

<p>Form 5500</p> <p>Department of the Treasury Internal Revenue Service</p> <hr/> <p>Department of Labor Employee Benefits Security Administration</p> <hr/> <p>Pension Benefit Guaranty Corporation</p>	<p>Annual Return/Report of Employee Benefit Plan</p> <p>This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6057(b) and 6058(a) of the Internal Revenue Code (the Code).</p> <p>▶ Complete all entries in accordance with the instructions to the Form 5500.</p>	<p>OMB Nos. 1210-0110 1210-0089</p> <hr/> <p style="font-size: 24pt; font-weight: bold;">2024</p> <hr/> <p>This Form is Open to Public Inspection</p>
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Part I Annual Report Identification Information
 For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024

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

a single-employer plan a DFE (specify) _____

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

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

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

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

special extension (enter description)

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

Part II Basic Plan Information—enter all requested information

<p>1a Name of plan <u>BRICKLAYERS PENSION PLAN OF WESTERN PA</u></p>	<p>1b Three-digit plan number (PN) ▶ <u>001</u></p>
<p>2a Plan sponsor's name (employer, if for a single-employer plan) Mailing address (include room, apt., suite no. and street, or P.O. Box) City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions) <u>BRICKLAYERS PENSION FUND TRUSTEES</u></p> <p><u>3660 STUTZ DRIVE, SUITE 101</u> <u>CANFIELD, OH 44406</u></p>	<p>1c Effective date of plan <u>01/01/1971</u></p> <p>2b Employer Identification Number (EIN) <u>25-6121713</u></p> <p>2c Plan Sponsor's telephone number <u>330-270-0453</u></p> <p>2d Business code (see instructions) <u>238900</u></p>

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

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

SIGN HERE	Filed with authorized/valid electronic signature.	10/14/2025	WILLIAM GREER
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	Filed with authorized/valid electronic signature.	10/14/2025	CAROLYN KUSLER
	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 <input type="checkbox"/> Same as Plan Sponsor BRICKLAYERS PENSION FUND TRUSTEES 3660 STUTZ DRIVE, SUITE 101 CANFIELD, OH 44406	3b Administrator's EIN 25-6121713 3c Administrator's telephone number 412-471-2885
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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
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5 Total number of participants at the beginning of the plan year	5	1016
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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	6a(1)	349
a(2) Total number of active participants at the end of the plan year	6a(2)	253
b Retired or separated participants receiving benefits.....	6b	456
c Other retired or separated participants entitled to future benefits	6c	230
d Subtotal. Add lines 6a(2) , 6b , and 6c	6d	939
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	6e	115
f Total. Add lines 6d and 6e	6f	1054
g(1) Number of participants with account balances as of the beginning of the plan year (only defined contribution plans complete this item)	6g(1)	
g(2) Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	6g(2)	
h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested.....	6h	

7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	7	54
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8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions:
1B

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

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

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 0

(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 MB (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6059 of the Internal Revenue Code (the Code). ► File as an attachment to Form 5500 or 5500-SF.	<small>OMB No. 1210-0110</small> 2024 This Form is Open to Public Inspection
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For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024

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

A Name of plan <u>BRICKLAYERS PENSION PLAN OF WESTERN PA</u>	B Three-digit plan number (PN) ► <u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF <u>BRICKLAYERS PENSION FUND TRUSTEES</u>	D Employer Identification Number (EIN) <u>25-6121713</u>

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

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

b Assets	
(1) Current value of assets	1b(1) <u>53335359</u>
(2) Actuarial value of assets for funding standard account	1b(2) <u>57812937</u>
c (1) Accrued liability for plan using immediate gain methods	1c(1) <u>92334420</u>
(2) Information for plans using spread gain methods:	
(a) Unfunded liability for methods with bases	1c(2)(a)
(b) Accrued liability under entry age normal method	1c(2)(b)
(c) Normal cost under entry age normal method	1c(2)(c)
(3) Accrued liability under unit credit cost method	1c(3) <u>92334420</u>
d Information on current liabilities of the plan:	
(1) Amount excluded from current liability attributable to pre-participation service (see instructions)	1d(1)
(2) "RPA '94" information:	
(a) Current liability	1d(2)(a) <u>153165491</u>
(b) Expected increase in current liability due to benefits accruing during the plan year	1d(2)(b) <u>2288392</u>
(c) Expected release from "RPA '94" current liability for the plan year	1d(2)(c) <u>7160329</u>
(3) Expected plan disbursements for the plan year	1d(3) <u>7148729</u>

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

SIGN HERE <u>BRADFORD L. RIGBY</u> Type or print name of actuary <u>ACRISURE</u> Firm name <u>FOUR GATEWAY CENTER</u> <u>PITTSBURGH, PA 15222</u> Address of the firm	<u>10/14/2025</u> Date <u>23-07217</u> Most recent enrollment number <u>412-394-9330</u> Telephone number (including area code)
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If the actuary has not fully reflected any regulation or ruling promulgated under the statute in completing this schedule, check the box and see instructions

2 Operational information as of beginning of this plan year:

a Current value of assets (see instructions)	2a	53335359
b "RPA '94" current liability/participant count breakdown:	(1) Number of participants	(2) Current liability
(1) For retired participants and beneficiaries receiving payment	468	79883466
(2) For terminated vested participants	240	25601190
(3) For active participants:		
(a) Non-vested benefits		4446943
(b) Vested benefits		43233892
(c) Total active	258	47680835
(4) Total	966	153165491
c If the percentage resulting from dividing line 2a by line 2b(4), column (2), is less than 70%, enter such percentage	2c	34.82 %

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

(a) Date (MM/DD/YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM/DD/YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees
06/30/2024	1880776	0			
Totals ▶			3(b)	1880776	3(c) 0
(d) Total withdrawal liability amounts included in line 3(b) total					3(d) 0

4 Information on plan status:

a Funded percentage for monitoring plan's status (line 1b(2) divided by line 1c(3)).....	4a	62.6 %
b Enter code to indicate plan's status (see instructions for attachment of supporting evidence of plan's status). If entered code is "N," go to line 5	4b	D
c Is the plan making the scheduled progress under any applicable funding improvement or rehabilitation plan?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
d If the plan is in critical status or critical and declining status, does line 1(c) reflect any benefit reductions for the first time (see instructions)?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
e If line d is "Yes," enter the reduction in liability resulting from the reduction in benefits (see instructions), measured as of the valuation date	4e	
f If the plan is in critical status or critical and declining status, and is: • Projected to emerge from critical status within 30 years, enter the plan year in which it is projected to emerge; • Projected to become insolvent within 30 years, enter the plan year in which insolvency is expected and check here..... <input checked="" type="checkbox"/> • Neither projected to emerge from critical status nor become insolvent within 30 years, enter "9999."	4f	2037

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

- a** Attained age normal **b** Entry age normal **c** Accrued benefit (unit credit) **d** Aggregate
- e** Frozen initial liability **f** Individual level premium **g** Individual aggregate **h** Shortfall
- i** Other (specify):

j If box h is checked, enter period of use of shortfall method	5j	
k Has a change been made in funding method for this plan year?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
l If line k is "Yes," was the change made pursuant to Revenue Procedure 2000-40 or other automatic approval?		<input type="checkbox"/> Yes <input type="checkbox"/> No
m If line k is "Yes," and line l is "No," enter the date (MM/DD/YYYY) of the ruling letter (individual or class) approving the change in funding method	5m	

6 Checklist of certain actuarial assumptions:

a Interest rate for "RPA '94" current liability.....	6a	3.29 %
	Pre-retirement	Post-retirement
b Rates specified in insurance or annuity contracts.....	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A
c Mortality table code for valuation purposes:		
(1) Males	6c(1)	9P 9P
(2) Females	6c(2)	9FP 9FP
d Valuation liability interest rate	6d	7.50 % 7.50 %
e Salary scale	6e	% <input checked="" type="checkbox"/> N/A
f Withdrawal liability interest rate:		
(1) Type of interest rate	6f(1)	<input checked="" type="checkbox"/> Single rate <input type="checkbox"/> ERISA 4044 <input type="checkbox"/> Other <input type="checkbox"/> N/A
(2) If "Single rate" is checked in (1), enter applicable single rate	6f(2)	7.50 %
g Estimated investment return on actuarial value of assets for year ending on the valuation date	6g	6.3 %
h Estimated investment return on current value of assets for year ending on the valuation date	6h	12.0 %
i Expense load included in normal cost reported in line 9b	6i	<input type="checkbox"/> N/A
(1) If expense load is described as a percentage of normal cost, enter the assumed percentage.....	6i(1)	%
(2) If expense load is a dollar amount that varies from year to year, enter the dollar amount included in line 9b.....	6i(2)	292000
(3) If neither (1) nor (2) describes the expense load, check the box	6i(3)	<input type="checkbox"/>

7 New amortization bases established in the current plan year:

(1) Type of base	(2) Initial balance	(3) Amortization Charge/Credit
1	1213204	127852

8 Miscellaneous information:

a If a waiver of a funding deficiency has been approved for this plan year, enter the date (MM/DD/YYYY) of the ruling letter granting the approval	8a	
b Demographic, benefit, and contribution information		
(1) Is the plan required to provide a projection of expected benefit payments? (See instructions) If "Yes," see instructions for required attachment.		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
(2) Is the plan required to provide a Schedule of Active Participant Data? (See instructions).		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
(3) Is the plan required to provide a projection of employer contributions and withdrawal liability payments? (See instructions) If "Yes," attach a schedule.		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
c Are any of the plan's amortization bases operating under an extension of time under section 412(e) (as in effect prior to 2008) or section 431(d) of the Code?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
d If line c is "Yes," provide the following additional information:		
(1) Was an extension granted automatic approval under section 431(d)(1) of the Code?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
(2) If line 8d(1) is "Yes," enter the number of years by which the amortization period was extended ..	8d(2)	5
(3) Was an extension approved by the Internal Revenue Service under section 412(e) (as in effect prior to 2008) or 431(d)(2) of the Code?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
(4) If line 8d(3) is "Yes," enter number of years by which the amortization period was extended (not including the number of years in line (2))	8d(4)	
(5) If line 8d(3) is "Yes," enter the date of the ruling letter approving the extension	8d(5)	
(6) If line 8d(3) is "Yes," is the amortization base eligible for amortization using interest rates applicable under section 6621(b) of the Code for years beginning after 2007?		<input type="checkbox"/> Yes <input type="checkbox"/> No
e If box 5h is checked or the plan received an amortization extension for this plan year under Code section 431(d), enter the difference between the amount necessary to satisfy the plan's minimum funding standard for this plan year and the amount that would have been necessary without using the shortfall method or extending the amortization period(s).	8e	278580

9 Funding standard account statement for this plan year:

Charges to funding standard account:

a Prior year funding deficiency, if any	9a	6259577
b Employer's normal cost for plan year as of valuation date.....	9b	1300186

c Amortization charges as of valuation date:		Outstanding balance	
(1) All bases except funding waivers and certain bases for which the amortization period has been extended	9c(1)	32494307	4952584
(2) Funding waivers	9c(2)		
(3) Certain bases for which the amortization period has been extended.....	9c(3)		
d Interest as applicable on lines 9a, 9b, and 9c.....	9d		938426
e Total charges. Add lines 9a through 9d.....	9e		13450773
Credits to funding standard account:			
f Prior year credit balance, if any.....	9f		0
g Employer contributions. Total from column (b) of line 3.....	9g		1880776
		Outstanding balance	
h Amortization credits as of valuation date.....	9h	4232401	497640
i Interest as applicable to end of plan year on lines 9f, 9g, and 9h	9i		96352
j Full funding limitation (FFL) and credits:			
(1) ERISA FFL (accrued liability FFL).....	9j(1)	36612156	
(2) "RPA '94" override (90% current liability FFL)	9j(2)	88401463	
(3) FFL credit	9j(3)		0
k (1) Waived funding deficiency	9k(1)		
(2) Other credits	9k(2)		
l Total credits. Add lines 9f through 9i, 9j(3), 9k(1), and 9k(2)	9l		2474768
m Credit balance: If line 9l is greater than line 9e, enter the difference	9m		
n Funding deficiency: If line 9e is greater than line 9l, enter the difference	9n		10976005
o Current year's accumulated reconciliation account:			
(1) Due to waived funding deficiency accumulated prior to the current plan year.....	9o(1)		
(2) Due to amortization bases extended and amortized using the interest rate under section 6621(b) of the Code:			
(a) Reconciliation outstanding balance as of valuation date	9o(2)(a)		
(b) Reconciliation amount (line 9c(3) balance minus line 9o(2)(a)).....	9o(2)(b)		0
(3) Total as of valuation date.....	9o(3)		0
10 Contribution necessary to avoid an accumulated funding deficiency. (see instructions.).....	10		10976005
11 Has a change been made in the actuarial assumptions for the current plan year? If "Yes," see instructions			<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

SCHEDULE C (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	Service Provider Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500.	<small>OMB No. 1210-0110</small> 2024 This Form is Open to Public Inspection.
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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 BRICKLAYERS PENSION PLAN OF WESTERN PA	B Three-digit plan number (PN) ▶	001
C Plan sponsor's name as shown on line 2a of Form 5500 BRICKLAYERS PENSION FUND TRUSTEES	D Employer Identification Number (EIN) 25-6121713	

Part I Service Provider Information (see instructions)

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

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

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

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

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)

ZENITH AMERICAN SOLUTIONS

52-1590516

(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	CONTRACT ADMINISTRATOR	68201	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

BENESYS

38-2383171

(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	CONTRACT ADMINISTRATOR	67700	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

CIM INVESTMENT MANAGEMENT INC.

25-1738846

(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 68	NONE	45038	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	0	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

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

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

MARINER INSTITUTIONAL LLC

531 W. MORSE BLVD.
WINTER PARK, FL 32789

(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	NONE	42000	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

ACRISURE MID-ATLANTIC PARTNERS LLC

92-3652116

(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 16	NONE	39989	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

TUCKER ARENSBERG P.C.

1500 ONE PPG PLACE
PITTSBURGH, PA 15222

(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	NONE	34333	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

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

HAMILTON LANE

6900 EAST LAYTON AVENUE
DENVER, CO 80237

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28	NONE	26979	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

GRIDIRON PARTNERS, LLC

101 BRADFORD ROAD
SUITE 200
WEXFORD, PA 15090

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28	NONE	24178	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

PNC ADVISORS

25-1211909

(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	NONE	16172	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	0	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

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

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

CYPHER & CYPHER

25-1385288

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
10	NONE	13095	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

TWIN CAPITAL MANAGEMENT

3244 WASHINGTON ROAD
SUITE 202
MCMURRAY, PA 15317

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 51 68	NONE	8276	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	0	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

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

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

Part I Service Provider Information (continued)

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

a Name: CYPHER & CYPHER	b EIN: 25-6121713
c Position: AUDITOR	
d Address: 6000 BABCOCK BOULEVARD PITTSBURGH, PA 15237	e Telephone: 724-745-3543

Explanation: THE AUDITING SERVICES WERE OPENED UP FOR COMPETITIVE BIDS COMPARING EXPERIENCE, STAFFING AND PRICE. DICLAUDIO & KRAMER, LLC HAS BEEN RETAINED FOR THESE SERVICES AT THE BOARD OF TRUSTEES SELECTION.

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

A Name of plan <u>BRICKLAYERS PENSION PLAN OF WESTERN PA</u>	B Three-digit plan number (PN)	<u>001</u>
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 <u>BRICKLAYERS PENSION FUND TRUSTEES</u>	D Employer Identification Number (EIN) <u>25-6121713</u>	

Part I	Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs) (Complete as many entries as needed to report all interests in DFEs)
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a Name of MTIA, CCT, PSA, or 103-12 IE:	<u>ERECT FUND II</u>	
b Name of sponsor of entity listed in (a):	<u>AMERI SERVE TRUST AND FINANCIAL</u>	
c EIN-PN <u>25-1689052-001</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>3890262</u>
a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

SCHEDULE H (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	Financial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110 2024 This Form is Open to Public Inspection
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For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024	
A Name of plan BRICKLAYERS PENSION PLAN OF WESTERN PA	B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 BRICKLAYERS PENSION FUND TRUSTEES	D Employer Identification Number (EIN) 25-6121713

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

		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a	479805	918899
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	290583	373129
(2) Participant contributions	1b(2)		
(3) Other	1b(3)	92086	82952
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	4857713	2670193
(2) U.S. Government securities	1c(2)	2962123	2475764
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)	317194	0
(B) All other	1c(3)(B)	1115292	1777949
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)	14085164	16729166
(5) Partnership/joint venture interests	1c(5)	3205766	2421942
(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)	3678550	3890262
(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)	22221372	22953070
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other	1c(15)	75951	249067

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	0	12640
f Total assets (add all amounts in lines 1a through 1e).....	1f	53381599	54555033
Liabilities			
g Benefit claims payable.....	1g		
h Operating payables.....	1h	46240	145010
i Acquisition indebtedness.....	1i		
j Other liabilities.....	1j		
k Total liabilities (add all amounts in lines 1g through 1j).....	1k	46240	145010
Net Assets			
l Net assets (subtract line 1k from line 1f).....	1l	53335359	54410023

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)	1880776	
(B) Participants.....	2a(1)(B)		
(C) Others (including rollovers).....	2a(1)(C)		
(2) Noncash contributions.....	2a(2)		
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		1880776
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit).....	2b(1)(A)	140916	
(B) U.S. Government securities.....	2b(1)(B)	79376	
(C) Corporate debt instruments.....	2b(1)(C)	78199	
(D) Loans (other than to participants).....	2b(1)(D)		
(E) Participant loans.....	2b(1)(E)		
(F) Other.....	2b(1)(F)	8522	
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		307013
(2) Dividends:			
(A) Preferred stock.....	2b(2)(A)		
(B) Common stock.....	2b(2)(B)	219891	
(C) Registered investment company shares (e.g. mutual funds).....	2b(2)(C)	1065848	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		1285739
(3) Rents.....	2b(3)		
(4) Net gain (loss) on sale of assets:			
(A) Aggregate proceeds.....	2b(4)(A)	12464461	
(B) Aggregate carrying amount (see instructions).....	2b(4)(B)	12274175	
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result.....	2b(4)(C)		190286
(5) Unrealized appreciation (depreciation) of assets:			
(A) Real estate.....	2b(5)(A)		
(B) Other.....	2b(5)(B)	2839577	
(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)		211712
(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)		1039233
c Other income	2c		
d Total income. Add all income amounts in column (b) and enter total	2d		7754336

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	6231345	
(2) To insurance carriers for the provision of benefits	2e(2)		
(3) Other	2e(3)		
(4) Total benefit payments. Add lines 2e(1) through (3)	2e(4)		6231345
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)	135901	
(3) Recordkeeping fees	2i(3)		
(4) IQPA audit fees	2i(4)	13095	
(5) Investment advisory and investment management fees	2i(5)	146471	
(6) Bank or trust company trustee/custodial fees	2i(6)	24250	
(7) Actuarial fees	2i(7)	39989	
(8) Legal fees	2i(8)	34333	
(9) Valuation/appraisal fees	2i(9)		
(10) Other trustee fees and expenses	2i(10)	12671	
(11) Other expenses	2i(11)	41617	
(12) Total administrative expenses. Add lines 2i(1) through (11)	2i(12)		448327
j Total expenses. Add all expense amounts in column (b) and enter total	2j		6679672

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		1074664
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: **DICLAUDIO & KRAMER, LLC**

(2) EIN: **27-0889793**

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

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

Part IV Compliance Questions

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

During the plan year:

	Yes	No	Amount
a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)		X	
b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)		X	
c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)		X	
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)		X	
e Was this plan covered by a fidelity bond?	X		2000000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		X	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	X		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.)	X		
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?		X	
l Has the plan failed to provide any benefit when due under the plan?		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)		X	
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.			

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

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

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

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

If "Yes" is checked, enter the My PAA confirmation number from the PBGC premium filing for this plan year 541709.

SCHEDULE R (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	Retirement Plan Information This schedule is required to be filed under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500.	<small>OMB No. 1210-0110</small> 2024 This Form is Open to Public Inspection.
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For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024

A Name of plan <u>BRICKLAYERS PENSION PLAN OF WESTERN PA</u>	B Three-digit plan number (PN) ▶	<u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>BRICKLAYERS PENSION FUND TRUSTEES</u>	D Employer Identification Number (EIN) <u>25-6121713</u>	

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

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

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

1		0
---	--	---

2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits):
 EIN(s): _____
Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.

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

3		0
---	--	---

Part II	Funding Information (If the plan is not subject to the minimum funding requirements of section 412 of the Internal Revenue Code or ERISA section 302, skip this Part.)
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4 Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)? Yes No N/A
If the plan is a defined benefit plan, go to line 8.

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

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

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

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

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

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

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

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

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

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

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

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

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

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

a	Name of contributing employer HARRIS MASONRY		
b	EIN 25-1481881	c	Dollar amount contributed by employer 203991
d	Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box <input type="checkbox"/> and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month 05 Day 31 Year 2027		
e	Contribution rate information (If more than one rate applies, check this box <input type="checkbox"/> and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)		
	(1) Contribution rate (in dollars and cents) 4.33		
	(2) Base unit measure: <input checked="" type="checkbox"/> Hourly <input type="checkbox"/> Weekly <input type="checkbox"/> Unit of production <input type="checkbox"/> Other (specify): _____		
a	Name of contributing employer LILJA CORPORATION		
b	EIN 91-3165094	c	Dollar amount contributed by employer 146868
d	Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box <input type="checkbox"/> and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month 05 Day 31 Year 2027		
e	Contribution rate information (If more than one rate applies, check this box <input type="checkbox"/> and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)		
	(1) Contribution rate (in dollars and cents) 4.33		
	(2) Base unit measure: <input checked="" type="checkbox"/> Hourly <input type="checkbox"/> Weekly <input type="checkbox"/> Unit of production <input type="checkbox"/> Other (specify): _____		
a	Name of contributing employer PLIBRICO REFRACTORY CONSTRUCTION		
b	EIN 20-1626973	c	Dollar amount contributed by employer 108590
d	Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box <input type="checkbox"/> and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month 05 Day 31 Year 2027		
e	Contribution rate information (If more than one rate applies, check this box <input type="checkbox"/> and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)		
	(1) Contribution rate (in dollars and cents) 4.33		
	(2) Base unit measure: <input checked="" type="checkbox"/> Hourly <input type="checkbox"/> Weekly <input type="checkbox"/> Unit of production <input type="checkbox"/> Other (specify): _____		
a	Name of contributing employer TERVO MASONRY		
b	EIN 61-1514733	c	Dollar amount contributed by employer 81387
d	Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box <input type="checkbox"/> and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month 05 Day 31 Year 2027		
e	Contribution rate information (If more than one rate applies, check this box <input type="checkbox"/> and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)		
	(1) Contribution rate (in dollars and cents) 4.33		
	(2) Base unit measure: <input checked="" type="checkbox"/> Hourly <input type="checkbox"/> Weekly <input type="checkbox"/> Unit of production <input type="checkbox"/> Other (specify): _____		
a	Name of contributing employer ETZEL MASONRY, INC.		
b	EIN 25-1727268	c	Dollar amount contributed by employer 81030
d	Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box <input type="checkbox"/> and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month 05 Day 31 Year 2027		
e	Contribution rate information (If more than one rate applies, check this box <input type="checkbox"/> and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)		
	(1) Contribution rate (in dollars and cents) 4.33		
	(2) Base unit measure: <input checked="" type="checkbox"/> Hourly <input type="checkbox"/> Weekly <input type="checkbox"/> Unit of production <input type="checkbox"/> Other (specify): _____		
a	Name of contributing employer RC REFRACTORY CONSULTING		
b	EIN 20-2691958	c	Dollar amount contributed by employer 78182
d	Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box <input type="checkbox"/> and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month 05 Day 31 Year 2027		
e	Contribution rate information (If more than one rate applies, check this box <input type="checkbox"/> and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)		
	(1) Contribution rate (in dollars and cents) 4.33		
	(2) Base unit measure: <input checked="" type="checkbox"/> Hourly <input type="checkbox"/> Weekly <input type="checkbox"/> Unit of production <input type="checkbox"/> Other (specify): _____		

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

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

a Name of contributing employer KUSLER MASONRY

b EIN 25-1675406 **c** Dollar amount contributed by employer 68172

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month 05 Day 31 Year 2027

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

(1) Contribution rate (in dollars and cents) 4.33

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

a Name of contributing employer SMITH MASONRY, INC.

b EIN 25-1763209 **c** Dollar amount contributed by employer 65845

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month 05 Day 31 Year 2027

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

(1) Contribution rate (in dollars and cents) 4.33

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

a Name of contributing employer BANE MASONRY

b EIN 47-3353094 **c** Dollar amount contributed by employer 49939

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month 05 Day 31 Year 2027

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

(1) Contribution rate (in dollars and cents) 4.33

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

a Name of contributing employer RESCO PRODUCTS, INC.

b EIN 23-1279448 **c** Dollar amount contributed by employer 34575

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month 05 Day 31 Year 2027

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

(1) Contribution rate (in dollars and cents) 4.33

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

a Name of contributing employer _____

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

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

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

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

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

a Name of contributing employer _____

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

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

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

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

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

14 Enter the number of deferred vested and retired participants (inactive participants), as of the beginning of the plan year, whose contributing employer is no longer making contributions to the plan for:

a The current plan year. Check the box to indicate the counting method used to determine the number of inactive participants: <input checked="" type="checkbox"/> last contributing employer <input type="checkbox"/> alternative <input type="checkbox"/> reasonable approximation (see instructions for required attachment).....	14a	0
b The plan year immediately preceding the current plan year. <input type="checkbox"/> Check the box if the number reported is a change from what was previously reported (see instructions for required attachment).....	14b	0
c The second preceding plan year. <input type="checkbox"/> Check the box if the number reported is a change from what was previously reported (see instructions for required attachment).....	14c	0

15 Enter the ratio of the number of participants under the plan on whose behalf no employer had an obligation to make an employer contribution during the current plan year to:

a The corresponding number for the plan year immediately preceding the current plan year	15a	
b The corresponding number for the second preceding plan year	15b	

16 Information with respect to any employers who withdrew from the plan during the preceding plan year:

a Enter the number of employers who withdrew during the preceding plan year	16a	0
b If line 16a is greater than 0, enter the aggregate amount of withdrawal liability assessed or estimated to be assessed against such withdrawn employers.....	16b	0

17 If assets and liabilities from another plan have been transferred to or merged with this plan during the plan year, check box and see instructions regarding supplemental information to be included as an attachment

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

18 If any liabilities to participants or their beneficiaries under the plan as of the end of the plan year consist (in whole or in part) of liabilities to such participants and beneficiaries under two or more pension plans as of immediately before such plan year, check box and see instructions regarding supplemental information to be included as an attachment

19 If the total number of participants is 1,000 or more, complete lines (a) and (b):

a Enter the percentage of plan assets held as:
 Public Equity: _____% Private Equity: _____% Investment-Grade Debt and Interest Rate Hedging Assets: _____%
 High-Yield Debt: _____% Real Assets: _____% Cash or Cash Equivalents: _____% Other: _____%

b Provide the average duration of the Investment-Grade Debt and Interest Rate Hedging Assets:
 0-5 years 5-10 years 10-15 years 15 years or more

20 PBGC missed contribution reporting requirements. If this is a multiemployer plan or a single-employer plan that is not covered by PBGC, skip line 20.

a Is the amount of unpaid minimum required contributions for all years from Schedule SB (Form 5500) line 40 greater than zero? Yes No

b If line 20a is "Yes," has PBGC been notified as required by ERISA sections 4043(c)(5) and/or 303(k)(4)? Check the applicable box:
 Yes.
 No. Reporting was waived under 29 CFR 4043.25(c)(2) because contributions equal to or exceeding the unpaid minimum required contribution were made by the 30th day after the due date.
 No. The 30-day period referenced in 29 CFR 4043.25(c)(2) has not yet ended, and the sponsor intends to make a contribution equal to or exceeding the unpaid minimum required contribution by the 30th day after the due date.
 No. Other. Provide explanation: _____

Part VII IRS Compliance Questions

21a Does the plan satisfy the coverage and nondiscrimination tests of Code sections 410(b) and 401(a)(4) by combining this plan with any other plans under the permissive aggregation rules? Yes No

21b If this is a Code section 401(k) plan, check all boxes that apply to indicate how the plan is intended to satisfy the nondiscrimination requirements for employee deferrals and employer matching contributions (as applicable) under Code sections 401(k)(3) and 401(m)(2).
 Design-based safe harbor method
 "Prior year" ADP test
 "Current year" ADP test
 N/A

22 If the plan sponsor is an adopter of a pre-approved plan that received a favorable IRS Opinion Letter, enter the date of the Opinion Letter ___/___/____ (MM/DD/YYYY) and the Opinion Letter serial number _____.

BRICKLAYERS PENSION FUND OF WESTERN PENNSYLVANIA
FINANCIAL STATEMENTS
YEAR ENDED DECEMBER 31, 2024



INDEPENDENT AUDITOR'S REPORT

Board of Trustees
Bricklayers Pension Fund of
Western Pennsylvania
Pittsburgh, PA

Opinion on the 2024 Financial Statements

We have audited the financial statements of Bricklayers Pension Fund of Western Pennsylvania, an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (ERISA), which comprise the statement of net assets available for benefits as of December 31, 2024, and the related statement of changes in net assets available for benefits for the year then ended, and the related notes to the financial statements.

In our opinion, the accompanying financial statements present fairly, in all material respects, the net assets available for benefits of Bricklayers Pension Fund of Western Pennsylvania as of December 31, 2024, and the changes in its net assets available for benefits for the year then ended, in accordance with accounting principles generally accepted in the United States of America.

Basis for Opinion on the 2024 Financial Statements

We conducted our audits in accordance with auditing standards generally accepted in the United States of America (GAAS). Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of Bricklayers Pension Fund of Western Pennsylvania 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 2024 Financial Statements

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

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about Bricklayers Pension Fund of Western Pennsylvania'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.

Auditor's Responsibilities for the Audit of the 2024 Financial Statements

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

In performing an audit in accordance with GAAS, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of Bricklayers Pension Fund of Western Pennsylvania'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 Bricklayers Pension Fund of Western Pennsylvania's ability to continue as a going concern for a reasonable period of time.

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

Other Matters

2023 Financial Statements

The financial statements of Bricklayers Pension Fund of Western Pennsylvania as of December 31, 2023, were audited by other auditors whose report dated October 8, 2024 expressed an unmodified opinion on those statements.

Di Claudio & Kramer, LLC

DiClaudio & Kramer, LLC

McMurray, Pennsylvania
October 13, 2025

BRICKLAYERS PENSION FUND OF WESTERN PENNSYLVANIA
STATEMENT OF NET ASSETS AVAILABLE FOR PLAN BENEFITS

	DECEMBER 31,	
	2024	2023
INVESTMENTS AT FAIR VALUE		
Interest Bearing Cash	\$ 2,670,193	\$ 4,857,719
U.S. Government Obligations	2,475,764	2,962,123
Corporate Debt	1,777,949	1,462,268
Common Stocks	16,729,166	14,085,164
Registered Investment Companies	19,741,836	17,715,495
Exchange Traded Funds	3,211,234	4,505,874
Common Collective Trusts	3,890,262	3,678,550
Limited Partnership	2,421,942	3,205,766
Other	249,067	46,166
	53,167,413	52,519,125
Accrued Income	52,944	59,651
	53,220,357	52,578,776
Cash	918,899	479,805
Employer Contributions Receivable	373,129	290,583
Prepaid Expenses	12,640	-
Due From Combined Inc.	29,462	-
Other Receivables	546	32,435
	54,555,033	53,381,599
TOTAL ASSETS		
LIABILITIES		
Accounts Payable	145,010	46,240
	145,010	46,240
NET ASSETS AVAILABLE FOR PLAN BENEFITS	\$ 54,410,023	\$ 53,335,359

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

BRICKLAYERS PENSION FUND OF WESTERN PENNSYLVANIA
STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR PLAN BENEFITS
YEAR ENDED DECEMBER 31,

2024

ADDITIONS TO PLAN ASSETS ATTRIBUTED TO:

CONTRIBUTIONS

Employer Contributions	\$	1,815,002
Reciprocal Contributions		297,072
Reciprocal Disbursements		(231,298)
		1,880,776

INVESTMENT INCOME

Interest and Dividends	1,592,752
Appreciation (Depreciation) in Investments	4,280,808
Investment Fees	(162,643)
	5,710,917

TOTAL ADDITIONS 7,591,693

DEDUCTIONS FROM PLAN ASSETS ATTRIBUTED TO:

Pension Benefits 6,231,345

Administrative Expenses

Auditing Fees	13,095
Actuarial Fees	39,989
Administrator Fees	135,901
Legal Fees	34,333
Trustee Meeting Expense	12,671
Conference Expense	-
Office Supplies and Expense	3,198
Postage	2,710
PBGC Insurance	37,592
Fiduciary Insurance	10,404
Cyber Liability Insurance	1,175
Fidelity Insurance	-
Dues	-
Bank Fees	8,078
Collection Expense	(13,462)
	285,684

TOTAL DEDUCTIONS 6,517,029

NET INCREASE (DECREASE) IN NET ASSETS 1,074,664

NET ASSETS AVAILABLE FOR BENEFITS - Beginning of Year 53,335,359

NET ASSETS AVAILABLE FOR BENEFITS - End of Year \$ 54,410,023

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

BRICKLAYERS PENSION PLAN OF WESTERN PENNSYLVANIA
NOTES TO FINANCIAL STATEMENTS
YEAR ENDED DECEMBER 31, 2024

NOTE A - SIGNIFICANT ACCOUNTING POLICIES

Basis of Accounting - The financial estimates have been prepared on the accrual basis.

Estimates - The preparation of financial statements in conformity with generally accepted accounting principles requires the plan administrator to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results may differ from those estimates.

Payment of Benefits – Benefits are recorded when paid.

Investment Valuation and Income Recognition - Investments are stated at fair value. Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded on the accrual basis. Dividends are recorded on the ex-dividend date.

Actuarial Present Value of Accumulated Plan Benefits - Accumulated plan benefits are those future periodic payments, including lump-sum distributions that are attributable under the Plan's provisions to services rendered by the participants to the valuation date.

NOTE B - PLAN DESCRIPTION

The Fund provides pension benefits covering all employees who are employed by an employer who is obligated, pursuant to a collective bargaining agreement, reciprocal agreement, or other written document, to make contributions on their behalf to the Fund. The Plan is a defined benefit pension plan and is subject to the provisions of the Employee Retirement and Income Security Act of 1974 (ERISA), as amended.

As of the latest actuarial valuation date (January 1, 2024), the Fund continues to meet the funding requirements established by ERISA.

Information about the Plan agreement, the vesting and benefit provisions are contained in the Summary Plan Description. Copies of the booklet are available from the fund office.

NOTE C - INCOME TAX STATUS

The Internal Revenue Service has determined and informed the Fund by a letter dated January 7, 2016, that the Plan and related trust are designed in accordance with applicable sections of the Internal Revenue Code (IRC). The Plan has been amended since receiving the determination letter. However, the Plan administrator and the Plan's counsel believe that the Plan is designed and is currently being operated in compliance with the applicable requirements of the IRC.

NOTE D – PRIORITIES UPON TERMINATION

In the event of termination and in order to safeguard against any unforeseen contingencies, the right to discontinue the Plan is reserved to the Trustees. Termination shall not permit any part of the Plan to be used for or diverted to purposes other than the exclusive benefit of the Plan's participants and beneficiaries. In the event the Plan terminates, the net assets of the Plan will be allocated as prescribed by ERISA and its related regulations.

Certain benefits under the Plan are insured by the PBGC if the Plan terminates. Generally, the PBGC guarantees most vested normal age retirement benefits, early retirement benefits, and certain disability and survivor's pension. However, the PBGC does not guarantee all types of benefits under the Plan, and the amount of benefit protection is subject to certain limitations.

BRICKLAYER PENSION FUND OF WESTERN PENNSYLVANIA
NOTES TO FINANCIAL STATEMENTS
YEAR ENDED DECEMBER 31, 2024
(Continued)

NOTE E – SUBSEQUENT EVENTS

The Plan evaluated subsequent events and transactions for potential recognition or disclosure in the financial statements through October 13, 2025, the day the financial statements were approved and authorized for use.

NOTE F - ACCUMULATED PLAN BENEFITS

Actuarial valuations of the Plan were prepared by Acrisure. The present value of accumulated plan benefits at January 1, 2024 the actuarial valuations are as follows:

	<u>January 1,</u> <u>2024</u>
Vested benefits:	
Participants currently receiving payments	\$ 53,662,365
Separated deferred participants	14,758,115
Active participants	<u>21,816,503</u>
	90,236,983
Non-vested benefits	<u>2,097,437</u>
Total actuarial present value of accumulated plan benefits	<u>\$ 92,334,420</u>

The changes in accumulated plan benefits for the year are as follows:

	<u>January 1,</u> <u>2024</u>
Actuarial present values of accumulated plan benefits - beginning of year	\$ 90,018,417
Increase (decrease) during the year attributable to:	
Accrual of benefits and plan experience	1,754,122
Benefits payments	(5,969,684)
Plan Amendment	-
Change in Assumptions	-
Interest	<u>6,531,565</u>
	<u>2,316,003</u>

Actuarial present value of accumulated plan benefits - end of year	<u>\$ 92,334,420</u>
--	----------------------

The principal assumptions underlying the above actuarial computation follow:

- Method – Unit Credit actuarial cost method
- Interest rate - 7.50%
- Mortality tables – SOA Pri-2012 amount-weighted, sex distinct, pre/post commencement and blue collar adjusted mortality with a 2012 base year with MP 2021 mortality improvement
- Normal retirement - 65 or attained age if greater

BRICKLAYERS PENSION FUND OF WESTERN PENNSYLVANIA
NOTES TO FINANCIAL STATEMENTS
YEAR ENDED DECEMBER 31, 2024
(continued)

NOTE G - FAIR VALUE MEASUREMENTS

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

Level 1 Inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets that the Plan has the ability to access.

Level 2 Inputs to the valuation methodology include:

Quoted prices for similar assets or liabilities in active markets;

Quoted prices for identical or similar assets or liabilities in inactive markets;

Inputs other than quoted prices that are observable for the asset or liability;

Inputs that are derived principally from or corroborated by observable market data by correlation or other means.

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

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

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

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:

Cash Equivalents - The carrying value of cash equivalents approximates fair value.

U.S. Government Obligations - The estimated fair value of U.S. government securities are based on quoted market prices and/or other market data for the same or comparable instruments and transactions in establishing the prices. Due to the nature of pricing U.S. government securities, the Plan has classified U.S. government securities as Level 2 investments.

Corporate Bonds - The estimated fair value of corporate bonds are based on quoted market prices and/or other market data for the same or comparable instruments and transactions in establishing the prices. Due to the nature of pricing corporate bonds, the Plan has classified corporate bonds securities as Level 2 investments.

Common Stocks, Exchange Traded Funds and Publicly Traded Partnerships - Valued at the closing price reported on the active market on which the individual securities are traded.

Registered Investment Companies - These investments are valued at the net asset value of shares held by the plan at year end.

Common Collective Trusts and Limited Partnerships - Valued at unit values provided by the respective trustees of those trusts based on the estimated fair value of the investments held by the trust.

BRICKLAYERS PENSION FUND OF WESTERN PENNSYLVANIA
NOTES TO FINANCIAL STATEMENTS
YEAR ENDED DECEMBER 31, 2024
(continued)

NOTE G - FAIR VALUE MEASUREMENTS (continued)

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

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

Description	December 31, 2024	Fair Value Measurements at Reporting Date Using:		
		Quoted Prices In Active Markets For Identical Assets (Level 1)	Significant Other Observable Inputs (Level 2)	Significant Unobservable Inputs (Level 3)
Cash Equivalents	\$ 2,670,193	\$ 2,670,193	\$ -	\$ -
U.S. Government Obligations	2,475,764	-	2,475,764	-
Corporate Debt	1,777,949	-	1,777,949	-
Common Stocks	16,729,166	16,729,166	-	-
Mutual Funds	19,741,836	19,741,836	-	-
Exchange Traded Funded	3,211,234	3,211,234	-	-
Other Assets	249,067	-	249,067	-
Assets in Fair Value Hierarchy	46,855,209	42,352,429	4,502,780	-
Investments measured at Net Asset Value (a):				
Limited Partnerships	2,421,942	-	-	-
Common Trust Funds	3,890,262	-	-	-
	6,312,204	-	-	-
Investments at Fair Value	\$ 53,167,413	\$ 42,352,429	\$ 4,502,780	\$ -

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

Description	December 31, 2023	Fair Value Measurements at Reporting Date Using:		
		Quoted Prices In Active Markets For Identical Assets (Level 1)	Significant Other Observable Inputs (Level 2)	Significant Unobservable Inputs (Level 3)
Cash Equivalents	\$ 4,857,719	\$ 4,857,719	\$ -	\$ -
U.S. Government Obligations	2,962,123	-	2,962,123	-
Corporate Debt	1,462,268	-	1,462,268	-
Common Stocks	14,085,164	14,085,164	-	-
Mutual Funds	17,715,495	17,715,495	-	-
Exchange Traded Funded	4,505,874	4,505,874	-	-
Other Assets	46,166	-	46,166	-
Assets in Fair Value Hierarchy	45,634,809	41,164,252	4,470,557	-
Investments measured at Net Asset Value (a):				
Limited Partnerships	3,205,766	-	-	-
Common Trust Funds	3,678,550	-	-	-
	6,884,316	-	-	-
Investments at Fair Value	\$ 52,519,125	\$ 41,164,252	\$ 4,470,557	\$ -

(a) In accordance with subtopic 820-10, certain investments that were measured at net asset value per share (or its equivalent) have not been classified in the fair value hierarchy. The fair value amounts presented in the table are intended to permit reconciliation of the fair value hierarchy to the line items presented in the statement of net assets available for benefits.

The following table sets forth the Plan's investments in certain entities that calculate net asset value per share at December 31, 2024 including fair value, redemption frequency and investment strategy:

Investment	Classification / Strategy	Fair Value	Unfunded Commitments	Redemption Frequency	Redemption Notice Period
Ameriserv ERECT Fund II	Real Estate - Loans	3,890,262	-	Quarterly	5 Days
Hamilton Lane Strategic Opp., 2017	Master Fund - Private Equity	390,800	578,755	No Interim Liquidity	N/A
Hamilton Lane Strategic Opp., 2020	Master Fund - Private Equity	2,031,142	323,587	No Interim Liquidity	N/A
		\$ 6,312,204	\$ 902,342		

Distributions from these Funds are only made as individual investments of Funds are sold. Otherwise, distributions occur at Fund termination date or after a certain time period from final fund closing or investment period. These periods range from 1 to 5 years.

BRICKLAYERS PENSION FUND OF WESTERN PENNSYLVANIA
NOTES TO FINANCIAL STATEMENTS
YEAR ENDED DECEMBER 31, 2024
(Continued)

NOTE H – CASH DEPOSITS IN EXCESS OF INSURED LIMITS

The Plan maintains cash balances at one financial institution in Pennsylvania. Accounts at the financial institution are insured by the Federal Deposit Insurance Corporation up to \$250,000. At various times throughout the year, the cash balances maintained have exceeded the insured limits.

NOTE I – RISKS AND UNCERTAINTIES

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

The actuarial present value of accumulated plan benefits is reported based on certain assumptions pertaining to interest rates, 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 J – FUNDING POLICY

The funding policy of the Plan is for contributions to be sufficient to meet the Plan's short-term and long-term benefit obligations, taking into account investment returns and expenses and subject to the minimum and maximum contribution requirements of law. This requires communication with the bargaining parties who set the contribution levels through the collectively bargaining process and an ongoing review of appropriate benefit levels. As a result of the actuary's certification that the Plan was in Critical Status for the 2015 plan year, the Trustees adopted a Rehabilitation Plan. The Rehabilitation Plan and Schedules are modified as required under federal pension laws which may necessitate additional Plan changes. The most recent actuarial certification of funding status for the year beginning January 1, 2025 indicates the Plan is in Critical and Declining Status and is projected to become insolvent within the next 20 plan years.

On March 11, 2021, the American Rescue Plan Act of 2021 ("ARPA") was signed into law. Under the ARPA, eligible plans, such as this plan, may seek special financial assistance ("SFA") from the federal government. The Plan has filed an application for SFA from the PBGC. The Plan requested and received \$46,968,668 in financial assistance on August 25, 2025.

Bricklayers Pension Plan of Western PA
 EIN/PN: 25-6121713/001
 Attachment to Form 5500
 Schedule MB, Line 8b(2) - Schedule of Active Participant Data
 Years of credited service

Attained Age	Under 1	1 to 4	5 to 9	10 to 14	15 to 19	20 to 24	25 to 29	30 to 34	35 to 39	40 & up	Total
	No.	No.	No.	No.	No.	No.	No.	No.	No.	No.	No.
Under 25	9	22	1	0	0	0	0	0	0	0	32
25 to 29	5	6	8	0	0	0	0	0	0	0	19
30 to 34	2	7	7	3	0	0	0	0	0	0	19
35 to 39	3	4	5	4	5	0	0	0	0	0	21
40 to 44	1	5	2	1	8	7	0	0	0	0	24
45 to 49	3	2	3	3	7	8	2	0	0	0	28
50 to 54	2	0	2	5	8	8	11	1	0	0	37
55 to 59	2	2	3	5	1	9	14	3	3	0	42
60 to 64	3	2	0	3	2	2	4	8	3	1	28
65 to 69	0	0	0	0	0	1	0	1	1	0	3
70 & up	0	0	0	0	0	0	0	1	0	1	2
Unknown	3	0	0	0	0	0	0	0	0	0	3
Total	33	50	31	24	31	35	31	14	7	2	258

Actuarial Methods and Assumptions

As of January 1, 2024

Interest Rates		<u>Current Year</u>	<u>Prior Year</u>
	Minimum/Maximum Funding	7.50%	7.50%
	Present Value of Accrued Benefits	7.50%	7.50%
	Full Funding Limitation		
	Maximum Basis	3.29%	2.55%
	RPA Current Liability	3.29%	2.55%
Mortality	Healthy:	SOA PRI-2012 amount-weighted, sex distinct, pre/post commencement and blue collar adjusted mortality with a 2012 base year with MP 2021 mortality improvement	
	Disabled:	SOA PRI-2012 amount-weighted, sex distinct, disabled (Total Dataset) mortality with a 2012 base year with MP 2021 mortality improvement	
Withdrawal Liability	Interest Rate:	Same as Funding calculations	
	Mortality:	Same as Funding calculations	
	Methodology:	Presumptive Method	
	Asset Valuation:	Actuarial Value	
Turnover	Based on service as follows:		
	<u>Years of Service</u>	<u>Rate</u>	
	0-1	25%	
	2	20	
	3-5	10	
	6	5	
	7+	4	
	Participants with less than 200 hours in the prior year are treated as terminated.		
Retirement	Based on age as follows:		
	<u>Age</u>	<u>Rate</u>	
	60	10%	
	61	5	
	62	20	
	63	25	
	64	25	
	65	50	
	66	75	
	67	100	
	Terminated vested participants are assumed to retire at the earliest unreduced retirement age.		

Actuarial Methods and Assumptions (continued)

Disability 100% of the UAW 1955 Study. Sample rates are as follows:

<u>Age</u>	<u>Rate</u>	
	<u>Male</u>	<u>Female</u>
25	0.0003	0.0005
35	0.0006	0.0008
40	0.0007	0.0010
45	0.0010	0.0015
55	0.0036	0.0049

Expenses The normal cost is increased by last year's non-investment related expenses, rounded to the nearest \$1,000. For projection purposes, expenses are assumed to increase 2.50% per year.

Percent Married 80% of the participants are assumed to be married with the female spouse four years younger than the male spouse.

Asset Valuation Effective January 1, 2001, plan assets are carried at market value with a 5 year averaging of the difference between actual and expected investment performance. The Actuarial Value of Assets is subject to limits of 80% and 120% of Market Value.

Funding Method Unit Credit. The unit credit actuarial cost method develops normal cost and actuarial accrued liability separately for each individual in the plan. The normal cost is the present value of the individual's benefits expected to be earned in the current year. The individual's actuarial accrued liability is the present value of the individual's benefits earned in previous years.

Incomplete Data The dates of birth for 3 active participants are missing. Each participant was assumed to have a date of birth of 1/01/1989.

Benefit Accrual Rate Pension credits and expected contributions were projected on the assumption that all active participants would accrue future service credits that were the same as they earned during the previous Plan Year. Expectations were further adjusted so that total hours worked in the coming year would match the Board of Trustees' expectations that were used in the most recent zone status certification.

Actuarial Methods and Assumptions (continued)

Calculation of Actuarial Present Value of Accrued Plan Benefits The actuarial present value of accrued benefits has been calculated as of the valuation date, based upon the Plan specifications then in effect and upon each participant's age and service as of that date. These calculations consider the same actuarial assumptions as were used in the actuarial valuation.

Projected Industry Activity Beginning with the 2023 Plan Year, for the purpose of credit balance projection, future covered employment has been estimated to be equal to the 2019 employment level (442,642), decreasing 1.75% per year through 2029, then decreasing 1% per year from 2030 moving forward. This assumption has been set with input from the Board of Trustees. Members expected hours are adjusted to reflect the total expected hours but limited to 2,500 when benefits earned become capped.

Models Used in Preparing Results Acisure uses valuation and projection software to model benefit cash flows, present values, and attribution to various periods based on deterministic or stochastic assumption sets and benefit parameters provided by the user. The software model also supports comparisons between periods to measure gains and losses and compile plan experience data to support or modify demographic and certain economic assumptions.

In the absence of adequate review, the model's complexity and flexibility could lead to unintentional results. However, the model contains robust tools to test and verify the reasonableness of results. Our internal technical review utilizes these tools.

We have reviewed the model's documentation, and have relied on the expertise of the software vendor for underlying structure, methodology, and extensive supporting calculations. We have not performed a substantial audit of the model or its structure beyond typical use in preparing results as this is typically not done by plan actuaries. However, we expect that the very deep market of qualified users for this same model ensures that no materially significant issues can or will persist.

Additionally, projections reflect models developed and maintained by Acisure. These models generally follow accepted actuarial principles and reflect required Internal Revenue Code and Regulations requirements in determining estimated future funded status and potential outcomes for the Funds being modeled. Outcomes from the modeling process are generally determined by the current Fund position and inputs regarding future economic assumptions and plan participant behavior and demographics.

Based on our experience, because of the detailed structure provided by Code and Regulations, we anticipate that other practitioners using similar data and assumptions would provide results that are materially similar to the outcome from our models. We have developed the models internally and are familiar with its parameters and how it functions. In addition, the results are continually reviewed across our multiemployer client base by a group of qualified actuaries and other technical staff.

Form 5500

Annual Return/Report of Employee Benefit Plan

OMB Nos. 1210-0110 1210-0089

Department of the Treasury Internal Revenue Service

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

2024

Department of Labor Employee Benefits Security Administration

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

Pension Benefit Guaranty Corporation

This Form is Open to Public Inspection

Part I Annual Report Identification Information

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

- A This return/report is for: [X] a multiemployer plan [] a multiple-employer plan... B This return/report is: [] a single-employer plan [] a DFE... C If the plan is a collectively-bargained plan, check here. [X] D Check box if filing under: [X] Form 5558 [] automatic extension [] the DFVC program 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 BRICKLAYERS PENSION PLAN OF WESTERN PA 1b Three-digit plan number (PN) 001 1c Effective date of plan 01/01/1971 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) Bricklayers Pension Fund Trustees 3660 STUTZ DRIVE, SUITE 101 CANFIELD OH 44406 2b Employer Identification Number (EIN) 25-6121713 2c Plan Sponsor's telephone number 412-471-2885 2d Business code (see instructions) 238900

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

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

Table with 4 columns: SIGN HERE, Signature, Date, and Name. Row 1: William Greer, 10/14/25, UNION TRUSTEE WILLIAM GREER. Row 2: Carolyn Kusler, 10/14/25, EMPLOYER TRUSTEE CAROLYN KUSLER. Row 3: Signature of DFE, Date, Enter name of individual signing as DFE.

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

3a Plan administrator's name and address <input type="checkbox"/> Same as Plan Sponsor BRICKLAYERS PENSION FUND TRUSTEES 3660 STUTZ DRIVE, SUITE 101 CANFIELD OH 44406	3b Administrator's EIN 25-6121713 3c Administrator's telephone number 412-471-2885
--	---

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	1,016
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	6a(1)	349
a(2) Total number of active participants at the end of the plan year	6a(2)	253
b Retired or separated participants receiving benefits	6b	456
c Other retired or separated participants entitled to future benefits	6c	230
d Subtotal. Add lines 6a(2), 6b, and 6c.	6d	939
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits	6e	115
f Total. Add lines 6d and 6e.	6f	1,054
g(1) Number of participants with account balances as of the beginning of the plan year (only defined contribution plans complete this item)	6g(1)	
g(2) Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	6g(2)	
h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested	6h	
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	7	54

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

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

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

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

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

INDEPENDENT AUDITOR'S REPORT ON SUPPLEMENTAL SCHEDULES

Board of Trustees
Bricklayers Pension Fund of
Western Pennsylvania
Pittsburgh, PA

We have audited the financial statements of the Bricklayers Pension Fund of Western Pennsylvania as of and for the year ended December 31, 2024, and our report thereon dated October 13, 2025 which expressed an unmodified opinion on those financial statements appears on pages 1 and 2. Our audit was conducted for the purpose of forming an opinion on the financial statements taken as a whole. The supplemental schedule of assets held for investment purposes as of December 31, 2024 and the schedule of 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 is supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America.

In forming an opinion on the supplemental schedules, we evaluated whether the supplemental schedules, including its form and content, are presented in conformity with the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974.

In our opinion, the information in the accompanying schedules, is fairly stated in all material respects, in relation to the financial statements taken 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 the Employee Retirement Income Security Act of 1974.



DiClaudio & Kramer, LLC

McMurray, Pennsylvania
October 13, 2025

BRICKLAYERS PENSION FUND OF WESTERN PENNSYLVANIA

REPORTABLE (5%) TRANSACTIONS

YEAR ENDED DECEMBER 31, 2024

Federal I.D. - 25-6121713
Plan No. - 001

FORM 5500, Schedule H, Part IV, Question J

I. Individual Transactions:

(a) Identity of party involved	(b) Description of Asset (include interest rate and maturity in case of a loan)	(c) Purchase Price	(d) Selling Price	(e) Lease Rental	(f) Expenses incurred with transaction	(g) Cost of Asset	(h) Current value of asset on transaction date	(i) Net gain (loss)
- NONE -								

II. Series of Transactions:

<u>Description of Investment</u>	<u>Total Number of Purchases</u>	<u>Total Number of Sales</u>	<u>Total Value of Purchases</u>	<u>Total Value of Sales</u>	<u>Net Gain or (Loss)</u>
Federated Hermes Treasury Obligations Fund	122	40	\$ 4,432,322	\$ 9,290,041	\$ -
Federated Hermes Treasury Obligations Premier Fund	9	1	\$ 2,720,193	\$ 50,000	\$ -

**SCHEDULE MB
(Form 5500)**

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

**Multiemployer Defined Benefit Plan and Certain
Money Purchase Plan Actuarial Information**

This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6059 of the Internal Revenue Code (the Code).

▶ **File as an attachment to Form 5500 or 5500-SF.**

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

▶ **Round off amounts to nearest dollar.**

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

A Name of plan BRICKLAYERS PENSION PLAN OF WESTERN PA	B Three-digit plan number (PN) ▶	001
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF BRICKLAYERS PENSION FUND TRUSTEES	D Employer Identification Number (EIN) 25-6121713	

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

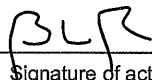
1a Enter the valuation date: Month 01 Day 01 Year 2024

b Assets

(1) Current value of assets	1b(1)	53,335,359
(2) Actuarial value of assets for funding standard account.....	1b(2)	57,812,937
c (1) Accrued liability for plan using immediate gain methods	1c(1)	92,334,420
(2) Information for plans using spread gain methods:		
(a) Unfunded liability for methods with bases	1c(2)(a)	
(b) Accrued liability under entry age normal method.....	1c(2)(b)	
(c) Normal cost under entry age normal method	1c(2)(c)	
(3) Accrued liability under unit credit cost method.....	1c(3)	92,334,420
d Information on current liabilities of the plan:		
(1) Amount excluded from current liability attributable to pre-participation service (see instructions).....	1d(1)	
(2) "RPA '94" information:		
(a) Current liability	1d(2)(a)	153,165,491
(b) Expected increase in current liability due to benefits accruing during the plan year	1d(2)(b)	2,288,392
(c) Expected release from "RPA '94" current liability for the plan year	1d(2)(c)	7,160,329
(3) Expected plan disbursements for the plan year	1d(3)	7,148,729

Statement by Enrolled Actuary

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

SIGN HERE		10/14/2025
BRADFORD L. RIGBY	Signature of actuary	Date 2307217
ACRISURE	Type or print name of actuary	Most recent enrollment number 412-394-9330
FOUR GATEWAY CENTER, SUITE 605 PITTSBURGH PA 15222	Firm name Address of the firm	Telephone number (including area code)

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

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

Schedule MB (Form 5500) 2024
v. 240311

k Has a change been made in funding method for this plan year? Yes No

l If line k is "Yes," was the change made pursuant to Revenue Procedure 2000-40 or other automatic approval? Yes No

m If line k is "Yes," and line l is "No," enter the date (MM/DD/YYYY) of the ruling letter (individual or class) approving the change in funding method 5m

6 Checklist of certain actuarial assumptions:

a Interest rate for "RPA '94" current liability.....	6a	3.29%
b Rates specified in insurance or annuity contracts.....	Pre-retirement	Post-retirement
	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A
c Mortality table code for valuation purposes:		
(1) Males.....	6c(1)	9P
(2) Females.....	6c(2)	9FP
d Valuation liability interest rate.....	6d	7.50%
e Salary scale.....	6e	% <input checked="" type="checkbox"/> N/A
f Withdrawal liability interest rate:		
(1) Type of interest rate.....	6f(1)	<input checked="" type="checkbox"/> Single rate <input type="checkbox"/> ERISA 4044 <input type="checkbox"/> Other <input type="checkbox"/> N/A
(2) If "Single rate" is checked in (1), enter applicable single rate.....	6f(2)	7.50%
g Estimated investment return on actuarial value of assets for year ending on the valuation date.....	6g	6.3%
h Estimated investment return on current value of assets for year ending on the valuation date.....	6h	12.0%
i Expense load included in normal cost reported in line 9b.....	6i	<input type="checkbox"/> N/A
(1) If expense load is described as a percentage of normal cost, enter the assumed percentage.....	6i(1)	%
(2) If expense load is a dollar amount that varies from year to year, enter the dollar amount included in line 9b.....	6i(2)	292,000
(3) If neither (1) nor (2) describes the expense load, check the box.....	6i(3)	<input type="checkbox"/>

7 New amortization bases established in the current plan year:

(1) Type of base	(2) Initial balance	(3) Amortization Charge/Credit
1	1,213,204	127,852

8 Miscellaneous information:

a If a waiver of a funding deficiency has been approved for this plan year, enter the date (MM/DD/YYYY) of the ruling letter granting the approval..... 8a

b Demographic, benefit, and contribution information

(1) Is the plan required to provide a projection of expected benefit payments? (See instructions) If "Yes," see instructions for required attachment. Yes No

(2) Is the plan required to provide a Schedule of Active Participant Data? (See instructions). Yes No

(3) Is the plan required to provide a projection of employer contributions and withdrawal liability payments? (See instructions) If "Yes," attach a schedule. Yes No

c Are any of the plan's amortization bases operating under an extension of time under section 412(e) (as in effect prior to 2008) or section 431(d) of the Code? Yes No

d If line c is "Yes," provide the following additional information:

(1) Was an extension granted automatic approval under section 431(d)(1) of the Code? Yes No

(2) If line 8d(1) is "Yes," enter the number of years by which the amortization period was extended. 8d(2) 5

(3) Was an extension approved by the Internal Revenue Service under section 412(e) (as in effect prior to 2008) or 431(d)(2) of the Code? Yes No

(4) If line 8d(3) is "Yes," enter number of years by which the amortization period was extended (not including the number of years in line (2)). 8d(4)

(5) If line 8d(3) is "Yes," enter the date of the ruling letter approving the extension 8d(5)

(6) If line 8d(3) is "Yes," is the amortization base eligible for amortization using interest rates applicable under section 6621(b) of the Code for years beginning after 2007? Yes No

e If box 5h is checked or the plan received an amortization extension for this plan year under Code section 431(d), enter the difference between the amount necessary to satisfy the plan's minimum funding standard for this plan year and the amount that would have been necessary without using the shortfall method or extending the amortization period(s).		8e	278,580
9 Funding standard account statement for this plan year:			
Charges to funding standard account:			
a Prior year funding deficiency, if any		9a	6,259,577
b Employer's normal cost for plan year as of valuation date		9b	1,300,186
c Amortization charges as of valuation date:		Outstanding balance	
(1) All bases except funding waivers and certain bases for which the amortization period has been extended		9c(1)	32,494,307
(2) Funding waivers		9c(2)	
(3) Certain bases for which the amortization period has been extended		9c(3)	
d Interest as applicable on lines 9a, 9b, and 9c		9d	938,426
e Total charges. Add lines 9a through 9d		9e	13,450,773
Credits to funding standard account:			
f Prior year credit balance, if any		9f	0
g Employer contributions. Total from column (b) of line 3		9g	1,880,776
h Amortization credits as of valuation date		Outstanding balance	
		9h	4,232,401
i Interest as applicable to end of plan year on lines 9f, 9g, and 9h		9i	96,352
j Full funding limitation (FFL) and credits:			
(1) ERISA FFL (accrued liability FFL)		9j(1)	36,612,156
(2) "RPA '94" override (90% current liability FFL)		9j(2)	88,401,463
(3) FFL credit		9j(3)	0
k (1) Waived funding deficiency		9k(1)	
(2) Other credits		9k(2)	
l Total credits. Add lines 9f through 9i, 9j(3), 9k(1), and 9k(2)		9l	2,474,768
m Credit balance: If line 9l is greater than line 9e, enter the difference		9m	
n Funding deficiency: If line 9e is greater than line 9l, enter the difference		9n	10,976,005
o Current year's accumulated reconciliation account:			
(1) Due to waived funding deficiency accumulated prior to the current plan year		9o(1)	
(2) Due to amortization bases extended and amortized using the interest rate under section 6621(b) of the Code:			
(a) Reconciliation outstanding balance as of valuation date		9o(2)(a)	
(b) Reconciliation amount (line 9c(3) balance minus line 9o(2)(a))		9o(2)(b)	0
(3) Total as of valuation date		9o(3)	0
10 Contribution necessary to avoid an accumulated funding deficiency. (see instructions.)		10	10,976,005
11 Has a change been made in the actuarial assumptions for the current plan year? If "Yes," see instructions			<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

Schedule of Progress of Rehabilitation Plan

The following table shows the estimated credit balance and funding percentages throughout the Rehabilitation Period.

Estimated Plan Year End Results:

<u>Date</u>	<u>Credit Balance</u>	<u>Funded Percentage</u>
December 31, 2023	\$ (6,300,000)	63%
December 31, 2024	(10,700,000)	60%
December 31, 2025	(15,620,000)	55%
December 31, 2026	(21,140,000)	51%
December 31, 2027	(27,320,000)	48%
December 31, 2028	(33,560,000)	45%
December 31, 2029	(39,750,000)	41%
December 31, 2030	(46,110,000)	37%
December 31, 2031	(42,030,000)	33%

The schedule of progress under the Rehabilitation Plan is such that the avoid insolvency and emerge from Critical and Declining Status while exhausting all reasonable measures

Conclusion:

The plan satisfies the schedule of progress as set by the Rehabilitation Plan.

Plan Provisions

Effective January 1, 1971
As Restated Effective January 1, 2016

The following is a summary of the major provisions of the plan as of January 1, 2024. Refer to the plan document for a more complete description of the most recent plan provisions.

Participation Upon completion of 200 hours of Credited Employment in a plan year or 1,000 hours of service in a 12 month period.

Credited Employment Prior to January 1, 1971 – A year of Credit Service is granted for each full and partial year of service.

After December 31, 1971 – Granted according to the following schedule:

Hours	Years of Credit
0 - 199	0.00
200 - 399	0.25
400 - 599	0.50
600 - 799	0.75
800+	1.00

Accrued Benefit

A monthly life annuity equal to the sum of the following:

- The accrued benefit as of December 31, 1990,
- 2.8% of contributions received from January 1, 1991 to December 31, 1997,
- 3.0% of contributions received from January 1, 1998 to December 31, 2002,
- 2.6% of contributions received from January 1, 2003 to December 31, 2011,
- 2.2% of contributions received from January 1, 2012 to December 31, 2012 for up to first 2,000 hours worked per year,
- 2.0% of contributions received after January 1, 2013 to June 30, 2016 for up to first 2,000 hours worked per year,
- 1.35% of contributions received after July 1, 2016 to December 31, 2019 for up to first 2,000 hours worked per year, and
- 2.0% of contributions received after January 1, 2020 for up to first 2,000 hours worked per year.

Plan Provisions (continued)

Normal Retirement

Eligibility: Age 65 and the 5th anniversary of participation, or age 63 with 25 years of Credited Service

Benefit: The Accrued Benefit

Early Retirement

Eligibility: Age 60 with 10 years of service.

Benefit: The Accrued Benefit reduced by 0.25% for each month prior to age 63 if have at least 25 years of service, otherwise reduced by 0.15% for each month prior to age 65. Effective July 1, 2016 reductions were changed to: if at least 25 years of service then reduced .5% per month from age 63, otherwise reduced 5% for each year prior to age 65. If a participant who does not earn at least 1,500 hours of Employer Contributions in the 60 months before retirement than the applicable reduction is the full actuarial equivalent.

Vested Termination

Eligibility: Five Years of Vesting Service

Benefit: The Accrued Benefit payable in full at Normal Retirement Date or in a reduced amount under the Early Retirement provisions.

Disability Retirement

Eligibility: Any time prior to eligibility for Early Retirement. Effective May 1, 2015 a participant must have at least 10 years of service and have worked at least 250 hours in the two plan years prior to disability.

Benefit: For a participant who is vested at the time of disability, the Accrued Benefit reduced for early commencement as if her were age 60 with further reduction of 1.25% per year for each year prior to age 60. For a participant who is not vested at the time of disability, the Accrued Benefit (but not less than \$20 per month) is payable until the total of such payments equals the sum of the contributions made on his behalf.

Pre-Retirement Death

For a participant with one or more years of Credited Employment, a lump sum benefit of 100% of the contributions credited on his behalf. As an offset to the foregoing, the spouse of a vested participant may receive a 50% survivor annuity.

Contributions

Contribution rates vary by contract. Non-benefit responsive contribution increases of 10% effective January 1, 2012, 15% on January 1, 2013, and 10% in 2014 that continue indefinitely are reflected herein.



INDEPENDENT AUDITOR'S REPORT ON SUPPLEMENTAL SCHEDULES

Board of Trustees
Bricklayers Pension Fund of
Western Pennsylvania
Pittsburgh, PA

We have audited the financial statements of the Bricklayers Pension Fund of Western Pennsylvania as of and for the year ended December 31, 2024, and our report thereon dated October 13, 2025 which expressed an unmodified opinion on those financial statements appears on pages 1 and 2. Our audit was conducted for the purpose of forming an opinion on the financial statements taken as a whole. The supplemental schedule of assets held for investment purposes as of December 31, 2024 and the schedule of 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 is supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America.

In forming an opinion on the supplemental schedules, we evaluated whether the supplemental schedules, including its form and content, are presented in conformity with the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974.

In our opinion, the information in the accompanying schedules, is fairly stated in all material respects, in relation to the financial statements taken 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 the Employee Retirement Income Security Act of 1974.

DiClaudio & Kramer, LLC

DiClaudio & Kramer, LLC

McMurray, Pennsylvania
October 13, 2025

**BRICKLAYERS PENSION FUND OF WESTERN PENNSYLVANIA
SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES
DECEMBER 31, 2024**

Federal I.D. - 25-6121713
Plan No. - 001

FORM 5500, Schedule H, Part IV, Question I

<u>(c) Description of investment including maturity date, rate of interest, collateral, par or maturity value</u>										
(a)	(b) Identity of issuer, borrower, lessor or similar party	Description	Collateral	Maturity Date	Rate of Interest	Par/Shares or Maturity Value	(d) Cost	(e) Current Value		
<u>CASH EQUIVALENTS:</u>										
	Federated Gov't Money Market	Money Market	N/A	N/A	variable	2,670,193	\$ 2,670,193	\$ 2,670,193		
<u>U.S. GOVERNMENT SECURITIES:</u>										
	(See attached pages 13 - 16)						2,898,180	2,475,764		
<u>CORPORATE DEBT:</u>										
	(See attached pages 16 - 21)						2,007,529	1,777,949		
<u>COMMON STOCKS:</u>										
	(See attached pages 21 - 35)						10,100,477	16,729,166		
<u>EXCHANGE TRADED FUNDS:</u>										
	(See attached pages 35 - 37)						3,015,426	3,211,234		
<u>REGISTERED INVESTMENT COMPANIES:</u>										
	DFA US Small Cap Portfolio	Mutual Fund	N/A	N/A	N/A	60,649	1,930,963	2,967,566		
	Delaware Small Cap Core	Mutual Fund	N/A	N/A	N/A	92,371	2,139,032	2,809,911		
	MFS International Intrinsic	Mutual Fund	N/A	N/A	N/A	78,107	2,986,361	3,025,073		
	North Square McKee Bond Fund	Mutual Fund	N/A	N/A	N/A	933,760	8,782,656	8,114,379		
	Vanguard Int'l Growth	Mutual Fund	N/A	N/A	N/A	27,812	2,807,622	2,824,907		
							<u>18,646,634</u>	<u>19,741,836</u>		
<u>COMMON / COLLECTIVE TRUST:</u>										
	Erect II - Ameriserv	Trust	N/A	N/A	N/A	760	2,270,607	3,890,262		
<u>OTHER:</u>										
	Illinois State, 5.30%; Due 12/01/27	Bonds	N/A	N/A	N/A	71,190	71,190	70,797		
	OK City Water Util., 4.458%; Due 07/01/36	Bonds	N/A	N/A	N/A	48,312	48,312	46,801		
	Pharr TX Econ Dev, 4.549%; Due 08/15/42	Bonds	N/A	N/A	N/A	43,323	43,323	44,628		
	Warren OH Local SD, 3.33%; Due 12/01/42	Bonds	N/A	N/A	N/A	90,627	90,627	86,841		
	Hamilton Lane Strategic Opp., 2017 Fund	Partnership	N/A	N/A	N/A	660,836	660,836	390,800		
	Hamilton Lane Strategic Opp. VI, 2020 Fund	Partnership	N/A	N/A	N/A	853,621	853,621	2,031,142		
							<u>1,767,909</u>	<u>2,671,009</u>		
							<u>\$ 43,376,955</u>	<u>\$ 53,167,413</u>		

**BRICKLAYERS PENSION FUND OF WESTERN PENNSYLVANIA
ASSETS HELD FOR INVESTMENT PURPOSES**

Federal I.D. - 25-6121713
Plan No. - 001

DECEMBER 31, 2024

FORM 5500, SCHEDULE H, PART IV, QUESTION I

(b) & (c)

(a) Identity & Description

(d)

US government securities

Description (Cusip)	Value last statement Quantity	Current market value		% of total portfolio	Unrealized gain/loss at PNC per unit	Total original value at PNC
		Current price per unit	Current market value			
FEDERAL HOME LOAN BANK BNDS SER 0000 CALL 04/24/2024 05.000% DUE 04/24/2028 RATING: AAA (3130AVQF2)	60,000	\$59,923.80	\$99,8730	0.13 %	\$535.80	\$59,940.00 \$99.90
20-10-002-***3942						
FEDERAL HOME LOAN BANK BNDS CALL 05/01/2026 04.550% DUE 05/01/2030 RATING: AA1 (3130AVTX0)	39,213.60	39,598.80	98,9970	0.09 %	385.20	39,920.00 99.80
20-10-002-***3942	40,000					
FEDERAL HOME LOAN MTG CORP POOL SD0674 02.500% DUE 09/01/2051 RATING: N/A (3132DMXB6)	68,065.67	65,781.66	82.2560	0.15 %	-2,284.01	83,108.28 103.92
20-10-002-***3942	79,971.870					
FEDERAL HOME LOAN MTG CORP POOL SD8172 02.000% DUE 10/01/2051 RATING: N/A (3132DWCH4)	67,233.18	64,176.78	78.1320	0.14 %	-3,056.40	82,960.28 101.00
20-10-002-***3942	82,138.920					
FEDERAL HOME LOAN MTG CORP POOL SD8174 03.000% DUE 09/01/2051 RATING: N/A (3132DWCK7)	60,636.10	58,538.25	85.4970	0.13 %	-2,097.85	72,394.40 105.73
20-10-002-***3942	68,468.190					
FEDERAL HOME LOAN MTG CORP POOL SB8131 01.500% DUE 12/01/2036 RATING: N/A (3132D6A83)	63,215.07	62,430.28	85.8340	0.14 %	-784.79	73,051.94 100.44
20-10-002-***3942	72,733.740					
FEDERAL HOME LOAN MTG CORP POOL QC8400 02.500% DUE 10/01/2051 RATING: N/A (3133ATKM2)	66,068.15	63,568.63	82.3500	0.14 %	-2,499.52	80,232.71 103.94
20-10-002-***3942	77,193.238					
FEDERAL HOME LOAN MTG CORP POOL QC9947 02.500% DUE 11/01/2051 RATING: N/A (3133AVBQ8)	70,135.84	67,506.82	82.2710	0.15 %	-2,629.02	84,515.83 103.00
20-10-002-***3942	82,054.210					
FEDERAL HOME LOAN MTG CORP POOL QE6408 05.000% DUE 07/01/2052 RATING: N/A (3133BGDM7)	65,571.30	64,001.51	96.9530	0.14 %	-1,569.79	68,034.56 103.06
20-10-002-***3942	66,012.920					
FEDERAL FARM CREDIT BANK BNDS CALL 02/17/2026 04.550% DUE 02/17/2033 RATING: AA1 (3133EPAZ8)	38,831.20	38,379.60	95.9490	0.09 %	-451.60	39,768.00 99.42
20-10-002-***3942	40,000					

**BRICKLAYERS PENSION FUND OF WESTERN PENNSYLVANIA
ASSETS HELD FOR INVESTMENT PURPOSES**

Federal I.D. - 25-6121713
Plan No. - 001

FORM 5500, SCHEDULE H, PART IV, QUESTION I

DECEMBER 31, 2024

(a) Identity & Description	(b) & (c)	(d)	(e)	(f)
FEDERAL FARM CREDIT BANK	39,073.20		39,740.40	667.20
BNDS CALL 05/18/2026	40,000		99,3510	40,000.00
05.180% DUE 05/18/2038				100.00
RATING: AA1				
(3133EPJT3)				
20-10-002-***3942				
FEDERAL HOME LOAN MTG CORP	58,612.89		57,759.75	853.14
POOL QN7929	64,975.251		88.8950	67,472.72
02.000% DUE 10/01/2036				103.84
RATING: N/A				
(3133GEY28)				
20-10-002-***3942				
FEDERAL NATL MTG ASSN	57,780.00		55,996.45	2,183.55
POOL BV0353	62,191.902		89.3950	64,562.96
03.500% DUE 03/01/2052				103.81
RATING: N/A				
(3140MDMB1)				
20-10-002-***3942				
FEDERAL NATL MTG ASSN	49,330.64		47,564.53	1,766.11
POOL BV2255	57,962.404		82.0610	58,143.51
02.500% DUE 02/01/2052				100.31
RATING: N/A				
(3140MFGH9)				
20-10-002-***3942				
FEDERAL NATL MTG ASSN	31,024.30		29,827.27	1,197.03
POOL BV4138	36,120.120		82.5780	35,383.61
02.500% DUE 03/01/2052				97.96
RATING: N/A				
(3140MHS42)				
20-10-002-***3942				
FEDERAL NATL MTG ASSN	60,429.56		58,175.98	2,253.58
POOL FM7686	67,735.494		85.8870	71,968.93
03.000% DUE 06/01/2051				106.25
RATING: N/A				
(3140XBRG7)				
20-10-002-***3942				
FEDERAL NATL MTG ASSN	64,987.20		62,459.66	2,527.54
POOL FM7890	76,038.635		82.1420	79,602.92
02.500% DUE 06/01/2051				104.69
RATING: N/A				
(3140XBXU9)				
20-10-002-***3942				
FEDERAL NATL MTG ASSN	53,048.08		51,050.91	1,997.17
POOL FS0766	59,262.981		86.1430	60,124.14
03.000% DUE 03/01/2052				101.45
RATING: N/A				
(3140XFZ87)				
20-10-002-***3942				
FEDERAL NATL MTG ASSN	83,792.10		81,501.81	2,290.29
POOL MA4520	98,043.750		83.1280	99,529.71
02.000% DUE 12/01/2041				101.52
RATING: N/A				
(31418EAW0)				
20-10-002-***3942				
FEDERAL NATL MTG ASSN	43,855.31		42,623.38	1,231.93
POOL MA4540	51,351.610		83.0030	48,174.22
02.000% DUE 02/01/2042				93.81
RATING: N/A				
(31418EBJ8)				
20-10-002-***3942				

**BRICKLAYERS PENSION FUND OF WESTERN PENNSYLVANIA
ASSETS HELD FOR INVESTMENT PURPOSES
DECEMBER 31, 2024**

Federal I.D. - 25-6121713
Plan No. - 001

FORM 5500, SCHEDULE H, PART IV, QUESTION I

(a) Identitivy & Description	(b) & (c)	(e)	(d)		
FEDERAL NATL MTG ASSN	52,930.56	50,777.53	0.11 %	- 2,153.03	63,317.21
POOL MA4548	62,190.020	81.6490			101.81
02.500% DUE 02/01/2052					
RATING: N/A					
(31418EBS8)					
20-10-002-***3942					
FEDERAL NATL MTG ASSN	44,008.56	42,203.00	0.10 %	- 1,805.56	49,819.33
POOL MA4571	49,494.540	85.2680			100.66
02.500% DUE 03/01/2042					
RATING: N/A					
(31418ECH1)					
20-10-002-***3942					
GOVT NATL MTG ASSN II	45,424.45	42,905.52	0.10 %	- 2,518.93	55,575.92
POOL CH7008	54,974.650	78.0460			101.09
02.000% DUE 11/20/2051					
RATING: N/A					
(3617WYD4)					
20-10-002-***3942					
GOVT NATL MTG ASSN II	57,827.18	54,637.36	0.12 %	- 3,189.82	69,558.78
POOL CI7285	69,298.930	78.8430			100.37
02.000% DUE 11/20/2051					
RATING: N/A					
(3617XCCW3)					
20-10-002-***3942					
USA TREASURY NOTES	43,566.50	39,051.50	0.09 %	- 4,515.00	43,855.45
03.375% DUE 11/15/2048	50,000	78.1030			87.71
RATING: AA1					
(912810SE9)					
20-10-002-***3942					
USA TREASURY NOTES	119,923.60	104,879.52	0.23 %	- 15,044.08	170,350.94
02.250% DUE 02/15/2052	173,000	60.6240			98.47
RATING: AA1					
(912810TD0)					
20-10-002-***3942					
USA TREASURY NOTES	131,203.17	121,728.06	0.26 %	- 9,475.11	172,066.88
02.375% DUE 02/15/2042	171,000	71.1860			100.62
RATING: AA1					
(912810TF5)					
20-10-002-***3942					
USA TREASURY NOTES	214,488.00	198,022.50	0.43 %	- 16,465.50	218,636.72
03.875% DUE 05/15/2043	225,000	88.0100			97.17
RATING: AA1					
(912810TS7)					
20-10-002-***3942					

**BRICKLAYERS PENSION FUND OF WESTERN PENNSYLVANIA
ASSETS HELD FOR INVESTMENT PURPOSES
DECEMBER 31, 2024**

Federal I.D. - 25-6121713
Plan No. - 001

FORM 5500 - SCHEDULE H, PART IV, QUESTION I

(a) Identity & Description	(b) & (c)	(e)	(d)
USA TREASURY NOTES 00.750% DUE 03/31/2026 RATING: AA1 (91282CBT7)	227,303.65 245,000	234,670.80 95,7840	7,367.15 100.09
20-10-002-***3942			
USA TREASURY NOTES 01.375% DUE 11/15/2031 RATING: AA1 (91282CDJ7)	111,250.82 134,000	109,499.44 81,7160	- 1,751.38 98.95
20-10-002-***3942			
USA TREASURY NOTES 02.750% DUE 05/31/2029 RATING: AA1 (91282CE56)	136,894.50 145,000	135,570.65 93,4970	- 1,323.85 98.75
20-10-002-***3942			
USA TREASURY NOTES 03.875% DUE 08/15/2033 RATING: AA1 (91282CHT1)	181,772.50 182,000	173,213.04 95,1720	- 8,559.46 91.81
20-10-002-***3942			
USA TREASURY NOTES 04.000% DUE 02/15/2034 RATING: AA1 (91282CJZ5)	58,007.19 61,000	58,398.96 95,7360	391.77 95.09
20-10-002-***3942			
Total US government securities	\$2,475,764.15		\$2,898,179.69

Corporate debt

Description [Cusip]	Value last statement	Current market value		% of total portfolio	Unrealized gain/loss	Total original value at PNC
		Quantity	Current price per unit			
AMERICAN AIRLINES/AADVAN						
SEDOL BN92KXS ISIN USG0R209AA85	\$17,870.22	18,000	\$17,941.86	0.04 %	\$71.64	\$19,080.00
05.500% DUE 04/20/2026 RATING: BA1 (G0R209AA8)			\$99.6770			\$106.00
20-10-002-***3942						
AT&T INC						
CALL 11/15/2034 @ 100.000 UNSC	59,674.86		58,267.44	0.13 %	- 1,407.42	74,867.94
04.500% DUE 05/15/2035 RATING: BAA2 (00206RCP5)	63,000		92.4880			118.84
20-10-002-***3942						
ANHEUSER-BUSCH INBEV WOR						
COGT	40,293.00		38,771.56	0.09 %	- 1,521.44	50,421.75
05.875% DUE 06/15/2035 RATING: A3 (035240AF7)	37,000		104.7880			136.28
20-10-002-***3942						

**BRICKLAYERS PENSION FUND OF WESTERN PENNSYLVANIA
ASSETS HELD FOR INVESTMENT PURPOSES
DECEMBER 31, 2024**

Federal I.D. - 25-6121713
Plan No. - 001

FORM 5500, SCHEDULE H, PART IV, QUESTION I

(a) Identity & Description	(b) & (c)	(e)	(d)
BANCO SANTANDER SA SEDOL ISIN US05964HAR66 05.147% DUE 08/18/2025 RATING: BAA1 (05964HAR6)	17,895.96 18,000	18,016.38 100.0910	120.42 18,000.00 100.00
20-10-002-***3942			
BANK OF AMERICA CORP SER GMTN SUB 04.450% DUE 03/03/2026 RATING: A3 (06051GFU8)	43,515.56 44,000	43,817.84 99.5860	302.28 49,691.84 112.94
20-10-002-***3942			
BECTON DICKINSON & CO CALL 01/08/2029 UNSC 04.874% DUE 02/08/2029 RATING: BAA2 (075887CR8)	30,030.30 30,000	29,918.40 99.7280	- 111.90 30,030.30 100.10
20-10-002-***3942			
BOEING CO CALL 11/01/2049 UNSC 05.805% DUE 05/01/2050 RATING: BAA3 (097023CW3)	18,639.90 18,000	16,742.70 93.0150	- 1,897.20 24,641.64 136.90
20-10-002-***3942			
CARDINAL HEALTH INC CALL 05/15/2044 @ 100.000 UNSC 04.500% DUE 11/15/2044 RATING: BAA2 (14149YBB3)	47,962.75 55,000	45,301.30 82.3660	- 2,661.45 61,112.15 111.11
20-10-002-***3942			
CENTENE CORP SER WI CALL 12/15/2022 04.250% DUE 12/15/2027 RATING: BA1 (15135BAR2)	32,760.70 34,000	32,735.80 96.8700	175.10 35,929.50 105.68
20-10-002-***3942			
CHENIERE ENERGY PARTNERS CALL 12/30/2032 COGT 05.950% DUE 06/30/2033 RATING: BAA2 (16411QAQ4)	40,824.00 40,000	40,947.60 102.3690	123.60 40,824.00 102.06
20-10-002-***3942			
CHEVRON CORP CALL 02/16/2026 @ 100.000 UNSC 02.954% DUE 05/16/2026 RATING: AA2 (166764BL3)	67,696.30 70,000	68,632.90 98.0470	936.60 65,774.80 93.96
20-10-002-***3942			
CITIGROUP INC BDS 06.625% DUE 06/15/2032 RATING: BAA2 (172967BL4)	54,413.00 50,000	53,417.50 106.8350	- 995.50 68,582.50 137.17
20-10-002-***3942			
DXC TECHNOLOGY CO CALL 07/15/2028 UNSC 02.375% DUE 09/15/2028 RATING: BAA2 (23355LAM8)	41,995.68 48,000	43,248.00 90.1000	1,252.32 47,307.30 98.56
20-10-002-***3942			

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FORM 5500, SCHEDULE H, PART IV, QUESTION I

(a) Identity & Description	(b) & (c)	(e)	(d)
DEVON ENERGY CORPORATION	14,441.10	14,507.85	14,441.10
CALL 01/15/2025 UNSC	15,000	96.7190	96.27
04.500% DUE 01/15/2030		0.04 %	
RATING: BAA2			
[25179MBF9]			
20-10-002-***3942			
DOMINION ENERGY INC	47,305.50	48,536.50	47,305.50
SER D CALL 05/15/2026	50,000	97.0730	94.61
02.850% DUE 08/15/2026		0.11 %	
RATING: BAA2			
[25746UCK3]			
20-10-002-***3942			
EQT CORP	47,832.50	48,619.50	46,504.50
CALL 07/01/2027 UNSC	50,000	97.2390	93.01
03.900% DUE 10/01/2027		0.11 %	
RATING: BAA3			
[26884LAF6]			
20-10-002-***3942			
FAIRFAX FINL HLDGS LTD	42,333.50	42,684.81	49,763.04
SEDOL ISIN US303901BB79	43,000	99.2670	115.73
04.850% DUE 04/17/2028		0.10 %	
RATING: BAA2			
[303901BB7]			
20-10-002-***3942			
FORD MOTOR COMPANY	43,853.85	44,292.60	48,577.50
CALL 09/08/2026 UNSC	45,000	98.4280	107.95
04.346% DUE 12/08/2026		0.10 %	
RATING: BA1			
[345370CR9]			
20-10-002-***3942			
FORD MOTOR COMPANY	42,927.00	41,585.00	42,927.00
CALL 11/12/2031 UNSC	50,000	83.1700	85.85
03.250% DUE 02/12/2032		0.09 %	
RATING: BA1			
[345370DA5]			
20-10-002-***3942			
GENERAL MOTORS FINL CO	44,859.00	45,939.00	50,709.50
CALL 02/10/2028 UNSC	50,000	91.8780	101.42
02.400% DUE 04/10/2028		0.10 %	
RATING: BAA2			
[37045XDH6]			
20-10-002-***3942			
GLOBAL PAYMENTS INC	64,154.25	64,145.25	74,922.00
CALL 08/15/2031 UNSC	75,000	85.5270	99.90
02.900% DUE 11/15/2031		0.14 %	
RATING: BAA3			
[37940XAH5]			
20-10-002-***3942			
HCA INC	24,645.95	22,636.60	36,032.50
CALL 01/15/2051 SECR	35,000	64.6760	102.95
03.500% DUE 07/15/2051		0.05 %	
RATING: BAA3			
[404119CB3]			
20-10-002-***3942			
INTERCONTINENTAL EXCHANGE	29,806.40	27,959.45	39,217.60
CALL 03/15/2040 UNSC	40,000	69.8986	98.04
02.650% DUE 09/15/2040		0.06 %	
RATING: A3			
[45866FAP9]			
20-10-002-***3942			

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(a) Identitivy & Description	(b) & (c)	(e)	(d)
INTL PAPER CO		25,017.96	
BND\$		113.7180	
07.300% DUE 11/15/2039			0.06 %
RATING: BAA2			- 1,299.54
(460146CF8)			34,882.98
20-10-002-***3942			158.56
JP MORGAN CHASE & CO		49,570.50	
SR UNSEC CALL 04/22/25 @ 100		99,14.10	
VAR% DUE 04/22/2026			0.11 %
RATING: A1			1,532.50
(46647PBK1)			48,038.00
20-10-002-***3942			96.08
KELLOGG CO		28,983.24	
DEB DTD 03/29/2001 SER B		111,474.00	
07.450% 04/01/2031			0.07 %
RATING: BAA2			- 797.68
(487836AT5)			30,741.88
20-10-002-***3942			118.24
KINDER MORGAN INC/DELAWA		56,076.00	
CALL 12/01/2044 @ 100.000 COGT		93,460.00	
05.550% DUE 06/01/2045			0.12 %
RATING: BAA2			- 1,635.60
(49456BAH4)			54,803.40
20-10-002-***3942			91.34
LINCOLN NATIONAL CORP		36,990.80	
SR UNSEC		104,067.00	
06.300% DUE 10/09/2037			0.08 %
RATING: BAA2			- 567.35
(534187AW9)			50,476.65
20-10-002-***3942			144.22
MARRIOTT INTERNATIONAL		43,107.93	
SER WJ CALL 04/01/2034		93,038.00	
04.500% DUE 10/01/2034			0.10 %
RATING: BAA2			619.93
(571903AX1)			53,877.87
20-10-002-***3942			114.63
MARTIN MARIETTA MATERIAL		64,141.11	
CALL 09/15/2027 UNSC		64,676.44	
03.500% DUE 12/15/2027		96,532.00	
RATING: BAA2			0.14 %
(573284AT3)			535.33
20-10-002-***3942			74,536.83
METLIFE INC		28,282.28	
SR UNSEC		102,066.00	
05.875% DUE 02/06/2041			0.06 %
RATING: A3			- 1,745.12
(59156RAY4)			36,671.18
20-10-002-***3942			141.04
NESTLE CAPITAL CORP		31,977.99	
SER 144A CALL 12/12/2033		32,268.06	
04.875% DUE 03/12/2034		97,782.00	
RATING: AA3			0.07 %
(64105MAC5)			290.07
20-10-002-***3942			31,977.99
NETFLIX INC		42,111.20	
SER 144A UNSC		103,624.00	
05.875% DUE 11/15/2028			0.09 %
RATING: A3			- 661.60
(64110LAT3)			41,300.00
20-10-002-***3942			103.25

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(a) Identity & Description	(b) & (c)	(e)	(d)
PNC FINANCIAL SERVICES	32,712.75	34,440.35	
SER S CALL 11/01/2026	35,000	98,4010	1,727.60
VAR% DUE 12/31/2089			38,412.50
RATING: BAA2			109.75
(693475A08)			
20-10-002-***3942			
PNC FINANCIAL SERVICES	40,201.20	40,343.20	
CALL 01/21/2027 UNSC	40,000	100.8580	142.00
VAR% DUE 01/21/2028			40,201.20
RATING: A3			100.50
(693475BV6)			
20-10-002-***3942			
PACIFICORP	24,510.50	24,837.75	
CALL 11/15/2033 MORT	25,000	99.3510	327.25
05.450% DUE 02/15/2034			24,510.50
RATING: A3			98.04
(695114DD7)			
20-10-002-***3942			
RALPH LAUREN CORP	22,798.50	22,680.50	
CALL 03/15/2030 UNSC	25,000	90.7220	- 118.00
02.950% DUE 06/15/2030			26,817.00
RATING: A3			107.27
(731572AB9)			
20-10-002-***3942			
REINSURANCE GRP OF AMER	61,829.30	62,069.80	
CALL 02/15/2029 UNSC	65,000	95.4920	240.50
03.900% DUE 05/15/2029			73,784.10
RATING: BAA1			113.51
(759351AN9)			
20-10-002-***3942			
STARBUCKS CORP	44,221.00	43,817.00	
CALL 08/15/2030 UNSC	50,000	87.6340	- 404.00
02.550% DUE 11/15/2030			52,399.50
RATING: BAA1			104.80
(855244AZ2)			
20-10-002-***3942			
THERMO FISHER SCIENTIFIC	20,529.00	20,169.20	
CALL 12/31/2028 UNSC	20,000	100.8460	- 359.80
05.000% DUE 01/31/2029			20,059.60
RATING: A3			100.30
(883556DA7)			
20-10-002-***3942			
UPMC	40,491.20	39,298.80	
CALL 02/15/2033 SCRD	40,000	98.2470	- 1,192.40
05.035% DUE 05/15/2033			39,552.40
RATING: A2			98.88
(90320WAG8)			
20-10-002-***3942			
UNDER ARMOUR INC	63,219.19	64,681.80	
CALL 03/15/2026 @ 100.000 UNSC	67,000	96.5400	1,462.61
03.250% DUE 06/15/2026			66,276.25
RATING: B1			98.92
(904311AA5)			
20-10-002-***3942			
UNITED RENTALS NORTH AM	50,763.50	50,444.00	
SER 1444 CALL 12/15/2025	50,000	100.8880	- 319.50
06.000% DUE 12/15/2029			49,475.00
RATING: BAA3			98.95
(911365BQ6)			
20-10-002-***3942			

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VERIZON COMMUNICATIONS	21,363.98	19,765.46	27,031.40
SR UNSEC	22,000	89,8430	122.87
04.750% DUE 11/01/2041		0.05 %	- 1,598.52
RATING: BAA1			
(92343VBE3)			
20-10-002-***3942			
WELLS FARGO & COMPANY	23,779.75	22,191.25	35,208.50
SER MTN CALL 04/04/50 @ 100	25,000	88.7650	140.83
VAR% DUE 04/04/2051		0.05 %	- 1,588.50
RATING: A1			
(95000U2M4)			
20-10-002-***3942			
WHIRLPOOL CORP	19,830.40	19,613.60	19,830.40
CALL 12/01/2033 UNSC	20,000	98.0680	99.15
05.750% DUE 03/01/2034		0.05 %	- 216.80
RATING: BA1			
(963320BC9)			
20-10-002-***3942			
Total corporate debt		\$1,777,948.82	\$2,007,529.09

Corporate stock - common

Description (Symbol)	Value last statement		Current market value		% of total portfolio	Unrealized gain/loss at PNC per unit	Total original value at PNC
	Quantity	price per unit	Current price per unit	Avg. original value			
ACCENTURE PLC CLASS A (ACN)	\$44,916.48		\$45,029.12		0.10 %	\$112.64	\$20,845.13
SEDOL B4BNMY3	128		\$351.7900				\$162.85
ISIN IE00B4BNMY34							
20-10-002-***5471							
ACCENTURE PLC CLASS A (ACN)	50,881.95		51,009.55		0.11 %	127.60	46,309.93
SEDOL B4BNMY3	145		351.7900				319.38
ISIN IE00B4BNMY34							
20-10-002-***5489							
EATON CORP PLC (ETN)	35,400.54		48,784.89		0.11 %	13,384.35	11,077.25
SEDOL B8KQ82	147		331.8700				75.36
ISIN IE00B8KQ827							
20-10-002-***5489							
APTIV HOLDINGS LTD (APT)	8,343.96		5,624.64		0.02 %	- 2,719.32	10,164.62
SEDOL B783TY6	93		60.4800				109.30
ISIN JE00BTDN8H13							
20-10-002-***5471							
INVESCO LTD (IVZ)	17,122.02		18,249.12		0.04 %	1,127.10	17,122.02
ISIN BMG491BT1088 SEDOL B28XP76	1,044		17.4800				16.40
20-10-002-***5489							
MEDTRONIC PLC (MDT)	28,915.38		28,037.88		0.06 %	- 877.50	32,677.77
SEDOL BTN1Y11	351		79.8800				93.10
ISIN IE00BTN1Y115							
20-10-002-***5471							
MEDTRONIC PLC (MDT)	57,089.34		55,356.84		0.12 %	- 1,732.50	56,400.72
SEDOL BTN1Y11	693		79.8800				81.39
ISIN IE00BTN1Y115							
20-10-002-***5489							
SMURFIT WESTROCK PLC (SW)	27,703.75		32,262.14		0.07 %	4,558.39	24,656.39
SEDOL BRK49M5	599		53.8600				41.16
ISIN IE00028FXN24							
20-10-002-***5489							
TRANE TECHNOLOGIES PLC (TT)	26,829.00		40,628.50		0.09 %	13,799.50	17,873.09
SEDOL BK9ZQ86	110		369.3500				162.48
ISIN IE00BK9ZQ967							
20-10-002-***5489							

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CHUBB LTD (CB)	35,030.00	42,826.50	0.10 %
SEDOL B3BQMF6	155	276.3000	7,796.50
ISIN CH0044328745			23,979.14
20-10-002-***5471			154.70
CHUBB LTD (CB)	29,380.00	35,919.00	0.08 %
SEDOL B3BQMF6	130	276.3000	6,539.00
ISIN CH0044328745			25,442.51
20-10-002-***5489			195.71
LYONDELLBASELL INDUSTRIES N.V. (LYB)	19,776.64	15,448.16	0.04 %
ISIN NL0009434992 SEDOL B3SPXZ3	208	74.2700	-4,328.48
20-10-002-***5471			15,721.52
LYONDELLBASELL INDUSTRIES N.V. (LYB)	17,314.78	13,145.79	0.03 %
ISIN NL0009434992 SEDOL B3SPXZ3	177	74.2700	-4,168.99
20-10-002-***5489			17,314.78
AT&T INC (T)	40,976.76	55,604.34	0.12 %
20-10-002-***5489	2,442	22.7700	14,627.58
ABBOTT LABORATORIES INC (ABT)	23,444.91	24,092.43	0.06 %
20-10-002-***5471	213	113.1100	647.52
ABBOTT LABORATORIES INC (ABT)	29,133.67	28,956.16	0.07 %
20-10-002-***5489	256	113.1100	-177.51
ABBVIE INC (ABBV)	60,283.33	69,125.30	0.15 %
20-10-002-***5489	389	177.7000	8,841.97
ADOBE INC (ADBE)	85,954.02	68,480.72	0.15 %
20-10-002-***5471	154	444.6800	-17,473.30
ADOBE INC (ADBE)	65,626.00	48,914.80	0.11 %
20-10-002-***5489	110	444.6800	51,215.07
ADVANCED MICRO DEVICES INC (AMD)	42,601.49	34,908.31	0.08 %
20-10-002-***5471	289	120.7900	-7,693.18
ADVANCED MICRO DEVICES INC (AMD)	45,477.84	36,961.74	0.08 %
20-10-002-***5489	306	120.7900	-8,516.10
AFFIRM HOLDINGS INC (AFRM)	37,985.22	47,075.70	0.11 %
20-10-002-***5471	773	60.9000	9,090.48
AIRBNB INC-CLASS A (ABNB)	21,650.87	18,791.63	0.05 %
20-10-002-***5489	143	131.4100	-2,859.24
AKAMAI TECHNOLOGIES (AKAM)	92,088.84	81,972.05	0.18 %
20-10-002-***5471	857	95.6500	-10,116.79
ALBEMARLE CORP (ALB)	7,079.52	4,217.92	0.01 %
20-10-002-***5471	49	86.0800	-2,861.60
ALPHABET INC/CA-CL C (GOOG)	102,878.90	139,021.20	0.30 %
20-10-002-***5471	730	190.4400	36,142.30
ALPHABET INC/CA-CL C (GOOG)	89,490.55	120,929.40	0.26 %
20-10-002-***5489	635	190.4400	31,438.85
ALPHABET INC/CA-CL A (GOOGL)	176,847.54	239,653.80	0.52 %
20-10-002-***5471	1,266	189.3000	62,806.26
			56,271.84
			44.45

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(b) & (c)

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(a) Identity & Description	(b) & (c)	(d)	(e)	
ALPHABET INC(CA-CL A (GOOGL)	180,339.79	244,386.30	0.53 %	64,046.51
20-10-002-***5489	1,291	189,300		41.52
AMAZON COM INC (AMZN)	171,996.08	248,349.48	0.54 %	76,353.40
20-10-002-***5471	1,132	219,390		84.40
AMAZON COM INC (AMZN)	244,319.52	352,779.12	0.76 %	108,459.60
20-10-002-***5489	1,608	219,390		49.96
AMERICAN AIRLINES GROUP INC (AAL)	20,156.58	25,569.81	0.06 %	5,413.23
20-10-002-***5471	1,467	17,430		16.64
AMENTUM HOLDINGS INC-W/I (AMTM)	5,073.39	5,846.34	0.02 %	772.95
20-10-002-***5471	278	21,030		18.25
AMERICAN TOWER CORP (AMT)	57,424.08	48,787.06	0.11 %	- 8,637.02
20-10-002-***5471	266	183,410		192.00
CENCORA INC (COR)	20,127.24	22,018.64	0.05 %	1,891.40
20-10-002-***5489	98	224,680		9,815.23
AMERIPRISE FINANCIAL INC (AMP)	20,665.82	25,024.21	0.06 %	4,358.39
20-10-002-***5489	47	532,430		439.70
AMGEN INC (AMGN)	28,513.98	25,803.36	0.06 %	- 2,710.62
20-10-002-***5471	99	260,640		16,852.88
AMGEN INC (AMGN)	41,762.90	37,792.80	0.09 %	- 3,970.10
20-10-002-***5489	145	260,640		38,592.40
ANALOG DEVICES INC (ADI)	32,523.77	29,956.86	0.07 %	- 2,566.91
20-10-002-***5489	141	212,460		32,523.77
ANSYS INC (ANSS)	23,470.04	25,637.08	0.06 %	2,167.04
MERGED 07/18/25 @ \$199.91 P/S	76	337,330		23,470.04
SEE ***607107				308.82
20-10-002-***5489				
ELEVANCE HEALTH INC (ELV)	21,691.76	16,969.40	0.04 %	- 4,722.36
20-10-002-***5471	46	368,900		11,622.74
ELEVANCE HEALTH INC (ELV)	30,651.40	23,978.50	0.06 %	- 6,672.90
20-10-002-***5489	65	368,900		8,735.16
APPLE INC (AAPL)	365,229.41	475,046.74	1.02 %	109,817.33
20-10-002-***5471	1,897	250,420		134.39
APPLE INC (AAPL)	509,299.54	656,350.82	1.41 %	125,848.18
20-10-002-***5489	2,621	250,420		66.34
APPLIED MATERIALS INC (AMAT)	25,769.13	25,858.17	0.06 %	89.04
20-10-002-***5471	159	162,630		44.95
ARCHER DANIELS MIDLAND CO (ADM)	23,471.50	16,419.00	0.04 %	- 7,052.50
20-10-002-***5471	325	50,520		138.08
ARCHER DANIELS MIDLAND CO (ADM)	18,921.64	13,236.24	0.03 %	- 5,685.40
20-10-002-***5489	262	50,520		78.51
ARISTA NETWORKS INC (ANET)	46,159.96	86,655.52	0.19 %	40,495.56
20-10-002-***5489	784	110,530		42.54
ARM HOLDINGS PLC ADR (ARM)	40,709.77	50,454.24	0.11 %	9,744.47
SEDOL BNSP5P7	409	123,360		25.78
ISIN US0420682058				40,709.77
20-10-002-***5471				99.53
BANK OF AMERICA CORP (BAC)	16,329.95	21,315.75	0.05 %	4,985.80
20-10-002-***5471	485	43,950		14,788.07
BANK OF AMERICA CORP (BAC)	35,838.86	35,599.50	0.08 %	- 239.36
20-10-002-***5489	810	43,950		35,838.86
BANK NEW YORK MELLON CORP COM (BK)	26,857.80	39,644.28	0.09 %	12,786.48
20-10-002-***5489	516	76,830		44.25
				23,573.97
				45.69

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(a) Identity & Description	(b) & (c)	(d)	
BECTON DICKINSON & CO (BDX)	23,407.68	0.05 %	- 1,628.16
20-10-002-***5471	96		18,871.28
WR BERKLEY CORP (WRB)	31,588.27	0.09 %	196.58
20-10-002-***5489	670		21,519.24
BERKSHIRE HATHAWAY INC (BRKB)	120,210.59	0.31 %	7,620.13
CLASS B	317		32.12
20-10-002-***5471			114,190.14
BERKSHIRE HATHAWAY INC (BRKB)	134,460.82	0.37 %	23,479.17
CLASS B	377		360.22
20-10-002-***5489			79,686.38
BIO RAD LABORATORIES INC (BIO)	22,279.41	0.05 %	211.37
CLASS A	69		34,769.71
20-10-002-***5471			503.91
BIOMEN INC (BIIB)	32,863.79	0.05 %	387.78
20-10-002-***5471	127		34,421.68
BIOMEN INC (BIIB)	18,890.21	0.03 %	271.04
20-10-002-***5489	73		20,659.55
BIO-TECHNE CORP (TECH)	11,496.84	0.03 %	283.01
20-10-002-***5471	149		16,574.13
BLACKROCK FUNDING INC/DE (BLK)	54,390.60	0.15 %	111.24
20-10-002-***5471	67		37,805.30
BLACKROCK FUNDING INC/DE (BLK)	53,878.58	0.15 %	564.26
20-10-002-***5489	68		792.33
BOEING CO (BA)	64,643.68	0.10 %	- 20,747.68
20-10-002-***5471	248		54,897.57
BOSTON SCIENTIFIC CORP (BSX)	31,333.02	0.11 %	221.36
20-10-002-***5471	542		37.71
BRISTOL MYERS SQUIBB CO (BMY)	31,093.86	0.08 %	17,078.42
20-10-002-***5471	606		39,642.91
BRISTOL MYERS SQUIBB CO (BMY)	26,886.44	0.07 %	65.42
20-10-002-***5489	524		33,697.63
BROADCOM INC (AVGO)	95,997.50	0.43 %	64.31
20-10-002-***5471	860		14,362.27
BROADCOM INC (AVGO)	89,411.63	0.40 %	16.70
20-10-002-***5489	801		37,735.91
CBRE GROUP INC (CBRE)	25,134.30	0.08 %	47.11
20-10-002-***5489	270		19,040.94
THE CIGNA GROUP (CI)	25,153.80	0.05 %	10,314.00
20-10-002-***5471	84		70.52
THE CIGNA GROUP (CI)	37,431.25	0.08 %	- 1,958.04
20-10-002-***5489	125		316.40
CVS HEALTH CORPORATION (CVS)	35,295.12	0.05 %	- 2,913.75
20-10-002-***5489	447		195.05
COTERRA ENERGY INC (CTRA)	16,715.60	0.04 %	- 15,229.29
20-10-002-***5471	655		41,712.15
			93.32
			11,206.09
			17.11

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CAMDEN PROPERTY (CPT)	29,489.13	34,463.88	0.08 %
REIT	297	116.0400	4,974.75
20-10-002-***5489			28,824.42
20-10-002-***5471			97.05
CAPITAL ONE FINANCIAL CORP (COF)	12,718.64	17,297.04	0.04 %
	97	178.3200	4,578.40
CAPITAL ONE FINANCIAL CORP (COF)	30,157.60	41,013.60	0.09 %
	230	178.3200	10,856.00
20-10-002-***5489			21,473.85
CATERPILLAR INC (CAT)	49,376.89	60,580.92	0.13 %
	167	362.7600	11,204.03
20-10-002-***5471			29,314.32
CATERPILLAR INC (CAT)	36,071.74	44,256.72	0.10 %
	122	362.7600	18,517.20
20-10-002-***5489			151.78
CENTENE CORP (CNC)	14,693.58	11,994.84	0.03 %
	198	60.5800	-2,698.74
20-10-002-***5489			12,866.21
CENTERPOINT ENERGY INC (CNP)	17,827.68	19,799.52	0.05 %
	624	31.7300	1,971.84
20-10-002-***5489			11,669.11
CHEVRON CORPORATION (CVX)	42,808.92	41,569.08	0.09 %
	287	144.8400	-1,239.84
20-10-002-***5471			33,960.64
CHEVRON CORPORATION (CVX)	49,968.60	48,521.40	0.11 %
	335	144.8400	-1,447.20
20-10-002-***5489			34,789.49
CHIPOTLE MEXICAN GRIL CL A (CMG)	26,538.03	28,220.40	0.07 %
	468	60.3000	1,682.37
20-10-002-***5489			26,538.03
CINCINNATI FINANCIAL CORP (CINF)	18,105.50	25,147.50	0.06 %
	175	143.7000	7,042.00
20-10-002-***5489			18,061.82
CISCO SYSTEMS INC (CSCO)	34,353.60	40,256.00	0.09 %
	680	59.2000	5,902.40
20-10-002-***5471			37,691.31
CINTAS CORP (CTAS)	36,159.60	43,848.00	0.10 %
	240	182.7000	7,688.40
20-10-002-***5489			23,561.23
CITIGROUP INC (C)	14,454.64	19,779.59	0.05 %
	281	70.3900	5,324.95
20-10-002-***5471			16,609.11
CITIGROUP INC (C)	30,555.36	41,811.66	0.09 %
	594	70.3900	11,256.30
20-10-002-***5489			24,962.82
COCA COLA CO (KO)	23,689.86	25,028.52	0.06 %
	402	62.2600	1,338.66
20-10-002-***5471			24,526.10
COCA COLA CO (KO)	55,099.55	58,213.10	0.13 %
	935	62.2600	3,113.55
20-10-002-***5489			50,750.10
COGNIZANT TECHNOLOGY SOLUTIONS (CTSH)	23,867.48	24,300.40	0.06 %
	316	76.9000	432.92
20-10-002-***5489			20,006.75
COINBASE GLOBAL INC - CLASS A (COIN)	33,218.72	47,425.30	0.11 %
	191	248.3000	14,206.58
20-10-002-***5471			40,577.50
COLGATE-PALMOLIVE CO (CL)	28,934.73	33,000.33	0.08 %
	363	90.9100	4,065.60
20-10-002-***5471			27,938.91
COMCAST CORPORATION CL A (CMCSA)	17,452.30	14,936.94	0.04 %
	398	37.5300	-2,515.36
20-10-002-***5471			21,693.90
COMCAST CORPORATION CL A (CMCSA)	37,842.55	32,388.39	0.07 %
	863	37.5300	-5,454.16
20-10-002-***5489			28,837.35
CONOCOPHILLIPS (COP)	25,999.68	22,214.08	0.05 %
	224	99.1700	-3,785.60
20-10-002-***5471			13,661.20
CONSOLIDATED EDISON INC (ED)	27,343.62	26,322.85	0.06 %
	295	89.2300	-1,020.77
20-10-002-***5489			28,737.93
			97.42

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CONSTELLATION BRANDS INC (STZ)	40,614.00	37,128.00	0.08 %
CL A	168	221,000	- 3,486.00
20-10-002-***5471			34,674.38
20-10-002-***5489			206.40
COPART INC (CPRT)	30,282.00	35,467.02	0.08 %
20-10-002-***5489	618	57,390	5,185.02
CORTEVA INC-WI (CTVA)	13,369.68	15,891.84	0.04 %
20-10-002-***5471	279	56,960	2,522.16
20-10-002-***5471			8,483.74
20-10-002-***5489			30.41
CORTEVA INC-WI (CTVA)	18,065.84	21,473.92	0.05 %
20-10-002-***5489	377	56,960	3,408.08
COSTCO WHOLESALE CORP (COST)	75,249.12	104,454.78	0.23 %
20-10-002-***5471	114	916,270	29,205.66
COSTCO WHOLESALE CORP (COST)	62,047.52	86,129.38	0.19 %
20-10-002-***5489	94	916,270	24,081.86
20-10-002-***5489			39,889.31
CUMMINS INC (CMI)	25,873.56	37,648.80	0.09 %
20-10-002-***5471	108	348,600	11,775.24
20-10-002-***5471			21,428.39
DEERE & CO (DE)	38,787.39	41,098.90	0.09 %
20-10-002-***5471	97	423,700	2,311.51
20-10-002-***5471			34,208.63
DELTA AIR LINES INC (DAL)	14,885.10	22,385.00	0.05 %
20-10-002-***5489	370	60,500	7,499.90
20-10-002-***5489			16,163.30
DENTSPLY SIRONA INC (XRAY)	36,230.62	19,321.64	0.05 %
20-10-002-***5471	1,018	18,980	- 16,908.98
20-10-002-***5489			36,592.41
DEVON ENERGY CORP NEW (DVN)	13,253.13	9,000.75	0.02 %
20-10-002-***5489	275	32,730	- 4,252.38
20-10-002-***5489			13,253.13
DEXCOM INC (DXCM)	26,555.26	16,642.78	0.04 %
20-10-002-***5471	214	77,770	- 9,912.48
20-10-002-***5471			22,345.09
DIGITAL RLTY TR INC (DLR)	69,847.02	92,034.27	0.20 %
20-10-002-***5471	519	177,330	22,187.25
20-10-002-***5471			68,263.40
DIGITAL RLTY TR INC (DLR)	17,005.62	18,619.65	0.04 %
20-10-002-***5489	105	177,330	1,614.03
20-10-002-***5489			17,005.62
DISNEY WALT CO (DIS)	34,581.07	42,647.05	0.10 %
20-10-002-***5471	383	111,350	8,065.98
20-10-002-***5471			56,614.69
DOW INC (DOW)	42,171.96	30,859.97	0.07 %
20-10-002-***5471	769	40,130	- 11,311.99
20-10-002-***5471			37,309.24
DUKE ENERGY HOLDING CORP (DUK)	12,906.32	14,329.42	0.04 %
20-10-002-***5471	133	107,740	1,423.10
20-10-002-***5471			13,557.58
DUKE ENERGY HOLDING CORP (DUK)	30,664.64	34,045.84	0.08 %
20-10-002-***5489	316	107,740	3,381.20
20-10-002-***5489			31,762.32
DUPONT DE NEMOURS INC-WI (DD)	19,617.15	19,443.75	0.05 %
20-10-002-***5471	255	76,250	- 173.40
20-10-002-***5471			16,287.77
EOG RES INC (EOG)	8,103.65	8,212.86	0.02 %
20-10-002-***5471	67	122,580	109.21
20-10-002-***5471			8,448.41
EOG RES INC (EOG)	23,035.71	23,290.20	0.05 %
20-10-002-***5489	190	122,580	254.49
20-10-002-***5489			25,006.76
20-10-002-***5489			131.61

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EQT CORPORATION (EQT)			35,596.92	0.08 %	5,751.40
20-10-002-***5471		29,845.52	772		31,158.35
EBAY INC (EBAY)			46,1100		40.36
20-10-002-***5471		30,228.66	42,931.35	0.10 %	43,064.49
EBAY INC (EBAY)			61,9500		62.14
20-10-002-***5489		16,488.36	23,417.10	0.05 %	18,307.78
ECOLAB INC (ECL)			61,9500		48.43
20-10-002-***5489		29,027.74	30,461.60	0.07 %	29,027.74
EDWARDS LIFSCIENCES CORP (EW)			234,3200		223.29
20-10-002-***5471		21,960.00	21,320.64	0.05 %	22,856.13
EDWARDS LIFSCIENCES CORP (EW)			74,0300		79.36
20-10-002-***5489		25,467.50	24,726.02	0.06 %	21,894.67
ELECTRONIC ART (EA)			74,0300		65.37
20-10-002-***5471		13,407.38	14,337.40	0.04 %	13,662.97
EMBECTA CORP-W/I (EMBC)			146,3000		139.42
20-10-002-***5471		359.67	392.35	0.01 %	441.92
ENPHASE ENERGY INC (ENPH)			20,6500		23.26
20-10-002-***5471		45,720.44	29,763.28	0.06 %	52,672.66
ENERGY CORP (ETR)			68,6800		152.23
NEW		12,345.18	18,500.08	0.04 %	8,497.93
20-10-002-***5489		244	75,8200		34.83
EPAM SYSTEMS INC (EPAM)			12,626.28	0.03 %	16,495.15
20-10-002-***5471		16,056.36	233,8200		305.47
EQUINIX INC (EQIX)			148,033.73	0.32 %	119,385.97
20-10-002-***5471		123,531.87	942,8900		760.42
EQUITY RESIDENTIAL (EQR)			31,861.44	0.07 %	33,967.72
SH BEN INT REIT			71,7600		76.50
20-10-002-***5489		26,709.59			
EXPEDIA GROUP INC (EXPE)			25,899.87	0.06 %	23,267.17
20-10-002-***5489		21,098.81	186,3300		167.39
EXTRA SPACE STORAGE INC (EXR)			21,392.80	0.05 %	22,545.17
20-10-002-***5489		22,545.17	149,6000		157.66
EXXON MOBIL CORP (XOM)			32,055.86	0.07 %	14,104.58
20-10-002-***5471		29,794.04	107,5700		47.33
EXXON MOBIL CORP (XOM)			64,326.86	0.14 %	45,169.52
20-10-002-***5489		59,641.43	107,5700		75.53
META PLATFORMS INC (META)			220,151.76	0.47 %	87,062.80
20-10-002-***5471		133,088.96	585,5100		71,079.96
META PLATFORMS INC (META)			231,276.45	0.50 %	50,127.12
20-10-002-***5489		139,814.20	585,5100		126.90
FEDEX CORPORATION (FDX)			32,071.62	0.07 %	17,796.92
20-10-002-***5471		28,838.58	281,3300		156.11
F5 INC (FFIV)			36,714.62	0.08 %	26,874.38
20-10-002-***5489		26,874.38	251,4700		184.07
FIDELITY NATIONAL INFORMATION (FIS)			16,315.54	0.04 %	26,734.56
20-10-002-***5471		12,134.14	80,7700		132.35
FIDELITY NATIONAL INFORMATION (FIS)			48,381.23	0.11 %	31,458.58
20-10-002-***5489		35,981.93	80,7700		52.52
FORD MOTOR COMPANY (F)			35,600.40	0.08 %	49,329.89
20-10-002-***5471		43,835.24	9,9000		13.72

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FORD MOTOR COMPANY (F)	21,637.25	17,572.50	17,607.87
20-10-002-***5489	1,775	9,900	9.92
FORTINET INC (FTNT)	21,480.51	34,674.16	5,362.57
20-10-002-***5489	367	94,480	14.61
FREEMPORT-MCMORAN INC (FCX)	70,968.51	65,269.12	67,827.38
20-10-002-***5471	1,714	38,080	39.57
GARTNER INC (IT)	23,343.31	25,192.44	1,849.13
20-10-002-***5489	52	484,470	448.91
GENERAC HOLDINGS INC (GNRC)	56,607.12	67,911.90	47,243.03
20-10-002-***5471	438	155,050	107.86
GE AEROSPACE (GE)	37,395.59	48,869.47	23,649.72
20-10-002-***5489	293	166,790	80.72
GENERAL MOTORS CO (GM)	20,079.28	29,777.93	19,110.94
20-10-002-***5489	559	53,270	34.19
GENUINE PARTS CO (GPC)	14,237.69	11,559.24	14,237.69
20-10-002-***5489	99	116,760	143.82
GILEAD SCIENCES INC (GILD)	10,288.27	11,730.99	10,261.42
20-10-002-***5471	127	92,370	80.80
GILEAD SCIENCES INC (GILD)	19,118.36	21,799.32	18,756.69
20-10-002-***5489	236	92,370	79.48
GLOBAL PAYMENTS INC-W/ (GPN)	21,717.00	19,162.26	25,804.39
20-10-002-***5471	171	112,060	150.90
HP INC (HPQ)	15,232.30	16,119.22	15,232.30
20-10-002-***5489	494	32,630	30.83
HALLIBURTON CO (HAL)	14,821.50	11,147.90	12,931.63
20-10-002-***5471	410	27,190	31.54
HARTFORD INSURANCE GROUP INC (HIG)	19,773.48	26,912.40	18,392.35
20-10-002-***5489	246	109,400	74.77
HEWLETT PACKARD ENTERPRISE CO (HPE)	13,091.58	16,460.85	11,166.92
20-10-002-***5489	771	21,350	14.48
HOLOGIC INC (HOLX)	17,076.55	17,229.51	16,235.87
20-10-002-***5489	239	72,090	67.93
HOME DEPOT INC (HD)	37,080.85	41,621.93	26,017.82
20-10-002-***5471	107	388,990	243.16
HOME DEPOT INC (HD)	58,710.50	62,238.40	52,872.89
20-10-002-***5489	160	388,990	330.46
HONEYWELL INTL INC (HON)	28,101.14	30,269.26	21,864.62
20-10-002-***5471	134	225,890	163.17
HOST HOTELS & RESORTS INC (HST)	25,505.70	22,951.20	22,385.14
REIT	1,310	17,520	17.09
20-10-002-***5489			
INCYTE CORPORATION (INCY)	16,450.98	18,096.34	21,096.47
20-10-002-***5471	262	69,070	80.52
INGERSOLL RAND INC (IR)	20,881.80	24,424.20	16,211.86
20-10-002-***5489	270	90,460	60.04
INTEL CORP (INTC)	32,009.25	12,771.85	29,874.46
20-10-002-***5471	637	20,050	46.90
INTERCONTINENTAL EXCHANGE INC (ICE)	31,654.70	28,311.90	31,654.70
20-10-002-***5489	190	149,010	166.60
INTUIT SOFTWARE (INTU)	53,127.55	53,422.50	45,725.20
20-10-002-***5489	85	628,500	537.94

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IQVIA HOLDINGS INC (IQV)	15,502.46	13,166.17	0.03 %	- 2,336.29	17,303.67
20-10-002-***5471	67	196,510.00			258.26
JPMORGAN CHASE & CO (JPM)	96,957.00	136,634.70	0.30 %	39,677.70	34,733.93
20-10-002-***5471	570	239,710.00			60.94
JPMORGAN CHASE & CO (JPM)	94,575.60	133,278.76	0.29 %	38,703.16	45,116.80
20-10-002-***5489	556	239,710.00			81.15
JACOBS SOLUTIONS INC (J)	36,084.40	37,146.36	0.08 %	1,061.96	24,680.27
20-10-002-***5471	278	133,620.00			88.78
JACOBS SOLUTIONS INC (J)	25,744.16	23,784.36	0.06 %	- 1,959.80	21,354.44
20-10-002-***5489	178	133,620.00			119.97
JOHNSON & JOHNSON (JNJ)	49,529.84	45,699.92	0.10 %	- 3,829.92	45,709.48
20-10-002-***5471	316	144,620.00			144.65
JOHNSON & JOHNSON (JNJ)	77,429.56	71,442.28	0.16 %	- 5,987.28	63,267.32
20-10-002-***5489	494	144,620.00			128.07
KKR & CO INC (KKR)	38,937.74	48,662.39	0.11 %	9,724.65	38,937.74
CLASS A	329	147,910.00			118.35
20-10-002-***5489					
KIMBERLY-CLARK CORP (KMB)	29,891.46	32,235.84	0.07 %	2,344.38	33,120.58
20-10-002-***5471	246	131,040.00			134.64
KIMCO REALTY CORP (KIM)	27,328.53	32,731.71	0.07 %	5,403.18	27,328.53
REIT	1,397	23,430.00			19.56
20-10-002-***5489					
KRAFT HEINZ CO/THE (KHC)	7,691.84	6,387.68	0.02 %	- 1,304.16	6,697.29
20-10-002-***5489	208	30,710.00			32.20
KROGER CO (KR)	15,130.01	20,240.65	0.05 %	5,110.64	10,502.94
20-10-002-***5489	331	61,150.00			31.73
L3 HARRIS TECHNOLOGIES INC (LHX)	22,775.42	23,130.80	0.05 %	355.38	22,775.42
20-10-002-***5471	110	210,280.00			207.05
LAM RESEARCH CORP (LRCX)	31,330.40	28,892.00	0.07 %	- 2,438.40	26,102.03
20-10-002-***5471	400	72,230.00			65.26
LAM RESEARCH CORP (LRCX)	30,547.14	28,169.70	0.07 %	- 2,377.44	11,143.76
20-10-002-***5489	390	72,230.00			28.57
LAS VEGAS SANDS CORP (LVS)	21,898.45	22,855.20	0.05 %	956.75	25,952.40
20-10-002-***5471	445	51,360.00			58.32
LEIDOS HOLDINGS INC-W/I (LDOS)	62,670.96	83,410.74	0.18 %	20,739.78	57,797.80
20-10-002-***5471	579	144,060.00			99.82
LENNAR CORP (LEN)	51,269.76	46,911.28	0.11 %	- 4,358.48	32,740.40
CLASS A	344	136,370.00			95.18
20-10-002-***5471					
LENNAR CORP (LEN)	37,856.16	34,637.98	0.08 %	- 3,218.18	20,101.66
CLASS A	254	136,370.00			79.14
20-10-002-***5489					
ELI LILLY & CO (LLY)	43,719.00	57,900.00	0.13 %	14,181.00	12,379.11
20-10-002-***5471	75	772,000.00			165.05
ELI LILLY & CO (LLY)	101,055.72	120,432.00	0.26 %	19,376.28	66,559.57
20-10-002-***5489	156	772,000.00			426.66
LINCOLN NATIONAL CORP (LNC)	19,067.79	22,418.97	0.05 %	3,351.18	46,562.68
20-10-002-***5471	707	31,710.00			65.86
LOWES COMPANIES INC (LOW)	23,367.75	25,914.00	0.06 %	2,546.25	8,441.01
20-10-002-***5471	105	246,800.00			80.39
MARRIOTT INTERNATIONAL INC (MAR)	20,746.92	25,662.48	0.06 %	4,915.56	14,499.06
CL A	92	278,940.00			157.60
20-10-002-***5471					
MARRIOTT INTERNATIONAL INC (MAR)	27,512.22	34,030.68	0.08 %	6,518.46	16,016.48
CL A	122	278,940.00			131.28
20-10-002-***5489					

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FORM 5500, SCHEDULE H, PART IV, QUESTION I

(a) Identity & Description	(b) & (c)	(d)	(e)	(d)	
MASCO CORP (MAS)	14,400.70	15,602.55	0.04 %	1,201.85	12,166.16
20-10-002-***5471	215	72,5700			56.59
MASTERCARD INC CL A (MA)	40,944.96	50,550.72	0.11 %	9,605.76	21,738.60
20-10-002-***5471	96	526.5700			226.44
MCDONALD'S CORP (MCD)	75,977.41	77,690.52	0.17 %	1,713.11	75,977.41
20-10-002-***5471	268	289.8900			283.50
MCKESSON CORPORATION (MCK)	28,704.76	35,334.42	0.08 %	6,629.66	10,996.49
20-10-002-***5489	62	569.9100			177.36
MERCK & CO INC (MRK)	37,938.96	34,619.04	0.08 %	-3,319.92	21,233.48
20-10-002-***5471	348	99.4800			61.02
MERCK & CO INC (MRK)	50,347.00	44,865.48	0.10 %	-5,481.52	40,822.15
20-10-002-***5489	451	99.4800			90.51
METLIFE INC. (MET)	15,805.07	19,569.32	0.05 %	3,764.25	15,549.89
20-10-002-***5489	239	81.8800			65.06
MICROSOFT CORP (MSFT)	364,185.46	400,846.50	0.86 %	36,661.04	162,091.77
20-10-002-***5471	951	421.5000			170.44
MICROSOFT CORP (MSFT)	481,732.86	539,520.00	1.16 %	57,787.14	107,072.35
20-10-002-***5489	1,280	421.5000			83.65
MICRON TECHNOLOGY INC (MU)	61,444.80	60,595.20	0.13 %	-849.60	49,418.66
20-10-002-***5471	720	84.1600			68.64
MICRON TECHNOLOGY INC (MU)	24,311.10	24,827.20	0.06 %	516.10	24,311.10
20-10-002-***5489	295	84.1600			82.41
MODERNA INC (MRNA)	7,458.75	3,118.50	0.01 %	-4,340.25	29,030.87
20-10-002-***5471	75	41.5800			387.08
MOLINA HEALTHCARE INC (MOH)	16,981.57	13,679.35	0.03 %	-3,302.22	15,433.79
20-10-002-***5489	47	291.0500			328.38
MOLSON COORS BEVERAGE COMPANY (TAP)	12,731.68	11,922.56	0.03 %	-809.12	8,709.60
20-10-002-***5489	208	57.3200			41.87
MONDELEZ INTERNATIONAL (MDLZ)	11,154.22	9,198.42	0.02 %	-1,955.80	10,217.85
20-10-002-***5471	154	59.7300			66.35
MONDELEZ INTERNATIONAL (MDLZ)	27,595.83	22,757.13	0.05 %	-4,838.70	23,313.58
20-10-002-***5489	381	59.7300			61.19
MONOLITHIC POWER SYSTEMS INC (MPWR)	15,600.12	13,017.40	0.03 %	-2,582.72	15,600.12
20-10-002-***5489	22	591.7000			709.10
MORGAN STANLEY (MS)	31,052.25	41,864.76	0.09 %	10,812.51	15,994.96
20-10-002-***5471	333	125.7200			48.03
MOSAIC CO/THE (MOS)	23,974.83	16,493.18	0.04 %	-7,481.65	32,291.60
20-10-002-***5471	671	24.5800			48.12
MOSAIC CO/THE (MOS)	16,628.99	13,789.38	0.03 %	-2,839.61	16,628.99
20-10-002-***5489	561	24.5800			29.64
MOTOROLA SOLUTIONS INC (MSI)	38,234.77	36,978.40	0.08 %	-1,256.37	38,234.77
20-10-002-***5489	80	462.2300			477.93
NETAPP INC (NTAP)	23,979.52	31,573.76	0.07 %	7,594.24	18,584.75
20-10-002-***5471	272	116.0800			68.33
NETAPP INC (NTAP)	16,309.60	21,474.80	0.05 %	5,165.20	11,323.27
20-10-002-***5489	185	116.0800			61.21
NETFLIX INC (NFLX)	57,938.72	106,067.08	0.23 %	48,128.36	29,767.34
20-10-002-***5471	119	891.3200			250.15
NETFLIX INC (NFLX)	43,819.20	80,218.80	0.18 %	36,399.60	28,091.23
20-10-002-***5489	90	891.3200			312.12
NEWMONT CORP (NEM)	46,518.10	36,773.36	0.08 %	-9,744.74	46,518.10
20-10-002-***5471	988	37.2200			47.08

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NEWMONT CORP (NEM)	26,587.22		22,518.10	0.05 %	- 4,069.12	20,462.04
20-10-002-***5489	605		37,220.00			33.82
NEWS CORP/NEW-CL A-W/I (NWSA)	15,316.57		15,670.26	0.04 %	353.69	15,316.57
20-10-002-***5489	569		27,540.00			26.92
NORDSON CORPORATION (NDSN)	31,138.49		26,155.00	0.06 %	- 4,983.49	31,138.49
20-10-002-***5489	125		209,240.00			249.11
NORTHROP GRUMMAN CORPORATION (NOC)	20,130.02		20,179.47	0.05 %	49.45	11,605.84
20-10-002-***5471	43		469,290.00			269.90
NUCOR CORP (NUE)	45,424.44		30,461.31	0.07 %	- 14,963.13	24,842.42
20-10-002-***5471	261		116,710.00			95.18
NUCOR CORP (NUE)	26,106.00		17,506.50	0.04 %	- 8,599.50	12,190.45
20-10-002-***5489	150		116,710.00			81.27
NVIDIA CORP (NVDA)	211,458.94		573,418.30	1.23 %	361,959.36	73,657.81
20-10-002-***5471	4,270		134,290.00			17.25
NVIDIA CORP (NVDA)	216,807.32		587,921.62	1.26 %	371,114.30	35,768.86
20-10-002-***5489	4,378		134,290.00			8.17
OCCIDENTAL PETROLEUM CORP (OXY)	27,765.15		22,975.65	0.05 %	- 4,789.50	32,354.93
20-10-002-***5471	465		49,410.00			69.58
OCCIDENTAL PETROLEUM CORP (OXY)	18,509.81		16,997.04	0.04 %	- 1,512.77	18,509.81
20-10-002-***5489	344		49,410.00			53.81
OLD DOMINION FIGHT LINES INC (ODFL)	14,997.21		13,053.60	0.03 %	- 1,943.61	10,454.32
20-10-002-***5471	74		176,400.00			141.27
OMNICOM GROUP (OMC)	20,809.09		17,896.32	0.04 %	- 2,912.77	20,809.09
20-10-002-***5489	208		86,040.00			100.04
ON SEMICONDUCTOR CORPORATION (ON)	33,579.06		25,346.10	0.06 %	- 8,232.96	31,004.17
20-10-002-***5471	402		63,050.00			77.12
ONEOK INC (OKE)	20,855.34		29,818.80	0.07 %	8,963.46	17,905.50
NEW	297		100,400.00			60.29
20-10-002-***5489						
ORACLE CORP (ORCL)	37,322.22		58,990.56	0.13 %	21,668.34	23,711.20
20-10-002-***5471	354		166,640.00			66.98
PPG INDUSTRIES INC (PPG)	35,592.90		28,429.10	0.07 %	- 7,163.80	26,619.05
20-10-002-***5471	238		119,450.00			111.84
PPG INDUSTRIES INC (PPG)	21,684.75		17,320.25	0.04 %	- 4,364.50	20,447.29
20-10-002-***5489	145		119,450.00			141.02
PACCAR INC (PCAR)	30,466.80		32,454.24	0.07 %	1,987.44	17,556.77
20-10-002-***5489	312		104,020.00			56.27
PALANTIR TECHNOLOGIES INC-A (PLTR)	20,999.20		37,209.96	0.08 %	16,210.76	20,999.20
20-10-002-***5489	492		75,630.00			42.68
PALO ALTO NETWORKS INC (PANW)	27,640.51		34,208.48	0.08 %	6,567.97	27,640.51
20-10-002-***5471	188		181,960.00			147.02
PAYCHEX INC (PAYX)	38,948.97		45,851.94	0.10 %	6,902.97	30,151.26
20-10-002-***5489	327		140,220.00			92.21
PAYPAL HOLDINGS INC-W/I (PYPL)	24,072.72		33,457.20	0.08 %	9,384.48	52,283.42
20-10-002-***5471	392		85,350.00			133.38
PELTON INTERACTIVE INC-A (PTON)	2,551.71		3,645.30	0.01 %	1,093.59	20,706.31
20-10-002-***5471	419		8,700.00			49.42
PEPSICO INC (PEP)	41,440.96		37,102.64	0.08 %	- 4,338.32	41,458.87
20-10-002-***5471	244		152,060.00			169.91
PEPSICO INC (PEP)	44,498.08		39,839.72	0.09 %	- 4,658.36	36,710.04
20-10-002-***5489	262		152,060.00			140.11

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FORM 5500, SCHEDULE H, PART IV, QUESTION I

(a) Identity & Description	(b) & (c)	(e)	(d)		
PFIZER INC (PFE)	19,836.31	18,279.17	0.04 %	- 1,557.14	30,377.08
20-10-002-***5471	689	26,530.00			44.09
PFIZER INC (PFE)	21,390.97	19,711.79	0.05 %	- 1,679.18	25,005.43
20-10-002-***5489	743	26,530.00			33.65
PINTEREST INC- CLASS A (PINS)	23,446.32	18,357.00	0.04 %	- 5,089.32	39,832.19
20-10-002-***5471	633	29,000.00			62.93
POOL CORP (POOL)	21,530.34	18,410.76	0.04 %	- 3,119.58	18,258.01
20-10-002-***5471	54	340,940.00			338.11
PRICE T ROWE GROUP INC (TROW)	44,260.59	46,479.99	0.10 %	2,219.40	45,346.46
20-10-002-***5489	411	113,090.00			110.33
PRINCIPAL FINANCIAL GROUP (PFG)	16,363.36	16,101.28	0.04 %	- 262.08	9,279.07
20-10-002-***5489	208	77,410.00			44.61
PROCTER & GAMBLE CO (PG)	48,797.82	55,827.45	0.12 %	7,029.63	47,851.42
20-10-002-***5471	333	167,650.00			143.70
PROCTER & GAMBLE CO (PG)	75,468.10	86,339.75	0.19 %	10,871.65	55,657.72
20-10-002-***5489	515	167,650.00			108.07
PRUDENTIAL FINANCIAL, INC. (PRU)	30,075.90	34,373.70	0.08 %	4,297.80	24,631.14
20-10-002-***5471	290	118,530.00			84.93
PULTE GROUP INC (PHM)	40,565.46	42,797.70	0.10 %	2,232.24	9,375.84
20-10-002-***5489	393	108,900.00			23.86
QUALCOMM (QCOM)	44,401.41	47,161.34	0.11 %	2,759.93	28,978.02
20-10-002-***5471	307	153,620.00			94.39
QUALCOMM (QCOM)	25,744.14	27,344.36	0.06 %	1,600.22	19,692.33
20-10-002-***5489	178	153,620.00			110.63
QUANTA SVCS INC (PWR)	29,564.60	43,298.85	0.10 %	13,734.25	22,437.60
20-10-002-***5489	137	316,050.00			163.78
RALPH LAUREN CORP (RL)	28,840.00	46,196.00	0.10 %	17,356.00	18,890.12
20-10-002-***5489	200	230,980.00			94.45
RTX CORPORATION (RTX)	35,422.94	48,718.12	0.11 %	13,295.18	33,091.67
20-10-002-***5471	421	115,720.00			78.60
RTX CORPORATION (RTX)	30,773.31	40,386.28	0.09 %	9,612.97	30,519.13
20-10-002-***5489	349	115,720.00			87.45
REGENERON PHARMACEUTICALS INC (REGN)	19,322.38	15,671.26	0.04 %	- 3,651.12	13,293.74
20-10-002-***5471	22	712,330.00			604.26
REGENERON PHARMACEUTICALS INC (REGN)	21,078.96	17,095.92	0.04 %	- 3,983.04	10,128.31
20-10-002-***5489	24	712,330.00			422.01
REGIONS FINANCIAL CORP (RF)	18,527.28	22,485.12	0.05 %	3,957.84	20,595.11
20-10-002-***5489	956	23,520.00			21.54
RESMED INC (RMD)	30,813.72	29,272.32	0.07 %	- 1,541.40	30,813.72
20-10-002-***5489	128	228,690.00			240.73
S&P GLOBAL INC (SPGI)	45,269.64	49,803.00	0.11 %	4,533.36	39,861.36
20-10-002-***5489	100	498,030.00			398.61
SALESFORCE INC (CRM)	29,997.96	38,113.62	0.09 %	8,115.66	22,689.23
20-10-002-***5471	114	334,330.00			199.03
SALESFORCE INC (CRM)	87,625.62	111,331.89	0.24 %	23,706.27	62,421.64
20-10-002-***5489	333	334,330.00			187.45
SCHLUMBERGER LTD (SLB)	15,299.76	11,271.96	0.03 %	- 4,027.80	10,569.30
SEDOL 2779201	294	38,340.00			35.95
ISIN AN8068571086					
20-10-002-***5471					
SEMPRA (SRE)	29,892.00	35,088.00	0.08 %	5,196.00	30,807.95
20-10-002-***5489	400	87,720.00			77.02
SERVICE NOW INC (NOW)	28,259.60	42,404.80	0.10 %	14,145.20	15,705.50
20-10-002-***5471	40	1,060,120.00			392.64
SERVICE NOW INC (NOW)	36,038.35	49,825.64	0.11 %	13,787.29	31,096.26
20-10-002-***5489	47	1,060,120.00			661.62

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TYSON FOODS INC (TSNI)	21,867.08	22,631.36	0.05 %
CLASS A	394	57,4400	764.28
20-10-002-***5489			21,867.07
UBER TECHNOLOGIES INC (UBER)	14,468.95	14,175.20	0.04 %
20-10-002-***5471	235	60,3200	-293.75
UBER TECHNOLOGIES INC (UBER)	33,577.73	26,118.56	0.06 %
20-10-002-***5489	433	60,3200	-7,459.17
20-10-002-***5489			33,577.73
UNDER ARMOUR INC CLASS A (UAA)	36,575.19	34,453.08	0.08 %
20-10-002-***5471	4,161	8,2800	-2,122.11
UNION PACIFIC CORP (UNP)	59,685.66	55,413.72	0.12 %
20-10-002-***5471	243	228,0400	-4,271.94
UNION PACIFIC CORP (UNP)	16,256.44	38,257.40	0.09 %
20-10-002-***5489	394	97,1000	22,000.96
UNION PACIFIC CORP (UNP)	23,874.50	20,176.00	0.05 %
20-10-002-***5489	160	126,1000	-3,698.50
UNION PACIFIC CORP (UNP)	55,805.82	53,621.16	0.12 %
20-10-002-***5471	106	505,8600	-2,184.66
UNION PACIFIC CORP (UNP)	89,499.90	85,996.20	0.19 %
20-10-002-***5489	170	505,8600	-3,503.70
UNION PACIFIC CORP (UNP)	34,060.00	32,118.58	0.07 %
20-10-002-***5489	262	122,5900	-1,941.42
UNION PACIFIC CORP (UNP)	19,092.53	18,333.00	0.04 %
20-10-002-***5471	180	101,8500	-759.53
UNION PACIFIC CORP (UNP)	19,867.90	21,074.73	0.05 %
20-10-002-***5471	527	39,9900	1,206.83
UNION PACIFIC CORP (UNP)	21,570.22	20,794.80	0.05 %
20-10-002-***5489	520	39,9900	-775.42
UNION PACIFIC CORP (UNP)	40,874.95	49,618.28	0.11 %
20-10-002-***5471	157	316,0400	8,743.33
UNION PACIFIC CORP (UNP)	61,963.30	75,217.52	0.17 %
20-10-002-***5489	238	316,0400	13,254.22
UNION PACIFIC CORP (UNP)	9,944.00	14,798.08	0.04 %
20-10-002-***5489	352	42,0400	4,854.08
UNION PACIFIC CORP (UNP)	30,826.71	34,418.64	0.08 %
20-10-002-***5489	366	94,0400	3,591.93
UNION PACIFIC CORP (UNP)	38,939.55	66,949.35	0.15 %
20-10-002-***5471	741	90,3500	28,009.80
UNION PACIFIC CORP (UNP)	48,503.65	83,393.05	0.18 %
20-10-002-***5489	923	90,3500	34,889.40
UNION PACIFIC CORP (UNP)	18,242.14	16,943.71	0.04 %
20-10-002-***5471	1,603	10,5700	-1,298.43
UNION PACIFIC CORP (UNP)	47,461.50	53,474.35	0.12 %
20-10-002-***5471	265	201,7900	6,012.85
UNION PACIFIC CORP (UNP)	61,963.30	75,217.52	0.17 %
20-10-002-***5489	238	316,0400	13,254.22
UNION PACIFIC CORP (UNP)	9,944.00	14,798.08	0.04 %
20-10-002-***5489	352	42,0400	4,854.08
UNION PACIFIC CORP (UNP)	30,826.71	34,418.64	0.08 %
20-10-002-***5489	366	94,0400	3,591.93
UNION PACIFIC CORP (UNP)	38,939.55	66,949.35	0.15 %
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**BRICKLAYERS PENSION FUND OF WESTERN PENNSYLVANIA
ASSETS HELD FOR INVESTMENT PURPOSES**

Federal I.D. - 25-6121713
Plan No. - 001

DECEMBER 31, 2024

FORM 5500, SCHEDULE H, PART IV, QUESTION I

(a) Identitivy & Description	(e)	(d)
WELLS FARGO & COMPANY (WFC)	19,786.44	8,450.04
20-10-002-***5471	28,236.48	18,954.44
	70,2400	47,15
WELLS FARGO & COMPANY (WFC)	47,595.74	20,326.34
20-10-002-***5489	967	52,84
WEST PHARMACEUTICAL SVCS INC (WST)	29,578.08	-2,063.04
20-10-002-***5471	84	23,497.03
WEYERHAEUSER CO (WY)	17,211.15	279.73
20-10-002-***5471	13,934.25	16,958.65
	28,1500	34,26
WHIRLPOOL CORP (WHR)	23,258.07	-1,392.39
20-10-002-***5471	191	32,930.54
WILLIAMS COMPANIES INC (WMB)	33,784.21	172.41
20-10-002-***5489	650	33,784.21
WYNN RESORTS LTD (WYNN)	22,959.72	1,393.79
20-10-002-***5471	252	51.98
ZILLOW GROUP INC (ZG)	18,434.00	-1,247.40
CLASS A	325	25,884.91
20-10-002-***5471	70,8500	102.72
		28,229.99
		86,86
ZIMMER BIOMET HOLDINGS, INC (ZBH)	22,757.90	-3,005.09
20-10-002-***5471	187	20,317.31
ZOETIS INC (ZTS)	24,079.14	108.65
20-10-002-***5471	122	19,506.12
		159.89
Total corporate stock - common	\$16,729,165.72	\$10,100,476.67

Exchange Traded Funds

Description (Symbol)	Value last statement		Current market value	% of total portfolio	Unrealized gain/loss	Total original value at PNC
	Quantity	Current price per unit				
BNY MELLON STRATEGIC (LEO) MUNICIPALS, INC. COMMON STOCK	\$30,745.61	\$31,685.84	\$31,685.84	0.07 %	\$940.23	\$29,675.70
20-10-002-***7152	5,246	\$6.0400				\$5.46
BARINGS GLOBAL SHORT DURATION (BGH) HIGH YIELD FUND	3,534.72	4,060.72	4,060.72	0.01 %	526.00	3,447.80
20-10-002-***7152	263	15.4400				13.11
BLACKROCK MUNICIPAL INCOME TRUST (BFK)	20,492.45	20,045.10	20,045.10	0.05 %	-427.35	20,145.73
20-10-002-***7152	2,035	9.8400				9.90
BLACKROCK TAXABLE MUNICIPAL (BBN) BOND TRUST	12,455.16	12,347.92	12,347.92	0.03 %	-107.24	12,303.86
20-10-002-***7152	766	16.1200				16.06
BLACKROCK MUNIVEST FUND INC (MVF)	37,614.96	37,192.32	37,192.32	0.08 %	-422.64	35,702.48
20-10-002-***7152	5,283	7.0400				6.76
BLACKROCK MUNI VEST FUND II INC (MVT)	7,366.68	7,216.20	7,216.20	0.02 %	-150.48	7,206.92
20-10-002-***7152	684	10.5500				10.54
BLACKROCK MUNICIPAL INCOME DURA (I) EXCH 03/24/25	104.76	109.08	109.08	0.01 %	4.32	96.21
SEE 09262J102	9	12.1200				10.69
20-10-002-***7152						
BLACKROCK MUNICIPAL 2030 TARGET (BIT) TERM TRUST	25,147.20	24,893.31	24,893.31	0.06 %	-253.89	24,152.87
20-10-002-***7152	1,209	20.5900				19.98
BNY MELLON STRATEGIC MUNICIPAL (DSM) BOND FUND, INC. - COMMON STOCK	6,606.47	6,722.17	6,722.17	0.02 %	115.70	6,549.04
20-10-002-***7152	1,157	5.8100				5.66
BROOKFIELD REAL ASSETS INCOME (RA) FUND INC	7,711.62	8,018.64	8,018.64	0.02 %	307.02	7,570.07
20-10-002-***7152	602	13.3200				12.57

**BRICKLAYERS PENSION FUND OF WESTERN PENNSYLVANIA
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Plan No. - 001

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FORM 5500, SCHEDULE H, PART IV, QUESTION 1

(a) Identity & Description	(b) & (c)	(d)	(e)
DWS MUNICIPAL INCOME TRUST (KTF)	2,578.10	2,740.50	0.01 %
20-10-002-***7152	290	9,4500	162.40
DOUBLELINE YIELD OPPORT (DLY)	877.33	933.97	0.01 %
20-10-002-***7152	59	15,8300	56.64
DOUBLELINE INCOME SOLUTIONS (DSL)	624.24	641.07	0.01 %
20-10-002-***7152	51	12,5700	16.83
EATON VANCE MUNICIPAL INCOME TR (EVN)	6,137.50	6,318.75	0.02 %
FD	625	10,1100	181.25
20-10-002-***7152			9.23
EATON VANCE MUNICIPAL BOND FD (EIM)	1,073.78	1,098.16	0.01 %
20-10-002-***7152	106	10,3600	24.38
VESPER US LARGE CAP SHORT TE (UTRN)	888,188.18	1,094,046.53	2.34 %
ETF	36,075	30,3270	235,858.35
20-10-002-***4457			26.66
FIRST TRUST INTERMEDIATE (FPF)	7,176.40	7,920.00	0.02 %
DURATION PFD & INCOME FUND	440	18,0000	743.60
20-10-002-***7152			6,999.81
FLAHERTY & CRUMRINE PREFERRED (FFC)	26,271.00	29,351.70	0.07 %
AND INCOME SECS FUND INC	1,890	15,5300	3,080.70
20-10-002-***7152			13.25
FRANKLIN LIMITED DURATION (FTF)	1,094.72	1,166.88	0.01 %
INCOME TRUST	176	6,6300	72.16
20-10-002-***7152			1,150.97
GUGGENHEIM STRATEGIC (GOF)	1,881.60	2,243.22	0.01 %
OPPORTUNITIES FUND	147	15,2600	361.62
20-10-002-***7152			1,654.61
INVESTCO TRUST FOR (VGM)	26,792.01	27,360.90	0.06 %
INVESTMENT GRADE MUNICIPALS	2,709	10,1000	568.89
20-10-002-***7152			24,481.15
INVESTCO MUNICIPAL (VMO)	14,270.85	14,434.20	0.04 %
OPPORTUNITY TRUST	1,485	9,7200	163.35
20-10-002-***7152			12,948.80
INVESTCO VALUE MUNICIPAL (IIM)	5,257.45	5,374.28	0.02 %
INCOME TRUST	452	11,8900	116.83
20-10-002-***7152			4,886.68
ISHARES CORE S&P 500 (IIV)	53,972.19	66,520.84	0.15 %
ETF	113	588,6800	12,568.65
20-10-002-***5471			46,694.14
ISHARES CORE US AGGREGATE BOND (AGG)	684,094.54	670,063.50	1.44 %
ETF	6,915	96,9000	- 14,031.04
20-10-002-***7152			665,404.24
NUVEEN ENHANCED AMT-FREE (NEA)	36,608.00	37,539.84	0.09 %
QUALITY MUNICIPAL INCOME FUND	3,328	11,2800	931.84
20-10-002-***7152			35,202.83
NUVEEN MUNICIPAL CREDIT (NMCO)	20,709.40	22,090.02	0.05 %
OPPORTUNITIES FUND	2,082	10,6100	1,380.62
20-10-002-***7152			19,111.44
NUVEEN MUNI HIGH INCM OPPORT (NMZ)	73,317.60	80,404.78	0.18 %
20-10-002-***7152	7,438	10,8100	7,087.18
NUVEEN MUNICIPAL CREDIT (NZF)	80,293.26	82,670.81	0.18 %
INCOME FUND	6,793	12,1700	2,377.55
20-10-002-***7152			79,086.44
			11.64

**BRICKLAYERS PENSION FUND OF WESTERN PENNSYLVANIA
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DECEMBER 31, 2024

FORM 5500, SCHEDULE H, PART IV, QUESTION 1

(a) Identity & Description	(b) & (c)	(e)	(d)
NUVEEN AMT-FREE MUNICIPAL (NVG)	68,733.30	71,291.90	0.16 %
CREDIT INCOME FUND	5,815	12,2600	
20-10-002-***7152			67,532.24 11.61
NUVEEN PREFERRED & INCOME (JPC)	4,529.20	5,266.20	0.02 %
OPPORTUNITIES FUND	670	7,8600	
20-10-002-***7152			4,774.60 7.13
NUVEEN TAXABLE MUNICIPAL INCOME (NBB)	6,426.53	6,096.86	0.02 %
FUND	407	14,9800	
20-10-002-***7152			6,148.86 15.11
PIMCO MUNICIPAL INCOME FUND (I)	20,591.55	19,800.90	0.05 %
MERGED 08/01/25	2,205	8,9800	
SEE 72200W106			- 790.65 20,331.68 9.22
20-10-002-***7152			
PIMCO MUNICIPAL INCOME FD II (PML)	80,464.42	78,440.64	0.17 %
20-10-002-***7152	9,696	8,0900	
PIMCO INCOME STRATEGY FUND II (PFNI)	81.01	81.95	0.01 %
20-10-002-***7152	11	7,4500	
PIMCO DYNAMIC INCOME FUND (PDII)	1,669.35	1,705.62	0.01 %
20-10-002-***7152	93	18,3400	
UTILITIES SELECT SECTOR SPDR (XLU)	100,694.70	120,347.10	0.26 %
FUND ETF	1,590	75,6900	
20-10-002-***5471			19,652.40 77.49
VANGUARD TOTAL BOND MARKET (BND)	612,008.70	600,376.59	1.29 %
ETF	8,349	71,9100	
20-10-002-***7152			- 11,632.11 595,173.12 71.29
VIRTUS CONVERTIBLE & INCOME (I)	2,470.42	2,594.77	0.01 %
REV SPLIT 2/10/2025	829	3,1300	
SEE 92838U801			124.35 2,511.62 3.03
20-10-002-***7152			

Total Exchange Traded Funds

\$ 3,211,233.78

\$ 3,015,476.22

PPA Funded Percentage and Projection of Credit Balance

• Projection of Liability to January 1, 2024		
○ Actuarial Accrued Liability, January 1, 2023	\$	90,018,417
○ Normal Cost		1,061,346
○ Estimated Benefit Payments		(5,991,870)
○ Interest at 7.50% to End of Year		6,587,563
• Estimated Actuarial Accrued Liability, January 1, 2024		91,675,456
• Estimated Actuarial Value of Plan Assets, January 1, 2024		57,657,954
• Funded Percentage (Ratio of Assets to Liabilities), January 1, 2024		62.89%
• Projection of Estimated Credit Balance		
○ December 31, 2023	\$	(6,300,000)
○ December 31, 2024		(10,700,000)
○ December 31, 2025		(15,620,000)
○ December 31, 2026		(21,140,000)
○ December 31, 2027		(27,320,000)
○ December 31, 2028		(33,560,000)
○ December 31, 2029		(39,750,000)
○ December 31, 2030		(46,110,000)
○ December 31, 2031		(52,030,000)

Zone Status Determination

Y or N

Critical Status – Red zone if any of a), b), c), or d) apply

- | | |
|---|---|
| a) Is the Plan's Funded Percentage less than 65% and the Plan's fair market value of assets plus present value of expected employer contributions for the current and following 6 plan years less than the present value of all nonforfeitable benefits and administrative expenses projected to be payable under the plan during the current and following 6 plan years? | N |
| b) Does the plan have an accumulated funding deficiency (negative credit balance) in any of the current or following 3 plan years (4 plan years if the Funded Percentage is 65% or less), without reflecting amortization extensions? | Y |
| c) Each of the following are applicable. | |
| i) The Plan's normal cost plus interest on unfunded liability exceeds the present value of anticipated employer and employee contributions for the year. | Y |
| ii) The present value of nonforfeitable benefits of inactive participants is greater than the present value of nonforfeitable benefits for active participants. | Y |
| iii) The plan has an accumulated funding deficiency (negative credit balance) in any of the current or following 4 plan years, without reflecting amortization extensions. | Y |
| Do all apply? | Y |
| d) Is the Plan's fair market value of assets plus present value of expected employer contributions for the current and following 4 plan years less than the present value of all nonforfeitable benefits and administrative expenses projected to be payable under the plan during the current and following 4 plan years? | N |

Critical and Declining Status – both a) and b) apply

- | | |
|--|---|
| a) Does the Plan meet the criteria above for Critical Status? | Y |
| b) Is the Plan projected to become insolvent within the current or following 14 plan years (19 plan years if the ratio of inactive to active participants is at least 2:1 or if the plan is less than 80% funded)? | Y |

Endangered Status – Yellow zone if a) does not apply and either b) or c) apply. Orange zone if not a) and both b) and c) apply.

- | | |
|--|---|
| a) Is the Plan in either Critical or Critical and Declining Status? | Y |
| b) Is the Plan's Funded Percentage less than 80%? | Y |
| c) Is the Plan projected to have an accumulated funding deficiency (negative credit balance) in any of the current or following 6 plan years (reflecting any amortization extensions)? | Y |

Conclusion

Critical and Declining Status

Schedule of Amortization Bases

MINIMUM FUNDING	<u>Initial</u> <u>Amount</u>	<u>Date</u> <u>Established</u>	<u>Remaining</u> <u>Period</u>	<u>Balance</u>	<u>Payment</u>
<u>Charges</u>					
Benefit Change 90	\$ 119,894	1/1/1990	1.0	\$ 12,603	\$ 12,603
Assumption Change 93	741,846	1/1/1993	4.0	257,050	71,392
Benefit Change 93	314,302	1/1/1993	4.0	108,907	30,247
Plan Amendment 94	436,563	1/1/1994	5.0	178,226	40,978
Plan Amendment 97	9,635	1/1/1997	8.0	5,342	849
Plan Amendment 98	337,718	1/1/1998	9.0	200,459	29,233
Plan Amendment 99	713,929	1/1/1999	10.0	448,623	60,798
Plan Amendment 00	577,668	1/1/2000	11.0	381,106	48,462
Experience Loss 09	2,954,966	1/1/2009	5.0	1,206,374	277,369
Experience Loss 10	1,157,352	1/1/2010	6.0	535,745	106,175
Assumption Change 11	4,207,599	1/1/2011	7.0	2,152,076	377,966
Experience Loss 11	1,771,337	1/1/2011	7.0	905,990	159,118
Experience Loss 12	1,828,767	1/1/2012	8.0	1,050,731	166,872
Experience Loss 13	2,148,160	1/1/2013	4.0	815,083	226,381
Experience Loss 14	1,814,668	1/1/2014	5.0	831,745	191,236
Experience Loss 15	1,549,776	1/1/2015	6.0	824,094	163,321
Experience Loss 16	3,187,792	1/1/2016	7.0	1,912,790	335,941
Experience Loss 17	4,679,044	1/1/2017	8.0	3,104,814	493,094
Experience Loss 18	3,438,757	1/1/2018	9.0	2,485,008	362,388
Experience Loss 19	2,338,231	1/1/2019	10.0	1,818,238	246,411
Experience Loss 20	4,847,851	1/1/2020	11.0	4,017,631	510,883
Assumption Change 22	7,375,215	1/1/2022	13.0	6,789,284	777,226
Experience Loss 23	1,288,518	1/1/2023	14.0	1,239,184	135,789
Experience Loss 24	1,213,204	1/1/2024	15.0	<u>1,213,204</u>	<u>127,852</u>
Subtotal				\$ 32,494,307	\$ 4,952,584
<u>Credits</u>					
Experience Gain 21	\$ 2,590,560	1/1/2021	12.0	\$ 2,270,130	\$ 273,002
Experience Gain 22	2,131,621	1/1/2022	13.0	<u>1,962,271</u>	<u>224,638</u>
Subtotal				\$ 4,232,401	\$ 497,640
Net Amortization Balance and Payment				\$ 28,261,906	\$ 4,454,944
Credit Balance as of January 1, 2024				(6,259,577)	
Unfunded Liability				\$ 34,521,483	
MAXIMUM FUNDING					
Fresh Start 2023	<u>Initial</u> <u>Amount</u>	<u>Payment</u>		<u>Balance</u>	<u>Limit</u> <u>Adjustment</u>
Subtotal	\$34,521,483	\$ 4,678,413		\$ 34,521,483	\$ 4,678,413
				\$ 34,521,483	\$ 4,678,413

Changes Since Last Year

Plan Changes

None

Method Changes

None

Assumption Changes

The assumptions have been reviewed, and the following changes made:

- The interest rate used to calculate RPA '94 current liability has been changed from 3.29% to 2.55% to fall within prescribed limitations that fluctuate yearly. The mortality assumption for RPA '94 current liability has also been updated as mandated.