

Form 5500 Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Annual Return/Report of Employee Benefit Plan This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6057(b) and 6058(a) of the Internal Revenue Code (the Code). ▶ Complete all entries in accordance with the instructions to the Form 5500.	OMB Nos. 1210-0110 1210-0089 2024 This Form is Open to Public Inspection
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Part I	Annual Report Identification Information
For calendar plan year 2024 or fiscal plan year beginning 05/01/2024 and ending 04/30/2025	
A	This return/report is for: ☒ a multiemployer plan ☐ a multiple-employer plan (Filers checking this box must provide participating employer information in accordance with the form instructions.) ☐ a single-employer plan ☐ a DFE (specify) _____
B	This return/report is: ☐ the first return/report ☐ the final return/report ☐ an amended return/report ☐ a short plan year return/report (less than 12 months)
C	If the plan is a collectively-bargained plan, check here.▶ ☒
D	Check box if filing under: ☒ Form 5558 ☐ automatic extension ☐ the DFVC program ☐ special extension (enter description)
E	If this is a retroactively adopted plan permitted by SECURE Act section 201, check here.▶ ☐

Part II	Basic Plan Information—enter all requested information
1a	Name of plan WELFARE FUND OF ENGINEERS LOCAL 513
1b	Three-digit plan number (PN) ▶ 501
1c	Effective date of plan 05/01/1966
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) WELFARE FUND OF ENGINEERS LOCAL UNION 513 3449 HOLLENBERG DRIVE BRIDGETON, MO 63044
2b	Employer Identification Number (EIN) 43-6071748
2c	Plan Sponsor's telephone number 314-739-2973
2d	Business code (see instructions) 813930

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.	02/12/2026	BRIAN GRAFF
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

3a Plan administrator's name and address ☒ Same as Plan Sponsor	3b Administrator's EIN 3c Administrator's telephone number
4 If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report: a Sponsor's name c Plan Name	4b EIN 4d PN
5 Total number of participants at the beginning of the plan year	5 4063
6 Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines 6a(1) , 6a(2) , 6b , 6c , and 6d). a(1) Total number of active participants at the beginning of the plan year a(2) Total number of active participants at the end of the plan year b Retired or separated participants receiving benefits c Other retired or separated participants entitled to future benefits d Subtotal. Add lines 6a(2) , 6b , and 6c e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits. f Total. Add lines 6d and 6e g(1) Number of participants with account balances as of the beginning of the plan year (only defined contribution plans complete this item) g(2) Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item) h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested.....	6a(1) 2799 6a(2) 2927 6b 1225 6c 6d 4152 6e 6f 6g(1) 6g(2) 6h
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	7 472

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

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

4A 4B 4D 4E

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

a Pension Schedules

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

b General Schedules

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

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

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

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

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

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

Receipt Confirmation Code _____

SCHEDULE A (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Insurance Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500. ▶ Insurance companies are required to provide the information pursuant to ERISA section 103(a)(2).	OMB No. 1210-0110 2024 This Form is Open to Public Inspection
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For calendar plan year 2024 or fiscal plan year beginning 05/01/2024 and ending 04/30/2025		
A Name of plan WELFARE FUND OF ENGINEERS LOCAL 513	B Three-digit plan number (PN) ▶	501
C Plan sponsor's name as shown on line 2a of Form 5500 WELFARE FUND OF ENGINEERS LOCAL UNION 513	D Employer Identification Number (EIN) 43-6071748	

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

(a) Name of insurance carrier
ANTHEM BLUE CROSS BLUE SHIELD

(b) EIN	(c) NAIC code	(d) Contract or identification number	(e) Approximate number of persons covered at end of policy or contract year	Policy or contract year	
				(f) From	(g) To
35-0781558	28207	MOEGR002	1517	05/01/2024	04/30/2025

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

Part II Investment and Annuity Contract Information

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

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

6 Contracts With Allocated Funds:**a** State the basis of premium rates ▶

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

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

f If contract purchased, in whole or in part, to distribute benefits from a terminating plan, check here ▶ ☐**7** Contracts With Unallocated Funds (Do not include portions of these contracts maintained in separate accounts)

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

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

Part III Welfare Benefit Contract Information

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

8 Benefit and contract type (check all applicable boxes)

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

9 Experience-rated contracts:

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

10 Nonexperience-rated contracts:

a Total premiums or subscription charges paid to carrier	10a	1406837
b If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, other than reported in Part I, line 2 above, report amount. Specify nature of costs.	10b	

Part IV Provision of Information

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

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

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

For calendar plan year 2024 or fiscal plan year beginning 05/01/2024 and ending 04/30/2025		
A Name of plan WELFARE FUND OF ENGINEERS LOCAL 513	B Three-digit plan number (PN) ▶	501
C Plan sponsor's name as shown on line 2a of Form 5500 WELFARE FUND OF ENGINEERS LOCAL UNION 513	D Employer Identification Number (EIN) 43-6071748	

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

- a Check "Yes" or "No" to indicate whether you are excluding a person from the remainder of this Part because they received only eligible indirect compensation for which the plan received the required disclosures (see instructions for definitions and conditions)..... ☐ 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	
LIGHTHOUSE INVESTMENT PARTNERS LLC	3801 PGA BOULEVARD SUITE 500 PALM BEACH GARDENS, FL 33410
20-3528185	

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

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

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

BENESYS, INC.

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 50	NONE	1148214	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

EVERSIDE HEALTH LLC

4850 LEMAY FERRY RD SUITE 115
ST. LOUIS, MO 63129

(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?
	NONE	869432	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

DELTA DENTAL

43-0908349

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
12	NONE	163727	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

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

MILLIMAN USA

91-0675641

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
11 50	NONE	99000	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

NATIONAL INVESTMENT SERVICES

200 W MADISON STREET
CHICAGO, IL 60606

(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?
50	NONE	77017	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

LOCAL 513

43-0338091

(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?
50	RELATED ADMINISTRATOR	59699	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

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

VISION SERVICE PLAN

36-3560825

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
12	NONE	55317	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

HARTNETT REYES-JONES

4399 LACLEDE AVENUE
ST. LOUIS, MO 63108

(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?
50	NONE	53666	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

THE COMMERCE TRUST COMPANY

48-0962626

(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?
50 28	NONE	53067	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

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

BOSTON TRUST WALDEN COMPANY

ONE BEACON STREET
BOSTON, MA 02108

(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?
51 19 28	NONE	34128	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

CONSTRUCTION DATA SERVICES

2348 HAMPTON AVE
ST. LOUIS, MO 63139

(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?
16	NONE	31302	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

ANDERS MINKLER HUBER & HELM LLP

43-0831507

(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	25500	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

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

NEPC, LLC

26-1429809

(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	20450	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

MEDEXPERT INTERNATIONAL INC

1300 HANCOCK STREET
REDWOOD CITY, CA 94063

(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?
50	NONE	19000	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

BRYAN CAVE LEIGHTON PAISNER LLC

211 N BROADWAY STE 3600
ST. LOUIS, MO 63102

(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	9900	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

Part I Service Provider Information (continued)

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE D (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration		DFE/Participating Plan Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500.		OMB No. 1210-0110 2024 This Form is Open to Public Inspection.	
For calendar plan year 2024 or fiscal plan year beginning 05/01/2024 and ending 04/30/2025					
A Name of plan WELFARE FUND OF ENGINEERS LOCAL 513				B Three-digit plan number (PN) ▶ 501	
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 WELFARE FUND OF ENGINEERS LOCAL UNION 513				D Employer Identification Number (EIN) 43-6071748	
Part I Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs) (Complete as many entries as needed to report all interests in DFEs)					
a Name of MTIA, CCT, PSA, or 103-12 IE: AFL-CIO CF STOCK INDEX FUND					
b Name of sponsor of entity listed in (a): BNY MELLON					
c EIN-PN 84-7064589-001		d Entity code C		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 13827480	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT	

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

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

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

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

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

For calendar plan year 2024 or fiscal plan year beginning 05/01/2024 and ending 04/30/2025

A Name of plan WELFARE FUND OF ENGINEERS LOCAL 513	B Three-digit plan number (PN) ▶ 501
C Plan sponsor's name as shown on line 2a of Form 5500 WELFARE FUND OF ENGINEERS LOCAL UNION 513	D Employer Identification Number (EIN) 43-6071748

Part I	Asset and Liability Statement		
1 Current value of plan assets and liabilities at the beginning and end of the plan year. Combine the value of plan assets held in more than one trust. Report the value of the plan's interest in a commingled fund containing the assets of more than one plan on a line-by-line basis unless the value is reportable on lines 1c(9) through 1c(14). Do not enter the value of that portion of an insurance contract which guarantees, during this plan year, to pay a specific dollar benefit at a future date. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 1b(1), 1b(2), 1c(8), 1g, 1h, and 1i. CCTs, PSAs, and 103-12 IEs also do not complete lines 1d and 1e. See instructions.			
Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a	1864914	161253
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	4915236	5654792
(2) Participant contributions.....	1b(2)		
(3) Other	1b(3)	3889157	3130856
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	18954772	15320348
(2) U.S. Government securities	1c(2)	15168490	19929148
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)	5304468	5694613
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)	4322900	3722345
(5) Partnership/joint venture interests	1c(5)	24423286	38402401
(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)	12344746	13827480
(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)	22514311	22368910
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)		
(15) Other.....	1c(15)	22718148	19017648

1d Employer-related investments:		(a) Beginning of Year	(b) End of Year
(1) Employer securities	1d(1)		
(2) Employer real property	1d(2)		
e Buildings and other property used in plan operation	1e		
f Total assets (add all amounts in lines 1a through 1e)	1f	136420428	147229794
Liabilities			
g Benefit claims payable	1g	4149300	3771100
h Operating payables	1h	287658	673226
i Acquisition indebtedness	1i		
j Other liabilities	1j		
k Total liabilities (add all amounts in lines 1g through 1j)	1k	4436958	4444326
Net Assets			
l Net assets (subtract line 1k from line 1f)	1l	131983470	142785468

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)	54668755	
(B) Participants	2a(1)(B)	6297159	
(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)		60965914
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	541273	
(B) U.S. Government securities	2b(1)(B)	287165	
(C) Corporate debt instruments	2b(1)(C)	266609	
(D) Loans (other than to participants)	2b(1)(D)		
(E) Participant loans	2b(1)(E)		
(F) Other	2b(1)(F)	766508	
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		1861555
(2) Dividends:			
(A) Preferred stock	2b(2)(A)		
(B) Common stock	2b(2)(B)	64779	
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	877332	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		942111
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets:			
(A) Aggregate proceeds	2b(4)(A)	33323531	
(B) Aggregate carrying amount (see instructions)	2b(4)(B)	31419770	
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)		1903761
(5) Unrealized appreciation (depreciation) of assets:			
(A) Real estate	2b(5)(A)		
(B) Other	2b(5)(B)	195024	
(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)		1302177
(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)		875578
c Other income	2c		9822195
d Total income. Add all income amounts in column (b) and enter total	2d		77868315

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	62197455	
(2) To insurance carriers for the provision of benefits	2e(2)	1406819	
(3) Other	2e(3)		
(4) Total benefit payments. Add lines 2e(1) through (3)	2e(4)		63604274
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)	1074622	
(3) Recordkeeping fees	2i(3)		
(4) IQPA audit fees	2i(4)	25500	
(5) Investment advisory and investment management fees	2i(5)	179731	
(6) Bank or trust company trustee/custodial fees	2i(6)		
(7) Actuarial fees	2i(7)	99000	
(8) Legal fees	2i(8)	69524	
(9) Valuation/appraisal fees	2i(9)		
(10) Other trustee fees and expenses	2i(10)		
(11) Other expenses	2i(11)	2013666	
(12) Total administrative expenses. Add lines 2i(1) through (11)	2i(12)		3462043
j Total expenses. Add all expense amounts in column (b) and enter total	2j		67066317

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		10801998
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: **ANDERS MINKLER HUBER HELM LLP**

(2) EIN: **43-0831507**

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

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

Part IV Compliance Questions

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

During the plan year:

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

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

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

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

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

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

WELFARE FUND OF ENGINEERS LOCAL 513

**FINANCIAL STATEMENTS WITH
SUPPLEMENTARY INFORMATION AND
ADDITIONAL INFORMATION
AND
INDEPENDENT AUDITORS' REPORT
YEARS ENDED APRIL 30, 2025 AND 2024**

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Independent Auditors' Report

Board of Trustees
Welfare Fund of Engineers Local 513
Bridgeton, Missouri

Opinion

We have audited the financial statements of the Welfare Fund of Engineers Local 513 (the "Plan"), an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 ("ERISA"), which comprise the statements of net assets available for benefits and of benefit obligations as of April 30, 2025 and 2024, and the related statements of changes in net assets available for benefits and of changes in benefit obligations for the years then ended, and the related notes to the financial statements.

In our opinion, the financial statements referred to above present fairly, in all material respects, the net assets available for benefits and benefit obligations of the Plan as of April 30, 2025 and 2024, and the changes in its net assets available for benefits and changes in its benefit obligations for the years then ended, in accordance with accounting principles generally accepted in the United States of America ("GAAP").

Basis for Opinion

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

Emphasis of Matter - Correction of Error

As discussed in Note 3 to the financial statements, certain errors resulting in understatements of pharmacy rebates receivable and pharmacy rebate income as of and for the year ended April 30, 2024, were discovered during the current year audit. Accordingly, amounts have been restated in the 2024 statement of net assets available for benefits and the statement of changes in net assets available for benefits now presented, and an adjustment has been made to net assets as of April 30, 2023 to correct the error. Our conclusion is not modified with respect to that matter.

Responsibilities of Management for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with GAAP and for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error. In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about the Plan's ability to continue as a going concern for one year after the date the financial statements are available to be issued.

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

Auditors' Responsibilities for the Audit of the Financial Statements

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

In performing an audit in accordance with GAAS, we:

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

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

Supplemental Schedules Required by ERISA

Our audits were conducted for the purpose of forming an opinion on the financial statements as a whole. The supplemental Schedule of Assets (Held at End of Year) and Reportable Transactions are presented for purposes of additional analysis and are not a required part of the financial statements but are supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with GAAS.

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

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

Report on Additional Information

Our audits were conducted for the purpose of forming an opinion on the financial statements as a whole. The additional Schedules of Administrative Expenses are presented for purposes of additional analysis and are not a required part of the financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audits of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with GAAS. In our opinion, the additional information is fairly stated in all material respects in relation to the financial statements as a whole.



February 12, 2026
Chesterfield, Missouri

Welfare Fund of Engineers Local 513
Statements of Net Assets Available for Benefits
April 30, 2025 and 2024

Assets			
		<u>2025</u>	<u>2024</u> <u>(As Restated)</u>
Investments, at Fair Value		<u>\$ 138,282,893</u>	<u>\$ 125,643,426</u>
Receivables			
Employer contributions		5,654,792	4,915,236
Accrued interest		224,556	206,002
Other receivables		5,396	51,916
Due from related parties		126,544	57,594
Due from federal government		248,168	208,594
Pharmacy rebates		<u>2,526,192</u>	<u>3,365,051</u>
Total Receivables		<u>8,785,648</u>	<u>8,804,393</u>
Cash - Noninterest Bearing		161,253	1,864,914
Prepaid Expenses		<u>-</u>	<u>107,695</u>
Total Assets		<u>147,229,794</u>	<u>136,420,428</u>
Liabilities			
Accounts Payable and Accrued Expenses		68,121	59,310
Reciprocity Payable		322,190	228,348
Cash Overdraft		<u>282,915</u>	<u>-</u>
Total Liabilities		<u>673,226</u>	<u>287,658</u>
Net Assets Available for Benefits		<u>\$ 146,556,568</u>	<u>\$ 136,132,770</u>

Welfare Fund of Engineers Local 513
Statements of Changes in Net Assets Available for Benefits
Years Ended April 30, 2025 and 2024

	<u>2025</u>	<u>2024</u> <u>(As Restated)</u>
Additions to Net Assets:		
Investment Income		
Interest and dividends	\$ 2,803,666	\$ 2,936,151
Net appreciation in fair value of investments	4,276,540	3,048,857
Partnership income	<u>2,479,115</u>	<u>1,571,616</u>
	9,559,321	7,556,624
Less: investment expense	<u>(159,281)</u>	<u>(156,077)</u>
Net Investment Income	<u>9,400,040</u>	<u>7,400,547</u>
Contribution Income		
Employer contributions	54,668,755	52,124,152
Participant contributions	<u>6,297,159</u>	<u>6,295,193</u>
Total Contribution Income	<u>60,965,914</u>	<u>58,419,345</u>
Other Income		
Pharmacy rebates	5,336,518	5,561,910
Federal subsidies	1,916,323	1,036,474
Miscellaneous income	629	12,983
Alcohol - drug screening income	<u>89,610</u>	<u>91,036</u>
Total Other Income	<u>7,343,080</u>	<u>6,702,403</u>
Total Additions	<u>77,709,034</u>	<u>72,522,295</u>
Deductions from Net Assets:		
Benefits Paid Directly To/For Participants:		
Health benefits	62,247,655	58,826,179
Death benefits	328,000	228,000
Insurance premiums paid (Medicare Supplement Plan F)	<u>1,406,819</u>	<u>1,418,812</u>
Total Benefits Paid	<u>63,982,474</u>	<u>60,472,991</u>
Administrative Expenses	<u>3,302,762</u>	<u>3,204,765</u>
Total Deductions	<u>67,285,236</u>	<u>63,677,756</u>
Net Increase	10,423,798	8,844,539
Net Assets Available for Benefits, Beginning of Year	<u>136,132,770</u>	<u>127,288,231</u>
Net Assets Available for Benefits, End of Year	<u>\$ 146,556,568</u>	<u>\$ 136,132,770</u>

Welfare Fund of Engineers Local 513
Statements of Benefit Obligations
April 30, 2025 and 2024

	<u>2025</u>	<u>2024</u>
Amounts Currently Payable to or for Participants, Beneficiaries and Dependents:		
Claims payable and claims incurred but not reported	\$ 3,771,100	\$ 4,149,300
Postemployment Benefit Obligations, Estimated Amounts:		
Accumulated eligibility credits	<u>12,368,991</u>	<u>10,969,591</u>
Total Obligations Other Than Postretirement Benefit Obligations	<u>16,140,091</u>	<u>15,118,891</u>
Postretirement Benefit Obligations:		
Current retirees, beneficiaries, and dependents	79,238,732	68,170,950
Other participants fully eligible for benefits	38,800,394	29,736,066
Other participants not yet fully eligible for benefits	<u>61,862,880</u>	<u>46,110,952</u>
Total Postretirement Benefit Obligations	<u>179,902,006</u>	<u>144,017,968</u>
Total Benefit Obligations	<u>\$ 196,042,097</u>	<u>\$ 159,136,859</u>

Welfare Fund of Engineers Local 513
Statements of Changes in Benefit Obligations
Years Ended April 30, 2025 and 2024

	<u>2025</u>	<u>2024</u>
Amounts Currently Payable to or for Participants, Beneficiaries and Dependents:		
Balance at beginning of year	\$ 4,149,300	\$ 2,685,700
Claims and premiums incurred	63,604,274	61,936,591
Claims and insurance premiums paid	<u>(63,982,474)</u>	<u>(60,472,991)</u>
Balance at end of year	<u>3,771,100</u>	<u>4,149,300</u>
Postemployment Benefit Obligations, Estimated Amounts:		
Balance at beginning of year	10,969,591	11,650,083
Net change during year	<u>1,399,400</u>	<u>(680,492)</u>
Balance at end of year	<u>12,368,991</u>	<u>10,969,591</u>
Postretirement Benefit Obligations:		
Balance at beginning of year	144,017,968	167,784,512
Increase (decrease) during the year attributable to:		
Benefits earned and other changes	48,069,032	(6,940,883)
Changes in actuarial assumptions	(20,202,029)	(24,791,437)
Increase for interest due to decrease in discount period	<u>8,017,035</u>	<u>7,965,776</u>
Balance at end of year	<u>179,902,006</u>	<u>144,017,968</u>
Total Benefit Obligations, End of Year	<u>\$ 196,042,097</u>	<u>\$ 159,136,859</u>

Welfare Fund of Engineers Local 513
Notes to Financial Statements
April 30, 2025 and 2024

1. Description of the Plan

The following description of the Welfare Fund of Engineers Local 513 (the "Plan") provides only general information. Participants of the Plan should refer to the plan document and summary plan description for a more complete description of the Plan's provisions.

General

The Plan is a multiemployer defined benefit health and welfare plan. The Plan was established in 1966, pursuant to a collective bargaining agreement ("CBA") between the International Union of Operating Engineers Local 513 (the "Union") and participating contractors (the "Employers") to provide medical, vision, dental, prescription, disability and death benefits to eligible participants and beneficiaries. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 ("ERISA"), as amended.

Administration of the Plan is the responsibility of the Board of Trustees (the "Trustees") and is governed by a joint board consisting of equal representation from the Employers and the Union.

Eligibility

Participants become eligible initially for benefits on any one of the following eligibility dates: August 1, November 1, February 1, and May 1 after accruing 300 hours of contributions for any three consecutive months prior to the aforementioned eligibility dates. Once the eligibility requirements are met, certain eligible dependents are also covered under the Plan upon submission of their applicable enrollment form. Owner-operators contributing on their own behalf must have 520 hours of contributions for any three consecutive months prior to the eligibility dates.

Generally, a participant will remain eligible as long as actively employed with an Employer. Participants may also continue to remain eligible for benefits through the use of accumulated eligibility credits for times of unemployment (less than full time) and upon termination of employment through the Consolidated Omnibus Budget Reconciliation Act ("COBRA").

Retired employees are entitled to benefits if they are an eligible retired participant of the Local Union 513 Pension Plan (the "Pension Fund") and are receiving a standard, early retirement, or disability retirement pension and were covered in the Plan immediately prior to the effective date of their retirement. Retired employees are currently required to make contributions to the Plan.

Welfare Fund of Engineers Local 513
Notes to Financial Statements
April 30, 2025 and 2024

Contributions

Employers pay contributions to the Plan with respect to each of their employees in the hourly amounts required by the applicable CBA.

In accordance with the Plan, participants or their dependents, under specified circumstances, are allowed to make contributions to the Plan for a limited time to provide COBRA benefits. Retired employees are required to make contributions to the Plan for continuation of coverage.

Payment of Benefits

The Plan provides health benefits (medical, dental, vision, and prescription) and death and disability benefits for Plan participants, as specified in the plan document. The Plan also provides continuation of certain benefits during periods of unemployment (accumulated eligibility credits), disability, or upon termination of employment through COBRA. Retired employees are entitled to similar health benefits which the Plan fully insures with Medicare supplement benefits. The Plan purchases annual insurance contracts for this insured benefit. The premiums for all insured benefits are paid from the assets of the Plan. All other Plan benefits are self-insured. The claims for these benefits are processed by the Plan's third-party claims processors under administrative services only ("ASO") arrangements. The claims processors pay claims directly to or on behalf of the participants. Despite the Plan's utilization of third-party claims processors, ultimate responsibility for payments to providers and participants is retained by the Plan. The Plan uses a pharmacy benefit manager ("PBM"), which periodically makes refunds to the Plan based on the Plan's actual utilization pattern of specific drugs.

There are three types of plans available: Plan A, Plan B, and Plan F. Significant features of the Plans are described in the summary plan descriptions. The Trustees have the right to modify the benefits under these Plans provided to eligible participants.

Fund Management

BeneSys, Inc. (the "Plan Administrator"), an employee benefit fund management company, has been retained by the Trustees to administer the activities and operations of the Plan on a contractual basis. Under a management contract, all personnel costs and other normal administrative expenses related to bookkeeping and collection are borne by BeneSys, Inc.

Operating Engineers Local Union 513 Annuity Fund, Pension Fund, Welfare Fund, Vacation Fund, and Journeymen Apprenticeship Training Fund (the "Fringe Benefit Funds"), and the Plan have retained BeneSys, Inc. to administer a field audit program to determine that employers are complying with their contractual obligations to make contributions to the Plans. The Trustees will determine the number of audits to be performed during the course of the year.

Welfare Fund of Engineers Local 513
Notes to Financial Statements
April 30, 2025 and 2024

2. Summary of Significant Accounting Policies

Basis of Accounting

The financial statements of the Plan have been prepared in accordance with the provisions of the Financial Accounting Standards Board ("FASB"), Accounting Standards Codification (the "FASB ASC"), which is the source of authoritative, non-governmental accounting principles generally accepted in the United States of America ("GAAP"). All references to authoritative accounting guidance contained in our disclosures are based on the general accounting topics within FASB ASC.

Use of Estimates

The preparation of financial statements in conformity with GAAP requires management to make estimates and assumptions that affect certain reported amounts of assets, liabilities, benefit obligations and changes therein, incurred but not reported ("IBNR"), accumulated eligibility credits, claims payable, and disclosure of contingent assets and liabilities. Accordingly, actual results could differ from those estimates.

Investment Valuation and Income Recognition

Investments are reported at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date.

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. Partnership income is the Plan's proportionate share of the income attributable to the partnership as a whole. Net appreciation in fair value of investments includes the Plan's gains and losses on investments bought and sold as well as held during the year.

Fair Value Measurements

The Plan follows guidance issued by the FASB on fair value measurements, which establishes a framework for measuring fair value, clarifies the definition of fair value within that framework, and expands disclosures about the use of fair value measurements. This guidance applies whenever fair value is the applicable measurement. The three general valuation techniques used to measure fair value are the market approach, cost approach, and income approach.

Welfare Fund of Engineers Local 513
Notes to Financial Statements
April 30, 2025 and 2024

Employer Contributions Receivable

Employer contributions receivables represent Employer contributions due to the Plan for hours worked prior to the end of the Plan year, but not yet received by year end. Employer contributions receivables are carried at reported amounts, net of an estimate made for credit losses. Management estimates the allowance for credit losses by regularly evaluating individual Employer receivables and considers an Employer's financial condition, payment history, current economic conditions, and management's expectations of conditions in the future. Employer contributions receivable are written off when deemed uncollectible. Management is of the opinion that no allowance for credit losses is necessary as of April 30, 2025 and 2024.

Refunds and Rebates

Prescription refunds due from the Plan's PBM are recorded when earned. Refunds due at year-end are recorded as a receivable on the statements of net assets available for benefits, with the offset being recorded as other income. Pharmacy rebates totaling \$5,336,518 and \$5,561,909 for the years ended April 30, 2025 and 2024, respectively, have been recorded as pharmacy rebates in the accompanying statements of changes in net assets available for benefits.

Medicare Subsidy

The Medicare Prescription Drug Improvement and Modernization Act of 2003 ("the Act") applies to postretirement health care plans and provides prescription drug benefits. The Act provides for a Plan to receive a subsidy under Medicare ("Medicare Part D") if it provides a benefit that is at least actuarially equivalent to Medicare Part D. The Plan received \$1,916,323 and \$1,036,474 in federal subsidies for the years ended April 30, 2025 and 2024, respectively. The Plan's postretirement benefit obligation reflects an amount associated with the Medicare subsidy allowed under the Act because the Plan is directly entitled to the Medicare subsidy. Medicare subsidy amounts received are recorded on the statements of changes in net assets available for benefits as federal subsidies.

Payments of Benefits

Premiums paid by the Plan are recorded as insurance premiums paid in the statements of changes in net assets available for benefits. Claim payments are recorded when submitted to the Plan by the third-party claims processor for reimbursement. Claims paid by the claims processor prior to year-end or claim payments submitted to the Plan by the third-party claims processor that are not yet paid are recorded as an amount currently payable in the accompanying statements of benefit obligations.

Welfare Fund of Engineers Local 513
Notes to Financial Statements
April 30, 2025 and 2024

Plan Benefit Obligations

The Plan is required to provide benefits to certain members, if such members have accumulated credit amounts (expressed in dollars) in excess of that required for current coverage. Participants draw on their accumulated eligibility credits whenever they fail to meet the annual requirement. The estimated future liability represents the present value of an extension of future benefits that occurs prior to eligibility for retirement with medical benefits per the rules specified in the Plan agreement. The calculation of the accumulated eligibility credit reserves at April 30, 2025 and 2024, have been based on assumptions of past underemployment data, usage, and estimated cost of coverage. The weighted-average discount rate was 5.50 percent and 5.55 percent in 2025 and 2024, respectively.

Claims IBNR are estimated by the Plan's actuary in accordance with accepted actuarial principles based on claims data provided by the Plan Administrator. These amounts are paid by the Plan only if claims are submitted and approved for payment. Postretirement benefit obligations are determined in accordance with accepted actuarial principles.

Administrative Expenses

The Plan permits the payment of Plan expenses from Plan assets. Expenses incurred in connection with the general administration of the Plan are recorded as deductions in the accompanying statements of changes in net assets available for benefits.

Reclassifications

Certain amounts in the 2024 financial statements have been reclassified to conform to the current year presentation.

3. Restatement

During the course of the Plan's April 30, 2025 audit, management and the Plan's independent auditors' identified issues that had a material effect upon the Plan's previously issued financial statements. Therefore, management has restated the Plan's statement of net assets available for benefits and the statement of changes in net assets available for benefits for the year ended April 30, 2024. The cumulative effect of all adjustments resulted in a \$3,365,051 increase to pharmacy rebates receivable and a \$3,324,255 decrease to pharmacy rebate income, and increase in beginning net assets available for benefits of \$6,689,307 on the financial statements for the year ended April 30, 2024.

Welfare Fund of Engineers Local 513
Notes to Financial Statements
April 30, 2025 and 2024

The following table presents the impact of the restatement adjustments as of April 30, 2024:

	As Previously Reported	Adjustment	As Restated
Change in net assets, beginning of year	\$120,598,924	\$ 6,689,307	\$127,288,231
Pharmacy rebates receivable	-	3,365,051	3,365,051
Pharmacy rebate income	8,886,165	(3,324,255)	5,561,910

4. Postretirement and Postemployment Benefit Obligations

The amount reported as postretirement benefit obligations represents the actuarial present value of those estimated future benefits that are attributed by the terms of the Plan to employees for service rendered to April 30. Postretirement benefits include future benefits expected to be paid to or for (1) currently retired or terminated employees and their beneficiaries and dependents and (2) active employees and their beneficiaries and dependents after retirement from service with the participating Employers. The postretirement benefit obligation represents the amount that is to be funded by contributions from the Plan's participating Employers and from existing Plan assets. Prior to an active employee's full eligibility date, the postretirement benefit obligation is the portion of the expected postretirement benefit obligation that is attributed to that employee's service in the industry rendered to the valuation date. The obligation is net of anticipated self-payments.

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

The current medical trend rate assumption has a significant effect on the amounts reported in the accompanying financial statements. If the assumed rates increased by one percentage point in each year, it would increase the postretirement obligation as of April 30, 2025 and 2024, by \$23,827,652 and \$19,980,197, respectively.

The following were other significant assumptions used in the valuations as of April 30:

	2025	2024
Actuarial Cost Method	Projected Unit Credit	Projected Unit Credit
Discount Rate	5.50%	5.55%
Mortality	RP-2014 Combined Healthy table with Blue Collar adjustments	RP-2014 Combined Healthy table with Blue Collar adjustments

Welfare Fund of Engineers Local 513
Notes to Financial Statements
April 30, 2025 and 2024

Disability Mortality	RP-2014 Disabled Life Mortality Table	RP-2014 Disabled Life Mortality Table
Retirement Age	Percent of probability table if eligible, but 100% by age 67	Percent of probability table if eligible, but 100% by age 67
Percent Married	70%	80%
Age of Spouse	Spouses of male retirees are assumed to be 4 years younger than the retiree and spouses of female retirees are assumed to be 4 years older than the retiree	Spouses of male retirees are assumed to be 4 years younger than the retiree and spouses of female retirees are assumed to be 4 years older than the retiree
Expenses	Net 6.50% load on benefit liabilities	Net 6.50% load on benefit liabilities

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

The Plan's deficiency of net assets over benefit obligations at April 30, 2025 and 2024, relates primarily to the postretirement benefit obligation, the funding of which is not covered by the contribution rate provided by the current CBAs. It is expected that the deficiency will be funded through future increases in the CBA contribution rates or reductions in benefits.

5. Fair Value Measurements

The framework for measuring fair value provides a fair value hierarchy which prioritizes the inputs to valuation techniques used to measure fair value into Levels 1, 2, and 3. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1) and the lowest priority to unobservable inputs (Level 3). The three levels of the fair value hierarchy are described as follows:

Level 1	Inputs to the valuation methodology are unadjusted quoted prices for identical instruments in active markets.
Level 2	Inputs to the valuation method to include quoted prices for similar instruments in active markets, quoted prices for identical or similar instruments in inactive markets, inputs other than quoted prices that are observable for the instrument, or inputs that are derived principally from or corroborated by observable market data by correlation or other means.
Level 3	Inputs to the valuation methodology are unobservable and significant to the fair value measurement.

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The instruments' fair value measurement levels 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 should maximize the use of observable inputs and minimize the use of unobservable inputs.

Following is a description of the valuation methodologies used for instruments measured at fair value.

Level 1 investments consist of interest-bearing cash, mutual funds, and common stocks. Interest-bearing cash is valued at the cost plus accrued interest, which approximates fair value. Mutual funds are recorded at the closing price reported by the fund. These are open-ended mutual funds that are registered with the Securities and Exchange Commission. These funds are required to publish their daily net asset value ("NAV") and to transact at that price. The mutual funds held by the Plan are deemed to be actively traded. Common stocks are valued at the closing price reported on the active market on which the individual securities are traded.

Level 2 investments consist of corporate bonds, municipal bonds, foreign bonds, U.S. government and agency securities and limited partnerships. Corporate bonds, municipal bonds, foreign bonds and U.S. government and agency securities are valued using pricing models maximizing the use of observable inputs for similar securities. This includes basing value on yields currently available on comparable securities of issuers with similar credit ratings. Limited partnerships are valued at estimated fair value as determined by the partnerships' management and supported by independent sources and valuations. The fair values are based on estimates made in accordance with valuation guidelines in the Partnership Agreement and GAAP.

Level 3 investments consist of limited partnerships. Limited partnerships are valued at estimated fair value as determined by the partnerships' management and supported by independent sources and valuations. The fair values are based on estimates made in accordance with valuation guidelines in the Partnership Agreement and GAAP.

Investments also consist of hedge funds and a common collective trust. The hedge funds are directly invested in mutual funds, equity securities, or fixed maturity securities. These securities are valued at the NAV based on the observable underlying investments. The common collective trust fund is valued at the NAV of shares of the bank collective trust held by the Plan at year-end. The NAV is based on the fair value of the underlying investments held by the trusts. The NAV is used as a practical expedient to estimate fair value.

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

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Notes to Financial Statements
April 30, 2025 and 2024

The fair value of investments is measured as of April 30, as follows:

	2025			
	Total	Fair Value Measurements		
		Level 1	Level 2	Level 3
Interest-bearing cash	\$ 15,320,348	\$ 15,320,348	\$ -	\$ -
U.S. government and agency securities	19,929,148	-	19,929,148	-
Municipal bonds	1,115,467	-	1,115,467	-
Common stocks	3,722,345	3,722,345	-	-
Corporate bonds	5,337,326	-	5,337,326	-
Foreign bonds	357,287	-	357,287	-
Limited partnerships	38,402,401	-	12,944,167	25,458,234
Mutual funds	22,368,910	22,368,910	-	-
Total assets in fair value hierarchy	106,553,232	<u>\$ 41,411,603</u>	<u>\$39,683,395</u>	<u>\$25,458,234</u>
Investments measured at NAV	<u>31,729,661</u>			
	<u>\$138,282,893</u>			

	2024			
	Total	Fair Value Measurements		
		Level 1	Level 2	Level 3
Interest-bearing cash	\$ 18,954,772	\$ 18,954,772	\$ -	\$ -
U.S. government and agency securities	15,168,490	-	15,168,490	-
Municipal bonds	988,148	-	988,148	-
Common stocks	4,322,900	4,322,900	-	-
Corporate bonds	4,962,269	-	4,962,269	-
Foreign bonds	342,199	-	342,199	-
Limited partnerships	24,423,286	-	12,937,251	11,486,035
Mutual funds	22,514,311	22,514,311	-	-
Total assets in fair value hierarchy	91,676,375	<u>\$ 45,791,983</u>	<u>\$34,398,357</u>	<u>\$11,486,035</u>
Investments measured at NAV	<u>33,967,051</u>			
	<u>\$125,643,426</u>			

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

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Investments measured at fair value based on NAV per share as practical expedient as of April 30, are as follows:

<u>2025</u>	<u>Fair Value</u>	<u>Unfunded Commitments</u>	<u>Redemption Frequency</u>	<u>Redemption Notice Period</u>
<u>Common Collective Trust</u>				
BNY Mellon AFL-CIO CF CL Stock Index Fund	\$ 13,827,480	N/A	Quarterly	N/A
<u>Hedge Funds</u>				
ABS Long & Short Strategies Fund (A)	\$ 6,180,941	N/A	Quarterly	N/A
Lighthouse Global Long/Short Fund Limited Class F (B)	\$ 6,225,348	N/A	Monthly/Quarterly	90/60 Days
Proloan Bond Fund (C)	\$ 5,495,892	N/A	Monthly	10 days
<u>2024</u>	<u>Fair Value</u>	<u>Unfunded Commitments</u>	<u>Redemption Frequency</u>	<u>Redemption Notice Period</u>
<u>Common Collective Trust</u>				
BNY Mellon AFL-CIO CF CL Stock Index Fund	\$ 12,344,746	N/A	Quarterly	N/A
<u>Hedge Funds</u>				
ABS Long & Short Strategies Fund (A)	\$ 8,198,381	N/A	Quarterly	N/A
Lighthouse Global Long/Short Fund Limited Class F (B)	\$ 8,349,368	N/A	Monthly/Quarterly	90/60 days
Proloan Bond Fund (C)	\$ 5,074,556	N/A	Monthly	10 days

- (A) This hedge fund's investment objective is to seek capital appreciation over a full market cycle while maintaining a lower level of volatility when compared to the global equity markets.
- (B) This hedge fund's objective is to maximize capital appreciation over the long term by investing principally in the global equity markets by employing a long/short investment strategy.
- (C) This hedge fund's objective is to provide current income with high overall credit quality. The Fund's other important objectives are to encourage the construction of residential and commercial housing and to facilitate employment for union members in the construction and related industries.

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Notes to Financial Statements
April 30, 2025 and 2024

The following table provides a summary of changes in the estimated fair value of the Plan's Level 3 assets for the years ended April 30:

	<u>Limited Partnerships</u>
Balance, April 30, 2023	\$ 9,343,204
Total gains (realized or unrealized) included in change in net assets	1,142,831
Purchases, sales, issuances, and settlements (net)	<u>1,000,000</u>
Balance, April 30, 2024	11,486,035
Total gains (realized or unrealized) included in change in net assets	1,472,199
Purchases, sales, issuances, and settlements (net)	<u>12,500,000</u>
Balance, April 30, 2025	<u><u>\$ 25,458,234</u></u>

The following table represents the Plan's level 3 financial instruments, the valuation techniques used to measure the fair value of those financial instruments as of April 30, and the significant unobservable inputs and the ranges of values for those inputs:

<u>2025</u>			
<u>Instrument</u>	<u>Fair Value</u>	<u>Valuation Technique(s)</u>	<u>Unobservable Inputs</u>
Limited partnerships	\$ 25,458,234	Market Approach	Value of underlying assets of the partnership

<u>2024</u>			
<u>Instrument</u>	<u>Fair Value</u>	<u>Valuation Technique(s)</u>	<u>Unobservable Inputs</u>
Limited partnerships	\$ 11,486,035	Market Approach	Value of underlying assets of the partnership

6. Related Party Transactions

The Pension Fund collects field audit contributions on behalf of each of the Fringe Benefit Funds. The amounts due from the Pension Fund consist of the Plan's share of those field audit contributions held by the Pension Fund. For the years ended April 30, 2025 and 2024, these contributions amounted to \$126,544 and \$57,594, respectively. These amounts were outstanding and collectible at April 30, 2025 and 2024, respectively.

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April 30, 2025 and 2024

The Union collects Employer contributions on behalf of each of the Fringe Benefit Funds. The amounts due from the Union consists of the Plan's share of those Employer contributions held by the Union. For the years ended April 30, 2025 and 2024, these contributions amounted to \$5,396 and \$51,916, respectively.

7. Plan Amendments

Effective May 1, 2024, covered medical supplies will include prosthesis after a mastectomy, which includes coverage for four post-mastectomy bras annually, silicone breast prosthesis every two years, and one fabric, foam, fiber-filled breast prosthesis per side every six months.

In December 2023, the Trustees approved an amendment to the Plan to update the coordination of retiree coverage with active coverage.

In October 2023, the Trustees approved an amendment to the Plan to cover the FDA approved respiratory syncytial virus ("RSV") vaccines with zero cost-share for eligible individuals.

8. Plan Termination

It is the intent of the Trustees to continue the Plan in full force and effect; however, the right to discontinue the Plan is reserved by the Trustees. During termination, the Plan's assets should not be used for or diverted to purpose other than the exclusive benefit of the participants and beneficiaries. In the event of termination, the net assets of the Plan will be allocated as prescribed by ERISA, as amended and its regulations.

9. Tax Status

The IRS has determined and informed the Trustees by a letter dated April 25, 1980, that the Plan and related Trust, as then designed, was in compliance with the applicable sections of the Internal Revenue Code ("IRC"). The Plan has been amended since receiving the determination letter. Management believes that the Plan is designed and is currently being operated in compliance with the applicable requirements of the IRC and therefore believes that the Plan is qualified and the related trust is tax-exempt.

In accordance with GAAP, management is required to evaluate tax positions taken by the Plan and recognize a tax liability if the Plan has taken an uncertain position that more likely than not would not be sustained upon examination by the applicable taxing authorities. Management has analyzed the tax positions taken by the Plan and has concluded that as of April 30, 2025 and 2024, there were no uncertain positions taken, or expected to be taken, that would require recognition of a liability or disclosure in the financial statements. Management believes the Plan is no longer subject to income tax examinations prior to 2021. The Plan is also subject to routine audits by the DOL, generally for six years after the statutory due date of the annual information return. There are currently no audits in progress for any tax periods.

Welfare Fund of Engineers Local 513
Notes to Financial Statements
April 30, 2025 and 2024

10. Risks and Uncertainties

Investments

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 participants' account balances and the amounts reported in the statements of net assets available for benefits.

Employer Contributions Receivable

The majority of the receivables are from Employers concentrated in the operating engineering industries. The Plan generally does not require collateral, but in some cases can require a performance bond.

Benefit Obligations

The actuarial present value of benefit obligations are reported based on certain assumptions pertaining to interest rates, health care inflation rates, and employee demographics, all of which are subject to change. Due to uncertainties inherent in the estimations and assumption 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.

11. Reconciliation of Financial Statements to Form 5500

The following is a reconciliation of total net assets available for benefits per the financial statements at April 30, to Form 5500:

	<u>2025</u>	<u>2024</u>
Net assets available for benefits per the financial statements	\$ 146,556,568	\$ 136,132,770
Less: Benefit obligations currently payable	<u>(3,771,100)</u>	<u>(4,149,300)</u>
Net assets available for benefits per the Form 5500	<u>\$ 142,785,468</u>	<u>\$ 131,983,470</u>

The following is a reconciliation of benefits paid to participants per the financial statements for the year ended April 30, to Form 5500:

	<u>2025</u>
Benefits paid to participants per the financial statements	\$ 63,982,474
Add: Benefit obligations payable - current year	3,771,100
Less: Benefit obligations payable - prior year	<u>(4,149,300)</u>
Total benefits paid per Form 5500	<u>\$ 63,604,274</u>

Welfare Fund of Engineers Local 513
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12. Subsequent Events

The Plan has evaluated subsequent events through February 12, 2026, the date the financial statements were available to be issued.

In October 2025, the Trustees approved an amendment to the Plan to extend the time available for the one-time option to enroll/re-enroll for retiree benefits under the Plan.

Welfare Fund of Engineers Local 513
EIN: 43-6071748 Plan Number: 501
Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
April 30, 2025

(a)	Identity of Issuer, Borrower, Lessor, or Similar Party and Description of Assets (b) and (c)	Cost (d)	Current Value (e)
	INTEREST-BEARING CASH:		
	ENTERPRISE BANK AND TRUST - BUSINESS NOW ACCOUNT	\$ 6,794	\$ 6,794
	ENTERPRISE BANK AND TRUST - SWEEP ACCOUNT	7,823,929	7,823,929
	GS FIN SQ GOV #465	7,489,625	7,489,625
	TOTAL INTEREST-BEARING CASH	<u>15,320,348</u>	<u>15,320,348</u>
	COMMON STOCKS:		
	ACCENTURE PLC CLASS A ORDINARYSHARES	60,977	74,788
	ADOBE INC.	42,691	35,623
	AGILENT TECHNOLOGIES INC COM	42,444	36,046
	AIR PRODS & CHEMS INC COM	43,546	44,730
	ALPHABET INC CAP STK CL A	194,296	239,788
	AMAZON.COM INC COM	116,173	96,821
	APPLE INC COM	115,588	211,438
	APPLIED MATLS INC COM	107,052	110,772
	APTARGROUP INC COM	26,334	32,239
	AUTOMATIC DATA PROCESSING INC COM	51,754	87,174
	AUTOZONE INC COM	19,980	48,914
	BECTON DICKINSON & CO COM	47,668	39,347
	BLACKROCK INC COM	56,865	54,856
	BOOKING HLDGS INC COM	36,821	66,291
	CHUBB LTD COM	67,073	111,571
	CISCO SYS INC COM	60,803	76,204
	COMCAST CORP CL A	43,144	35,739
	COOPER COS INC COM	44,884	45,735
	D R HORTON INC COM	44,499	32,217
	DEERE & CO COM	41,326	62,581
	DONALDSON INC COM	39,827	50,941
	ESSENTIAL UTILS INC COM	38,106	40,102
	EVERSOURCE ENERGY COM	44,819	35,688
	EXXON MOBIL CORP COM	92,717	133,622
	FACTSET RESH SYS INC COM	30,587	38,900
	HUBBELL INC COM	32,219	50,845
	JOHNSON & JOHNSON COM	130,069	125,048
	JPMORGAN CHASE & CO COM	77,517	156,557
	KLA CORPORATION	47,091	49,188
	LOCKHEED MARTIN CORP COM	41,836	42,998
	LOWES COS INC COM	31,746	33,534

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EIN: 43-6071748 Plan Number: 501
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April 30, 2025

(a)	Identity of Issuer, Borrower, Lessor, or Similar Party and Description of Assets (b) and (c)	Cost (d)	Current Value (e)
COMMON STOCKS (CONTINUED):			
	LULULEMON ATHLETICA INC COM	\$ 40,141	\$ 40,616
	MARSH & MCLENNAN COS COM	19,420	34,948
	MERCK & CO INC NEW COM	50,357	51,120
	META PLATFORM, INC.	114,387	120,780
	MICROSOFT CORP COM	164,605	276,682
	NVIDIA CORP COM	137,063	118,178
	ORACLE CORP COM	57,480	45,030
	PEPSICO INC COM	85,974	76,603
	PROCTER & GAMBLE CO COM	78,334	74,782
	QUALCOMM INC COM	53,980	42,311
	ROSS STORES INC COM	29,778	41,005
	STRYKER CORP COM	34,321	59,827
	SYSCO CORP COM	57,107	51,765
	TE CONNECTIVITY PLC ORD SHS	39,819	42,450
	UNION PAC CORP COM	41,878	45,289
	UNITED PARCEL SVC INC CL B	60,000	38,120
	UNITEDHEALTH GROUP INC COM	70,847	78,174
	VISA INC COM CL A	90,881	146,838
	ZOETIS INC CL A	35,848	37,530
	TOTAL COMMON STOCKS	<u>3,132,672</u>	<u>3,722,345</u>
U.S. GOVERNMENT AND AGENCY SECURITIES:			
	FHLMC MULTICLASSMTG PARTN CTFS GTD SER 2110 CL PG	1,702	1,664
	FHLMC MULTICLASSMTG PARTN CTFS GTD SER 2126 CL CB	1,177	1,164
	FHLMC MULTICLASSMTG PARTN CTFS GTD SER 4370 CL PA	3,391	3,371
	FHLMC MULTICLASSMTG PARTN CTFS GTD SER 4666	7,901	7,697
	FHLMC MULTICLASSMTG PARTN CTFS GTD SER 4929 CL PA	69,339	69,104
	FHLMC MULTICLASSMTG PARTN CTFS GTD SER 5020 CL KW	160,607	133,172
	FHLMC PARTN CTFGROUP #781530 ARM RATE DTD 04/01/04	556	593
	FHLMC PARTN CTFGROUP #840432 ARM RATE DTD	13,886	13,234
	FHLMC PARTN CTFGROUP #SD6639 5.500% DTD 10/01/2024	91,586	92,556
	FHLMC PARTN CTFGROUP #SD6847 5.500% DTD 10/01/2024	86,924	87,129
	FHLMC PARTN CTFGROUP #SD7185 5.500% DTD 12/01/2024	97,706	98,922
	FHLMC PARTN CTFGROUP #SD8106 2.000% DTD 10/01/2020	121,416	93,562
	FHLMC PARTN CTFGROUP #SD8226 3.500% DTD 06/01/2022	86,393	88,120
	FHLMC PARTN GOLDDGROUP #A12626 5.500% DTD 08/01/2003	10,911	11,107
	FHLMC PARTN GOLDDGROUP #A27987 5.000% DTD 10/01/04	3,688	3,757

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EIN: 43-6071748 Plan Number: 501
Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
April 30, 2025

(a)	Identity of Issuer, Borrower, Lessor, or Similar Party and Description of Assets (b) and (c)	Cost (d)	Current Value (e)
U.S. GOVERNMENT AND AGENCY SECURITIES (CONTINUED):			
	FHLMC PARTN GOLDGROUP #G08717 4.000% DTD 07/01/2016	\$ 17,223	\$ 15,219
	FHLMC PARTN GOLDGROUP #G18728 4.500% DTD 12/01/2018	18,411	17,921
	FHLMC PARTN GOLDGROUP #J14978 4.000% DTD 03/01/2011	1,287	1,201
	FNMA GTD PASSTHRUCTF POOL #675570 6.000% DTD	491	485
	FNMA GTD PASSTHRUCTF POOL #766027 5.000% DTD	3,107	3,139
	FNMA GTD PASSTHRUCTF POOL #813174 ARM RATE DTD	115	116
	FNMA GTD PASSTHRUCTF POOL #816308 ARM RATE DTD	1,234	1,243
	FNMA GTD PASSTHRUCTF POOL #AL4012 2.500% DTD	6,067	5,837
	FNMA GTD PASSTHRUCTF POOL #AL6326 2.500% DTD	9,381	8,961
	FNMA GTD PASSTHRUCTF POOL #AT2767 2.500% DTD	9,617	9,123
	FNMA GTD PASSTHRUCTF POOL #BE2362 3.500% DTD	23,508	20,929
	FNMA GTD PASSTHRUCTF POOL #BF0532 3.000% DTD	56,381	59,135
	FNMA GTD PASSTHRUCTF POOL #BM4874 ARM RATE DTD	9,668	9,291
	FNMA GTD PASSTHRUCTF POOL #BP1352 3.000% DTD	33,634	28,854
	FNMA GTD PASSTHRUCTF POOL #CA7991 2.000% DTD	133,419	101,654
	FNMA GTD PASSTHRUCTF POOL #DC0424 5.500% DTD	135,490	135,167
	FNMA GTD PASSTHRUCTF POOL #MA1491 3.000% DTD	26,482	23,435
	FNMA GTD PASSTHRUCTF POOL #MA2841 2.500% DTD	19,330	18,585
	FNMA GTD PASSTHRUCTF POOL #MA4074 2.000% DTD	69,906	61,606
	FNMA GTD PASSTHRUCTF POOL #MA4191 2.000% DTD	124,457	95,263
	FNMA GTD PASSTHRUCTF POOL #MA5039 5.500% DTD	101,699	101,398
	FNMA GTD PASSTHRUCTF POOL #MA5271 5.500% DTD	97,206	98,000
	FNMA GTD REMICPASSTHRU TR 6.00% DTD 11/01/2003 DUE	17,274	17,161
	FNMA GTD REMICPASSTHRU TR REMIC TR SER 2003 14	11	11
	FNMA GTD REMICPASSTHRU TR REMIC TR SER 2012 103 CL	1,142	1,124
	FNMA GTD REMICPASSTHRU TR REMIC TR SER 2012 118 CL	11,246	11,360
	FNMA GTD REMICPASSTHRU TR REMIC TR SER 2012 93 CL	4,031	4,019
	FNMA GTD REMICPASSTHRU TR REMIC TR SER 2014 47 CL	16,763	16,313
	FNMA GTD REMICPASSTHRU TR REMIC TR SER 2019 25 CL	55,101	49,412
	FNMA GTD REMICPASSTHRU TR REMIC TR SER 2021 59 CL	139,225	113,094
	FREDDIE MAC SEASONED CR RISKTRANSFER TR 3.00% 09/01/2017	38,835	36,053
	FREDDIE MAC SEASONED LNS STRUCTURED TR 3.50% 05/01/2022	110,496	107,464
	GNMA GTD PASSTHRU CTF POOL #6077205.25% 03/01/2003 03/15/2033	621	641
	GNMA GTD PASSTHRU CTF POOL #6221235.500% 10/01/03 10/15/2033	3,473	3,407
	GNMA II PASSTHRU CTF POOL #7841742.50% 07/01/2016 06/20/2031	7,765	7,357
	GNMA II PASSTHRU CTF POOL #7846264.50% 12/01/2018 10/20/2048	12,712	11,775
	GNMA II PASSTHRU CTF POOL #7868835.50% 08/01/2023 08/20/2053	73,553	75,669

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Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
April 30, 2025

(a)	Identity of Issuer, Borrower, Lessor, or Similar Party and Description of Assets (b) and (c)	Cost (d)	Current Value (e)
U.S. GOVERNMENT AND AGENCY SECURITIES (CONTINUED):			
	GNMA II PASSTHRU CTF POOL #CO29005.00% 07/01/2022 07/20/2052	\$ 88,614	\$ 90,632
	GNMA II PASSTHRU CTF POOL #MA05273.00% 11/01/2012 11/20/2042	16,139	13,805
	GNMA GTD REMICPSTH SECS SER 2016 129	13,687	11,915
	GNMA GTD REMICPSTH SECS SER 2020 024 CL AC	119,314	96,651
	GNMA GTD REMICPSTH SECS SER 2020 028 CL AK	157,109	125,962
	TENNESSEE VALLEY AUTH FED BE SR ABD 5.25% DTD 02/14/2025	88,665	87,756
	US TREASURY BOND0.625% DTD 02/15/2013 DUE 02/15/2043	226,968	197,445
	US TREASURY BOND0.75% DTD 02/15/2012 DUE 02/15/2042	220,622	198,784
	US TREASURY BOND0.75% DTD 02/15/2015 DUE 02/15/2045	316,166	279,160
	US TREASURY BOND0.875% DTD 02/15/2017 DUE 02/15/2047	116,664	96,570
	US TREASURY BOND1.00% DTD 02/15/2016 DUE 02/15/2046	60,743	51,343
	US TREASURY BOND1.00% DTD 02/15/2018 DUE 02/15/2048	338,928	302,274
	US TREASURY BOND1.375% DTD 02/15/2014 DUE 02/15/2044	240,810	208,597
	US TREASURY BOND1.50% DTD 02/15/2023 DUE 02/15/2053	517,302	493,976
	US TREASURY BOND1.750% DTD 01/31/08 DUE 01/15/2028	353,237	365,308
	US TREASURY BOND2.125% DTD 02/15/2010 DUE 02/15/2040	309,177	257,014
	US TREASURY BOND2.25% DTD 08/15/2019 DUE 08/15/2049	171,250	101,410
	US TREASURY BOND2.375% DTD 01/15/2007 DUE 01/15/2027	315,216	316,938
	US TREASURY BOND2.50% DTD 01/15/2009 DUE 01/15/2029	328,227	326,821
	US TREASURY BOND2.875% DTD 05/15/2019 DUE 05/15/2049	220,029	195,793
	US TREASURY BOND3.375% DTD 10/15/01 DUE 04/15/2032	774,142	761,297
	US TREASURY BOND3.625% DTD 04/15/98 DUE 04/15/2028	1,003,628	995,716
	US TREASURY BOND3.875% DTD 04/15/99 DUE 04/15/2029	321,194	299,196
	US TREASURY BOND3.875% DTD 05/15/2023 DUE 05/15/2043	783,157	781,259
	US TREASURY NOTE0.125% DTD 01/15/2021 DUE 01/15/2031	1,200,273	1,195,745
	US TREASURY NOTE0.125% DTD 01/15/2022 DUE 01/15/2032	1,679,172	1,689,171
	US TREASURY NOTE0.125% DTD 04/15/2022 DUE 04/15/2027	535,066	557,066
	US TREASURY NOTE0.125% DTD 07/15/2016 DUE 07/15/2026	264,880	309,322
	US TREASURY NOTE0.125% DTD 07/15/2021 DUE 07/15/2031	327,902	284,139
	US TREASURY NOTE0.125% DTD 10/15/2021 DUE 10/15/2026	467,203	476,180
	US TREASURY NOTE0.25% DTD 07/15/2019 DUE 07/15/2029	341,198	336,093
	US TREASURY NOTE0.375% DTD 01/15/2017 DUE 01/15/2027	397,184	459,228
	US TREASURY NOTE0.375% DTD 07/15/2017 DUE 07/15/2027	197,406	226,733
	US TREASURY NOTE0.50% DTD 01/15/2018 DUE 01/15/2028	128,656	146,891
	US TREASURY NOTE0.625% DTD 07/15/2022 DUE 07/15/2032	674,954	612,654
	US TREASURY NOTE0.75% DTD 07/15/2018 DUE 07/15/2028	434,521	473,268
	US TREASURY NOTE0.875% DTD 01/15/2019 DUE 01/15/2029	216,130	231,039

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(a)	Identity of Issuer, Borrower, Lessor, or Similar Party and Description of Assets (b) and (c)	Cost (d)	Current Value (e)
U.S. GOVERNMENT AND AGENCY SECURITIES (CONTINUED):			
	US TREASURY NOTE0.875% DTD 11/15/2020 DUE 11/15/2030	\$ 332,350	\$ 299,506
	US TREASURY NOTE1.125% DTD 01/15/2023 DUE 01/15/2033	540,574	551,393
	US TREASURY NOTE1.125% DTD 02/15/2021 DUE 02/15/2031	202,069	181,205
	US TREASURY NOTE1.375% DTD 07/15/2023 DUE 07/15/2033	470,344	478,643
	US TREASURY NOTE1.625% DTD 05/15/2021 DUE 05/15/2031	133,037	132,144
	US TREASURY NOTE1.875% DTD 02/15/2022 DUE 02/15/2032	997,864	992,355
	US TREASURY NOTE2.875% DTD 05/15/2022 DUE 05/15/2032	216,928	214,956
	US TREASURY NOTE3.125% DTD 08/31/2022 DUE 08/31/2029	85,845	88,014
	US TREASURY NOTE4.00% DTD 02/28/2023 DUE 02/28/2030	101,609	101,313
	US TREASURY NOTE4.25% DTD 06/30/2024 DUE 06/30/2029	216,134	219,762
	US TREASURY NOTE4.25% DTD 11/15/2024 DUE 11/15/2034	265,414	267,072
	US TREASURY NOTE4.375% DTD 05/15/2024 DUE 05/15/2034	212,207	214,074
	US TREASURY NOTE4.50% DTD 05/15/2024 DUE 05/15/2027	211,706	213,640
	US TREASURY NOTEVAR RATE DTD 10/15/2024 DUE	337,932	345,346
	TOTAL U.S. GOVERNMENT AND AGENCY SECURITIES	<u>20,437,090</u>	<u>19,929,148</u>
CORPORATE BONDS:			
	ABFS MORTGAGE LOAN TR SER 2001 2 CLA 4 6.99% DTD 06/01/2001	708	648
	AMEREN MISSOURI SECU FUNDING I EXTAMZ 2024A 4.85% 12/20/2024	99,989	98,623
	AMGEN INC SR NT5.65% DTD 03/02/2023 DUE 03/02/2053	49,928	47,990
	APACHE CORP SR NT5.10% DTD 08/20/2010 DUE 09/01/2040	70,435	53,487
	AT&T INC SR NT5.40% DTD 06/02/2023 DUE 02/15/2034	40,421	40,847
	BANK AMER CORP FRVAR RATE DTD 04/23/2019 DUE	30,000	25,787
	BANK AMER CORP SR NT3.248% DTD 10/21/2016 DUE	129,744	117,440
	BANK NEW YORK MELLON CORP FRVAR RATE DTD 07/22/2024 DUE	80,000	81,221
	BAPTIST HEALTH SOUTH FLA4.342% DTD 01/12/2017 DUE 11/15/2041	90,719	76,769
	BERKSHIRE HATHAWAY INC DEL SR NT3.125% 03/15/2016 03/15/2026	113,139	98,990
	BORGWARNER INC SR NT4.375% DTD 03/16/2015 DUE 03/15/2045	59,539	55,725
	BURLINGTON NORTHN SANTA FE CORP DEB7.95% 08/08/2000 08/15/2030	162,330	152,399
	CENTERPOINT ENERGY INC SR NT5.40% DTD 05/10/2024 DUE	49,895	51,495
	CITIGROUP INC SUB NT4.125% DTD 07/25/2016 DUE 07/25/2028	59,815	59,348
	COMCAST CORP NEW SR NT3.30% DTD 03/27/2020 DUE 04/01/2027	228,106	197,024
	CSFB MTG PTC SER 2003 19 CL I A 45.25% DTD 07/01/2003 07/25/2033	4,845	5,547
	CSFB MTG PTC SER 2003 8 CL III A45.50% DTD 03/01/2003 04/25/2033	3,915	3,662
	CUMMINS INC SR GLBL1.50% DTD 08/24/2020 DUE 09/01/2030	155,533	134,029
	CVS HEALTH CORP SR GLBL1.30% DTD 08/21/2020 DUE 08/21/2027	74,790	69,733
	DANAHER CORP DEL SR NT2.60% DTD 10/06/2020 DUE 10/01/2050	89,073	53,402

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EIN: 43-6071748 Plan Number: 501
Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
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(a)	Identity of Issuer, Borrower, Lessor, or Similar Party and Description of Assets (b) and (c)	Cost (d)	Current Value (e)
CORPORATE BONDS (CONTINUED):			
	ENTERGY LA LLC 1ST MTG4.20% DTD 03/12/2019 DUE 04/01/2050	\$ 119,115	\$ 78,172
	ENTERPRISE PRODS OPER LLC SR NT5.35% DTD 01/10/2023 01/31/2033	80,923	81,649
	FISERV INC SR NT3.20% DTD 06/24/2019 DUE 07/01/2026	69,995	69,062
	GALLAGHER ARTHUR J & CO SR GLBL NT5.00% 12/19/2024 02/15/2032	54,964	55,218
	GATX CORP SR NT4.70% DTD 01/31/2019 DUE 04/01/2029	44,926	45,002
	GENERAL MTRS FINL CO INC SR GLBL5.80% 06/23/2023 06/23/2028	59,987	61,208
	GOLDMAN SACHS GROUP INC SR GLOBALNT VAR RATE 06/05/2017	75,000	73,791
	HARTFORD FINL SVCS GROUP INC SR NT2.90% 09/21/2021 09/15/2051	99,128	61,677
	INTEL CORP SR GLBL NT2.45% DTD 11/21/2019 DUE 11/15/2029	110,063	90,059
	JP MORGAN CHASE BANK NA NTVAR RATE DTD 07/23/2018 DUE	138,510	116,034
	JPMORGAN CHASE & CO NT2.95% DTD 7/21/2016 DUE 10/01/2026	111,229	98,281
	KIMCO REALTY CORP SR NT4.60% DTD 08/24/2022 DUE 02/01/2033	49,715	48,252
	KINDER MORGAN INC DEL SR GLBL3.60% 02/11/2021 02/15/2051	64,550	59,758
	LOEWS CORP SR NT4.125% DTD 05/07/2013 DUE 05/15/2043	89,481	62,876
	MCDONALDS CORP MED TERM NT SR NT2.125% 03/05/2020 03/01/2030	94,362	90,106
	METLIFE INC SR NT5.30% DTD 06/05/2024 DUE 12/15/2034	79,667	81,270
	MID AMERICA APTS LP SR NT4.95% DTD 12/18/2024 DUE 03/01/2035	99,170	97,492
	MIDAMERICAN ENERGY CO 1M BD3.15% DTD 10/15/2019 04/15/2050	139,210	93,083
	MORGAN STANLEY FRVAR RATE DTD 07/21/2023 DUE	75,274	75,789
	NORTHERN STS PWR CO WIS 1MTG BD4.85% 08/11/2010 08/15/2040	79,453	65,992
	NORTHERN TR CORP3.15% DTD 05/03/2019 DUE 05/03/2029	152,044	134,439
	NORTHWEST NAT GAS CO FR3.869% DTD 06/17/2019 DUE 06/15/2049	100,000	71,303
	NSTAR ELEC CO SR GLBL DEB3.25% DTD 11/18/2015 DUE 11/15/2025	111,529	99,223
	OHIO PWR CO SR GLBL P NT2.60% DTD 03/17/2020 DUE 04/01/2030	53,236	54,618
	ONEOK INC NEW SR NT4.75% DTD 09/24/2024 DUE 10/15/2031	39,826	39,020
	PEPPERDINE UNIVERSITY 2021A SNK BD2.639% 12/07/2021 09/01/2036	175,000	134,890
	PLAINS ALL AMERN PIPELINE LP/PAAFIN CORP SR NT 4.70% 04/23/2014	49,867	39,869
	PNC FINL SVCS GROUP INC SR NTVAR RATE DTD 07/23/2024 DUE	101,954	99,922
	PPL ELEC UTILS CORP 1MTG BD4.75% DTD 07/11/2013 DUE 07/15/2043	84,461	77,049
	PUGET SOUND ENERGY INC SR SEC3.25% DTD 08/30/2019 09/15/2049	88,475	82,450
	QUALCOMM INC FR3.25% DTD 05/26/2017 DUE 05/20/2027	84,188	73,824
	RBSGC MTG LN TR SER 2007 B CL 3A1FLTG RATE DTD 03/01/2007 DUE	427	448
	REALTY INCOME CORP SR GLBL NT3.00% DTD 10/12/2016 01/15/2027	44,402	44,013
	RESIDENTIAL ACCREDIT SER 2005 QS12CL A 3 5.50% 08/01/2005	3,284	2,527
	SANTANDER HOLDINGS USA INC SR NTVAR RATE DTD 05/31/2024	52,192	51,090
	SIMON PPTY GROUP LP GLBL NT6.25% DTD 11/09/2023 DUE 01/15/2034	79,366	80,324
	SOUTH CAROLINA ELEC & GAS CO 1ST MTG5.45% 01/27/11 02/01/41	58,308	48,437

Welfare Fund of Engineers Local 513
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Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
April 30, 2025

(a)	Identity of Issuer, Borrower, Lessor, or Similar Party and Description of Assets (b) and (c)	Cost (d)	Current Value (e)
CORPORATE BONDS (CONTINUED):			
	SPIRE INC SR GLBL4.70% DTD 08/19/2014 DUE 08/15/2044	\$ 54,948	\$ 46,055
	SSM HEALTH CARE CORP 2017A3.823% DTD 04/19/2017 DUE 06/01/2027	100,000	99,088
	STARBUCKS CORP SR GLBL NT4.00% DTD 08/10/2018 DUE 11/15/2028	118,778	98,632
	STEEL DYNAMICS INC SR GLBL NT1.65% DTD 10/09/2020 10/15/2027	79,442	74,596
	STRYKER CORPORATION SR GLBL NT1.15% DTD 06/04/2020 06/15/2025	101,348	99,551
	TEXAS INSTRS INC SR GLBL NT3.65% DTD 08/16/2022 DUE 08/16/2032	124,636	116,699
	TRUIST FINL CORP FRVAR RATE DTD 01/26/2023 DUE	55,000	53,838
	U S BANCORP MTNS BK ENT FR3.00% DTD 07/29/2019 DUE 07/30/2029	102,083	102,841
	UNITEDHEALTH GROUP INC SR GLBL4.90% DTD 03/21/2024 04/15/2031	79,370	81,421
	VALMONT INDS INC SR NT5.00% DTD 09/22/2014 DUE 10/01/2044	49,768	44,786
	VALSPAR CORP SR GLBL NT3.95% DTD 07/27/2015 DUE 01/15/2026	59,736	59,446
	VANDERBILT UNIV MED CTR4.172% DTD 07/26/2017 DUE 07/01/2037	120,000	104,927
	VERIZON COMMUNICATIONS INC SR NT4.125% 03/16/2017 03/16/2027	177,441	149,871
	WELLS FARGO & CO FRVAR RATE DTD 02/11/2020 DUE	65,000	58,901
	WYETH NT5.95% DTD 03/27/2007 DUE 04/01/2037	85,878	84,291
	TOTAL CORPORATE BONDS	<u>5,979,633</u>	<u>5,337,326</u>
MUNICIPAL BONDS:			
	COLORADO HSG & FIN AUTH SINGLEFAMILY MTG TAXABL 2022	110,000	110,733
	HAWAII ST DEPT BUSINESS ECONOM GREENMKT SEC A TAX 3.242%	49,180	48,103
	HOUSTON TEX TAXABLE PENSION OBLG BDSTAX 4.061% 12/22/2017	145,292	124,379
	HOUSTON TEX TAX PUB IMPT REF BDS2019 B TAX 2.13% 09/10/2019	150,000	147,476
	IDAHO ST BLDG AUTH BLDG REV STATEBDS 2018A TAX 3.431% DTD	125,000	123,690
	KANSAS CITY MO SPL OBLIG TAX BDS2018 A TAX 3.784% 04/18/2018	125,000	124,470
	MAINE HEALTH & HIGHER EDL FACSTAX BDS 2018 B TAX 3.94% DTD	125,000	123,461
	NORTH CAROLINA ST UNIV N C RAL GENREV BDS 2013 B TAX 3.825%	80,000	75,260
	VERMILLION CNTY IND ECONOMIC DTAX BDS TAX 5.00%	100,000	100,409
	WATAUGA CNTY N C LTD OBLIG TAXREF BDS TAX 2.53% 10/02/2019	140,000	137,486
	TOTAL MUNICIPAL BONDS	<u>1,149,472</u>	<u>1,115,467</u>
FOREIGN BONDS:			
	CANADIAN PAC RY CO NEW CR SENNT5.75% 12/01/2011 01/15/2042	68,291	54,416
	CANADIAN PAC RY CO NEW SR GLBL NT4.95% 04/19/2023 08/15/2045	67,212	58,843
	ENSTAR GROUP LTD SR NT3.10% DTD 08/24/2021 DUE 09/01/2031	84,855	73,970
	HSBC HLDGS PLC SR GLBL COCOVAR RATE DTD 03/09/2023 DUE	43,746	47,224
	KONINKLIJKE PHILIPS N V SR GLBL NT6.875% 03/11/2008 03/11/2038	55,553	54,181

Welfare Fund of Engineers Local 513
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Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
April 30, 2025

(a)	Identity of Issuer, Borrower, Lessor, or Similar Party and Description of Assets (b) and (c)	Cost (d)	Current Value (e)
	FOREIGN BONDS (CONTINUED):		
	ROGERS COMMUNICATIONS INC SR NT7.50% 08/06/2008 08/15/2038	\$ 94,512	\$ 68,653
	TOTAL FOREIGN BONDS	<u>414,169</u>	<u>357,287</u>
	MUTUAL FUNDS:		
	AFL-CIO HOUSING INVESTMENT TRUST	2,375,785	2,117,294
	BOSTON TRUST WALDEN INTERNATIONALEQUITY FUND	1,631,048	2,145,702
	BOSTON TRUST WALDEN SMID CAP FUND	553,535	750,215
	GMO BENCHMARK FREE ALLOCATIONFUND III	4,572,414	5,018,691
	VANGUARD FTSE EMERGING MARKETS ETF	435,054	442,771
	VANGUARD SHORT-TERM INVESTMENTGRADE FUND - INS #858	<u>11,491,850</u>	<u>11,894,237</u>
	TOTAL MUTUAL FUNDS	<u>21,059,686</u>	<u>22,368,910</u>
	LIMITED PARTNERSHIPS:		
	ARENA SHORT-DURATION HIGH YIELD	10,000,000	12,086,875
	NIS HIGH YIELD QP FUND LLC	737,289	854,896
	NIS INTERMEDIATE FIXED INCOME QPFUND LLC	9,621,177	10,183,402
	NIS PREFERRED STOCK QP FUND II LLC	664,958	714,965
	NIS TOTAL ABSOLUTE RETURN QPFUND LLC	1,015,437	1,190,904
	POINT BONITA CAPITAL FUND LLC	<u>12,500,000</u>	<u>13,371,359</u>
	TOTAL LIMITED PARTNERSHIPS	<u>34,538,861</u>	<u>38,402,401</u>
	HEDGE FUNDS:		
	ABS LONG & SHORT STRATEGIES FUND	6,638,987	6,180,941
	LIGHTHOUSE GLOBAL LONG/SHORT FUNDLIMITED - CLASS F ELIGIBLE	3,766,673	6,225,348
	PROLOAN BOND FUND	<u>5,000,000</u>	<u>5,495,892</u>
	TOTAL HEDGE FUNDS	<u>15,405,660</u>	<u>17,902,181</u>
	COMMON COLLECTIVE TRUST:		
	BNYM AFL-CIO CF SL SIF	<u>11,518,570</u>	<u>13,827,480</u>
	TOTAL ASSETS AT END OF YEAR	<u>\$ 128,956,161</u>	<u>\$ 138,282,893</u>

Welfare Fund of Engineers Local 513
EIN: 43-6071748 Plan Number: 501
Schedule H, Line 4j - Schedule of Reportable Transactions
Year Ended April 30, 2025

Identity of Party Involved (a)	Description of Asset (b)	Purchase Price (c)	Selling Price (d)	Cost of Asset (g)	Current Value of Asset on Transaction Date (h)	Net Gain (Loss) (i)
<u>Series of transactions with the same issue in excess of 5% of the fair value of plan assets at the beginning of the plan year:</u>						
BMO Harris	GS FIN SQ GOV #465 (238)	\$ 17,205,701	\$ -	\$ 17,205,701	\$ 17,205,701	\$ -
BMO Harris	GS FIN SQ GOV #465 (61)	T -	21,732,391	21,732,391	21,732,391	-
<u>Single transaction in excess of 5% of the fair value of plan assets at the beginning of the plan year:</u>						
BMO Harris	POINT BONITA CAPITAL FUND LLC	\$ 12,500,000	\$ -	\$ 12,500,000	\$ 12,500,000	\$ -

**Welfare Fund of Engineers Local 513
Schedules of Administrative Expenses
Years Ended April 30, 2025 and 2024**

	<u>2025</u>	<u>2024</u>
Actuarial fees	\$ 99,000	\$ 99,000
Administrator fees	1,074,622	1,058,914
Anthem administrative fees	1,520,541	1,467,795
Audit fees	25,500	29,588
Bank service charges	10,344	10,761
Delinquent collection expense	49,958	59,480
Delta Dental administrative fees	149,831	149,676
Claims audit	-	22,000
Insurance	127,538	103,663
Investment consulting fees	20,450	20,000
Legal fees	69,524	39,981
Meeting expense	1,571	1,405
Miscellaneous	3,814	3,483
Postage	83,959	78,889
Stationery and printing	65,497	60,054
Telephone	613	76
	<u>\$ 3,302,762</u>	<u>\$ 3,204,765</u>

Welfare Fund of Engineers Local 513
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Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
April 30, 2025

(a)	Identity of Issuer, Borrower, Lessor, or Similar Party and Description of Assets (b) and (c)	Cost (d)	Current Value (e)
	INTEREST-BEARING CASH:		
	ENTERPRISE BANK AND TRUST - BUSINESS NOW ACCOUNT	\$ 6,794	\$ 6,794
	ENTERPRISE BANK AND TRUST - SWEEP ACCOUNT	7,823,929	7,823,929
	GS FIN SQ GOV #465	7,489,625	7,489,625
	TOTAL INTEREST-BEARING CASH	15,320,348	15,320,348
	COMMON STOCKS:		
	ACCENTURE PLC CLASS A ORDINARYSHARES	60,977	74,788
	ADOBE INC.	42,691	35,623
	AGILENT TECHNOLOGIES INC COM	42,444	36,046
	AIR PRODS & CHEMS INC COM	43,546	44,730
	ALPHABET INC CAP STK CL A	194,296	239,788
	AMAZON.COM INC COM	116,173	96,821
	APPLE INC COM	115,588	211,438
	APPLIED MATLS INC COM	107,052	110,772
	APTARGROUP INC COM	26,334	32,239
	AUTOMATIC DATA PROCESSING INC COM	51,754	87,174
	AUTOZONE INC COM	19,980	48,914
	BECTON DICKINSON & CO COM	47,668	39,347
	BLACKROCK INC COM	56,865	54,856
	BOOKING HLDGS INC COM	36,821	66,291
	CHUBB LTD COM	67,073	111,571
	CISCO SYS INC COM	60,803	76,204
	COMCAST CORP CL A	43,144	35,739
	COOPER COS INC COM	44,884	45,735
	D R HORTON INC COM	44,499	32,217
	DEERE & CO COM	41,326	62,581
	DONALDSON INC COM	39,827	50,941
	ESSENTIAL UTILS INC COM	38,106	40,102
	EVERSOURCE ENERGY COM	44,819	35,688
	EXXON MOBIL CORP COM	92,717	133,622
	FACTSET RESH SYS INC COM	30,587	38,900
	HUBBELL INC COM	32,219	50,845
	JOHNSON & JOHNSON COM	130,069	125,048
	JPMORGAN CHASE & CO COM	77,517	156,557
	KLA CORPORATION	47,091	49,188
	LOCKHEED MARTIN CORP COM	41,836	42,998
	LOWES COS INC COM	31,746	33,534

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(a)	Identity of Issuer, Borrower, Lessor, or Similar Party and Description of Assets (b) and (c)	Cost (d)	Current Value (e)
COMMON STOCKS (CONTINUED):			
	LULULEMON ATHLETICA INC COM	\$ 40,141	\$ 40,616
	MARSH & MCLENNAN COS COM	19,420	34,948
	MERCK & CO INC NEW COM	50,357	51,120
	META PLATFORM, INC.	114,387	120,780
	MICROSOFT CORP COM	164,605	276,682
	NVIDIA CORP COM	137,063	118,178
	ORACLE CORP COM	57,480	45,030
	PEPSICO INC COM	85,974	76,603
	PROCTER & GAMBLE CO COM	78,334	74,782
	QUALCOMM INC COM	53,980	42,311
	ROSS STORES INC COM	29,778	41,005
	STRYKER CORP COM	34,321	59,827
	SYSCO CORP COM	57,107	51,765
	TE CONNECTIVITY PLC ORD SHS	39,819	42,450
	UNION PAC CORP COM	41,878	45,289
	UNITED PARCEL SVC INC CL B	60,000	38,120
	UNITEDHEALTH GROUP INC COM	70,847	78,174
	VISA INC COM CL A	90,881	146,838
	ZOETIS INC CL A	35,848	37,530
	TOTAL COMMON STOCKS	<u>3,132,672</u>	<u>3,722,345</u>
U.S. GOVERNMENT AND AGENCY SECURITIES:			
	FHLMC MULTICLASSMTG PARTN CTFS GTD SER 2110 CL PG	1,702	1,664
	FHLMC MULTICLASSMTG PARTN CTFS GTD SER 2126 CL CB	1,177	1,164
	FHLMC MULTICLASSMTG PARTN CTFS GTD SER 4370 CL PA	3,391	3,371
	FHLMC MULTICLASSMTG PARTN CTFS GTD SER 4666	7,901	7,697
	FHLMC MULTICLASSMTG PARTN CTFS GTD SER 4929 CL PA	69,339	69,104
	FHLMC MULTICLASSMTG PARTN CTFS GTD SER 5020 CL KW	160,607	133,172
	FHLMC PARTN CTFGROUP #781530 ARM RATE DTD 04/01/04	556	593
	FHLMC PARTN CTFGROUP #840432 ARM RATE DTD	13,886	13,234
	FHLMC PARTN CTFGROUP #SD6639 5.500% DTD 10/01/2024	91,586	92,556
	FHLMC PARTN CTFGROUP #SD6847 5.500% DTD 10/01/2024	86,924	87,129
	FHLMC PARTN CTFGROUP #SD7185 5.500% DTD 12/01/2024	97,706	98,922
	FHLMC PARTN CTFGROUP #SD8106 2.000% DTD 10/01/2020	121,416	93,562
	FHLMC PARTN CTFGROUP #SD8226 3.500% DTD 06/01/2022	86,393	88,120
	FHLMC PARTN GOLDDGROUP #A12626 5.500% DTD 08/01/2003	10,911	11,107
	FHLMC PARTN GOLDDGROUP #A27987 5.000% DTD 10/01/04	3,688	3,757

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U.S. GOVERNMENT AND AGENCY SECURITIES (CONTINUED):			
	FHLMC PARTN GOLDGROUP #G08717 4.000% DTD 07/01/2016	\$ 17,223	\$ 15,219
	FHLMC PARTN GOLDGROUP #G18728 4.500% DTD 12/01/2018	18,411	17,921
	FHLMC PARTN GOLDGROUP #J14978 4.000% DTD 03/01/2011	1,287	1,201
	FNMA GTD PASSTHRUCTF POOL #675570 6.000% DTD	491	485
	FNMA GTD PASSTHRUCTF POOL #766027 5.000% DTD	3,107	3,139
	FNMA GTD PASSTHRUCTF POOL #813174 ARM RATE DTD	115	116
	FNMA GTD PASSTHRUCTF POOL #816308 ARM RATE DTD	1,234	1,243
	FNMA GTD PASSTHRUCTF POOL #AL4012 2.500% DTD	6,067	5,837
	FNMA GTD PASSTHRUCTF POOL #AL6326 2.500% DTD	9,381	8,961
	FNMA GTD PASSTHRUCTF POOL #AT2767 2.500% DTD	9,617	9,123
	FNMA GTD PASSTHRUCTF POOL #BE2362 3.500% DTD	23,508	20,929
	FNMA GTD PASSTHRUCTF POOL #BF0532 3.000% DTD	56,381	59,135
	FNMA GTD PASSTHRUCTF POOL #BM4874 ARM RATE DTD	9,668	9,291
	FNMA GTD PASSTHRUCTF POOL #BP1352 3.000% DTD	33,634	28,854
	FNMA GTD PASSTHRUCTF POOL #CA7991 2.000% DTD	133,419	101,654
	FNMA GTD PASSTHRUCTF POOL #DC0424 5.500% DTD	135,490	135,167
	FNMA GTD PASSTHRUCTF POOL #MA1491 3.000% DTD	26,482	23,435
	FNMA GTD PASSTHRUCTF POOL #MA2841 2.500% DTD	19,330	18,585
	FNMA GTD PASSTHRUCTF POOL #MA4074 2.000% DTD	69,906	61,606
	FNMA GTD PASSTHRUCTF POOL #MA4191 2.000% DTD	124,457	95,263
	FNMA GTD PASSTHRUCTF POOL #MA5039 5.500% DTD	101,699	101,398
	FNMA GTD PASSTHRUCTF POOL #MA5271 5.500% DTD	97,206	98,000
	FNMA GTD REMICPASSTHRU TR 6.00% DTD 11/01/2003 DUE	17,274	17,161
	FNMA GTD REMICPASSTHRU TR REMIC TR SER 2003 14	11	11
	FNMA GTD REMICPASSTHRU TR REMIC TR SER 2012 103 CL	1,142	1,124
	FNMA GTD REMICPASSTHRU TR REMIC TR SER 2012 118 CL	11,246	11,360
	FNMA GTD REMICPASSTHRU TR REMIC TR SER 2012 93 CL	4,031	4,019
	FNMA GTD REMICPASSTHRU TR REMIC TR SER 2014 47 CL	16,763	16,313
	FNMA GTD REMICPASSTHRU TR REMIC TR SER 2019 25 CL	55,101	49,412
	FNMA GTD REMICPASSTHRU TR REMIC TR SER 2021 59 CL	139,225	113,094
	FREDDIE MAC SEASONED CR RISKTRANSFER TR 3.00% 09/01/2017	38,835	36,053
	FREDDIE MAC SEASONED LNS STRUCTURED TR 3.50% 05/01/2022	110,496	107,464
	GNMA GTD PASSTHRU CTF POOL #6077205.25% 03/01/2003 03/15/2033	621	641
	GNMA GTD PASSTHRU CTF POOL #6221235.500% 10/01/03 10/15/2033	3,473	3,407
	GNMA II PASSTHRU CTF POOL #7841742.50% 07/01/2016 06/20/2031	7,765	7,357
	GNMA II PASSTHRU CTF POOL #7846264.50% 12/01/2018 10/20/2048	12,712	11,775
	GNMA II PASSTHRU CTF POOL #7868835.50% 08/01/2023 08/20/2053	73,553	75,669

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U.S. GOVERNMENT AND AGENCY SECURITIES (CONTINUED):			
	GNMA II PASSTHRU CTF POOL #CO29005.00% 07/01/2022 07/20/2052	\$ 88,614	\$ 90,632
	GNMA II PASSTHRU CTF POOL #MA05273.00% 11/01/2012 11/20/2042	16,139	13,805
	GNMA GTD REMICPSTH SECS SER 2016 129	13,687	11,915
	GNMA GTD REMICPSTH SECS SER 2020 024 CL AC	119,314	96,651
	GNMA GTD REMICPSTH SECS SER 2020 028 CL AK	157,109	125,962
	TENNESSEE VALLEY AUTH FED BE SR ABD 5.25% DTD 02/14/2025	88,665	87,756
	US TREASURY BOND0.625% DTD 02/15/2013 DUE 02/15/2043	226,968	197,445
	US TREASURY BOND0.75% DTD 02/15/2012 DUE 02/15/2042	220,622	198,784
	US TREASURY BOND0.75% DTD 02/15/2015 DUE 02/15/2045	316,166	279,160
	US TREASURY BOND0.875% DTD 02/15/2017 DUE 02/15/2047	116,664	96,570
	US TREASURY BOND1.00% DTD 02/15/2016 DUE 02/15/2046	60,743	51,343
	US TREASURY BOND1.00% DTD 02/15/2018 DUE 02/15/2048	338,928	302,274
	US TREASURY BOND1.375% DTD 02/15/2014 DUE 02/15/2044	240,810	208,597
	US TREASURY BOND1.50% DTD 02/15/2023 DUE 02/15/2053	517,302	493,976
	US TREASURY BOND1.750% DTD 01/31/08 DUE 01/15/2028	353,237	365,308
	US TREASURY BOND2.125% DTD 02/15/2010 DUE 02/15/2040	309,177	257,014
	US TREASURY BOND2.25% DTD 08/15/2019 DUE 08/15/2049	171,250	101,410
	US TREASURY BOND2.375% DTD 01/15/2007 DUE 01/15/2027	315,216	316,938
	US TREASURY BOND2.50% DTD 01/15/2009 DUE 01/15/2029	328,227	326,821
	US TREASURY BOND2.875% DTD 05/15/2019 DUE 05/15/2049	220,029	195,793
	US TREASURY BOND3.375% DTD 10/15/01 DUE 04/15/2032	774,142	761,297
	US TREASURY BOND3.625% DTD 04/15/98 DUE 04/15/2028	1,003,628	995,716
	US TREASURY BOND3.875% DTD 04/15/99 DUE 04/15/2029	321,194	299,196
	US TREASURY BOND3.875% DTD 05/15/2023 DUE 05/15/2043	783,157	781,259
	US TREASURY NOTE0.125% DTD 01/15/2021 DUE 01/15/2031	1,200,273	1,195,745
	US TREASURY NOTE0.125% DTD 01/15/2022 DUE 01/15/2032	1,679,172	1,689,171
	US TREASURY NOTE0.125% DTD 04/15/2022 DUE 04/15/2027	535,066	557,066
	US TREASURY NOTE0.125% DTD 07/15/2016 DUE 07/15/2026	264,880	309,322
	US TREASURY NOTE0.125% DTD 07/15/2021 DUE 07/15/2031	327,902	284,139
	US TREASURY NOTE0.125% DTD 10/15/2021 DUE 10/15/2026	467,203	476,180
	US TREASURY NOTE0.25% DTD 07/15/2019 DUE 07/15/2029	341,198	336,093
	US TREASURY NOTE0.375% DTD 01/15/2017 DUE 01/15/2027	397,184	459,228
	US TREASURY NOTE0.375% DTD 07/15/2017 DUE 07/15/2027	197,406	226,733
	US TREASURY NOTE0.50% DTD 01/15/2018 DUE 01/15/2028	128,656	146,891
	US TREASURY NOTE0.625% DTD 07/15/2022 DUE 07/15/2032	674,954	612,654
	US TREASURY NOTE0.75% DTD 07/15/2018 DUE 07/15/2028	434,521	473,268
	US TREASURY NOTE0.875% DTD 01/15/2019 DUE 01/15/2029	216,130	231,039

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U.S. GOVERNMENT AND AGENCY SECURITIES (CONTINUED):			
	US TREASURY NOTE0.875% DTD 11/15/2020 DUE 11/15/2030	\$ 332,350	\$ 299,506
	US TREASURY NOTE1.125% DTD 01/15/2023 DUE 01/15/2033	540,574	551,393
	US TREASURY NOTE1.125% DTD 02/15/2021 DUE 02/15/2031	202,069	181,205
	US TREASURY NOTE1.375% DTD 07/15/2023 DUE 07/15/2033	470,344	478,643
	US TREASURY NOTE1.625% DTD 05/15/2021 DUE 05/15/2031	133,037	132,144
	US TREASURY NOTE1.875% DTD 02/15/2022 DUE 02/15/2032	997,864	992,355
	US TREASURY NOTE2.875% DTD 05/15/2022 DUE 05/15/2032	216,928	214,956
	US TREASURY NOTE3.125% DTD 08/31/2022 DUE 08/31/2029	85,845	88,014
	US TREASURY NOTE4.00% DTD 02/28/2023 DUE 02/28/2030	101,609	101,313
	US TREASURY NOTE4.25% DTD 06/30/2024 DUE 06/30/2029	216,134	219,762
	US TREASURY NOTE4.25% DTD 11/15/2024 DUE 11/15/2034	265,414	267,072
	US TREASURY NOTE4.375% DTD 05/15/2024 DUE 05/15/2034	212,207	214,074
	US TREASURY NOTE4.50% DTD 05/15/2024 DUE 05/15/2027	211,706	213,640
	US TREASURY NOTEVAR RATE DTD 10/15/2024 DUE	337,932	345,346
	TOTAL U.S. GOVERNMENT AND AGENCY SECURITIES	<u>20,437,090</u>	<u>19,929,148</u>
CORPORATE BONDS:			
	ABFS MORTGAGE LOAN TR SER 2001 2 CLA 4 6.99% DTD 06/01/2001	708	648
	AMEREN MISSOURI SECU FUNDING I EXTAMZ 2024A 4.85% 12/20/2024	99,989	98,623
	AMGEN INC SR NT5.65% DTD 03/02/2023 DUE 03/02/2053	49,928	47,990
	APACHE CORP SR NT5.10% DTD 08/20/2010 DUE 09/01/2040	70,435	53,487
	AT&T INC SR NT5.40% DTD 06/02/2023 DUE 02/15/2034	40,421	40,847
	BANK AMER CORP FRVAR RATE DTD 04/23/2019 DUE	30,000	25,787
	BANK AMER CORP SR NT3.248% DTD 10/21/2016 DUE	129,744	117,440
	BANK NEW YORK MELLON CORP FRVAR RATE DTD 07/22/2024 DUE	80,000	81,221
	BAPTIST HEALTH SOUTH FLA4.342% DTD 01/12/2017 DUE 11/15/2041	90,719	76,769
	BERKSHIRE HATHAWAY INC DEL SR NT3.125% 03/15/2016 03/15/2026	113,139	98,990
	BORGWARNER INC SR NT4.375% DTD 03/16/2015 DUE 03/15/2045	59,539	55,725
	BURLINGTON NORTHN SANTA FE CORP DEB7.95% 08/08/2000 08/15/2030	162,330	152,399
	CENTERPOINT ENERGY INC SR NT5.40% DTD 05/10/2024 DUE	49,895	51,495
	CITIGROUP INC SUB NT4.125% DTD 07/25/2016 DUE 07/25/2028	59,815	59,348
	COMCAST CORP NEW SR NT3.30% DTD 03/27/2020 DUE 04/01/2027	228,106	197,024
	CSFB MTG PTC SER 2003 19 CL I A 45.25% DTD 07/01/2003 07/25/2033	4,845	5,547
	CSFB MTG PTC SER 2003 8 CL III A45.50% DTD 03/01/2003 04/25/2033	3,915	3,662
	CUMMINS INC SR GLBL1.50% DTD 08/24/2020 DUE 09/01/2030	155,533	134,029
	CVS HEALTH CORP SR GLBL1.30% DTD 08/21/2020 DUE 08/21/2027	74,790	69,733
	DANAHER CORP DEL SR NT2.60% DTD 10/06/2020 DUE 10/01/2050	89,073	53,402

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CORPORATE BONDS (CONTINUED):			
	ENTERGY LA LLC 1ST MTG4.20% DTD 03/12/2019 DUE 04/01/2050	\$ 119,115	\$ 78,172
	ENTERPRISE PRODS OPER LLC SR NT5.35% DTD 01/10/2023 01/31/2033	80,923	81,649
	FISERV INC SR NT3.20% DTD 06/24/2019 DUE 07/01/2026	69,995	69,062
	GALLAGHER ARTHUR J & CO SR GLBL NT5.00% 12/19/2024 02/15/2032	54,964	55,218
	GATX CORP SR NT4.70% DTD 01/31/2019 DUE 04/01/2029	44,926	45,002
	GENERAL MTRS FINL CO INC SR GLBL5.80% 06/23/2023 06/23/2028	59,987	61,208
	GOLDMAN SACHS GROUP INC SR GLOBALNT VAR RATE 06/05/2017	75,000	73,791
	HARTFORD FINL SVCS GROUP INC SR NT2.90% 09/21/2021 09/15/2051	99,128	61,677
	INTEL CORP SR GLBL NT2.45% DTD 11/21/2019 DUE 11/15/2029	110,063	90,059
	JP MORGAN CHASE BANK NA NTVAR RATE DTD 07/23/2018 DUE	138,510	116,034
	JPMORGAN CHASE & CO NT2.95% DTD 7/21/2016 DUE 10/01/2026	111,229	98,281
	KIMCO REALTY CORP SR NT4.60% DTD 08/24/2022 DUE 02/01/2033	49,715	48,252
	KINDER MORGAN INC DEL SR GLBL3.60% 02/11/2021 02/15/2051	64,550	59,758
	LOEWS CORP SR NT4.125% DTD 05/07/2013 DUE 05/15/2043	89,481	62,876
	MCDONALDS CORP MED TERM NT SR NT2.125% 03/05/2020 03/01/2030	94,362	90,106
	METLIFE INC SR NT5.30% DTD 06/05/2024 DUE 12/15/2034	79,667	81,270
	MID AMERICA APTS LP SR NT4.95% DTD 12/18/2024 DUE 03/01/2035	99,170	97,492
	MIDAMERICAN ENERGY CO 1M BD3.15% DTD 10/15/2019 04/15/2050	139,210	93,083
	MORGAN STANLEY FRVAR RATE DTD 07/21/2023 DUE	75,274	75,789
	NORTHERN STS PWR CO WIS 1MTG BD4.85% 08/11/2010 08/15/2040	79,453	65,992
	NORTHERN TR CORP3.15% DTD 05/03/2019 DUE 05/03/2029	152,044	134,439
	NORTHWEST NAT GAS CO FR3.869% DTD 06/17/2019 DUE 06/15/2049	100,000	71,303
	NSTAR ELEC CO SR GLBL DEB3.25% DTD 11/18/2015 DUE 11/15/2025	111,529	99,223
	OHIO PWR CO SR GLBL P NT2.60% DTD 03/17/2020 DUE 04/01/2030	53,236	54,618
	ONEOK INC NEW SR NT4.75% DTD 09/24/2024 DUE 10/15/2031	39,826	39,020
	PEPPERDINE UNIVERSITY 2021A SNK BD2.639% 12/07/2021 09/01/2036	175,000	134,890
	PLAINS ALL AMERN PIPELINE LP/PAAFIN CORP SR NT 4.70% 04/23/2014	49,867	39,869
	PNC FINL SVCS GROUP INC SR NTVAR RATE DTD 07/23/2024 DUE	101,954	99,922
	PPL ELEC UTILS CORP 1MTG BD4.75% DTD 07/11/2013 DUE 07/15/2043	84,461	77,049
	PUGET SOUND ENERGY INC SR SEC3.25% DTD 08/30/2019 09/15/2049	88,475	82,450
	QUALCOMM INC FR3.25% DTD 05/26/2017 DUE 05/20/2027	84,188	73,824
	RBSGC MTG LN TR SER 2007 B CL 3A1FLTG RATE DTD 03/01/2007 DUE	427	448
	REALTY INCOME CORP SR GLBL NT3.00% DTD 10/12/2016 01/15/2027	44,402	44,013
	RESIDENTIAL ACCREDIT SER 2005 QS12CL A 3 5.50% 08/01/2005	3,284	2,527
	SANTANDER HOLDINGS USA INC SR NTVAR RATE DTD 05/31/2024	52,192	51,090
	SIMON PPTY GROUP LP GLBL NT6.25% DTD 11/09/2023 DUE 01/15/2034	79,366	80,324
	SOUTH CAROLINA ELEC & GAS CO 1ST MTG5.45% 01/27/11 02/01/41	58,308	48,437

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CORPORATE BONDS (CONTINUED):			
	SPIRE INC SR GLBL4.70% DTD 08/19/2014 DUE 08/15/2044	\$ 54,948	\$ 46,055
	SSM HEALTH CARE CORP 2017A3.823% DTD 04/19/2017 DUE 06/01/2027	100,000	99,088
	STARBUCKS CORP SR GLBL NT4.00% DTD 08/10/2018 DUE 11/15/2028	118,778	98,632
	STEEL DYNAMICS INC SR GLBL NT1.65% DTD 10/09/2020 10/15/2027	79,442	74,596
	STRYKER CORPORATION SR GLBL NT1.15% DTD 06/04/2020 06/15/2025	101,348	99,551
	TEXAS INSTRS INC SR GLBL NT3.65% DTD 08/16/2022 DUE 08/16/2032	124,636	116,699
	TRUIST FINL CORP FRVAR RATE DTD 01/26/2023 DUE	55,000	53,838
	U S BANCORP MTNS BK ENT FR3.00% DTD 07/29/2019 DUE 07/30/2029	102,083	102,841
	UNITEDHEALTH GROUP INC SR GLBL4.90% DTD 03/21/2024 04/15/2031	79,370	81,421
	VALMONT INDS INC SR NT5.00% DTD 09/22/2014 DUE 10/01/2044	49,768	44,786
	VALSPAR CORP SR GLBL NT3.95% DTD 07/27/2015 DUE 01/15/2026	59,736	59,446
	VANDERBILT UNIV MED CTR4.172% DTD 07/26/2017 DUE 07/01/2037	120,000	104,927
	VERIZON COMMUNICATIONS INC SR NT4.125% 03/16/2017 03/16/2027	177,441	149,871
	WELLS FARGO & CO FRVAR RATE DTD 02/11/2020 DUE	65,000	58,901
	WYETH NT5.95% DTD 03/27/2007 DUE 04/01/2037	85,878	84,291
	TOTAL CORPORATE BONDS	<u>5,979,633</u>	<u>5,337,326</u>
MUNICIPAL BONDS:			
	COLORADO HSG & FIN AUTH SINGLEFAMILY MTG TAXABL 2022	110,000	110,733
	HAWAII ST DEPT BUSINESS ECONOM GREENMKT SEC A TAX 3.242%	49,180	48,103
	HOUSTON TEX TAXABLE PENSION OBLG BDSTAX 4.061% 12/22/2017	145,292	124,379
	HOUSTON TEX TAX PUB IMPT REF BDS2019 B TAX 2.13% 09/10/2019	150,000	147,476
	IDAHO ST BLDG AUTH BLDG REV STATEBDS 2018A TAX 3.431% DTD	125,000	123,690
	KANSAS CITY MO SPL OBLIG TAX BDS2018 A TAX 3.784% 04/18/2018	125,000	124,470
	MAINE HEALTH & HIGHER EDL FACSTAX BDS 2018 B TAX 3.94% DTD	125,000	123,461
	NORTH CAROLINA ST UNIV N C RAL GENREV BDS 2013 B TAX 3.825%	80,000	75,260
	VERMILLION CNTY IND ECONOMIC DTAX BDS TAX 5.00%	100,000	100,409
	WATAUGA CNTY N C LTD OBLIG TAXREF BDS TAX 2.53% 10/02/2019	140,000	137,486
	TOTAL MUNICIPAL BONDS	<u>1,149,472</u>	<u>1,115,467</u>
FOREIGN BONDS:			
	CANADIAN PAC RY CO NEW CR SENNT5.75% 12/01/2011 01/15/2042	68,291	54,416
	CANADIAN PAC RY CO NEW SR GLBL NT4.95% 04/19/2023 08/15/2045	67,212	58,843
	ENSTAR GROUP LTD SR NT3.10% DTD 08/24/2021 DUE 09/01/2031	84,855	73,970
	HSBC HLDGS PLC SR GLBL COCOVAR RATE DTD 03/09/2023 DUE	43,746	47,224
	KONINKLIJKE PHILIPS N V SR GLBL NT6.875% 03/11/2008 03/11/2038	55,553	54,181

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	FOREIGN BONDS (CONTINUED):		
	ROGERS COMMUNICATIONS INC SR NT7.50% 08/06/2008 08/15/2038	\$ 94,512	\$ 68,653
	TOTAL FOREIGN BONDS	<u>414,169</u>	<u>357,287</u>
	MUTUAL FUNDS:		
	AFL-CIO HOUSING INVESTMENT TRUST	2,375,785	2,117,294
	BOSTON TRUST WALDEN INTERNATIONALEQUITY FUND	1,631,048	2,145,702
	BOSTON TRUST WALDEN SMID CAP FUND	553,535	750,215
	GMO BENCHMARK FREE ALLOCATIONFUND III	4,572,414	5,018,691
	VANGUARD FTSE EMERGING MARKETS ETF	435,054	442,771
	VANGUARD SHORT-TERM INVESTMENTGRADE FUND - INS #858	<u>11,491,850</u>	<u>11,894,237</u>
	TOTAL MUTUAL FUNDS	<u>21,059,686</u>	<u>22,368,910</u>
	LIMITED PARTNERSHIPS:		
	ARENA SHORT-DURATION HIGH YIELD	10,000,000	12,086,875
	NIS HIGH YIELD QP FUND LLC	737,289	854,896
	NIS INTERMEDIATE FIXED INCOME QPFUND LLC	9,621,177	10,183,402
	NIS PREFERRED STOCK QP FUND II LLC	664,958	714,965
	NIS TOTAL ABSOLUTE RETURN QPFUND LLC	1,015,437	1,190,904
	POINT BONITA CAPITAL FUND LLC	<u>12,500,000</u>	<u>13,371,359</u>
	TOTAL LIMITED PARTNERSHIPS	<u>34,538,861</u>	<u>38,402,401</u>
	HEDGE FUNDS:		
	ABS LONG & SHORT STRATEGIES FUND	6,638,987	6,180,941
	LIGHTHOUSE GLOBAL LONG/SHORT FUNDLIMITED - CLASS F ELIGIBLE	3,766,673	6,225,348
	PROLOAN BOND FUND	<u>5,000,000</u>	<u>5,495,892</u>
	TOTAL HEDGE FUNDS	<u>15,405,660</u>	<u>17,902,181</u>
	COMMON COLLECTIVE TRUST:		
	BNYM AFL-CIO CF SL SIF	<u>11,518,570</u>	<u>13,827,480</u>
	TOTAL ASSETS AT END OF YEAR	<u>\$ 128,956,161</u>	<u>\$ 138,282,893</u>

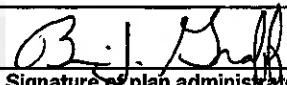
Form 5500 Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Annual Return/Report of Employee Benefit Plan This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6057(b) and 6058(a) of the Internal Revenue Code (the Code). ▶ Complete all entries in accordance with the instructions to the Form 5500.	OMB Nos. 1210 - 0110 1210 - 0089 2024 This Form is Open to Public Inspection
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Part I	Annual Report Identification Information
For calendar plan year 2024 or fiscal plan year beginning <u>05/01/2024</u> and ending <u>04/30/2025</u>	
A This return/report is for:	☒ a multiemployer plan ☐ a multiple-employer plan (Filers checking this box must provide participating employer information in accordance with the form instructions.)
B This return/report is:	☐ a single-employer plan ☐ a DFE (specify) _____ ☐ the first return/report ☐ the final return/report ☐ an amended return/report ☐ a short plan year return/report (less than 12 months)
C If the plan is a collectively-bargained plan, check here	▶ ☒
D Check box if filing under:	☒ Form 5558 ☐ automatic extension ☐ the DFVC program ☐ special extension (enter description) _____
E If this is a retroactively adopted plan permitted by SECURE Act section 201, check here	▶ ☐

Part II	Basic Plan Information - enter all requested information
1a Name of plan WELFARE FUND OF ENGINEERS LOCAL 513	1b Three-digit plan number (PN) ▶ 501
	1c Effective date of plan 05/01/1966
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) WELFARE FUND OF ENGINEERS LOCAL UNION 513 3449 HOLLENBERG DRIVE BRIDGETON MO 63044	2b Employer Identification Number (EIN) 43-6071748 2c Plan Sponsor's telephone number (314)-739-2973 2d Business code (see instructions) 813930

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		<u>2-12-26</u>	BRIAN GRAFF
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

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

Form 5500 (2024)
v. 240311

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 _____

Welfare Fund of Engineers Local 513
EIN: 43-6071748 Plan Number: 501
Schedule H, Line 4j - Schedule of Reportable Transactions
Year Ended April 30, 2025

Identity of Party Involved (a)	Description of Asset (b)	Purchase Price (c)	Selling Price (d)	Cost of Asset (g)	Current Value of Asset on Transaction Date (h)	Net Gain (Loss) (i)
<u>Series of transactions with the same issue in excess of 5% of the fair value of plan assets at the beginning of the plan year:</u>						
BMO Harris	GS FIN SQ GOV #465 (238)	\$ 17,205,701	\$ -	\$ 17,205,701	\$ 17,205,701	\$ -
BMO Harris	GS FIN SQ GOV #465 (61)	T -	21,732,391	21,732,391	21,732,391	-
<u>Single transaction in excess of 5% of the fair value of plan assets at the beginning of the plan year:</u>						
BMO Harris	POINT BONITA CAPITAL FUND LLC	\$ 12,500,000	\$ -	\$ 12,500,000	\$ 12,500,000	\$ -