UNITED FOOD AND COMMERCIAL WORKERS UNIONS AND PARTICIPATING EMPLOYERS HEALTH AND WELFARE FUND

Financial Statements

December 31, 2023 and 2022

With Independent Auditor's Report

United Food and Commercial Workers Unions and Participating Employers Health and Welfare Fund
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INDEPENDENT AUDITOR'S REPORT

To the Board of Trustees,
United Food and Commercial Workers Unions and Participating Employers Health and Welfare Fund:

Report on the Audit of the Financial Statements

Opinion

We have audited the financial statements of the United Food and Commercial Workers Unions and Contributing Employers Health and Welfare Fund, an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 ("ERISA"), which comprise the statements of net assets available for benefits as of December 31, 2023 and 2022, and the related statements of changes in net assets available for benefits for the years then ended, and the related notes to the financial statements.

In our opinion, the accompanying financial statements present fairly, in all material respects, the net assets available for benefits of the United Food and Commercial Workers Unions and Contributing Employers Health and Welfare Fund as of December 31, 2023 and 2022, and the changes in its net assets available for benefits for the years then ended, in accordance with accounting principles generally accepted in the United States of America.

Basis for Opinion

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

Responsibilities of Management for the Financial Statements

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

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about the United Food and Commercial Workers Unions and Contributing Employers Health and Welfare Fund's ability to continue as a going concern for one year after the date that the financial statements are available to be issued.

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

Auditor's Responsibilities for the Audit of the Financial Statements

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

In performing an audit in accordance with GAAS, we:

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

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

DATE

United Food and Commercial Workers Unions and Participating Employers Health and Welfare Fund
Statements of Net Assets Available for Benefits
December 31, 2023 and 2022

	2023	2022
Assets		
Cash and cash equivalents	$ 2,711,474	$ 3,199,816
Investments at fair value		
U.S. government and government agency securities	988,151	-
Corporate and municipal bonds	1,043,238	-
Total investments	2,031,389	-
Receivables		
Employers' contributions	864,597	909,398
Prescription rebates	519,625	464,576
Accrued interest	22,693	9,221
Other	27,642	99,583
Total receivables	1,434,557	1,482,778
Prepaid expenses	21,072	22,042
Total assets	6,198,492	4,704,636
Liabilities		
Accounts payable and accrued expenses	232,425	188,708
Employer deposits	133,142	133,142
Total liabilities	365,567	321,850
Net assets available for benefits	$ 5,832,925	$ 4,382,786

The Notes to Financial Statements are an integral part of these statements.

United Food and Commercial Workers Unions and Participating Employers Health and Welfare Fund
Statements of Changes in Net Assets Available for Benefits
Years Ended December 31, 2023 and 2022

	2023	2022
Additions		
Contributions		
Employers	$ 10,366,807	$ 13,770,908
Participants	1,028,027	138,422
Total contributions	11,394,834	13,909,330
Investment (loss) income		
Net income (depreciation) in fair value of investments	46,842	(54,108)
Interest income	384,468	72,020
Investment expenses	(6,272)	(4,781)
	425,038	13,131
Other income	27,245	26,860
Total additions	11,847,117	13,949,321
Deductions		
Benefits	9,441,144	12,774,345
Claims administration fees	321,142	412,835
Administrative expenses		
Contract administrator fees	194,522	198,533
Affordable Care Act fees	4,473	5,083
Legal fees	205,669	447,970
Conference and meeting expenses	4,547	-
Audit fees	54,880	58,331
Actuary fees	24,989	4,335
Postage, printing, and supplies	24,524	20,710
Bonding and insurance	35,710	34,539
Telephone	1,322	1,384
Consulting fees	75,014	131,854
Miscellaneous	9,042	6,762
Total administrative expenses	634,692	909,501
Total deductions	10,396,978	14,096,681
Net change in net assets available for benefits	1,450,139	(147,360)
Net assets available for benefits		
Beginning of year	4,382,786	4,530,146
End of year	$ 5,832,925	$ 4,382,786

The Notes to Financial Statements are an integral part of these statements.

1. PLAN DESCRIPTION

General

The United Food and Commercial Workers Unions and Participating Employers Health and Welfare Fund (the “Plan”) is a multiemployer health benefit plan subject to the provisions of the Employee Retirement Income Security Act of 1974 (“ERISA”).

Effective September 1, 2012, the Board of Trustees of the Plan approved separation of the health and welfare plan for active participants and the health and welfare plan for retirees by establishment of two separate programs under the trust. The active program is called the UFCW Unions and Participating Employers Active Health and Welfare Plan and the retiree program is called the UFCW Unions and Participating Employers Retiree Health and Welfare Plan. The assets, liabilities, income and expenses of these two programs are separately accounted for and all activity of these two programs has been combined in the Plan's financial statements.

Benefits

The Plan covers employees working in jobs covered by the collective bargaining agreements between certain employers and United Food and Commercial Workers Local Unions 400 and 27, and employees of participating employers for which contributions are required to be made to the Plan. The Plan provides benefits such as medical, hospitalization, surgical, mental health/substance abuse, life and accidental death and dismemberment insurance, accident and sickness, prescription drug, dental and optical benefits. Benefit levels vary, and are determined by the amount of the contributions as agreed to in the collective bargaining agreements and participation agreements. Under the provisions of the Consolidated Omnibus Budget Reconciliation Act (“COBRA”), participants and their dependents may continue their eligibility for benefits under the Plan for a certain period after the occurrence of a qualifying event.

Both full time and part time employees are eligible to participate in this Plan if they are employed by a participating employer and covered by a collective bargaining agreement which provides for contributions for coverage under this Plan. The level of benefits is determined by the amount of contribution.

Eligible retirees may elect health and welfare coverage, including prescription drug coverage, subject to Plan rules and co-payments, if applicable.

Participants should refer to the Summary Plan Description for more complete information.

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of Accounting

The accompanying financial statements have been prepared using the accrual basis of accounting in accordance with accounting principles generally accepted in the United States of America.

Use of Estimates

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

Cash and Cash Equivalents

Cash equivalents include money market funds valued at the daily closing price as reported by the funds. The money market funds held by the Plan are open-end funds that are registered with the Securities and Exchange Commission. These funds are required to publish their daily net asset value and to transact at that price. The money market funds held by the Plan are deemed to be actively traded.

Valuation of Investments and Income Recognition

Investments are reported at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. See Note 4 on fair value measurements for valuation methodologies in detail. Purchases and sales of securities are reflected on a trade-date basis. Interest income is recorded on the accrual basis. Net appreciation or depreciation includes the Plan's realized and unrealized gains and losses on investments bought and sold, as well as held during the year.

Claims Payable and Claims Incurred But Not Reported

Claims payable represent amounts reported at year-end, which have not yet been paid from the net assets of the Plan. The Plan's obligation for claims incurred by participants but not reported at year end is estimated by the Plan's actuary in accordance with accepted actuarial principles based on claims data provided by the Plan.

Postretirement Benefit Obligations

The postretirement benefit obligation as of December 31, 2023 and 2022 represents the actuarial present value of those estimated future benefits that are attributed to employee service rendered to December 31, 2023 and 2022, reduced by the actuarial present value of contributions expected to be received in the future from or on behalf of current Plan participants. Postretirement benefits include future benefits for (1) currently eligible retired employees and their beneficiaries and dependents and (2) active employees and their beneficiaries and dependents after retirement from service with 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 is the portion of the expected postretirement benefit that is attributed to that employee's service in the industry rendered to the valuation date. However, as stated under the terms of the Plan, the Trustees and/or collective bargaining parties reserve the right to amend, modify, or terminate the Plan and the benefits provided thereunder, in whole or in part, at any time.

The actuarial present value of the expected benefit obligations 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 cost 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.

Benefits

Benefits are recognized when paid.

Employers' Contributions Receivable

The Plan reports as employers' contributions receivable contributions due which relate to work periods on or before December 31, but not received by year end. Estimates may be used if remittance reports are not received timely. No allowance for uncollectible accounts has been established, as it is believed that all receivables are collectible.

Contributions from Participants

Participant contributions represent COBRA premiums as well as premium copayments received from current retirees. All retirees are required to pay for Medicare Part B when they become eligible for that benefit.

Accounting Pronouncements Currently Adopted

In June 2016, the FASB issued an Accounting Standards Update ("ASU") amending the accounting for credit losses on financial statements. This methodology replaced the incurred loss methodology with the expected credit losses using a wide range of reasonable and supportable information. The amendment affects loans, debt securities, trade receivables, net investment in leases, off-balance-sheet credit exposure and other financial instruments recorded at amortized cost. The Plan adopted the new standard effective January 1, 2023, using the modified retrospective approach. Upon adoption, there was no cumulative-effect adjustment to the opening balance of net assets available for benefits.

Subsequent Events

In preparing these financial statements, management of the Plan has evaluated events and transactions that occurred after December 31, 2023 for potential recognition or disclosure in the financial statements. These events and transactions were evaluated through DATE, the date that the financial statements were available to be issued, and no items have come to the attention of management that require recognition or disclosure.

3. BENEFIT OBLIGATIONS

The Plan reports its benefit obligations in conformity with accounting principles generally accepted in the United States of America. Information regarding amounts currently payable to or for participants, beneficiaries, and dependents for service providers and insurance premiums as of December 31, 2023 and 2022 are determined by the Plan's management. Information regarding amounts incurred but not reported and the present value of the Plan's benefit obligations as of December 31, 2023 and 2022, is determined by the Plan's actuaries. Information regarding the present value of the Plan's benefit obligations as of December 31, 2023 and 2022 is shown below:

	2023	2022
Amounts currently payable to or for participants, beneficiaries, and dependents		
Claims payable and claims incurred but not reported	$ 1,273,771	$ 1,273,771
Group insurance and service providers payable	1,255	1,255
Total amounts currently payable to or for participants, beneficiaries, and dependents	1,275,026	1,275,026
Benefit obligations		
Current retirees	34,000,000	34,000,000
Other participants fully eligible for benefits	16,100,000	16,100,000
Participants not yet fully eligible for benefits	6,500,000	6,500,000
Total benefit obligations	56,600,000	56,600,000
Total Plan benefit obligations	$ 57,875,026	$ 57,875,026

Information regarding the changes in benefit obligations for the years ended December 31, 2023 and 2022 is shown below:

	2023	2022
Amounts currently payable to or for participants, beneficiaries, and dependents		
Balance at beginning of year	$ 1,275,026	$ 2,649,074
Increase (decrease) during year attributable to		
Changes in claims payable and claims incurred but not reported	-	(1,208,858)
Changes in group insurance and service providers payable	-	(165,190)
Balance at end of year	1,275,026	1,275,026
Postretirement benefit obligations		
Balance at beginning of year	56,600,000	86,300,000
Increase (decrease) during year attributable to		
Estimated net benefits paid	(2,900,000)	(2,900,000)
Changes in actuarial assumptions	(28,400,000)	(28,400,000)
Passage of time	2,100,000	2,100,000
Benefits earned	500,000	500,000
Other changes	(1,000,000)	(1,000,000)
Balance at end of year	26,900,000	56,600,000
Total Plan benefit obligations	$ 28,175,026	$ 57,875,026

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Some of the more significant actuarial assumptions used to calculate the benefit obligations at December 31, 2023 and 2022 are as follows:

- Discount Rate - 5.00% for 2023 and 2022.
- Health cost trend for Medical - For 2023 and 2022, an initial trend rate of 5.8% for 2024 followed by 6.40% for 2025 grading to 3.90% for 2038 and later.
- Health cost trend for Drug - For 2023 and 2022, an initial trend rate of 5.8% for 2024 followed by 6.40% for 2025 grading to 3.90% for 2038 and later.
- Rates of mortality for active and healthy inactive participants - For 2023 and 2022, based on the RP-2000 healthy annuitant mortality table (2014 base year - fully generational with Scale AA).
- Rates of mortality for disabled participants - For 2023 and 2022, based on the RP-2000 disabled annuitant mortality table for ages prior to 65 and the same mortality as healthy inactives for ages 65 and older.
- Rates of retirement - For 2023 and 2022, 5% for ages 55-59, 10% for ages 60-64, 50% for ages 65-66, and 100% for ages 67 and older.

The benefit obligations are reported net of the present value of estimated contributions expected to be paid by retirees of $2,900,000 as of December 31, 2023 and 2022, respectively.

The medical trend rate has a significant effect on the amounts reported. If the assumed rates increased by one-percentage point in each year, that would increase the benefit obligations as of December 31, 2023 and 2022 by $7,600,000 and $15,200,000, respectively.

The Plan made prescription drug benefit payments of $3,283,690 and $3,743,297 during the years ended December 31, 2023 and 2022, respectively. The Plan received $5,469 and $100,557 of Medicare subsidies during the years ended December 31, 2023 and 2022, respectively. Medicare subsidies are netted with benefits that are shown on the statements of changes in net assets available for benefits.

4. FAIR VALUE MEASUREMENTS

The framework for measuring fair value provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1) 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 market prices for identical assets or liabilities in active markets that the Plan has the ability to access.

Level 2 - Inputs to the valuation methodology include 1) quoted prices for similar assets or liability in active markets; 2) quoted prices for identical or similar assets or liabilities in inactive markets; 3) inputs other than quoted prices that are observable for the asset or liability; 4) inputs that are derived principally from or corroborated by observable market data by correlation or other means. If the asset or liability has a specified (contractual) term, the Level 2 input must be observable for substantially the full term of the asset or the liability.

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

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

The following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the valuation methodology used at December 31, 2023 and 2022.

- Certain U.S. government and government agency securities, and corporate and municipal bonds are valued using quoted prices of similar assets, corroborated market data, indices and/or yield curves.

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

Management evaluates the significance of transfers between levels based upon the nature of the financial instrument and size of the transfer relative to total net assets available for benefits. For the years ended December 31, 2023 and 2022, there were no transfers in or out of Level 3.

As of December 31, assets measured at fair value on a recurring basis are summarized by level within the fair value hierarchy as follows:

	2023			
	Level 1	Level 2	Level 3	Total Fair Value
U.S. government and government agency securities	$ -	$ 988,151	$ -	$ 988,151
Corporate and municipal bonds	-	1,043,238	-	1,043,238
Total assets in fair value hierarchy	$ -	$ 2,031,389	$ -	$ 2,031,389

	2022			
	Level 1	Level 2	Level 3	Total Fair Value
U.S. government and government agency securities	$ -	$ -	$ -	$ -
Corporate and municipal bonds	-	-	-	-
Total assets in fair value hierarchy	$ -	$ -	$ -	$ -

5. RISKS AND UNCERTAINTIES

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

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

6. TAX STATUS

The Internal Revenue Service (“IRS”) has recognized the trust that holds the assets of the Plan as exempt from federal income taxation under Section 501(a) of the Internal Revenue Code (the “Code”), as described at Section 501(c)(9), and as stated in its latest determination letter received in 1994. The IRS stated the Plan, as then designed, was in compliance with the applicable requirements of the Code. The Plan has been amended since receiving the determination letter. However, the Plan's Trustees believe that the Plan is currently designed and being operated in compliance with the applicable requirements of the Code.

Accounting principles generally accepted in the United States of America require management to evaluate tax positions taken 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 IRS. Management has evaluated the tax positions taken by the Plan and concluded that as of December 31, 2023 and 2022, there are no uncertain positions taken or expected to be taken that would require recognition in the financial statements. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress. In addition, there have been no tax related interest or penalties for the periods presented in these financial statements.

7. PRIORITIES UPON TERMINATION

It is the intent of the Trustees to continue the Plan in full force and effect. However, in order to safeguard against any unforeseen contingencies, the right to discontinue the Plan is reserved by the Trustees. In the event of termination, the Trustees shall first satisfy or make provisions to satisfy the obligations of the Plan. Any remaining Plan assets will be distributed in such manner as will, in the opinion of the Trustees, bring about the purpose of the Plan. Termination shall not permit any part of the Plan assets to be used for or diverted to purposes other than the exclusive benefit of the participants.

8. CONTRIBUTIONS FROM MAJOR EMPLOYERS

Two employers with common ownership, Shoppers, accounted for approximately 99% of total contributions for the years ended December 31, 2023 and 2022, respectively.

9. RECONCILIATION OF FINANCIAL STATEMENTS TO FORM 5500

The following is a reconciliation of the Plan's net assets available for benefits per the 2023 and 2022 financial statements to Form 5500:

	2023	2022
Net assets available for benefits per the financial statements	$ 5,832,925	$ 4,382,786
Amounts currently payable to or for participants, beneficiaries, and dependents at end of year	(1,275,026)	(1,275,026)
Net assets per Form 5500	$ 4,557,899	$ 3,107,760

The following is a reconciliation of benefits paid per the financial statements to Form 5500 for the year ended December 31, 2023:

Benefits paid per the financial statements	$ 9,441,144
Amounts currently payable to or for participants, beneficiaries, and dependents at end of year	1,275,026
Amounts currently payable to or for participants, beneficiaries, and dependents at beginning of year	(1,275,026)
Benefits paid per Form 5500	$ 9,441,144

Benefits paid recorded on the Form 5500 include benefit claims that have been processed and approved for payment prior to December 31, 2023 but not yet paid as of that date, and claims incurred but not reported at the end of the Plan year.

10. BENEFIT REIMBURSEMENT ARRANGEMENT

The Plan had one employer that negotiated a collective bargaining agreement establishing a 100% benefit reimbursement arrangement, whereby the employer pays all the health benefit costs of its employees, plus an administrative fee. The benefits paid and reimbursements received as of 2023 are as follows:

Benefits paid	$ 1,178,775
Reimbursements received	1,311,917
Net amounts due to employer	$ (133,142)

Benefits paid and reimbursements received or accrued are recorded as benefits and employer contributions, respectively, on the statements of changes in net assets available for benefits. The net amounts advanced by, or due from, the employer are recorded as employer deposits on the statements of net assets available for benefits for 2023 and 2022.

11. PARTY-IN-INTEREST TRANSACTIONS

The Plan invests certain assets in investment funds operated by PNC Financial Services Group, the Plan's custodian, which is considered a party-in-interest under ERISA. These transactions qualify for an exemption from the prohibited transaction rules under ERISA and, therefore, are not prohibited transactions under ERISA.

SUPPLEMENTARY INFORMATION

REPORT ON SUPPLEMENTARY INFORMATION

INDEPENDENT AUDITOR'S REPORT

To the Board of Trustees,
United Food and Commercial Workers Unions and Participating Employers Health and Welfare Fund:

We have audited the financial statements of United Food and Commercial Workers Unions and Participating Employers Health and Welfare Fund as of and for the years ended December 31, 2023 and 2022, and our report thereon dated DATE, which expressed an unmodified opinion on those financial statements, appears on page 1. Our audits were conducted for the purpose of forming an opinion on the financial statements as a whole. The accompanying schedules of contributions and benefits for the years ended December 31, 2023 and 2022 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 auditing standards generally accepted in the United States of America. In our opinion, the information is fairly stated in all material respects in relation to the financial statements as a whole.

DATE

United Food and Commercial Workers Unions and Participating Employers Health and Welfare Fund
Schedules of Contributions
Years Ended December 31, 2023 and 2022

	2023	2022
Employer contributions		
Associated Administrators, LLC	$ 28,188	$ 40,113
Metro	2,812,682	2,919,250
Safeway	-	1,489
Shoppers Food Warehouse	7,525,937	10,810,056
Total employer contributions	10,366,807	13,770,908
Individual participant contributions	1,028,027	138,422
Total contributions	$ 11,394,834	$ 13,909,330

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See Report on Supplementary Information.

United Food and Commercial Workers Unions and Participating Employers Health and Welfare Fund
Schedules of Benefits
Years Ended December 31, 2023 and 2022

	2023	2022
Medical benefits paid directly by the Plan		
Health claims	$ 5,753,285	$ 7,886,351
Accident and sickness	323,276	426,201
Total medical benefits paid directly by the Plan	6,076,561	8,312,552
Benefits paid to service providers		
Pharmaceutical		
Optum RX	2,123,193	2,989,210
Optical		
Fidelity	51,691	56,407
Mental health and substance abuse benefits		
Value options	93,584	156,119
Total benefits paid to service providers	2,268,468	3,201,736
Insurance premiums		
Dental		
Group Dental Services, Inc.	383,589	419,981
Health maintenance organizations		
Kaiser Permanente	680,910	805,899
Life, AD&D insurance		
MetLife	31,616	34,177
Total insurance premiums	1,096,115	1,260,057
Total benefits	$ 9,441,144	$ 12,774,345

See Report on Supplementary Information.