.950%	07/03/31	74,544	75,076
	Vici Properties LP	145,000	5.130%	11/15/31	144,167	141,442
	Bp Cap Markets Amer	50,000	2.721%	01/12/32	50,000	42,785
	Broadcom INC	140,000	4.550%	02/12/32	139,635	135,384
	Bank of Amer Crp V-D	180,000	2.651%	03/11/32	148,678	155,169
	Pg&e Wildfire	175,942	3.594%	06/01/32	175,939	170,321
	Discover Finl Svsc	45,000	6.700%	11/29/32	44,758	47,960
	Autozone Inc	50,000	4.750%	02/01/33	49,917	47,971
	Kinder Morgan Inc	50,000	4.800%	02/01/33	49,972	47,513
	Bp Cap Mkts Amer	225,000	4.812%	02/13/33	225,000	217,503
	Comcast Corp	200,000	4.650%	02/15/33	199,808	193,178
	Eli Lilly & Co	200,000	4.700%	02/27/33	199,574	196,022
	Aon Corp	250,000	5.350%	02/28/33	249,943	248,893
	Amer Elec Pwr	250,000	5.625%	03/01/33	249,075	252,553
	Enbridge Inc	100,000	5.700%	03/08/33	100,120	101,039
	Simon Ppty Grp LP	125,000	5.500%	03/08/33	123,639	127,096
	Mastercard Inc	300,000	4.850%	03/09/33	299,718	297,432
	Texas Instruments	200,000	4.900%	03/14/33	199,844	198,620
	American Tower Corp	150,000	5.650%	03/15/33	149,316	151,926
	Northrop Grumman	100,000	4.700%	03/15/33	99,898	96,932
	Public Svc Elec Mtn	290,000	4.650%	03/15/33	289,730	280,624
	The Cigna Group	200,000	5.400%	03/15/33	199,812	199,698
	Williams Cos Inc	150,000	5.650%	03/15/33	149,837	151,333
	World Omni Auto Abs	200,000	4.430%	03/16/33	199,960	199,308
	American Interna	275,000	5.125%	03/27/33	273,705	271,585
	Allstate Corp	240,000	5.250%	03/30/33	239,594	239,554

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CORPORATE OBLIGATIONS (Continued):						
	Duke Energy Ohio Inc	250,000	5.250%	04/01/33	249,860	249,485
	Florida Pwr & Lt Co	200,000	5.100%	04/01/33	199,676	198,702
	Brown Forman Corp	300,000	4.750%	04/15/33	299,112	292,587
	McCormick	200,000	4.950%	04/15/33	199,872	195,182
	Unitedhealth Grp	250,000	4.500%	04/15/33	248,418	237,195
	Bank of America V-D	50,000	4.571%	04/27/33	50,000	47,516
	Constellation Brands	150,000	4.900%	05/01/33	148,959	144,837
	Ppl Electric UtI	200,000	5.000%	05/15/33	197,950	197,626
	CNA Financial Corp	150,000	5.500%	06/15/33	149,021	151,331
	Interpublic Group	140,000	5.375%	06/15/33	138,250	138,775
	Prologis LP	250,000	4.750%	06/15/33	249,538	241,965
	Southern Co	100,000	5.200%	06/15/33	99,824	98,855
	T-Mobile USA Inc	100,000	5.050%	07/15/33	99,827	97,919
	Conocophill Co	250,000	5.050%	09/15/33	242,390	246,670
	Micron Technology	75,000	5.875%	09/15/33	74,629	76,925
	Midamerican Energy	150,000	5.350%	01/15/34	149,799	151,802
	Chubb INA HLDGS MTN	150,000	5.000%	03/12/34	149,472	148,132
	Mid-America Apts LP	150,000	5.000%	03/12/34	148,529	145,908
	Safehold GL HLD	200,000	6.100%	04/01/34	197,472	203,474
	O'Reilly Automotive	200,000	5.000%	08/19/34	199,564	193,275
	Aercap Ireland Cap	200,000	4.950%	09/10/34	196,874	190,414
	Devon Energy Corp	100,000	5.200%	09/12/34	99,966	94,927
	Occidental Pete Corp	200,000	5.550%	10/01/34	199,242	194,534
	Vulcan Matls Co	150,000	5.350%	12/01/34	149,835	149,547
	General Mills Inc	200,000	5.250%	01/30/35	198,968	197,194
	Prologis LP	75,000	5.000%	01/31/35	74,142	73,080
	Campbell Soup Co	180,000	4.750%	03/23/35	179,327	169,731
	United Airlins abs	200,000	5.450%	02/15/37	200,000	200,278
	Benchmark Mtge Cmo	11,154	0.556%	10/15/53	11,154	11,085
	Bank Cmo V-M	83,514	0.446%	12/10/53	83,514	81,911
	Benchmark Cmo	11,130	0.418%	02/15/54	11,130	11,052
	Benchmark Mort Cmo	81,361	0.623%	04/15/54	81,359	79,076
	Benchmark Mort Cmo	141,798	0.725%	07/15/54	141,794	137,320
	Bmark Cmo	152,489	3.051%	04/15/55	152,486	149,791
	Citigroup Comm Cmo	23,285	2.690%	08/10/56	23,984	22,234
	Bank Cmo	22,048	2.263%	08/15/61	22,047	20,129
	Bank Cmo	76,022	0.613%	05/15/64	76,020	73,925
	Bank Cmo	37,114	0.801%	09/15/64	37,114	36,111
	Totals				\$ 33,421,336	\$ 32,912,251
MUNICIPAL OBLIGATIONS:						
	Birmingham Al Wtrwk	200,000	0.848%	01/01/25	\$ 200,000	\$ 200,000
	Huntsville Al Publi	50,000	1.000%	02/01/25	50,000	49,856
	Clear Creek Tx Indep	125,000	5.000%	02/15/25	146,848	125,069
	Frisco Tx Indep Sch	50,000	4.000%	02/15/25	56,926	49,978

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MUNICIPAL OBLIGATIONS (Continued):						
	Hays Cnty Tx	100,000	0.772%	02/15/25	100,000	99,578
	Houston Tx Cmnty	250,000	5.000%	02/15/25	293,868	250,100
	Greenville Cnty Sc	40,000	1.100%	04/01/25	40,000	39,664
	Brandon Mi Sch Dist	300,000	0.862%	05/01/25	300,000	296,601
	Corona Ca Pensn Obl	100,000	1.131%	05/01/25	100,000	98,919
	Arizona Brd of Rgts	75,000	1.147%	06/01/25	75,000	73,971
	Auburn Ca Pension	75,000	0.961%	06/01/25	75,000	73,938
	California St Dept	50,000	0.874%	06/01/25	50,000	49,284
	La State Enrgy & Pwr	185,000	1.233%	06/01/25	185,000	182,404
	Louisiana St Highwa	100,000	0.697%	06/15/25	100,000	98,263
	Cottonwood Az Pledg	250,000	0.941%	07/01/25	250,000	245,600
	Tempe Az Transit Exc	250,000	0.768%	07/01/25	250,000	245,805
	Albuquerque Nm Muni	80,000	0.957%	08/01/25	80,000	78,410
	Livermore Valley Ca	250,000	1.085%	08/01/25	250,000	245,313
	Maryland St Dept	75,000	0.806%	08/01/25	75,000	73,482
	San Bernardino Ca	150,000	0.837%	08/01/25	150,000	147,060
	Santa Ana Ca Pensn	225,000	0.976%	08/01/25	225,000	220,516
	Waco Tx Indep Sch	75,000	Z-CPN	08/15/25	72,612	72,894
	New Mexico St Educt	100,000	5.000%	09/01/25	115,765	100,903
	Ohio St Cops	225,000	0.735%	09/01/25	225,000	219,570
	Miami-Dade Cnty Fl	200,000	1.119%	10/01/25	200,000	195,252
	Colorado St Hsg	150,000	4.345%	11/01/25	150,000	150,009
	Charleston Cnty Sc	250,000	1.150%	12/01/25	250,000	242,665
	Hamilton Oh City	75,000	Z-CPN	12/01/25	70,119	72,036
	Michigan St Hsg Dev	75,000	1.038%	12/01/25	75,000	72,777
	Warrensville Heig Oh	50,000	Z-CPN	12/01/25	45,895	47,928
	Cincinnati Oh City	300,000	1.241%	12/15/25	300,000	291,357
	Madison Boro Nj Brd	40,000	0.809%	12/15/25	40,000	38,705
	Clg William Va	40,000	1.361%	02/15/26	36,366	38,658
	Clg William Va Etm	10,000	1.361%	02/15/26	9,152	9,669
	New York St Thruway	300,000	3.550%	03/15/26	300,000	296,886
	Greensboro Nc Ltd	50,000	1.300%	04/01/26	50,000	48,127
	New York St Mtge	200,000	2.425%	04/01/26	200,000	195,224
	Louisville & Jeff Ky	100,000	3.427%	05/15/26	100,000	98,639
	Houston Tx Arpt Sys	65,000	1.716%	07/01/26	65,000	62,394
	Minnesota St Hsg Fin	200,000	2.000%	07/01/26	200,000	193,142
	La Habra Ca Pensn	100,000	1.891%	08/01/26	100,000	96,125
	San Francisco Ca	25,000	5.123%	09/01/26	25,000	25,227
	Wyandotte Cnty Ks	50,000	1.562%	09/01/26	50,000	47,763
	Louisiana Loc Govt	60,000	1.165%	10/01/26	60,000	56,347
	Minnesota St Hsg Fin	135,000	5.044%	01/01/27	135,000	136,330
	Virginia St Hsg Dev	215,000	5.158%	01/01/27	215,000	217,296
	Aledo Tx Indep Sch	100,000	Z-CPN	02/15/27	93,206	90,819
	La Porte Tx Indep	75,000	Z-CPN	02/15/27	69,864	67,903
	Texas St Univ Sys	100,000	1.340%	03/15/27	100,000	93,375

HEATING, PIPING AND REFRIGERATION

MEDICAL FUND

SCHEDULE OF ASSETS HELD

DECEMBER 31, 2024

(a)	(b) IDENTITY OF ISSUER/BORROWER	(c) DESCRIPTION OF INVESTMENT			(d) COST	(e) CURRENT
		PAR	RATE	DUE DATE		VALUE
MUNICIPAL OBLIGATIONS (Continued):						
	Univ of Michigan Mi	50,000	1.372%	04/01/27	50,000	46,887
	Lancaster Cnty Pa	100,000	4.780%	05/01/27	100,000	100,143
	Massachusetts St	75,000	4.962%	06/01/27	75,000	75,698
	Bexar Cnty Tx Reven	100,000	1.573%	08/15/27	100,000	92,740
	San Francisco Ca	55,000	5.173%	09/01/27	55,000	55,699
	Curators of Univ Mo	75,000	2.012%	11/01/27	75,000	70,058
	New Jersey St Turnp	85,000	1.483%	01/01/28	85,000	77,768
	Alvarado Tx Ind Sch	30,000	Z-CPN	02/15/28	26,825	25,998
	Laredo Tx Wtrwks Swr	50,000	1.729%	03/01/28	50,000	45,754
	Alaska St Hsg Fin	50,000	1.680%	06/01/28	50,000	45,438
	Kentucky St Hgr Edu	150,000	5.321%	06/01/28	149,352	150,769
	Louisiana St Highwa	75,000	1.320%	06/15/28	75,000	67,299
	Honolulu City & Hi	50,000	1.273%	07/01/28	50,000	44,952
	Univ Ok Revenues	180,000	5.222%	07/01/28	180,000	182,461
	Virginia St Hsg	60,000	1.959%	07/01/28	60,000	55,016
	Seguin Tx Indep Sch	30,000	Z-CPN	08/15/28	26,649	25,517
	Virginia St Polytec	100,000	1.396%	09/01/28	100,000	89,577
	Colorado St Hsg	75,000	1.819%	11/01/28	75,000	67,986
	Pittsburgh Pa Pub	45,000	2.230%	12/01/28	45,000	40,926
	New York City Ny Hsg	70,000	3.756%	01/01/29	70,000	67,621
	New York St Dorm Aut	50,000	1.952%	03/15/29	50,000	44,983
	Nebraska St Investm	85,000	4.700%	09/01/29	85,000	84,750
	Nevada St Hsg Div	100,000	4.754%	10/01/29	100,000	99,597
	California St	300,000	6.000%	03/01/30	316,941	317,268
	Nevada St Hsg Div	100,000	4.804%	04/01/30	100,000	99,461
	Dist of Columbia Inc	200,000	5.071%	05/01/30	200,000	203,180
	Oregon St	300,000	4.300%	05/01/30	300,000	294,591
	Wisconsin St	125,000	4.471%	05/01/30	125,000	123,743
	El Paso Cnty Tx	300,000	4.532%	08/15/30	300,000	296,586
	Gerald R Ford Int Mi	300,000	4.640%	01/01/31	300,000	298,938
	Sale Tax Securiza Il	30,000	2.857%	01/01/31	30,000	26,704
	La Loc Govt Envmtl	250,000	5.048%	12/01/34	250,000	249,915
	Virginia St Hsg Dev	9,320	3.500%	10/25/37	9,319	8,667
	Virginia St Hsg De	14,099	3.125%	11/25/39	14,099	12,940
	Totals				<u>\$ 10,083,806</u>	<u>\$ 9,811,461</u>
MUTUAL FUND:						
	Strategic Income Opportunities Fund				<u>\$ 12,573,158</u>	<u>\$ 12,059,445</u>
LIMITED PARTNERSHIP AND ALTERNATIVE INVESTMENT:						
	WA Total Return Unconstrained Bond Fund LP				<u>\$ 8,098,328</u>	<u>\$ 8,989,150</u>
COLLECTIVE TRUST FUND:						
	Longview Broad Market 3000 Index Fund				<u>\$ 14,742,825</u>	<u>\$ 30,216,770</u>

HEATING, PIPING AND REFRIGERATION

MEDICAL FUND

SCHEDULE OF ASSETS HELD

DECEMBER 31, 2024

(a)	(b) IDENTITY OF ISSUER/BORROWER	(c) DESCRIPTION OF INVESTMENT			(d) COST	(e) CURRENT
		PAR	RATE	DUE DATE		VALUE
SHORT-TERM INVESTMENTS:						
	Wilmington US Treasury MMKT CL SLCT				\$ 3,830	\$ 3,830
TOTAL INVESTMENTS					\$ 92,756,355	\$ 107,516,134
..						

Heating, Piping and Refrigeration Medical Fund
 EIN: 53-0207840
 Plan Year: 2024
 Plan No. 501
 Form 5500, Schedule H, Line 4J
 Schedule of Reportable Transactions

Total Plan Assets at beginning of Plan Year: 180,167,076
 5% Value \$ 9,008,354

Security Description	Cost of Purchases	Proceeds from Sales	Cost of Assets Disposed	Gain/Loss
Wilmington US Treasury Mmkt CL SLCT	21,814,273	-	-	-
Wilmington US Treasury Mmkt CL SLCT	-	22,028,593	22,028,593	-

Heating, Piping and Refrigeration Medical Fund
 EIN: 53-0207840
 Plan Year: 2024
 Plan No. 501
 Form 5500, Schedule H, Line 4J
 Schedule of Reportable Transactions

Total Plan Assets at beginning of Plan Year: 180,167,076
 5% Value \$ 9,008,354

Security Description	Cost of Purchases	Proceeds from Sales	Cost of Assets Disposed	Gain/Loss
Wilmington US Treasury Mmkt CL SLCT	21,814,273	-	-	-
Wilmington US Treasury Mmkt CL SLCT	-	22,028,593	22,028,593	-

HEATING, PIPING AND REFRIGERATION

MEDICAL FUND

SCHEDULE OF ASSETS HELD

DECEMBER 31, 2024

Form 5500, Schedule H, Line 41

EIN: 53-0207840

Plan No. 501

(a)	(b) IDENTITY OF ISSUER/BORROWER	(c) DESCRIPTION OF INVESTMENT			(d) COST	(e) CURRENT VALUE
		PAR	RATE	DUE DATE		
U.S. GOVERNMENT AND AGENCY OBLIGATIONS:						
	FHLMC PL	7	7.000%	08/01/27	\$ 7	\$ 7
	U.S Treasury Notes	550,000	3.875%	10/15/27	546,240	544,220
	U.S Treasury Note	430,000	4.125%	11/15/27	429,085	428,104
	U.S Treasury Notes	1,260,000	4.125%	10/31/29	1,251,330	1,245,485
	U.S Treasury Bonds	760,000	4.125%	11/30/29	756,722	751,366
	U.S Treasury Notes	4,705,000	3.625%	09/30/31	4,699,342	4,470,973
	U.S Treasury Notes	5,266,000	4.125%	10/31/31	5,207,415	5,154,413
	U.S Treasury Notes	70,000	4.125%	11/30/31	69,609	68,506
	U.S Treasury Notes	595,000	4.500%	12/01/31	596,813	595,494
	FHLMC PL	382	7.375%	07/01/32	387	391
	FHLMC PL	138	7.000%	07/01/33	142	138
	GNMA PL	957	5.500%	03/15/34	959	954
	FHLMC GD PL	372	4.500%	08/01/34	371	366
	U.S Treasury Notes	273,000	3.875%	08/15/34	269,952	258,132
	FHLMC GD PL	47	5.500%	06/01/35	47	48
	FNMA Pool	561	5.000%	08/01/35	561	556
	FHLMC PL	47	7.233%	01/01/36	47	49
	FHLMC PL	818	6.000%	07/01/36	832	848
	FHLMC PL	717	6.500%	09/01/36	744	732
	FHLMC GD PL	115	7.000%	10/01/36	118	120
	FHLMC GD PL	24	6.500%	09/01/37	25	25
	FHLMC GD PL	243	5.500%	10/01/37	243	246
	FHLMC GD PL	527	6.000%	11/01/37	534	546
	GNMA SER 98 CMO	1,535	2.100%	08/16/52	1,547	1,508
	Totals				\$ 13,833,072	\$ 13,523,227

CORPORATE OBLIGATIONS:

	Sempra Energy	50,000	3.300%	04/01/25	\$ 49,912	\$ 49,795
	McDonald's Corp Mtn	60,000	3.375%	05/26/25	59,909	59,678
	PayPal Holdings Inc	25,000	1.650%	06/01/25	24,995	24,675
	National Rural Mtn	50,000	3.450%	06/15/25	49,987	49,714
	Dupont Ei Nemours	30,000	1.700%	07/15/25	29,973	29,525
	Charter Comm Opt LLC	12,000	4.908%	07/23/25	12,509	11,986
	American Express Co	100,000	3.950%	08/01/25	99,900	99,597
	Paccar Finl Corp Mtn	200,000	3.550%	08/11/25	199,858	198,816
	Eversource Energy	35,000	0.800%	08/15/25	34,935	34,111
	Nisource Inc	25,000	0.950%	08/15/25	24,938	24,384
	Public Service	50,000	0.800%	08/15/25	49,888	48,778
	Fnb Corp	25,000	5.150%	08/25/25	24,965	24,947
	Simon Prop Gp LP	50,000	3.500%	09/01/25	53,698	49,647
	Roper Technologi	75,000	1.000%	09/15/25	74,901	73,170
	Avalon Commun Mtn	300,000	3.500%	11/15/25	330,714	296,955
	Dowdupont Inc	40,000	4.493%	11/15/25	40,000	39,900

HEATING, PIPING AND REFRIGERATION

MEDICAL FUND

SCHEDULE OF ASSETS HELD

DECEMBER 31, 2024

(a)	(b) IDENTITY OF ISSUER/BORROWER	(c) DESCRIPTION OF INVESTMENT			(d) COST	(e) CURRENT VALUE
		PAR	RATE	DUE DATE		
CORPORATE OBLIGATIONS (Continued):						
	McCormick & Co Inc	30,000	3.250%	11/15/25	29,779	29,561
	Peacehealth Obli	25,000	1.375%	11/15/25	25,000	24,224
	McKesson Corp	35,000	0.900%	12/03/25	34,986	33,837
	General Motors Finl	50,000	1.250%	01/08/26	49,904	48,171
	Citigroup Inc	25,000	3.700%	01/12/26	24,967	24,750
	Energy Tran Ptnr	25,000	4.750%	01/15/26	24,819	24,965
	John Deere Cap	50,000	0.700%	01/15/26	49,956	48,095
	Southern Power	75,000	0.900%	01/15/26	74,816	72,039
	Royal Bk Ca Mtn Conv	100,000	0.875%	01/20/26	99,922	96,243
	Citigroup Inc V-D	100,000	2.014%	01/25/26	100,000	99,778
	Bank of NY Mello Mtn	50,000	0.750%	01/28/26	49,893	48,032
	Constellation Brands	130,000	5.000%	02/02/26	129,778	129,847
	Ibm Corp	100,000	4.500%	02/06/26	99,803	99,926
	Bp Cap Markets Amer	35,000	3.410%	02/11/26	35,000	34,571
	Wells Fargo Mtn V-Q	50,000	2.164%	02/11/26	50,000	49,847
	Altria Group Inc	13,000	4.400%	02/14/26	12,973	12,936
	Federal Realty I	50,000	1.250%	02/15/26	49,670	47,998
	McCormick & Co Inc	50,000	0.900%	02/15/26	49,868	47,892
	Hubbell Inc	60,000	3.350%	03/01/26	63,754	59,020
	Mplx LP	30,000	1.750%	03/01/26	29,936	28,965
	Southern Calif Ediso	300,000	5.350%	03/01/26	300,000	301,965
	Stanley Black	35,000	3.400%	03/01/26	34,950	34,428
	Union Pac Corp	150,000	2.750%	03/01/26	143,666	146,878
	Capital One Finl V-D	300,000	2.636%	03/03/26	300,000	298,725
	National Rural Util	150,000	4.450%	03/13/26	149,894	149,675
	Cigna Corp	75,000	1.250%	03/15/26	74,978	71,929
	Legg Mason Inc	100,000	4.750%	03/15/26	115,496	99,988
	At&t Inc	440,000	1.700%	03/25/26	439,265	424,164
	Kellogg Co	50,000	3.250%	04/01/26	49,948	49,179
	Bank of Amer Crp Mtn	75,000	VAR-CPN	04/02/26	75,000	74,709
	Toyota Auto Rece Abs	33,745	0.710%	04/15/26	33,745	33,499
	American Express V-D	150,000	4.990%	05/01/26	150,000	150,038
	Citigroup Inc	25,000	3.400%	05/01/26	24,950	24,569
	Amazon.com Inc	208,000	1.000%	05/12/26	207,101	199,014
	Charles Schwab Corp	50,000	1.150%	05/13/26	49,884	47,740
	Eversource Energy	150,000	4.750%	05/15/26	149,912	149,879
	Fmc Corp	250,000	5.150%	05/18/26	249,905	250,270
	Astrazeneca Finance	50,000	1.200%	05/28/26	49,937	47,794
	Centerpoint Ener	75,000	1.450%	06/01/26	74,825	71,636
	CVS Health Corp	35,000	2.875%	06/01/26	34,699	33,988
	Realty Income Corp	100,000	4.875%	06/01/26	105,077	100,242
	General Motors Finl	100,000	1.500%	06/10/26	99,818	95,305
	Carmax Auto Own Abs	28,904	0.550%	06/15/26	28,899	28,686
	Autozone Inc	150,000	5.050%	07/15/26	149,817	150,854
	Crown Castle Int	275,000	1.050%	07/15/26	274,137	259,831

HEATING, PIPING AND REFRIGERATION

MEDICAL FUND

SCHEDULE OF ASSETS HELD

DECEMBER 31, 2024

(a)	(b) IDENTITY OF ISSUER/BORROWER	(c) DESCRIPTION OF INVESTMENT			(d) COST	(e) CURRENT VALUE
		PAR	RATE	DUE DATE		
CORPORATE OBLIGATIONS (Continued):						
	Morgan Stan Mtn V-D	75,000	4.679%	07/17/26	75,000	74,920
	Bk Ny Mellon Mtn V-D	75,000	4.414%	07/24/26	75,000	74,801
	Capital One Finl Co	35,000	3.750%	07/28/26	34,876	34,349
	Air Lease Corp	30,000	1.875%	08/15/26	29,768	28,596
	Dominion Resources	50,000	2.850%	08/15/26	49,983	48,537
	American Honda Mtn	200,000	1.300%	09/09/26	199,846	189,048
	Caterpillar Finl Mtn	250,000	1.150%	09/14/26	249,565	236,605
	American Tower Corp	75,000	1.450%	09/15/26	74,610	70,904
	Texas Instruments	200,000	1.250%	09/15/26	200,000	189,162
	Citigroup Inc V-D	100,000	5.610%	09/29/26	100,000	100,539
	Dte Energy Co	50,000	2.850%	10/01/26	49,949	48,440
	Enbridge Inc	100,000	1.600%	10/04/26	99,995	94,654
	Bank of NY Mello Mtn	100,000	1.050%	10/15/26	99,924	94,063
	Us Bancorp V-D	250,000	5.727%	10/21/26	250,000	251,682
	American Express Co	50,000	1.650%	11/04/26	49,921	47,374
	Consolidated Edison	55,000	2.900%	12/01/26	54,776	53,151
	Duke Energy Carolina	25,000	2.950%	12/01/26	24,940	24,276
	Thermo Fisher Scien	200,000	5.000%	12/05/26	199,862	201,908
	Goldman Sachs Gp V-D	40,000	1.093%	12/09/26	40,000	38,613
	Comcast Corp	40,000	2.350%	01/15/27	39,952	38,239
	Jp Morgan Chase V-Q	30,000	3.960%	01/29/27	30,000	29,767
	Jp Morgan Chase V-Q	50,000	1.040%	02/04/27	50,000	48,037
	Paccar Finl Corp Mtn	270,000	2.000%	02/04/27	269,668	256,702
	Eversource Energy	40,000	2.900%	03/01/27	39,961	38,395
	Honeywell Intl Inc	175,000	1.100%	03/01/27	174,962	162,862
	Berkshire Hath	250,000	2.300%	03/15/27	249,953	239,468
	Xcel Energy Inc	100,000	1.750%	03/15/27	99,777	93,642
	Amphenol Corp	300,000	5.050%	04/05/27	300,881	302,607
	Diamondback Energy	200,000	5.200%	04/18/27	199,912	201,918
	Boeing	140,000	6.259%	05/01/27	140,000	143,331
	American Express Abs	150,000	3.390%	05/17/27	149,967	149,334
	Aon Corp/Aon Global	75,000	2.850%	05/28/27	74,958	71,703
	Atmos Energy Corp	50,000	3.000%	06/15/27	49,863	48,142
	Goldman Sachs Gp	50,000	4.387%	06/15/27	50,000	49,702
	Southwest Airlines	65,000	5.125%	06/15/27	67,686	65,290
	Targa Resources	50,000	5.200%	07/01/27	49,925	50,294
	Intuit Inc	50,000	1.350%	07/15/27	49,953	46,128
	PNC Financial V-D	200,000	5.102%	07/23/27	200,000	200,966
	ERP Operating LP	250,000	3.250%	08/01/27	241,255	240,763
	Visa Inc	30,000	0.750%	08/15/27	29,968	27,360
	Gm Financial Sec Abs	224,751	4.820%	08/16/27	224,714	225,023
	American Water Cap	250,000	2.950%	09/01/27	226,038	238,980
	Agilent Tech	250,000	4.200%	09/09/27	249,665	246,923
	Jp Morgan Chase V-Q	100,000	1.470%	09/22/27	100,000	94,596
	General Motors Co	50,000	6.800%	10/01/27	50,034	52,220

HEATING, PIPING AND REFRIGERATION

MEDICAL FUND

SCHEDULE OF ASSETS HELD

DECEMBER 31, 2024

(a)	(b) IDENTITY OF ISSUER/BORROWER	(c) DESCRIPTION OF INVESTMENT			(d) COST	(e) CURRENT VALUE
		PAR	RATE	DUE DATE		
CORPORATE OBLIGATIONS (Continued):						
	BMW Vehicle LEA ABS	225,000	4.180%	10/25/27	224,979	223,220
	Dollar General Corp	50,000	4.625%	11/01/27	49,952	49,683
	Lockheed Martin Corp	75,000	5.100%	11/15/27	74,875	76,154
	Nissan Auto Lea ABS	250,000	4.920%	11/15/27	249,998	251,698
	Philip Morris Intl	50,000	5.125%	11/17/27	49,757	50,601
	State Street Cor V-Q	50,000	1.684%	11/18/27	50,000	47,346
	Phillips 66	200,000	4.950%	12/01/27	199,536	201,630
	Manuf & Traders Trst	250,000	4.700%	01/27/28	249,648	247,500
	Us Bancorp Mtn V-D	50,000	2.215%	01/27/28	50,000	47,406
	At&t Inc	70,000	1.650%	02/01/28	67,645	63,652
	Autozone Inc	50,000	4.500%	02/01/28	49,951	49,548
	Simon Prop Gp In	60,000	1.750%	02/01/28	59,858	54,887
	State Street Crp V-D	50,000	2.203%	02/07/28	50,000	47,533
	Becton Dickinson	100,000	4.693%	02/13/28	100,000	99,507
	Energy Transfer LP	50,000	5.550%	02/15/28	49,987	50,759
	Texas Instruments	85,000	4.600%	02/15/28	84,853	85,157
	Kimco Realty Corp	35,000	1.900%	03/01/28	34,844	31,972
	Coca-Cola Co/The	75,000	1.500%	03/05/28	74,688	68,286
	Ameren Corp	50,000	1.750%	03/15/28	50,042	45,235
	Exelon Co	250,000	5.150%	03/15/28	249,580	251,458
	Realty Income Corp	60,000	2.100%	03/15/28	52,856	55,143
	Waste Mngt Inc	100,000	4.500%	03/15/28	99,777	99,382
	Charles Schwab	50,000	2.000%	03/20/28	49,916	45,799
	Brixmor Operatin	40,000	2.250%	04/01/28	39,927	36,551
	Extra Space Storage	250,000	5.700%	04/01/28	249,558	255,215
	Public Storage	40,000	1.850%	05/01/28	39,971	36,474
	Hershey Company	200,000	4.250%	05/04/28	199,714	198,096
	Capital One Finl V-D	50,000	4.927%	05/10/28	50,000	49,839
	Amazon.com Inc	75,000	1.650%	05/12/28	74,956	68,300
	Georgia Pwr Co	100,000	4.650%	05/16/28	99,874	99,578
	Dte Energy Co	150,000	4.875%	06/01/28	149,922	149,475
	Hca Inc	125,000	5.200%	06/01/28	124,795	125,306
	Nvidia Corp	75,000	1.550%	06/15/28	74,762	68,106
	Morgan Stanley V-Q	25,000	3.591%	07/22/28	25,000	24,108
	Harley-Davidson Abs	200,000	5.690%	08/15/28	199,955	202,260
	Best Buy Co Inc	90,000	4.450%	10/01/28	104,208	88,456
	Sun Communities Oper	50,000	2.300%	11/01/28	49,915	45,074
	Humana Inc	300,000	5.750%	12/01/28	299,490	305,529
	Pnc Financial V-D	100,000	5.354%	12/02/28	100,000	101,419
	Cubesmart LP	50,000	2.250%	12/15/28	49,758	44,975
	Realty Income Corp	150,000	4.700%	12/15/28	148,424	149,248
	Corporate Office Pro	50,000	2.000%	01/15/29	49,987	43,990
	Us Bancorp V-D	125,000	4.653%	02/01/29	125,000	123,734
	John Deere Cap Mtn	65,000	3.450%	03/07/29	64,799	61,844
	Abbvie Inc	150,000	4.800%	03/15/29	149,670	149,886

HEATING, PIPING AND REFRIGERATION

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		PAR	RATE	DUE DATE		
CORPORATE OBLIGATIONS (Continued):						
	Toyota Auto Rec Abs	200,000	4.880%	03/15/29	199,999	201,390
	Johnson Controls	200,000	5.500%	04/19/29	199,474	203,550
	Bank of Amer ABS	150,000	4.930%	05/15/29	149,992	151,449
	Hyundai Auto BS	250,000	4.410%	05/15/29	249,982	248,963
	John Deere Cap MTN	150,000	4.850%	06/11/29	149,757	150,552
	Toyota Auto Rec Abs	100,000	4.400%	06/15/29	99,994	99,706
	Erp Operating LP	50,000	3.000%	07/01/29	49,790	46,143
	Broadcom INC	150,000	5.050%	07/12/29	149,804	150,570
	Pepsico Inc	75,000	2.625%	07/29/29	74,777	68,750
	Philip Morris Intl	35,000	3.375%	08/15/29	34,533	32,838
	Huntington Banc V-D	100,000	6.208%	08/21/29	100,000	103,239
	Cadence Design	200,000	4.300%	09/10/29	199,716	196,068
	Evergy Inc	50,000	2.900%	09/15/29	49,914	45,494
	Hewlett Packard Ente	225,000	4.550%	10/15/29	224,762	219,328
	Cardinal Health Inc	250,000	5.000%	11/12/29	249,915	248,443
	State Street Crp	200,000	5.684%	11/21/29	200,000	205,568
	Conservation Fund	30,000	3.474%	12/15/29	30,000	27,563
	Plains All Amer	70,000	3.550%	12/15/29	69,861	65,107
	Ally Finl Inc V-A	200,000	6.848%	01/03/30	200,000	207,334
	United Airlines Abs	25,225	3.100%	01/07/30	25,225	23,910
	Consumers Energy Co	100,000	4.700%	01/15/30	99,775	99,304
	Philip Morris Intl	325,000	5.125%	02/15/30	323,266	326,716
	Waste Management Inc	200,000	4.625%	02/15/30	199,716	198,169
	CVS Health Corp	200,000	5.125%	02/21/30	199,487	195,790
	Avalonbay Cmnty Mtn	50,000	2.300%	03/01/30	49,947	43,997
	Astrazeneca Fin LLC	200,000	4.900%	03/03/30	199,180	200,808
	Barclays Conv	200,000	5.690%	03/12/30	200,000	201,938
	Marsh & McLennan Cos	170,000	4.650%	03/15/30	169,635	167,900
	General Mtrs Finl Co	75,000	5.850%	04/06/30	75,137	76,560
	United Airlines Abs	16,125	2.875%	04/07/30	16,125	15,060
	Northern Trust Corp	40,000	1.950%	05/01/30	39,848	34,538
	Altria Group Inc	50,000	3.400%	05/06/30	50,930	45,872
	Apple Inc	250,000	4.150%	05/10/30	249,323	247,580
	Camden Prop Trust	35,000	2.800%	05/15/30	34,975	31,411
	Meta Platforms	150,000	4.800%	05/15/30	149,661	151,248
	Capital One Abs	154,235	3.660%	05/17/30	154,224	153,407
	Merck & Co Inc	240,000	4.300%	05/17/30	239,712	235,536
	Nextera Energy Capl	45,000	2.250%	06/01/30	44,983	38,907
	Schlumberger Invst	50,000	2.650%	06/26/30	49,804	44,558
	Gatx Corp	50,000	4.000%	06/30/30	49,894	47,333
	Synchrony Financ	100,000	5.935%	08/02/30	100,000	100,918
	American Airline Abs	31,938	3.650%	08/15/30	31,937	30,396
	S&p Global Inc	25,000	1.250%	08/15/30	24,879	20,682
	CVS Health Corp	30,000	1.750%	08/21/30	29,951	24,421
	Morgan Stank MTN V-D	200,000	4.654%	10/12/30	200,000	195,714

HEATING, PIPING AND REFRIGERATION

MEDICAL FUND

SCHEDULE OF ASSETS HELD

DECEMBER 31, 2024

(a)	(b) IDENTITY OF ISSUER/BORROWER	(c) DESCRIPTION OF INVESTMENT			(d) COST	(e) CURRENT VALUE
		PAR	RATE	DUE DATE		
CORPORATE OBLIGATIONS (Continued):						
	Extra Space Storage	50,000	2.200%	10/15/30	-	42,543
	Jpmorgan Chase V-D	100,000	4.603%	10/22/30	100,000	98,907
	Goldman Sachs GP V-D	200,000	4.692%	10/23/30	200,000	195,806
	Essex Portfolio LP	30,000	1.650%	01/15/31	29,711	24,402
	Kroger Co	75,000	1.700%	01/15/31	74,828	61,790
	Cubesmart LP	25,000	2.000%	02/15/31	24,769	20,746
	Republic Svcs Inc	30,000	1.450%	02/15/31	29,855	24,331
	Bristol-Myers	300,000	5.100%	02/22/31	299,529	301,932
	Ford Motor Cred	300,000	6.050%	03/05/31	299,187	299,358
	Charles Schwab Corp	225,000	1.650%	03/11/31	170,775	184,219
	Fiserv Inc	125,000	5.350%	03/15/31	124,788	127,062
	Home Depot Inc	60,000	1.375%	03/15/31	59,642	48,589
	Williams Cos Inc	50,000	2.600%	03/15/31	50,487	43,056
	Hca Inc	150,000	5.450%	04/01/31	149,768	149,699
	Unitedhealth Grp	60,000	2.300%	05/15/31	59,995	51,018
	Gatx Corp	25,000	1.900%	06/01/31	24,812	20,326
	Johnson & Johnson	200,000	4.900%	06/01/31	199,820	201,262
	Assured Guaranty	55,000	3.150%	06/15/31	54,844	48,559
	Volkswagen Auto Abs	300,000	4.670%	06/20/31	299,998	300,108
	Waste Management	200,000	4.950%	07/03/31	74,544	75,076
	Vici Properties LP	145,000	5.130%	11/15/31	144,167	141,442
	Bp Cap Markets Amer	50,000	2.721%	01/12/32	50,000	42,785
	Broadcom INC	140,000	4.550%	02/12/32	139,635	135,384
	Bank of Amer Crp V-D	180,000	2.651%	03/11/32	148,678	155,169
	Pg&e Wildfire	175,942	3.594%	06/01/32	175,939	170,321
	Discover Finl Svsc	45,000	6.700%	11/29/32	44,758	47,960
	Autozone Inc	50,000	4.750%	02/01/33	49,917	47,971
	Kinder Morgan Inc	50,000	4.800%	02/01/33	49,972	47,513
	Bp Cap Mkts Amer	225,000	4.812%	02/13/33	225,000	217,503
	Comcast Corp	200,000	4.650%	02/15/33	199,808	193,178
	Eli Lilly & Co	200,000	4.700%	02/27/33	199,574	196,022
	Aon Corp	250,000	5.350%	02/28/33	249,943	248,893
	Amer Elec Pwr	250,000	5.625%	03/01/33	249,075	252,553
	Enbridge Inc	100,000	5.700%	03/08/33	100,120	101,039
	Simon Ppty Grp LP	125,000	5.500%	03/08/33	123,639	127,096
	Mastercard Inc	300,000	4.850%	03/09/33	299,718	297,432
	Texas Instruments	200,000	4.900%	03/14/33	199,844	198,620
	American Tower Corp	150,000	5.650%	03/15/33	149,316	151,926
	Northrop Grumman	100,000	4.700%	03/15/33	99,898	96,932
	Public Svc Elec Mtn	290,000	4.650%	03/15/33	289,730	280,624
	The Cigna Group	200,000	5.400%	03/15/33	199,812	199,698
	Williams Cos Inc	150,000	5.650%	03/15/33	149,837	151,333
	World Omni Auto Abs	200,000	4.430%	03/16/33	199,960	199,308
	American Interna	275,000	5.125%	03/27/33	273,705	271,585
	Allstate Corp	240,000	5.250%	03/30/33	239,594	239,554

HEATING, PIPING AND REFRIGERATION

MEDICAL FUND

SCHEDULE OF ASSETS HELD

DECEMBER 31, 2024

(a)	(b) IDENTITY OF ISSUER/BORROWER	(c) DESCRIPTION OF INVESTMENT			(d) COST	(e) CURRENT VALUE
		PAR	RATE	DUE DATE		
CORPORATE OBLIGATIONS (Continued):						
	Duke Energy Ohio Inc	250,000	5.250%	04/01/33	249,860	249,485
	Florida Pwr & Lt Co	200,000	5.100%	04/01/33	199,676	198,702
	Brown Forman Corp	300,000	4.750%	04/15/33	299,112	292,587
	McCormick	200,000	4.950%	04/15/33	199,872	195,182
	Unitedhealth Grp	250,000	4.500%	04/15/33	248,418	237,195
	Bank of America V-D	50,000	4.571%	04/27/33	50,000	47,516
	Constellation Brands	150,000	4.900%	05/01/33	148,959	144,837
	Ppl Electric UtI	200,000	5.000%	05/15/33	197,950	197,626
	CNA Financial Corp	150,000	5.500%	06/15/33	149,021	151,331
	Interpublic Group	140,000	5.375%	06/15/33	138,250	138,775
	Prologis LP	250,000	4.750%	06/15/33	249,538	241,965
	Southern Co	100,000	5.200%	06/15/33	99,824	98,855
	T-Mobile USA Inc	100,000	5.050%	07/15/33	99,827	97,919
	Conocophill Co	250,000	5.050%	09/15/33	242,390	246,670
	Micron Technology	75,000	5.875%	09/15/33	74,629	76,925
	Midamerican Energy	150,000	5.350%	01/15/34	149,799	151,802
	Chubb INA HLDGS MTN	150,000	5.000%	03/12/34	149,472	148,132
	Mid-America Apts LP	150,000	5.000%	03/12/34	148,529	145,908
	Safehold GL HLD	200,000	6.100%	04/01/34	197,472	203,474
	O'Reilly Automotive	200,000	5.000%	08/19/34	199,564	193,275
	Aercap Ireland Cap	200,000	4.950%	09/10/34	196,874	190,414
	Devon Energy Corp	100,000	5.200%	09/12/34	99,966	94,927
	Occidental Pete Corp	200,000	5.550%	10/01/34	199,242	194,534
	Vulcan Matls Co	150,000	5.350%	12/01/34	149,835	149,547
	General Mills Inc	200,000	5.250%	01/30/35	198,968	197,194
	Prologis LP	75,000	5.000%	01/31/35	74,142	73,080
	Campbell Soup Co	180,000	4.750%	03/23/35	179,327	169,731
	United Airlins abs	200,000	5.450%	02/15/37	200,000	200,278
	Benchmark Mtge Cmo	11,154	0.556%	10/15/53	11,154	11,085
	Bank Cmo V-M	83,514	0.446%	12/10/53	83,514	81,911
	Benchmark Cmo	11,130	0.418%	02/15/54	11,130	11,052
	Benchmark Mort Cmo	81,361	0.623%	04/15/54	81,359	79,076
	Benchmark Mort Cmo	141,798	0.725%	07/15/54	141,794	137,320
	Bmark Cmo	152,489	3.051%	04/15/55	152,486	149,791
	Citigroup Comm Cmo	23,285	2.690%	08/10/56	23,984	22,234
	Bank Cmo	22,048	2.263%	08/15/61	22,047	20,129
	Bank Cmo	76,022	0.613%	05/15/64	76,020	73,925
	Bank Cmo	37,114	0.801%	09/15/64	37,114	36,111
	Totals				\$ 33,421,336	\$ 32,912,251
MUNICIPAL OBLIGATIONS:						
	Birmingham Al Wtrwk	200,000	0.848%	01/01/25	\$ 200,000	\$ 200,000
	Huntsville Al Publi	50,000	1.000%	02/01/25	50,000	49,856
	Clear Creek Tx Indep	125,000	5.000%	02/15/25	146,848	125,069
	Frisco Tx Indep Sch	50,000	4.000%	02/15/25	56,926	49,978

HEATING, PIPING AND REFRIGERATION

MEDICAL FUND

SCHEDULE OF ASSETS HELD

DECEMBER 31, 2024

(a)	(b) IDENTITY OF ISSUER/BORROWER	(c) DESCRIPTION OF INVESTMENT			(d) COST	(e) CURRENT
		PAR	RATE	DUE DATE		VALUE
MUNICIPAL OBLIGATIONS (Continued):						
	Hays Cnty Tx	100,000	0.772%	02/15/25	100,000	99,578
	Houston Tx Cmnty	250,000	5.000%	02/15/25	293,868	250,100
	Greenville Cnty Sc	40,000	1.100%	04/01/25	40,000	39,664
	Brandon Mi Sch Dist	300,000	0.862%	05/01/25	300,000	296,601
	Corona Ca Pensn Obl	100,000	1.131%	05/01/25	100,000	98,919
	Arizona Brd of Rgts	75,000	1.147%	06/01/25	75,000	73,971
	Auburn Ca Pension	75,000	0.961%	06/01/25	75,000	73,938
	California St Dept	50,000	0.874%	06/01/25	50,000	49,284
	La State Enrgy & Pwr	185,000	1.233%	06/01/25	185,000	182,404
	Louisiana St Highwa	100,000	0.697%	06/15/25	100,000	98,263
	Cottonwood Az Pledg	250,000	0.941%	07/01/25	250,000	245,600
	Tempe Az Transit Exc	250,000	0.768%	07/01/25	250,000	245,805
	Albuquerque Nm Muni	80,000	0.957%	08/01/25	80,000	78,410
	Livermore Valley Ca	250,000	1.085%	08/01/25	250,000	245,313
	Maryland St Dept	75,000	0.806%	08/01/25	75,000	73,482
	San Bernardino Ca	150,000	0.837%	08/01/25	150,000	147,060
	Santa Ana Ca Pensn	225,000	0.976%	08/01/25	225,000	220,516
	Waco Tx Indep Sch	75,000	Z-CPN	08/15/25	72,612	72,894
	New Mexico St Educt	100,000	5.000%	09/01/25	115,765	100,903
	Ohio St Cops	225,000	0.735%	09/01/25	225,000	219,570
	Miami-Dade Cnty Fl	200,000	1.119%	10/01/25	200,000	195,252
	Colorado St Hsg	150,000	4.345%	11/01/25	150,000	150,009
	Charleston Cnty Sc	250,000	1.150%	12/01/25	250,000	242,665
	Hamilton Oh City	75,000	Z-CPN	12/01/25	70,119	72,036
	Michigan St Hsg Dev	75,000	1.038%	12/01/25	75,000	72,777
	Warrensville Heig Oh	50,000	Z-CPN	12/01/25	45,895	47,928
	Cincinnati Oh City	300,000	1.241%	12/15/25	300,000	291,357
	Madison Boro Nj Brd	40,000	0.809%	12/15/25	40,000	38,705
	Clg William Va	40,000	1.361%	02/15/26	36,366	38,658
	Clg William Va Etm	10,000	1.361%	02/15/26	9,152	9,669
	New York St Thruway	300,000	3.550%	03/15/26	300,000	296,886
	Greensboro Nc Ltd	50,000	1.300%	04/01/26	50,000	48,127
	New York St Mtge	200,000	2.425%	04/01/26	200,000	195,224
	Louisville & Jeff Ky	100,000	3.427%	05/15/26	100,000	98,639
	Houston Tx Arpt Sys	65,000	1.716%	07/01/26	65,000	62,394
	Minnesota St Hsg Fin	200,000	2.000%	07/01/26	200,000	193,142
	La Habra Ca Pensn	100,000	1.891%	08/01/26	100,000	96,125
	San Francisco Ca	25,000	5.123%	09/01/26	25,000	25,227
	Wyandotte Cnty Ks	50,000	1.562%	09/01/26	50,000	47,763
	Louisiana Loc Govt	60,000	1.165%	10/01/26	60,000	56,347
	Minnesota St Hsg Fin	135,000	5.044%	01/01/27	135,000	136,330
	Virginia St Hsg Dev	215,000	5.158%	01/01/27	215,000	217,296
	Aledo Tx Indep Sch	100,000	Z-CPN	02/15/27	93,206	90,819
	La Porte Tx Indep	75,000	Z-CPN	02/15/27	69,864	67,903
	Texas St Univ Sys	100,000	1.340%	03/15/27	100,000	93,375

HEATING, PIPING AND REFRIGERATION

MEDICAL FUND

SCHEDULE OF ASSETS HELD

DECEMBER 31, 2024

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		PAR	RATE	DUE DATE		VALUE
MUNICIPAL OBLIGATIONS (Continued):						
	Univ of Michigan Mi	50,000	1.372%	04/01/27	50,000	46,887
	Lancaster Cnty Pa	100,000	4.780%	05/01/27	100,000	100,143
	Massachusetts St	75,000	4.962%	06/01/27	75,000	75,698
	Bexar Cnty Tx Reven	100,000	1.573%	08/15/27	100,000	92,740
	San Francisco Ca	55,000	5.173%	09/01/27	55,000	55,699
	Curators of Univ Mo	75,000	2.012%	11/01/27	75,000	70,058
	New Jersey St Turnp	85,000	1.483%	01/01/28	85,000	77,768
	Alvarado Tx Ind Sch	30,000	Z-CPN	02/15/28	26,825	25,998
	Laredo Tx Wtrwks Swr	50,000	1.729%	03/01/28	50,000	45,754
	Alaska St Hsg Fin	50,000	1.680%	06/01/28	50,000	45,438
	Kentucky St Hgr Edu	150,000	5.321%	06/01/28	149,352	150,769
	Louisiana St Highwa	75,000	1.320%	06/15/28	75,000	67,299
	Honolulu City & Hi	50,000	1.273%	07/01/28	50,000	44,952
	Univ Ok Revenues	180,000	5.222%	07/01/28	180,000	182,461
	Virginia St Hsg	60,000	1.959%	07/01/28	60,000	55,016
	Seguin Tx Indep Sch	30,000	Z-CPN	08/15/28	26,649	25,517
	Virginia St Polytec	100,000	1.396%	09/01/28	100,000	89,577
	Colorado St Hsg	75,000	1.819%	11/01/28	75,000	67,986
	Pittsburgh Pa Pub	45,000	2.230%	12/01/28	45,000	40,926
	New York City Ny Hsg	70,000	3.756%	01/01/29	70,000	67,621
	New York St Dorm Aut	50,000	1.952%	03/15/29	50,000	44,983
	Nebraska St Investm	85,000	4.700%	09/01/29	85,000	84,750
	Nevada St Hsg Div	100,000	4.754%	10/01/29	100,000	99,597
	California St	300,000	6.000%	03/01/30	316,941	317,268
	Nevada St Hsg Div	100,000	4.804%	04/01/30	100,000	99,461
	Dist of Columbia Inc	200,000	5.071%	05/01/30	200,000	203,180
	Oregon St	300,000	4.300%	05/01/30	300,000	294,591
	Wisconsin St	125,000	4.471%	05/01/30	125,000	123,743
	El Paso Cnty Tx	300,000	4.532%	08/15/30	300,000	296,586
	Gerald R Ford Int Mi	300,000	4.640%	01/01/31	300,000	298,938
	Sale Tax Securiza Il	30,000	2.857%	01/01/31	30,000	26,704
	La Loc Govt Envmtl	250,000	5.048%	12/01/34	250,000	249,915
	Virginia St Hsg Dev	9,320	3.500%	10/25/37	9,319	8,667
	Virginia St Hsg De	14,099	3.125%	11/25/39	14,099	12,940
	Totals				<u>\$ 10,083,806</u>	<u>\$ 9,811,461</u>
MUTUAL FUND:						
	Strategic Income Opportunities Fund				<u>\$ 12,573,158</u>	<u>\$ 12,059,445</u>
LIMITED PARTNERSHIP AND ALTERNATIVE INVESTMENT:						
	WA Total Return Unconstrained Bond Fund LP				<u>\$ 8,098,328</u>	<u>\$ 8,989,150</u>
COLLECTIVE TRUST FUND:						
	Longview Broad Market 3000 Index Fund				<u>\$ 14,742,825</u>	<u>\$ 30,216,770</u>

HEATING, PIPING AND REFRIGERATION

MEDICAL FUND

SCHEDULE OF ASSETS HELD

DECEMBER 31, 2024

(a)	(b) IDENTITY OF ISSUER/BORROWER	(c) DESCRIPTION OF INVESTMENT			(d) COST	(e) CURRENT
		PAR	RATE	DUE DATE		VALUE
SHORT-TERM INVESTMENTS:						
	Wilmington US Treasury MMKT CL SLCT				\$ 3,830	\$ 3,830
TOTAL INVESTMENTS					\$ 92,756,355	\$ 107,516,134
..						

Form 5500 Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Annual Return/Report of Employee Benefit Plan This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6057(b) and 6058(a) of the Internal Revenue Code (the Code). ► Complete all entries in accordance with the Instructions to the Form 5500.	OMB Nos. 1210-0110 1210-0089 2024 This Form is Open to Public Inspection
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Part I Annual Report Identification Information
For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024
A This return/report is for: ☒ a multiemployer plan ☐ a multiple-employer plan (Filers checking this box must provide participating employer information in accordance with the form instructions.)
B This return/report is: ☐ a single-employer plan ☐ a DFE (specify) _____ ☐ the first return/report ☐ the final return/report ☐ an amended return/report ☐ a short plan year return/report (less than 12 months)
C If the plan is a collectively-bargained plan, check here ☒
D Check box if filing under: ☒ Form 5558 ☐ automatic extension ☐ the DFVC program ☐ special extension (enter description) _____
E If this is a retroactively adopted plan permitted by SECURE Act section 201, check here ☐

Part II Basic Plan Information - enter all requested information	
1a Name of plan HEATING PIPING AND REFRG. MED. FUND	1b Three-digit plan number (PN) ► 501
	1c Effective date of plan 03/01/1950
2a Plan sponsor's name (employer, if for a single-employer plan) Mailing address (include room, apt., suite no. and street, or P.O. Box) City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions) BOARD OF TRUSTEES, HEATING PIPING AND REFRIGERATION MEDICAL FUND 8700 ASHWOOD DRIVE CAPITOL HEIGHTS, MD 20743	2b Employer Identification Number (EIN) 53-0207840 2c Plan Sponsor's telephone number 800-618-2878 2d Business code (see instructions) 238220

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

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

SIGN HERE	<i>Sidney Bonilla</i>	10-14-25	<i>Sidney Bonilla</i>
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	Signed by: <i>Thomas Bello</i>	10/15/2025	Thomas Bello
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

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

Form 5500 (2024)
v. 240311