

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 6047(e), 6057(b), and 6058(a) of the Internal Revenue Code (the Code). <p style="text-align: center;">▶ Complete all entries in accordance with the instructions to the Form 5500.</p>	OMB Nos. 1210-0110 1210-0089 <div style="text-align: center; font-size: 1.5em; font-weight: bold;">2014</div> This Form is Open to Public Inspection
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Part I	Annual Report Identification Information
For calendar plan year 2014 or fiscal plan year beginning <u>07/01/2014</u> and ending <u>06/30/2015</u>	
A This return/report is for:	☒ a multiemployer plan; ☐ a multiple-employer plan (Filers checking this box must attach a list of participating employer information in accordance with the form instructions); or ☐ 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)

Part II	Basic Plan Information —enter all requested information				
1a Name of plan <u>PLUMBERS AND PIPEFITTERS NATIONAL PENSION FUND</u>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%;">1b Three-digit plan number (PN) ▶</td> <td style="width: 20%; text-align: center;"><u>001</u></td> </tr> <tr> <td colspan="2">1c Effective date of plan <u>07/23/1968</u></td> </tr> </table>	1b Three-digit plan number (PN) ▶	<u>001</u>	1c Effective date of plan <u>07/23/1968</u>	
1b Three-digit plan number (PN) ▶	<u>001</u>				
1c Effective date of plan <u>07/23/1968</u>					
2a Plan sponsor's name and address; include room or suite number (employer, if for a single-employer plan) <u>B/O/T PLUMBERS & PIPEFITTERS NATIONAL PENSION FUND</u> <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <u>103 ORONOCO STREET</u> <u>ALEXANDRIA, VA 22314-2015</u> </div> <div style="width: 45%;"> <u>103 ORONOCO STREET</u> <u>ALEXANDRIA, VA 22314</u> </div> </div>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>2b Employer Identification Number (EIN) <u>52-6152779</u></td> </tr> <tr> <td>2c Plan Sponsor's telephone number <u>703-739-9020</u></td> </tr> <tr> <td>2d Business code (see instructions) <u>525100</u></td> </tr> <tr> <td style="height: 40px;"></td> </tr> </table>	2b Employer Identification Number (EIN) <u>52-6152779</u>	2c Plan Sponsor's telephone number <u>703-739-9020</u>	2d Business code (see instructions) <u>525100</u>	
2b Employer Identification Number (EIN) <u>52-6152779</u>					
2c Plan Sponsor's telephone number <u>703-739-9020</u>					
2d Business code (see instructions) <u>525100</u>					

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.		
SIGN HERE	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
Preparer's name (including firm name, if applicable) and address (include room or suite number) (optional) <u>JEROME J. ROBERTSON, CPA</u> <u>SALTER & COMPANY, LLC</u> <u>4600 EAST-WEST HIGHWAY, SUITE 300</u> <u>BETHESDA, MD 20814-3415</u>			Preparer's telephone number (optional) <u>301-830-7400</u>

3a Plan administrator's name and address ☒ Same as Plan Sponsor	3b Administrator's EIN 3c Administrator's telephone number <div style="background-color: #cccccc; height: 40px; width: 100%;"></div>
4 If the name and/or EIN of the plan sponsor has changed since the last return/report filed for this plan, enter the name, EIN and the plan number from the last return/report: a Sponsor's name	4b EIN 4c PN
5 Total number of participants at the beginning of the plan year	5 151703
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 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 that terminated employment during the plan year with accrued benefits that were less than 100% vested.....	6a(1) 71066 6a(2) 70875 6b 41117 6c 35927 6d 147919 6e 6488 6f 154407 6g 6h 2145
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item).....	7 4606
8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions: 1A b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristics Codes in the instructions:	
9a Plan funding arrangement (check all that apply) (1) ☒ 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
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	b General Schedules (1) ☒ H (Financial Information) (2) ☐ I (Financial Information – Small Plan) (3) ☒ <u>2</u> A (Insurance Information) (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 2014 Form M-1 annual report. If the plan was not required to file the 2014 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 _____

<div><div>SCHEDULE A</div><div>(Form 5500)</div><div>Department of the Treasury Internal Revenue Service</div><div>Department of Labor Employee Benefits Security Administration</div><div>Pension Benefit Guaranty Corporation</div></div>	<div>Insurance Information</div> <div>This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA).</div> <div>▶ File as an attachment to Form 5500.</div> <div>▶ Insurance companies are required to provide the information pursuant to ERISA section 103(a)(2).</div>	<div>OMB No. 1210-0110</div> <div>2014</div> <div>This Form is Open to Public Inspection</div>
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For calendar plan year 2014 or fiscal plan year beginning 07/01/2014 and ending 06/30/2015		
A Name of plan PLUMBERS AND PIPEFITTERS NATIONAL PENSION FUND	B Three-digit plan number (PN) ▶	001
C Plan sponsor's name as shown on line 2a of Form 5500 B/O/T PLUMBERS & PIPEFITTERS NATIONAL PENSION FUND		
		D Employer Identification Number (EIN) 52-6152779

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 METLIFE INSURANCE COMPANY					
(b) EIN	(c) NAIC code	(d) Contract or identification number	(e) Approximate number of persons covered at end of policy or contract year	Policy or contract year	
				(f) From	(g) To
06-0566090	87726	919453		07/01/2014	06/30/2015

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
NA

(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

NA

(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

NA

(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	1625883
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c Additions: (1) Contributions deposited during the year	7c(1)		
(2) Dividends and credits	7c(2)		
(3) Interest credited during the year	7c(3)	56906	
(4) Transferred from separate account	7c(4)		
(5) Other (specify below)	7c(5)		
▶			

(6) Total additions	7c(6)	56906
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d Total of balance and additions (add lines 7b and 7c(6))	7d	1682789
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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
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f Balance at the end of the current year (subtract line 7e(5) from line 7d)	7f	1682789
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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	
b If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, other than reported in Part I, line 2 above, report amount.....	10b	

Specify nature of costs ▶

Part IV Provision of Information

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

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

SCHEDULE 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 2014 This Form is Open to Public Inspection
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For calendar plan year 2014 or fiscal plan year beginning 07/01/2014 and ending 06/30/2015	
A Name of plan PLUMBERS AND PIPEFITTERS NATIONAL PENSION FUND	B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 B/O/T PLUMBERS & PIPEFITTERS NATIONAL PENSION FUND	D Employer Identification Number (EIN) 52-6152779

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
UNION LABOR LIFE INSURANCE COMPANY

(b) EIN	(c) NAIC code	(d) Contract or identification number	(e) Approximate number of persons covered at end of policy or contract year	Policy or contract year	
				(f) From	(g) To
13-1423090	69744	GA02009		07/01/2014	06/30/2015

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	86016966

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

Specify nature of costs ▶

Part IV Provision of Information

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

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

<div>SCHEDULE MB (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation</div>	<div>Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6059 of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500 or 5500-SF.</div>	<div>OMB No. 1210-0110 2014 This Form is Open to Public Inspection</div>
For calendar plan year 2014 or fiscal plan year beginning 07/01/2014 and ending 06/30/2015		
▶ Round off amounts to nearest dollar. ▶ Caution: A penalty of \$1,000 will be assessed for late filing of this report unless reasonable cause is established.		
A Name of plan PLUMBERS AND PIPEFITTERS NATIONAL PENSION FUND		B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF B/O/T PLUMBERS & PIPEFITTERS NATIONAL PENSION FUND		D Employer Identification Number (EIN) 52-6152779
E Type of plan: (1) ☒ Multiemployer Defined Benefit (2) ☐ Money Purchase (see instructions)		
1a Enter the valuation date: Month 07 Day 01 Year 2014		
b Assets		
(1) Current value of assets	1b(1)	5603649138
(2) Actuarial value of assets for funding standard account.....	1b(2)	5966360151
c (1) Accrued liability for plan using immediate gain methods	1c(1)	7565578516
(2) Information for plans using spread gain methods:		
(a) Unfunded liability for methods with bases	1c(2)(a)	
(b) Accrued liability under entry age normal method.....	1c(2)(b)	
(c) Normal cost under entry age normal method	1c(2)(c)	
(3) Accrued liability under unit credit cost method	1c(3)	7565578516
d Information on current liabilities of the plan:		
(1) Amount excluded from current liability attributable to pre-participation service (see instructions)	1d(1)	
(2) "RPA '94" information:		
(a) Current liability.....	1d(2)(a)	13177832546
(b) Expected increase in current liability due to benefits accruing during the plan year	1d(2)(b)	282669467
(c) Expected release from "RPA '94" current liability for the plan year	1d(2)(c)	532830160
(3) Expected plan disbursements for the plan year	1d(3)	542550334
Statement by Enrolled Actuary To the best of my knowledge, the information supplied in this schedule and accompanying schedules, statements and attachments, if any, is complete and accurate. Each prescribed assumption was applied in accordance with applicable law and regulations. In my opinion, each other assumption is reasonable (taking into account the experience of the plan and reasonable expectations) and such other assumptions, in combination, offer my best estimate of anticipated experience under the plan.		
<div>SIGN HERE</div>	03/25/2016	
Signature of actuary	Date	
KENNETH A KENT, FSA, FCA	14-03776	
Type or print name of actuary	Most recent enrollment number	
CHEIRON, INC	703-893-1456	
Firm name	Telephone number (including area code)	
1750 TYSONS BOULEVARD, SUITE 1100, MCLEAN, VA 22102		
Address of the firm		
If the actuary has not fully reflected any regulation or ruling promulgated under the statute in completing this schedule, check the box and see instructions ☐		
For Paperwork Reduction Act Notice and OMB Control Numbers, see the instructions for Form 5500 or Form 5500-SF.		
Schedule MB (Form 5500) 2014 v. 140124		

2 Operational information as of beginning of this plan year:

a Current value of assets (see instructions)	2a	5603649138
b "RPA '94" current liability/participant count breakdown:		
(1) For retired participants and beneficiaries receiving payment	(1) Number of participants	(2) Current liability
(2) For terminated vested participants	45959	6306063260
(3) For active participants:	26086	1787627415
(a) Non-vested benefits		259455907
(b) Vested benefits		4824685964
(c) Total active	66966	5084141871
(4) Total	139011	13177832546
c If the percentage resulting from dividing line 2a by line 2b(4), column (2), is less than 70%, enter such percentage	2c	42.52 %

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

(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees
01/01/2015	367645132				
Totals ▶			3(b)	367645132	3(c)

4 Information on plan status:

a Enter code to indicate plan's status (see instructions for attachment of supporting evidence of plan's status). If code is "N," go to line 5.	4a	E
b Funded percentage for monitoring plan's status (line 1b(2) divided by line 1c(3))	4b	78.9 %
c Is the plan making the scheduled progress under any applicable funding improvement or rehabilitation plan?		☒ Yes ☐ No
d If the plan is in critical status, were any adjustable benefits reduced?		☐ Yes ☒ No
e If line d is "Yes," enter the reduction in liability resulting from the reduction in adjustable benefits, measured as of the valuation date	4e	
f If the rehabilitation plan projects emergence from critical status, enter the plan year in which it is projected to emerge. If the rehabilitation plan is based on forestalling possible insolvency, enter the plan year in which insolvency is expected and check here	4f	☐

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

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

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

6 Checklist of certain actuarial assumptions:

a Interest rate for "RPA '94" current liability	6a	3.59 %
b Rates specified in insurance or annuity contracts	Pre-retirement	Post-retirement
c Mortality table code for valuation purposes:	☐ Yes ☐ No ☒ N/A	☐ Yes ☐ No ☒ N/A

(1) Males.....	6c(1)	A		A	
(2) Females	6c(2)	A		A	
d Valuation liability interest rate.....	6d	7.50%		7.50 %	
e Expense loading	6e	16.5 %	☐ N/A	%	☒ N/A
f Salary scale	6f	%	☒ N/A		
g Estimated investment return on actuarial value of assets for year ending on the valuation date.....	6g	7.9 %			
h Estimated investment return on current value of assets for year ending on the valuation date	6h	16.2 %			

7 New amortization bases established in the current plan year:

(1) Type of base	(2) Initial balance	(3) Amortization Charge/Credit
8	263212628	22293517
4	11210400	1181391
1	-247398927	-26071759

8 Miscellaneous information:

a If a waiver of a funding deficiency has been approved for this plan year, enter the date (MM-DD-YYYY) of the ruling letter granting the approval.....	8a	
b Is the plan required to provide a Schedule of Active Participant Data? (See the instructions.) If "Yes," attach schedule.	☒ Yes ☐ No	
c Are any of the plan's amortization bases operating under an extension of time under section 412(e) (as in effect prior to 2008) or section 431(d) of the Code?.....	☒ Yes ☐ No	
d If line c is "Yes," provide the following additional information:		
(1) Was an extension granted automatic approval under section 431(d)(1) of the Code?.....	☒ Yes ☐ No	
(2) If line 8d(1) is "Yes," enter the number of years by which the amortization period was extended.....	8d(2)	5
(3) Was an extension approved by the Internal Revenue Service under section 412(e) (as in effect prior to 2008) or 431(d)(2) of the Code?.....	☐ Yes ☐ No	
(4) If line 8d(3) is "Yes," enter number of years by which the amortization period was extended (not including the number of years in line (2)).....	8d(4)	
(5) If line 8d(3) is "Yes," enter the date of the ruling letter approving the extension.....	8d(5)	
(6) If line 8d(3) is "Yes," is the amortization base eligible for amortization using interest rates applicable under section 6621(b) of the Code for years beginning after 2007?.....	☐ Yes ☐ No	
e If box 5h is checked or line 8c is "Yes," enter the difference between the minimum required contribution for the year and the minimum that would have been required without using the shortfall method or extending the amortization base(s)	8e	165164428

9 Funding standard account statement for this plan year:**Charges to funding standard account:**

a Prior year funding deficiency, if any.....	9a	0
b Employer's normal cost for plan year as of valuation date.....	9b	137795990
c Amortization charges as of valuation date:	Outstanding balance	
(1) All bases except funding waivers and certain bases for which the amortization period has been extended.....	9c(1)	4026422158
(2) Funding waivers.....	9c(2)	
(3) Certain bases for which the amortization period has been extended	9c(3)	
d Interest as applicable on lines 9a, 9b, and 9c	9d	48232731
e Total charges. Add lines 9a through 9d.....	9e	691335809
Credits to funding standard account:		
f Prior year credit balance, if any	9f	1588734044
g Employer contributions. Total from column (b) of line 3	9g	367645132
	Outstanding balance	
h Amortization credits as of valuation date.....	9h	838469749
i Interest as applicable to end of plan year on lines 9f, 9g, and 9h	9i	144065274
j Full funding limitation (FFL) and credits:		
(1) ERISA FFL (accrued liability FFL)	9j(1)	3965093868

(2) "RPA '94" override (90% current liability FFL)	9j(2)	6222002192	
(3) FFL credit		9j(3)	
k (1) Waived funding deficiency		9k(1)	
(2) Other credits		9k(2)	
l Total credits. Add lines 9f through 9i, 9j(3), 9k(1), and 9k(2)		9l	2252081345
m Credit balance: If line 9l is greater than line 9e, enter the difference		9m	1560745536
n Funding deficiency: If line 9e is greater than line 9l, enter the difference		9n	

9 o Current year's accumulated reconciliation account:

(1) Due to waived funding deficiency accumulated prior to the 2014 plan year	9o(1)	
(2) Due to amortization bases extended and amortized using the interest rate under section 6621(b) of the Code:		
(a) Reconciliation outstanding balance as of valuation date	9o(2)(a)	
(b) Reconciliation amount (line 9c(3) balance minus line 9o(2)(a))	9o(2)(b)	
(3) Total as of valuation date	9o(3)	

10 Contribution necessary to avoid an accumulated funding deficiency. (See instructions.)	10	
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11 Has a change been made in the actuarial assumptions for the current plan year? If "Yes," see instructions	☒ Yes ☐ No
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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
		2014
		This Form is Open to Public Inspection.

For calendar plan year 2014 or fiscal plan year beginning 07/01/2014 and ending 06/30/2015

A Name of plan <u>PLUMBERS AND PIPEFITTERS NATIONAL PENSION FUND</u>	B Three-digit plan number (PN) ▶ <u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>B/O/T PLUMBERS & PIPEFITTERS NATIONAL PENSION FUND</u>	D Employer Identification Number (EIN) <u>52-6152779</u>

Part I Service Provider Information (see instructions)

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

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

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation	
<u>INTERCONTINENTAL REAL ESTATE</u>	<u>1270 SOLDIERS FIELD RD</u> <u>BOSTON, MA 02135</u>
<u>04-3549299</u>	

(b) Enter name and EIN or address of person who provided you disclosure on eligible indirect compensation	
<u>MESIROW FINANCIAL</u>	<u>353 NORTH CLARK ST</u> <u>CHICAGO, IL 60654</u>
<u>36-3741067</u>	

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation	
<u>NEW TOWER TRUST COMPANY</u>	<u>3 BETHESDA METRO CENTER</u> <u>BETHESDA, MD 20814</u>
<u>20-1641876</u>	

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation	
<u>AFL CIO BUILDING INVESTMENT TRUST</u>	<u>815 CONNECTICUT AVE, NW</u> <u>WASHINGTON, DC 20006</u>
<u>52-6328901</u>	

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

AQR CAPITAL MANAGEMENT LLC

TWO GREENWICH PLAZA, 3RD FLOOR
GREENWICH, CT 0683013-3987414

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

AETOS CAPITAL LLC

875 THIRD AVENUE
NEW YORK, NY 10022

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

PINNACLE ASSET MANAGEMENT LP

712 5TH AVENUE
NEW YORK, NY 10019

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

GERDING EDLEN

1477 NW EVERETT ST
PORTLAND, OR 97209

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

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

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

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

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

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

O'DONOGHUE & O'DONOGHUE

4748 WISCONSIN AVE NW
WASHINGTON, DC 20016

53-0120528

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
29	NONE	2030758	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

STARWOOD HOTELS & RESORTS

PO BOX 198872
ATLANTA, GA 30384-8872

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	1941258	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

PBGC

PO BOX 77000
DETROIT, MI 48277

52-1042410

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	1768898	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)

LSV ASSET MGMT

155 N WACKER DR
CHICAGO, IL 60606

23-2772200

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 51	NONE	1441952	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

JPMORGAN CHASE BANK NA

PO BOX 974958
DALLAS, TX 75397

13-2624428

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 51	NONE	1418739	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

DISCIPLINED GROWTH INVESTORS

150 S FIFTH ST
MINNEAPOLIS, MN 55402

(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	NONE	1331016	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)

PNC BANK

PO BOX 856177
LOUISVILLE, KY 40285

22-1146430

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
19 62 68	NONE	1323838	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☒ No ☐

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

BELL ASSET MGMT

225 GEORGE STREET
SYDNEY AU

04-3412674

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 51	NONE	1308528	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

LOOMIS SAYLES

9841 WASHINGTON BLVD
GAITHERSBURG, MD 20878

04-3200030

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 51 68	NONE	1153319	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)

NEUBERGER BERMAN

190 S LASALLE ST
CHICAGO, IL 60603

02-0654486

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 51	NONE	1115846	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

WELLS CAPITAL

100 HERITAGE RESERVE
MENOMONEE FALLS, WI 53051

95-3692822

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 51	NONE	969282	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

WEDGE CAPITAL MANAGEMENT

301 S COLLEGE ST 2920
CHARLOTTE, NC 28202

56-1557450

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 51 68	NONE	890335	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☐ No ☒

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

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

SCHRODER INVESTMENT MGMT

875 THIRD AVENUE
NEW YORK, NY 10022

13-4064414

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 51	NONE	834989	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

CAPITAL HOTEL MGMT LLC

548 CABOT ST
BEVERLY, MA 01915

52-2266331

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28	NONE	821460	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

JENNISON ASSOCIATES

1000 WINTER STREET
WALTHAM, MA 02351

52-2069785

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 51 68	NONE	791942	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☒ No ☐

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

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

WELLINGTON MANAGEMENT

75 STATE STREET
BOSTON, MA 02109

04-2683227

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 51 68	NONE	746241	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☐ No ☒

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

COLUMBIA PARTNERS

5425 WISCONSIN AVE
CHEVY CHASE, MD 20815

52-1940739

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 51 68	NONE	715552	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☐ No ☒

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

ARONSON PARTNERS

230 SOUTH BROAD
PHILADELPHIA, PA 19102

23-2322104

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 51	NONE	674827	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)

FLORIDA POWER & LIGHT COMPANY

GENERAL MAIL FACILITY
MIAMI, FL 33188-0001

59-0247775

(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?
99	NONE	673372	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

AON RISK SERVICES INC

PO BOX 7247-7376
PHILADELPHIA, PA 19170-7376

16-1067929

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	655890	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

SOUTH FLORIDA HOTEL & CULINARY

PO BOX 918-8758
ORLANDO, FL 32891-8758

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	639851	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

US FOODS

PO BOX 281838
ATLANTA, GA 30384-1838

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	619095	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

THE DIPLOMAT RESORT & SPA

3555 S OCEAN DRIVE
HOLLYWOOD, FL 33019

52-2056797

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	615274	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

BOSTON INVESTMENT MANAGEMENT

ONE BOSTON PLACE
BOSTON, MA 02108-4408

04-3404987

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 51 68	NONE	586075	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☒ No ☐

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

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

RBC GLOBAL

155 FEDERAL STREET
BOSTON, MA 02110

41-1460668

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 51	NONE	525243	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

PROSKAUER ROSE LLP

1585 BROADWAY
NEW YORK, NY 10036

13-1840454

(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	522398	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

BRANDYWINE GLOBAL

2929 ARCH STREET
PHILADELPHIA, PA 19104

51-0294065

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 51	NONE	454897	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)

AAA PARKING

1100 SPRING ST NW, STE 800
ATLANTA, GA 30309

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	441769	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

1 WORLD LAUNDRY, LLC

2610 ORANGE AVENUE
FT PIERCE, IL 34950

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	416589	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

ULLICO

1625 I ST, NW
WASHINGTON, DC 20006

13-1423090

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 51 72	NONE	383761	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☐ No ☒

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

PSAV PRESENTATION SERVICES

23918 NETWORK PLACE
CHICAGO, IL 60673

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	341590	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

SWEENEY JR., WILLIAM T.

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088636

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30	EMPLOYEE	314067	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

SCHULTE ROTH AND ZABEL

919 THIRD AVENUE
NEW YORK, NY 10022

13-2639996

(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	307910	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

SEGAL ADVISORS, INC

PO BOX 4142 CHURCH STREET STATION
NEW YORK, NY 10261

13-2646110

(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	291332	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

KELLY PRESS, INC.

1701 CABIN BRANCH RD.
CHEVERLY, MD 20785

52-0975591

(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?
36	NONE	255338	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

CITY OF HOLLYWOOD

2600 HOLLYWOOD BLVD
HOLLYWOOD, FL 33020-4807

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	245029	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

BASYS, INC

857 ELKRIDGE LANDING RD 7TH FL
LINTHICUM, MD 21090

52-1796473

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
15	NONE	233680	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

CHEIRON, INC.

PO BOX 37117
BALTIMORE, MD 21297

13-4215617

(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	NONE	232067	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

GALLAGHER FIDUCIARY ADVISORS

805 15TH ST NW STE 1120
WASHINGTON, DC 20005

13-3406417

(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?
31	NONE	230044	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

SALTER & COMPANY, LLC

4600 EAST-WEST HIGHWAY STE 300
BETHESDA, MD 20814

20-2088757

(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	226121	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

NORTHSTAR SEAFOOD, INC.

2213 NW 30TH PLACE, 7A
POMPANO BEACH, FL 33069-1026

65-0341430

(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?
99	NONE	209582	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

STATE STREET GLOBAL ADVISORS

ONE LINCOLN ST, 33RD FLOOR
BOSTON, MA 02111

04-1867445

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 51	NONE	198916	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)

A-ONE-A PRODUCE AND DAIRY

2300 NW 19TH ST
POMPANO BEACH, FL 33069

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	185905	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

FRANKE, BENJAMIN C.

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088636

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30	EMPLOYEE	166554	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

XEROX CORPORATION

PO BOX 827181
PHILADELPHIA, PA 19182

16-0468020

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	161912	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

HALPERN'S STEAK AND SEAFOOD

PO BOX 116421
ATLANTA, GA 30368-6421

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	148164	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

DAELEMANS, LINDA K.

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088636

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30	EMPLOYEE	146580	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

SOFTMART, INC.

PO BOX 8500-52288
PHILADELPHIA, PA 19178

23-2984561

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	146315	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)

O'BRIEN WILCOX, MARGARET

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088636

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30	EMPLOYEE	141908	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

LEAHEY, DONALD M.

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088636

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30	EMPLOYEE	141788	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

INTEGRITY SERVICES

1451 WEST CYPRESS CREEK ROAD 300
FORT LAUDERDALE, FL 33309

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	137795	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)

MORGAN, LEWIS & BOCKIUS, LLP

PO BOX 8500 S-6050
PHILADELPHIA, PA 19178

23-0891050

(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	135126	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

DEUJA, KUMAR

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088636

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30	EMPLOYEE	133858	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

KPMG, LLC

PO BOX 120001
DALLAS, TX 75312

13-5565207

(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	133854	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)

BOUCHER BROTHERS MANAGEMENT, INC.

1451 OCEAN DRIVE 205
MIAMI BEACH, FL 33139

65-0884415

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	132259	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

PRIKRYL, ANDREW G.

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088636

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30	EMPLOYEE	131432	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

HUGO, CURTIS A.

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088636

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30	EMPLOYEE	128468	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)

DOMINION VIRGINIA POWER

PO BOX 26543
RICHMOND, VA 23290

54-1836683

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	128206	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

AMERICAN HOTEL REGISTER

PO BOX 71299
CHICAGO, IL 60694-1299

32-0726190

(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?
99	NONE	125335	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

KUKKALA, VENKATESWARARAO E.

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088636

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30	EMPLOYEE	123667	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)

EDD HELMS GROUP, INC.

17850 NE 5TH AVENUE
MIAMI, FL 33162-1008

59-2605868

(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?
99	NONE	122287	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

CONGRESS ASSET MGMT

2 SEAPORT LANE
BOSTON, MA 02210

94-3362212

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 51	NONE	122158	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

DEVORE, KAREN A.

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088636

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30	EMPLOYEE	114465	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

POTOMAC ASSET MANAGEMENT

5 S MARKET
FREDERICK, MD 21701

52-1224946

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 51	NONE	113029	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

WILLIAMS, RENEE A.

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088636

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30	EMPLOYEE	112262	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

PLUMBERS & PIPEFITTERS

PO BOX 918755
ORLANDO, FL 32891-8755

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	110619	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

ROURK, WANDA F.

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088636

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30	EMPLOYEE	107818	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

ZENEBE, IYOB

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088636

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30	EMPLOYEE	105306	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

EDWARDS, PERPETUA E.

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088636

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30	EMPLOYEE	105188	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

O'REILLY-WALKER, ARLETTE M.

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088636

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30	EMPLOYEE	101859	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

INGE, MAURICE A.

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088636

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30	EMPLOYEE	95736	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

GALBREATH, KIM M

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088636

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30	EMPLOYEE	92693	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

GEOHAGAN, WAYNE S.

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088636

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30	EMPLOYEE	92623	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

JOHNSON, KATHRYNE

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088636

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30	EMPLOYEE	91251	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

INSCOE, TONI C.

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088636

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30	EMPLOYEE	89052	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

RASHEED, SUSAN B.

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088636

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30	EMPLOYEE	88706	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

ROUNTREE, ELOISE S.

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088636

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30	EMPLOYEE	88076	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

SPOTMASTER LINENS-R-US

2100 NE 123RD STREET
NORTH MIAMI, FL 33181

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	85995	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)

DELL MARKETING LLP

PO BOX 643561
PITTSBURGH, PA 15264

74-2616805

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	85517	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

UNITE HERE NATIONAL RETIREMENT FUND

6 BLANKSTONE VALLEY PLACE STE 302
LINCOLN, RI 02865

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	85366	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

AMERILAND SERVICES, LLC

18385 LAKE BEND DRIVE
JUPITER, FL 33458

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	83500	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

PANCIERA, MARTHA E.

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088636

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30	EMPLOYEE	83146	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

FENDERSON, MELISSA

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088636

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30	EMPLOYEE	82073	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

HELMS-BRISCOE/ABC

20875 N 90TH PLACE
SCOTTSDALE, AZ 85255

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	81693	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

VERIZON

PO BOX 660720
DALLAS, TX 75266

47-0751768

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	81588	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

YOUHOUSE, JOSEPH D.

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088636

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30	EMPLOYEE	81086	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

RILEY, SANDRA L.

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088636

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30	EMPLOYEE	79470	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

GUERRA, MARY M.

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088636

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30	EMPLOYEE	79198	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

NOACK, LADONNA

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088636

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30	EMPLOYEE	78775	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

FIRST FEDERAL CORPORATION

PO BOX 37142
BALTIMORE, MD 21297

52-1548842

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	78364	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

RECOVERY POINT SYSTEMS

75 W WATKINS MILL RD
GAITHERSBURG, MD 20878

52-2212966

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	77285	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

BEKOE, KOFI

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088636

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30	EMPLOYEE	76469	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

PREMIER BEVERAGE COMPANY

9801 PREMIER PARKWAY
MIRAMAR, FL 33025

65-0772142

(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?
99	NONE	75957	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

SOUTHERN WINE AND SPIRITS

PO BOX 864921
ORLANDO, FL 32886-4921

59-1285786

(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?
99	NONE	74963	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

HILL, GERALD A.

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088636

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30	EMPLOYEE	74703	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

PARKER, LINDA S.

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088636

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30	EMPLOYEE	74444	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

BOYD, CHANTELE Y.

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088636

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30	EMPLOYEE	73808	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

SOUTHERN CALIFORNIA PIPE TRADES

501 SHATTO PL 5TH FL
LOS ANGELES, CA 90020

95-4557526

(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?
15	NONE	73613	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

CHESNICK, LISA

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088636

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30	EMPLOYEE	73383	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

YIMER, TSEDAY

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088636

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30	EMPLOYEE	71900	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

FRANK PARSONS PAPER CO INC.

PO BOX 791416
BALTIMORE, MD 21279

53-0179108

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	71740	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

LEIGH, SANDRA

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088636

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30	EMPLOYEE	71238	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

GAGHAN MECHANICAL, INC.

5649D GENERAL WASHINGTON DR
ALEXANDRIA, VA 22312

54-1789937

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	70361	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

ELLIS, ROBIN

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088636

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30	EMPLOYEE	69612	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

RAMPHAL, HARESH

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088636

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30	EMPLOYEE	68755	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

HITCH, LAUREN

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088636

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30	EMPLOYEE	68651	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

TROON GOLF

15044 N SCOTTSDALE RD SUITE 300
SCOTTSDALE, AZ 85254

86-0832529

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	68268	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

WHITE, AYEISHA

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088636

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30	EMPLOYEE	68043	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)

SAVIA, SANDRA

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088636

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30	EMPLOYEE	67618	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

ANDREWS, JUDY

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088636

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30	EMPLOYEE	67559	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

HARPER, SHARON

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088636

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30	EMPLOYEE	66837	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)

REVEL, DONNA L.

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088636

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30	EMPLOYEE	66070	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

CONLON, DENNIS

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088636

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30	EMPLOYEE	65256	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

CARROLL, CORNELIUS

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088636

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30	EMPLOYEE	65141	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)

MCGEADY, SHERRY

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088636

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30	EMPLOYEE	65125	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

PLUMB, DARLENE

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088636

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30	EMPLOYEE	65098	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

ROBINSON, KIVEN

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088636

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30	EMPLOYEE	65081	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)

JOHNSON, DAVID A.

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088636

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30	EMPLOYEE	64982	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

RICKENBAKER, PAUL

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088636

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30	EMPLOYEE	64973	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

BROWN, LINDA

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088636

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30	EMPLOYEE	64865	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)

PROCTOR, CHRISA

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088636

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30	EMPLOYEE	64662	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

MONGOLD, GARY

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088636

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30	EMPLOYEE	64007	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

SINCLAIR, NEICOLE

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088636

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30	EMPLOYEE	63683	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)

MEETING EXPECTATIONS

3525 PIEDMONT ROAD NORTHEAST 300
ATLANTA, GA 30305

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	63653	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

CLAASEN, GREGORY

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088636

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30	EMPLOYEE	63635	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

FULTZ, RUTH

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088636

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30	EMPLOYEE	63635	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)

BRENNAN, CAROL

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088636

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30	EMPLOYEE	63364	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

MORRISON, RYAN

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088636

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30	EMPLOYEE	62355	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

POWELL, PENNY

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088636

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30	EMPLOYEE	62184	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)

KARAWA, CAROLYNE SANARE

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088636

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30	EMPLOYEE	60831	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

COLLINS, ZENA

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088636

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30	EMPLOYEE	60779	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

STEPHENS, JANEEN

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088636

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30	EMPLOYEE	60536	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)

BEDWELL, STEPHANIE

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088636

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30	EMPLOYEE	60360	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

CRANFORD, CYNTHIA

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088636

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30	EMPLOYEE	60354	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

EJIGU, HABTAMA

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088636

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30	EMPLOYEE	60049	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)

SMITH, RANNIE

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088636

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30	EMPLOYEE	60043	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

THOMAS, KLANESHA

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088363

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30	EMPLOYEE	59859	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

YOUHOUSE, MARIANELLA

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088636

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30	EMPLOYEE	59819	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)

JONES, NIKKI

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088636

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30	EMPLOYEE	59730	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

ROBERTSON, BEVERLY

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088636

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30	EMPLOYEE	59629	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

EWELL, SANDRA

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088636

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30	EMPLOYEE	59216	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)

ATKINS, LISA

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088636

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30	EMPLOYEE	59022	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

GREEN, TOLEATHIA

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088636

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30	EMPLOYEE	58933	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

ROBERTSON, JAMES

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088636

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30	EMPLOYEE	58933	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)

GOLDIN ASSOCIATES LLC

350 5TH AVENUE
NEW YORK, NY 10118

13-3549635

(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	58628	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

CORPORATE BUSINESS CTR

3555 SOUTH OCEAN DRIVE
HOLLYWOOD, FL 33019

42-1561888

(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?
99	NONE	58623	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

BUTCHEE, TONIA

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088636

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30	EMPLOYEE	58414	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)

WARD, STACY

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088636

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30	EMPLOYEE	58372	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

RILEY, ROBERT J.

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088636

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30	EMPLOYEE	58342	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

WILLIAMS, YURI

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088636

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30	EMPLOYEE	58328	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)

WAKE, BRIAN

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088636

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30	EMPLOYEE	58286	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

PETERS, MICHAEL JR

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088636

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30	EMPLOYEE	58162	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

DICKENSON, MARY

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088636

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30	EMPLOYEE	57684	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)

KOPP III, ROBERT

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088636

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30	EMPLOYEE	57683	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

ST. REMY, CHRIS

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088636

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30	EMPLOYEE	57580	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

NORTHERN TRUST CORPORATION

50 SOUTH LASALLE STREET
CHICAGO, IL 60603

36-2723087

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 51 68	NONE	57058	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☒ No ☐

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

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

LEWIS, WILLIAM

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088636

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30	EMPLOYEE	56586	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

SHAMLEY, MADRIENNE

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088636

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30	EMPLOYEE	56286	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

SAYSON, MARIBEL

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088636

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30	EMPLOYEE	56263	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)

MOSLEY, NAKETA

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088636

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30	EMPLOYEE	56016	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

THOMAS, ANGELA

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088636

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30	EMPLOYEE	56008	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

WHITESTAR ADVISORS LLC

902 CLINT MOORE RD STE 220
BOCA RATON, FL 33487

64-1060104

(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	56000	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)

SHAMLEY, BARBARA

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088636

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30	EMPLOYEE	54523	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

BROWN, CHARMAINE

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088636

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30	EMPLOYEE	53799	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

GAILLARD, KIANA

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088636

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30	EMPLOYEE	53773	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

HUNT, JASON

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088636

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30	EMPLOYEE	53764	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

JOHNSON, ANGELA

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088636

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30	EMPLOYEE	52785	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

ISS FACILITY SERVICES - DC

9701 PHILADELPHIA CT STE R
LANHAM, MD 20706

06-1535240

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	52726	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)

SPARTAN SECURITY

4141 NORTH MIAMI AVE STE 200
MIAMI, FL 33127

65-1156613

(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?
99	NONE	51998	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

REID, LARRY

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088636

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30	EMPLOYEE	51788	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

O'CONNOR, KRISTINA

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088636

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30	EMPLOYEE	50973	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)

WASTE MANAGEMENT, INC

PO BOX 930580
ATLANTA, GA 31193

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	50927	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

ALPHA RISK MGMT

60 CUTTER MILL ROAD
GREAT NECK, NY 11021

11-2834548

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
23	NONE	50000	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

DALTON WHARF ASSOCIATION INC

107 ORONOCO ST
ALEXANDRIA, VA 22314

54-1182576

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	49260	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)

CHARITY, LISA

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088636

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30	EMPLOYEE	49036	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

JACKSON, TASHANNA M.

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088636

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30	EMPLOYEE	48964	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

ADENIJI IBRAHIM

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088636

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30	EMPLOYEE	48459	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)

MASTER PURVEYORS, INC.

355 FOOD CENTER DR. B-14
BRONX, NY 10474

13-5666907

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	47363	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

ALLIANCE TECHNOLOGY GROUP

7420 PARKWAY DR
HANOVER, MD 21076

52-2060067

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	46917	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

CAMBRIDGE SPECIALTY

2601 E OAKLAND PARK BLVD 200
FT LAUDERDALE, FL 33306

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	46750	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)

ETHRIDGE QUINN

33 WOOD LANE
ROCKVILLE, MD 20850

52-1543979

(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	46583	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

JACKSON, LILIA

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088636

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30	EMPLOYEE	45986	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

FENNELL, CECELIA M.

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088636

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30	EMPLOYEE	45783	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

LEWIS, VANISHA

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088636

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30	EMPLOYEE	45210	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

DANIELS, JANICE

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088636

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30	EMPLOYEE	43852	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

TRAVEL TRADERS HOTEL STORES, INC

6205 BLUE LAGOON DRIVE, STE 550
MIAMI, FL 33126

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	42827	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)

RECIPROCITY ADMINISTRATION SVCS, IN

103 ORONOCO STREET
ALEXANDRIA, VA 22314

20-1717978

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	42431	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

FLORIDA COCA-COLA BOTTLING CO.

PO BOX 403390
ATLANTA, GA 30384-3390

58-0503352

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	40898	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

XIOLOGIX INC

PO BOX 1880
TUALATIN, OR 97062

93-1297700

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	40646	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)

BECKER & POLIAKOFF PA

PO BOX 9057
FT LAUDERDALE, FL 33310

59-1640708

(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	40050	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

VOYA INVESTMENT

230 PARK AVENUE
NEW YORK, NY 02111

(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	NONE	38661	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

CONFERENCE DIRECT

PO BOX 69777
LOS ANGELES, CA 90069

95-4703518

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	38306	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

VIRGINIA & AMBINDER, LLP

111 BROADWAY STE 1403
NEW YORK, NY 10006

43-1995226

(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	37838	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

CHRISTENSEN JAMES AND MARTIN

7440 W SAHARA AVE
LAS VEGAS, NV 89117

88-0330040

(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	37268	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

AVAYA COMMUNICATIONS, INC.

PO BOX 5332
NEW YORK, NY 10087

22-3713430

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	36684	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)

HOTEL EMPLOYEE RESTUARANT

1525 NY 167TH STREET, STE 350
MIAMI, FL 33169

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	36612	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

DLA PIPER RUDNICK GRAY CARY US LP

PO BOX 64029
BALTIMORE, MD 21264

52-0616490

(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	36315	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

INTERCONN RESOURCES, INC.

PO BOX 1337
HOUSTON, TX 77251

72-1370574

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	35807	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)

EPICORE SOFTWARE

PO BOX 1547
LOS ANGELES, CA 90084

33-0277592

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	34636	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

HD SUPPLY FACILITIES MAINTENANCE

PO BOX 509058
SAN DIEGO, CA 92150-9058

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	34121	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

ACRA LOCAL 725 PENSION

2010 NW 150TH AVENUE, STE 100
PEMBROKE PINES, FL 33028

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	33753	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)

EDWARD DON & COMPANY

2562 PAYSHERE CIRCLE
CHICAGO, IL 60674-0025

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	33520	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

PALMER LOONEY, JAN

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088636

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30	EMPLOYEE	32752	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

PENSION BENEFIT INFORMATION

PO BOX 10308
SAN RAFAEL, CA 94912

94-2856521

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	31500	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)

GE CAPITAL

PO BOX 740425
ATLANTA, GA 30374-0425

52-2121565

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	31289	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

VISION BUSINESS PRODUCTS

PO BOX 66583
ST. LOUIS, MO 63166

74-3033381

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
23	NONE	30644	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

NORTHSTAR TRAVEL MEDIA LLC

PO BOX 150414 DEPT 106086
HARTFORD, CT 06115-0414

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	30500	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)

SONIFI SOLUTIONS INC

PO BOX 952141
ST. LOUIS, MO 63195-2141

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	30326	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

WORLDWIDE PAYMENT SYSTEMS

CALLE TORNEO 72
SEVILLA ES

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	29667	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

NEWMARKET INTERNATIONAL, INC.

PO BOX 845707
BOSTON, MA 02284-5707

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	29067	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)

SWEENEY, DAVID

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088636

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30	EMPLOYEE	28068	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

GOLD COAST BEVERAGE DISTRIBUTORS

10055 NW 12TH STREET
DORAL, FL 33172

59-1264956

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	27800	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

K&M MEAT CO, INC

2443 E. 27TH STREET
VERNON, CA 90058

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	27285	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)

UNION REALTY ADVISORS, LLC

1325 MASSACHUSETTS AVE NW 2ND FL
WASHINGTON, DC 20005

52-2009431

(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?
99	NONE	26000	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

EVANS, CYNTHIA P.

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088636

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30	EMPLOYEE	25591	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

CLARK, CHARMELE

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088636

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30	EMPLOYEE	25551	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)

BLAKE & UHLIG

753 STATE AVENUE
KANSAS CITY, KS 66101

48-0918231

(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	25480	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

ERNST AND YOUNG

200 PLAZA DRIVE
SECAUCUS, NJ 07094

34-6565596

(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	25395	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

CUSANO'S BAKERY

2798 SW 32ND AVE
PEMBROKE PARK, FL 33023

59-1550859

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	25222	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)

SAYFIE LAW FIRM

450 E LAS OLAS BLVD
FT LAUDERDALE, FL 33301

65-1127167

(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	25000	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

GREENTEAM SERVICE

4811 SW 28TH AVENUE
FORT LAUDERDALE, FL 33312

27-2152472

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	24005	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

WORLDWIDE POOLS, CORP

15476 NW 77 CT STE 168
MIAMI LAKES, FL 33016

20-8591517

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	24000	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

FIRECRAFT OF FLORIDA, INC.

STE C-7 10034 SPANISH ISLES BLVD.
BOCA RATON, FL 33498

11-3353835

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	23985	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

AMBIUS, INC

PO BOX 14086
READING, PA 19612

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	23246	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

WORLD CINEMA, INC.

9801 WESTHEIMER SUITE 409
HOUSTON, TX 77042

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	22365	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)

HUDSON & CALLEJA LLC

3211 PONCE DELEON BLVD STE 102
CORAL GABLES, FL 33134

37-1635439

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	21702	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

W W GRAINGER

DEPT 845434307
PALATINE, IL 60038-0001

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	21634	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

INDOFF, INC.

PO BOX 842808
KANSAS CITY, MO 64184

43-0964848

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	21392	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)

THYSSENKRUPP ELEVATOR CORP.

PO BOX 933007
ATLANTA, GA 31193

62-1211267

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	21334	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

STARCITE, INC

DEPT 2421 PO BOX 122421
DALLAS, TX 75312-2421

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	20792	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

PAETEC COMMUNICATIONS INC.

PO BOX 90001013
LOUISVILLE, KY 40290-1013

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	20682	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)

WASHINGTON COURIER

5520 CHEROKEE AVE STE 120
ALEXANDRIA, VA 22312

06-1626936

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	19901	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

GOURMET FOODS INTERNATIONAL

PO BOX 116585
ATLANTA, GA 30368-6585

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	18837	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

HARRELL'S FERTILIZER

PO BOX 935358
ATLANTA, GA 31193-5358

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	18805	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)

TECO PEOPLE GAS

PO BOX 31017
TAMPA, FL 33631-3017

59-0475140

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	18793	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

OFFICEMAX CONTRACT INC.

75 REMITTANCE DRIVE 2698
CHICAGO, IL 60675-2698

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	18585	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

OTIS ELEVATOR COMPANY

PO BOX 73579
CHICAGO, IL 60673-7579

13-5583389

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	18297	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)

PITNEY BOWES GLOBAL FINANCIAL

PO BOX 371887
PITTSBURGH, PA 15250

20-1344287

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	18134	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

VERITY, INC.

PO BOX 201051
DALLAS, TX 75320

77-0182779

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	16994	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

CLEARVIEW BUILDING SERVICES

6440 SW 42ND STREET
DAVIE, FL 33314

59-2621722

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	15734	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)

DE LAGE LANDEN FINANCIAL

PO BOX 41602
PHILADELPHIA, PA 19101-1602

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	15123	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

GSD CONTRACTING, LLC

4675 ANGLERS AVE
FT LAUDERDALE, FL 33312

59-2329721

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	14658	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

BELL SOUTH TELECOMMUNICATIONS

PO BOX 105503
ATLANTA, GA 30348-5503

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	14140	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)

KENNESAW FRUIT & JUICE

1300 SW 1ST COURT
POMPANO BEACH, FL 33069

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	13291	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

SHERWIN WILLIAMS CO

2733 HOLLYWOOD BLVD
HOLLYWOOD, FL 33020-4821

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	13239	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

PANTROPIC POWER PRODUCTS, INC.

8205 NW 58 STREET
MIAMI, FL 33166

59-2749643

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	13120	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)

ORACLE AMERICA, INC.

PO BOX 71028
CHICAGO, IL 60694

84-1332677

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	13084	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

COMMERCIAL ENERGY SPECIALIST

860 JUPITER PARK DRIVE STE 2
JUPITER, FL 33458

59-2550057

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	13016	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

BIG CHEF

5830 FUNSTON STREET
HOLLYWOOD, FL 33023-1932

90-0117046

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	12918	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)

TEMPORARIES NOW, INC.

PO BOX 2392
NEW YORK, NY 10116

54-1537382

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	12881	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

T AND T CUSTOM DESIGNS INC

130-103 401 E LAS OLAS BLVD
FT LAUDERDALE, FL 33301

26-2863221

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	12720	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

SMITTY BELCHER

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088636

(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?
20	TRUSTEE	12642	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)

REPUBLIC NATIONAL

441 SW 12TH AVE
DEERFIELD BEACH, FL 33442

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	12547	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

SYSCO FOOD SERVICES - SOUTH FL

PO BOX 64000-A
MIAMI, FL 33164

74-2541433

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	12508	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

AT&T

PO BOX 5094
CAROL STREAM, IL 60197

13-4924710

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	12476	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)

CENVEO CORP.

PO BOX 802035
CHICAGO, IL 60680-2035

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	12431	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

USA TRANSPORTATION

PO BOX 21684
FT LAUDERDALE, FL 33335

62-1861887

(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?
99	NONE	12418	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

WASHINGTON GAS

PO BOX 37747
PHILADELPHIA, PA 19101

53-0162882

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	12137	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)

SWISS CHALET FINE FOODS

9455 NW 40TH ST ROAD
MIAMI, FL 33178

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	12133	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

STEPHENS DISTRIBUTING COMPANY

185 ANGLERS AVENUE
FT LAUDERDALE, FL 33312

59-2359783

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	11944	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

CAVANAGH & O'HARA

407 EAST ADAMS PO BOX 5043
SPRINGFIELD, IL 62705

37-1259635

(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	11779	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)

AT&T
PO BOX 5091
CAROL STREAM, IL 60197-5091

22-3646053

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	11760	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

WALKER & VAN HEIJENOORT
4263 MONTGOMERY BLVD
ALBUQUERQUE, NM 87109

85-0365189

(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	11723	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

DADE PAPER CO.
PO BOX 523666
MIAMI, FL 33152

59-0784248

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	11391	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)

FELHABER LARSON

PO BOX 860034
MINNEAPOLIS, MN 55486

41-0991071

(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	11317	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

ORKIN PEST CONTROL/WESTERN PEST

3375 SW THIRD AVENUE
FT LAUDERDALE, FL 33315

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	11296	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

SELDAR FLORIDA FINANCE, LLC

9703 COLLINS AVENUE
BAL HARBOUR, FL 33154

32-0427637

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	10566	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)

ERICKS CONSULTANTS, INC.

205 S ADAMS ST
TALLAHASSEE, FL 32301

59-2722222

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	10500	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

GPSI LEASING, LLC

PO BOX 25035
BRADENTON, FL 34206

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	10392	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

ECOLAB

PO BOX 100512
PASADENA, CA 91189

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	10349	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)

CITY OF HOLLYWOOD RECLAIM

PO BOX 229045
HOLLYWOOD, FL 33022-9045

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	10187	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

DOLPHIN HOTEL ASSOCIATES

1500 EPCOT RESORT BLVD
LAKE BUENA VISTA, FL 32830

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	10061	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

JM ZELL PARTNERS

2900 K STREET, NW
WASHINGTON, DC 20007

52-1603888

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	10058	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)

HERITAGE FOOD SVCS EQUIPMENT, INC

PO BOX 8710
FORT WAYNE, IN 46898-8710

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	9973	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

ROLLING GREENS, INC

7155 OLD ALEXANDRIA FERRY RD
CLINTON, MD 20735

54-1087867

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	9858	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

COCOA CREATIONS

PO BOX 630583
MIAMI, FL 33163

20-5387278

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	9848	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)

EDY'S GRAND ICE CREAM

3852 COLLECTIONS CENTER DRIVE
CHICAGO, IL 60693

94-2761189

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	9770	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

IDN ARMSTRONGS, INC

3589 BROAD STREET
CHAMBLEE, GA 30341

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	9719	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

NORTHEAST CAPITAL

7 AIRPORT PARK
LATHAM, NY 12110

14-1755641

(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?
34	NONE	9707	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)

MICHAEL GOSSMAN

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088636

(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?
20	TRUSTEE	9446	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

NEEDLES & ASSOCIATES, LLC

350 INTERLOCKEN BLVD STE 220
BROOMFIELD, CO 80021

51-0435869

(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	9357	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

SILENT GUARD

4835 HOLLYWOOD BLVD. SUITE 1
HOLLYWOOD, FL 33021

65-0575927

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	9254	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)

REYNOLDS, WILBERT

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088636

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
30	EMPLOYEE	9148	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

K SEA TRADING

12201 NW 106TH COURT
MEDLEY, FL 33178-1205

01-0771265

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	8803	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

SPRINT

PO BOX 4181
CAROL STREAM, IL 60197

48-1165245

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	8547	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)

PALMDALE OIL CO.

911 NORTH 2ND STREET
FT PIERCE, FL 34950

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	8394	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

CALLAWAY GOLF

PO BOX 9002
CARLSBAD, CA 92018-9002

33-0533992

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	8095	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

QUINN & CO

520 EIGHTH AVE, FL 21
NEW YORK, NY 10018

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	8008	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)

JOHNSON CONTROLS

PO BOX 905240
CHARLOTTE, NC 28290-5240

39-0380010

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	7983	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

GREENBERG TRAURIG

401 EAST LAS OLAS BLVD STE 2000
FT LAUDERDALE, FL 33301

59-1270754

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	7938	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

A1A CLIPPER LLC

1140 SEABREEZE BLVD
FT LAUDERDALE, FL 33316

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	7915	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)

SO COOL EVENTS

2585 NW 21ST TERRACE
MIAMI, FL 33142

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	7596	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

SIGNAL COMMUNICATIONS, LLC

6820 LYONS TECHNOLOGY CIRCLE 115
COCONUT CREEK, FL 33073

65-0918022

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	7561	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

PROXY VOTE PLUS, LLC

1200 SHERMER RD STE 216
NORTHBROOK, IL 60062

76-0702630

(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?
70	NONE	7500	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)

CITRIX SYSTEMS, INC.

PO BOX 932841
ATLANTA, GA 31193

75-2275152

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	7350	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

MORROW TECHNOLOGIES CORPORATION

12000 28TH STREET NORTH
ST PETERSBURG, FL 33716

62-1220428

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	7205	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

COUNCIL OF INSTITUTIONAL INVESTORS

888 17 ST NE STE 500
WASHINGTON, DC 20006

52-1380217

(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?
72	NONE	7180	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)

GARNISH EVENTS LLC

233 SPRING STREET
NEWPORT, RI 02840

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	7096	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

DEAN HOLDING COMPANY

PO BOX 932688
ATLANTA, GA 31193-2688

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	7050	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

PLUMBERS & PIPEFITTERS LU 719

2502 SOUTH ANDREWS AVE
FT LAUDERDALE, FL 33316

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	6814	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)

ARAHULL SERVICES, INC

6851 W. SUNRISE BLVD 124
PLANTATION, FL 33313

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	6757	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

WRIGHT FULFORD

505 MAITLAND AVENUE
ALTAMONTE SPRINGS, FL 32701

59-2924905

(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	6745	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

CDM RETIREMENT CONSULTANTS, INC.

300 EAST JOPPA RD STE 210
TOWSON, MD 21286

52-2136664

(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?
15	NONE	6650	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)

STRUCTURED SOLUTIONS

548 CABOT STREET
BEVERLY, MA 01915

83-0400460

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	6556	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

LYNDA.COM INC

PO BOX 848527
LOS ANGELES, CA 90084

77-0532808

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	6500	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

STARBUCKS COFFEE COMPANY

PO BOX 84348
SEATTLE, WA 98124-5648

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	6404	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)

ADVANCED TELECOMMUNICATIONS SERVICE

386 CROOKED RIVER DR.
WOODBINE, GA 31569

57-1064337

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	6300	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

CONNER WINTERS LLP

4000 ONE WILLIAMS CTR
TULSA, OK 74172

73-1388566

(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	6194	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

WACO

26661 NETWORK PLACE
CHICAGO, IL 60673-1266

23-2386877

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	6179	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)

IRON MOUNTAIN

PO BOX 27128
NEW YORK, NY 10087

04-3038590

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	6093	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

ADP INC

PO BOX 842875
BOSTON, MA 02284-2875

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	5929	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

T-MOBILE

PO BOX 790047
ST. LOUIS, MO 63179-0047

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	5879	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)

ANASTASI & MOORE, PLLC

104 S DIVISION ST
SPOKANE, WA 99202

20-8149084

(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	5713	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

ACTION TRAVEL CORP

2151 CONSULATE DR
ORLANDO, FL 32837

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	5656	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

SENECA GLASS

601-28 DOVER ROAD
ROCKVILLE, MD 20850

52-1755069

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	5621	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)

AIRWAYS CLEANING & FIREPROOFING CO

4200 PETERS ROAD
FT LAUDERDALE, FL 33317-4541

59-1611645

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	5592	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

D & R FENCING

5743 LINCOLN STREET
HOLLYWOOD, FL 33021

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	5575	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

MARK ROGERS

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088636

(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?
20	TRUSTEE ALTERNATE	5537	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)

NALCO COMPANY

PO BOX 70716
CHICAGO, IL 60673-0716

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	5400	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

EUGENE ROBERTO & ASSOCIATES INC

PO BOX 460357
FT LAUDERDALE, FL 33346

65-1087182

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	5342	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

JOHN E. KELLY & SONS ELECTRIC

8431 OLD MARLBORO PIKE, 201
UPPER MARLBORO, MD 20772

52-1544913

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	5324	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)

ARROWHEAD CONFERENCES

5780 LINCOLN DR
EDINA, MN 55436

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	5170	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

JIM MURPHY

103 ORONOCO STREET
ALEXANDRIA, VA 22314

52-6088636

(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?
20	TRUSTEE	5109	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

ARAMARK

PO BOX 415758
BOSTON, MA 02241

23-1673482

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	5030	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)

49 HOUR MEDIA LLC

5750 NEW KING DR
TROY, MI 48098

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	NONE	5000	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

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

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

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

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

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE D (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small>	DFE/Participating Plan Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ► File as an attachment to Form 5500.	OMB No. 1210-0110 <hr/> 2014 <hr/> This Form is Open to Public Inspection.
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For calendar plan year 2014 or fiscal plan year beginning 07/01/2014 and ending 06/30/2015

A Name of plan <u>PLUMBERS AND PIPEFITTERS NATIONAL PENSION FUND</u>	B Three-digit plan number (PN) ►	<u>001</u>
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 <u>B/O/T PLUMBERS & PIPEFITTERS NATIONAL PENSION FUND</u>	D Employer Identification Number (EIN) <u>52-6152779</u>	

Part I	Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs) (Complete as many entries as needed to report all interests in DFEs)
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a Name of MTIA, CCT, PSA, or 103-12 IE: AFL-CIO BUILDING INVESTMENT TRUST

b Name of sponsor of entity listed in (a): AFL-CIO

c EIN-PN <u>52-6220193-001</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>171362484</u>
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a Name of MTIA, CCT, PSA, or 103-12 IE: MULTI EMPLOYER PROPERTY TRUST

b Name of sponsor of entity listed in (a): NEW TOWER TRUST COMPANY

c EIN-PN <u>52-6218800-001</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>219295278</u>
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a Name of MTIA, CCT, PSA, or 103-12 IE: UNION LABOR LIFE (J ACCT)

b Name of sponsor of entity listed in (a): UNION LABOR LIFE

c EIN-PN <u>13-1423090-203</u>	d Entity code <u>P</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>94655114</u>
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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)
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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)
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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)
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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)
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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)

(Complete as many entries as needed to report all participating plans)

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

<div>SCHEDULE G (Form 5500) Department of Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration</div>	<div>Financial Transaction Schedules</div> <div>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).</div> <div>► File as an attachment to Form 5500.</div>	<div>OMB No. 1210-0110</div> <div>2014</div> <div>This Form is Open to Public Inspection.</div>
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For calendar plan year 2014 or fiscal plan year beginning 07/01/2014 and ending 06/30/2015	
A Name of plan PLUMBERS AND PIPEFITTERS NATIONAL PENSION FUND	B Three-digit plan number (PN) ► 001
C Plan sponsor's name as shown on line 2a of Form 5500 B/O/T PLUMBERS & PIPEFITTERS NATIONAL PENSION FUND	D Employer Identification Number (EIN) 52-6152779

Part I	Schedule of Loans or Fixed Income Obligations in Default or Classified as Uncollectible Complete as many entries as needed to report all loans or fixed income obligations in default or classified as uncollectible. Check box (a) if obligor is known to be a party in interest. Attach Overdue Loan Explanation for each loan listed. See Instructions.
--------	--

(a)	(b) Identity and address of obligor	(c) Detailed description of loan including dates of making and maturity, interest rate, the type and value of collateral, any renegotiation of the loan and the terms of the renegotiation, and other material items
☐		

	Amount received during reporting year			Amount overdue	
(d) Original amount of loan	(e) Principal	(f) Interest	(g) Unpaid balance at end of year	(h) Principal	(i) Interest

(a)	(b) Identity and address of obligor	(c) Detailed description of loan including dates of making and maturity, interest rate, the type and value of collateral, any renegotiation of the loan and the terms of the renegotiation, and other material items
☐		

	Amount received during reporting year			Amount overdue	
(d) Original amount of loan	(e) Principal	(f) Interest	(g) Unpaid balance at end of year	(h) Principal	(i) Interest

(a)	(b) Identity and address of obligor	(c) Detailed description of loan including dates of making and maturity, interest rate, the type and value of collateral, any renegotiation of the loan and the terms of the renegotiation, and other material items
☐		

	Amount received during reporting year			Amount overdue	
(d) Original amount of loan	(e) Principal	(f) Interest	(g) Unpaid balance at end of year	(h) Principal	(i) Interest

(a)	(b) Identity and address of obligor		(c) Detailed description of loan including dates of making and maturity, interest rate, the type and value of collateral, any renegotiation of the loan and the terms of the renegotiation, and other material items		
☐					
		Amount received during reporting year			Amount overdue
(d) Original amount of loan	(e) Principal	(f) Interest	(g) Unpaid balance at end of year	(h) Principal	(i) Interest

(a)	(b) Identity and address of obligor		(c) Detailed description of loan including dates of making and maturity, interest rate, the type and value of collateral, any renegotiation of the loan and the terms of the renegotiation, and other material items		
☐					
		Amount received during reporting year			Amount overdue
(d) Original amount of loan	(e) Principal	(f) Interest	(g) Unpaid balance at end of year	(h) Principal	(i) Interest

(a)	(b) Identity and address of obligor		(c) Detailed description of loan including dates of making and maturity, interest rate, the type and value of collateral, any renegotiation of the loan and the terms of the renegotiation, and other material items		
☐					
		Amount received during reporting year			Amount overdue
(d) Original amount of loan	(e) Principal	(f) Interest	(g) Unpaid balance at end of year	(h) Principal	(i) Interest

(a)	(b) Identity and address of obligor		(c) Detailed description of loan including dates of making and maturity, interest rate, the type and value of collateral, any renegotiation of the loan and the terms of the renegotiation, and other material items		
☐					
		Amount received during reporting year			Amount overdue
(d) Original amount of loan	(e) Principal	(f) Interest	(g) Unpaid balance at end of year	(h) Principal	(i) Interest

(a)	(b) Identity and address of obligor		(c) Detailed description of loan including dates of making and maturity, interest rate, the type and value of collateral, any renegotiation of the loan and the terms of the renegotiation, and other material items		
☐					
		Amount received during reporting year			Amount overdue
(d) Original amount of loan	(e) Principal	(f) Interest	(g) Unpaid balance at end of year	(h) Principal	(i) Interest

Part II Schedule of Leases in Default or Classified as Uncollectible

Complete as many entries as needed to report all leases in default or classified as uncollectible. Check box (a) if lessor or lessee is known to be a party in interest. Attach Overdue Lease Explanation for each lease listed. (See instructions)

(a)	(b) Identity of lessor/lessee	(c) Relationship to plan, employer, employee organization, or other party-in-interest	(d) Terms and description (type of property, location and date it was purchased, terms regarding rent, taxes, insurance, repairs, expenses, renewal options, date property was leased)			
☐						
(e) Original cost	(f) Current value at time of lease	(g) Gross rental receipts during the plan year	(h) Expenses paid during the plan year	(i) Net receipts	(j) Amount in arrears	

(a)	(b) Identity of lessor/lessee	(c) Relationship to plan, employer, employee organization, or other party-in-interest	(d) Terms and description (type of property, location and date it was purchased, terms regarding rent, taxes, insurance, repairs, expenses, renewal options, date property was leased)			
☐						
(e) Original cost	(f) Current value at time of lease	(g) Gross rental receipts during the plan year	(h) Expenses paid during the plan year	(i) Net receipts	(j) Amount in arrears	

(a)	(b) Identity of lessor/lessee	(c) Relationship to plan, employer, employee organization, or other party-in-interest	(d) Terms and description (type of property, location and date it was purchased, terms regarding rent, taxes, insurance, repairs, expenses, renewal options, date property was leased)			
☐						
(e) Original cost	(f) Current value at time of lease	(g) Gross rental receipts during the plan year	(h) Expenses paid during the plan year	(i) Net receipts	(j) Amount in arrears	

(a)	(b) Identity of lessor/lessee	(c) Relationship to plan, employer, employee organization, or other party-in-interest	(d) Terms and description (type of property, location and date it was purchased, terms regarding rent, taxes, insurance, repairs, expenses, renewal options, date property was leased)			
☐						
(e) Original cost	(f) Current value at time of lease	(g) Gross rental receipts during the plan year	(h) Expenses paid during the plan year	(i) Net receipts	(j) Amount in arrears	

(a)	(b) Identity of lessor/lessee	(c) Relationship to plan, employer, employee organization, or other party-in-interest	(d) Terms and description (type of property, location and date it was purchased, terms regarding rent, taxes, insurance, repairs, expenses, renewal options, date property was leased)			
☐						
(e) Original cost	(f) Current value at time of lease	(g) Gross rental receipts during the plan year	(h) Expenses paid during the plan year	(i) Net receipts	(j) Amount in arrears	

(a)	(b) Identity of lessor/lessee	(c) Relationship to plan, employer, employee organization, or other party-in-interest	(d) Terms and description (type of property, location and date it was purchased, terms regarding rent, taxes, insurance, repairs, expenses, renewal options, date property was leased)			
☐						
(e) Original cost	(f) Current value at time of lease	(g) Gross rental receipts during the plan year	(h) Expenses paid during the plan year	(i) Net receipts	(j) Amount in arrears	

Part III Nonexempt Transactions

Complete as many entries as needed to report all nonexempt transactions. **Caution:** If a nonexempt prohibited transaction occurred with respect to a disqualified person, file Form 5330 with the IRS to pay the excise tax on the transaction.

(a) Identity of party involved	(b) Relationship to plan, employer, or other party-in-interest	(c) Description of transaction including maturity date, rate of interest, collateral, par or maturity value		(d) Purchase price	
AIA CLIPPER	RELATED PARTY VENDOR	REIMBURSEMENT FOR TASK FORCE LABOR			
(e) Selling price	(f) Lease rental	(g) Transaction expenses	(h) Cost of asset	(i) Current value of asset	(j) Net gain (or loss) on each transaction
		7915			

(a) Identity of party involved	(b) Relationship to plan, employer, or other party-in-interest	(c) Description of transaction including maturity date, rate of interest, collateral, par or maturity value		(d) Purchase price	
BIRMINGHAM JEFFERSON CIVI	RELATED PARTY VENDOR	REIMBURSEMENT FOR TASK FORCE LABOR			
(e) Selling price	(f) Lease rental	(g) Transaction expenses	(h) Cost of asset	(i) Current value of asset	(j) Net gain (or loss) on each transaction
		3171			

(a) Identity of party involved	(b) Relationship to plan, employer, or other party-in-interest	(c) Description of transaction including maturity date, rate of interest, collateral, par or maturity value		(d) Purchase price	
CAPRI HOTEL	RELATED PARTY VENDOR	REIMBURSEMENT FOR TASK FORCE LABOR			
(e) Selling price	(f) Lease rental	(g) Transaction expenses	(h) Cost of asset	(i) Current value of asset	(j) Net gain (or loss) on each transaction
		4500			

(a) Identity of party involved	(b) Relationship to plan, employer, or other party-in-interest	(c) Description of transaction including maturity date, rate of interest, collateral, par or maturity value		(d) Purchase price	
CJUF II STRATUS BLOCK 21	RELATED PARTY VENDOR	REIMBURSEMENT FOR TASK FORCE LABOR			
(e) Selling price	(f) Lease rental	(g) Transaction expenses	(h) Cost of asset	(i) Current value of asset	(j) Net gain (or loss) on each transaction
		571			

(a) Identity of party involved	(b) Relationship to plan, employer, or other party-in-interest	(c) Description of transaction including maturity date, rate of interest, collateral, par or maturity value		(d) Purchase price	
DEER CREST JANNA, LLC	RELATED PARTY VENDOR	REIMBURSEMENT FOR TASK FORCE LABOR			
(e) Selling price	(f) Lease rental	(g) Transaction expenses	(h) Cost of asset	(i) Current value of asset	(j) Net gain (or loss) on each transaction
		108			

(a) Identity of party involved	(b) Relationship to plan, employer, or other party-in-interest	(c) Description of transaction including maturity date, rate of interest, collateral, par or maturity value		(d) Purchase price	
DOLPHIN HOTEL ASSOCIATES	RELATED PARTY VENDOR	REIMBURSEMENT FOR TASK FORCE LABOR			
(e) Selling price	(f) Lease rental	(g) Transaction expenses	(h) Cost of asset	(i) Current value of asset	(j) Net gain (or loss) on each transaction
		10061			

Part III Nonexempt Transactions

Complete as many entries as needed to report all nonexempt transactions. **Caution:** If a nonexempt prohibited transaction occurred with respect to a disqualified person, file Form 5330 with the IRS to pay the excise tax on the transaction.

(a) Identity of party involved	(b) Relationship to plan, employer, or other party-in-interest	(c) Description of transaction including maturity date, rate of interest, collateral, par or maturity value			(d) Purchase price
SELDAR FLORIDA FINANCE	RELATED PARTY VENDOR	REIMBURSEMENT FOR TASK FORCE LABOR			
(e) Selling price	(f) Lease rental	(g) Transaction expenses	(h) Cost of asset	(i) Current value of asset	(j) Net gain (or loss) on each transaction
		10566			

(a) Identity of party involved	(b) Relationship to plan, employer, or other party-in-interest	(c) Description of transaction including maturity date, rate of interest, collateral, par or maturity value			(d) Purchase price
STARPORT I, LLC	RELATED PARTY VENDOR	REIMBURSEMENT FOR TASK FORCE LABOR			
(e) Selling price	(f) Lease rental	(g) Transaction expenses	(h) Cost of asset	(i) Current value of asset	(j) Net gain (or loss) on each transaction
		966			

(a) Identity of party involved	(b) Relationship to plan, employer, or other party-in-interest	(c) Description of transaction including maturity date, rate of interest, collateral, par or maturity value			(d) Purchase price
STARWOOD ASSOCIATE RELIEF	RELATED PARTY VENDOR	REIMBURSEMENT FOR TASK FORCE LABOR			
(e) Selling price	(f) Lease rental	(g) Transaction expenses	(h) Cost of asset	(i) Current value of asset	(j) Net gain (or loss) on each transaction
		1387			

(a) Identity of party involved	(b) Relationship to plan, employer, or other party-in-interest	(c) Description of transaction including maturity date, rate of interest, collateral, par or maturity value			(d) Purchase price
STARWOOD HOTELS & RESORTS	RELATED PARTY VENDOR	REIMBURSEMENT FOR TASK FORCE LABOR			
(e) Selling price	(f) Lease rental	(g) Transaction expenses	(h) Cost of asset	(i) Current value of asset	(j) Net gain (or loss) on each transaction
		3865			

(a) Identity of party involved	(b) Relationship to plan, employer, or other party-in-interest	(c) Description of transaction including maturity date, rate of interest, collateral, par or maturity value			(d) Purchase price
THE WESTIN PEACHTREE PLAZA	RELATED PARTY VENDOR	REIMBURSEMENT FOR TASK FORCE LABOR			
(e) Selling price	(f) Lease rental	(g) Transaction expenses	(h) Cost of asset	(i) Current value of asset	(j) Net gain (or loss) on each transaction
		218			

(a) Identity of party involved	(b) Relationship to plan, employer, or other party-in-interest	(c) Description of transaction including maturity date, rate of interest, collateral, par or maturity value			(d) Purchase price
W ATLANTA HOTEL, LLC	RELATED PARTY VENDOR	REIMBURSEMENT FOR TASK FORCE LABOR			
(e) Selling price	(f) Lease rental	(g) Transaction expenses	(h) Cost of asset	(i) Current value of asset	(j) Net gain (or loss) on each transaction
		207			

Part III Nonexempt Transactions

Complete as many entries as needed to report all nonexempt transactions. **Caution:** If a nonexempt prohibited transaction occurred with respect to a disqualified person, file Form 5330 with the IRS to pay the excise tax on the transaction.

(a) Identity of party involved	(b) Relationship to plan, employer, or other party-in-interest	(c) Description of transaction including maturity date, rate of interest, collateral, par or maturity value	(d) Purchase price
W SOUTH BEACH	RELATED PARTY VENDOR	REIMBURSEMENT FOR TASK FORCE LABOR	
(e) Selling price	(f) Lease rental	(g) Transaction expenses	(h) Cost of asset
		2877	
(a) Identity of party involved	(b) Relationship to plan, employer, or other party-in-interest	(c) Description of transaction including maturity date, rate of interest, collateral, par or maturity value	(d) Purchase price
WESTIN RESORT & VILLAS	RELATED PARTY VENDOR	REIMBURSEMENT FOR TASK FORCE LABOR	
(e) Selling price	(f) Lease rental	(g) Transaction expenses	(h) Cost of asset
		5813	
(a) Identity of party involved	(b) Relationship to plan, employer, or other party-in-interest	(c) Description of transaction including maturity date, rate of interest, collateral, par or maturity value	(d) Purchase price
(e) Selling price	(f) Lease rental	(g) Transaction expenses	(h) Cost of asset
(a) Identity of party involved	(b) Relationship to plan, employer, or other party-in-interest	(c) Description of transaction including maturity date, rate of interest, collateral, par or maturity value	(d) Purchase price
(e) Selling price	(f) Lease rental	(g) Transaction expenses	(h) Cost of asset
(a) Identity of party involved	(b) Relationship to plan, employer, or other party-in-interest	(c) Description of transaction including maturity date, rate of interest, collateral, par or maturity value	(d) Purchase price
(e) Selling price	(f) Lease rental	(g) Transaction expenses	(h) Cost of asset
(a) Identity of party involved	(b) Relationship to plan, employer, or other party-in-interest	(c) Description of transaction including maturity date, rate of interest, collateral, par or maturity value	(d) Purchase price
(e) Selling price	(f) Lease rental	(g) Transaction expenses	(h) Cost of asset
(a) Identity of party involved	(b) Relationship to plan, employer, or other party-in-interest	(c) Description of transaction including maturity date, rate of interest, collateral, par or maturity value	(d) Purchase price
(e) Selling price	(f) Lease rental	(g) Transaction expenses	(h) Cost of asset

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 2014 This Form is Open to Public Inspection
For calendar plan year 2014 or fiscal plan year beginning <u>07/01/2014</u> and ending <u>06/30/2015</u>		
A Name of plan <u>PLUMBERS AND PIPEFITTERS NATIONAL PENSION FUND</u>		B Three-digit plan number (PN) ► <u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>B/O/T PLUMBERS & PIPEFITTERS NATIONAL PENSION FUND</u>		D Employer Identification Number (EIN) <u>52-6152779</u>

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	49909751	44539992
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions.....	1b(1)	58436917	49811510
(2) Participant contributions.....	1b(2)		
(3) Other.....	1b(3)	30691231	12982956
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit).....	1c(1)	93522279	93113173
(2) U.S. Government securities	1c(2)	202559022	182579999
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)	334564733	337690261
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common.....	1c(4)(B)	2480989789	2219807440
(5) Partnership/joint venture interests	1c(5)	502605079	498669771
(6) Real estate (other than employer real property).....	1c(6)	525500000	0
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans.....	1c(8)		
(9) Value of interest in common/collective trusts	1c(9)	346944097	390657762
(10) Value of interest in pooled separate accounts	1c(10)	91424350	94655114
(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)	905793684	1665314908
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)	1625883	1682789
(15) Other.....	1c(15)	7784449	

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	8375482	9093318
f Total assets (add all amounts in lines 1a through 1e)	1f	5640726746	5600598993

Liabilities

g Benefit claims payable	1g		
h Operating payables	1h	37077608	25771266
i Acquisition indebtedness	1i		
j Other liabilities	1j		
k Total liabilities (add all amounts in lines 1g through 1j)	1k	37077608	25771266

Net Assets

l Net assets (subtract line 1k from line 1f)	1l	5603649138	5574827727
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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)	367645132	
(B) Participants	2a(1)(B)		
(C) Others (including rollovers)	2a(1)(C)		
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		367645132
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	465101	
(B) U.S. Government securities	2b(1)(B)	1788949	
(C) Corporate debt instruments	2b(1)(C)	19203429	
(D) Loans (other than to participants)	2b(1)(D)		
(E) Participant loans	2b(1)(E)		
(F) Other	2b(1)(F)	8534480	
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		29991959
(2) Dividends: (A) Preferred stock	2b(2)(A)		
(B) Common stock	2b(2)(B)	39057467	
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)		
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		39057467
(3) Rents	2b(3)		8402346
(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)	4061577208	
(B) Aggregate carrying amount (see instructions)	2b(4)(B)	3805642045	
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)		255935163
(5) Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)		
(B) Other	2b(5)(B)	-197626430	
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		-197626430

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts.....	2b(6)		43713665
(7) Net investment gain (loss) from pooled separate accounts.....	2b(7)		3788720
(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)		16382955
c Other income.....	2c		172001
d Total income. Add all income amounts in column (b) and enter total.....	2d		567462978

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers.....	2e(1)	550401045	
(2) To insurance carriers for the provision of benefits.....	2e(2)		
(3) Other.....	2e(3)		
(4) Total benefit payments. Add lines 2e(1) through (3).....	2e(4)		550401045
f Corrective distributions (see instructions).....	2f		
g Certain deemed distributions of participant loans (see instructions).....	2g		
h Interest expense.....	2h		
i Administrative expenses: (1) Professional fees.....	2i(1)	4066171	
(2) Contract administrator fees.....	2i(2)		
(3) Investment advisory and management fees.....	2i(3)	18331843	
(4) Other.....	2i(4)	23485330	
(5) Total administrative expenses. Add lines 2i(1) through (4).....	2i(5)		45883344
j Total expenses. Add all expense amounts in column (b) and enter total.....	2j		596284389

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d.....	2k		-28821411
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) ☒ Unqualified (2) ☐ Qualified (3) ☐ Disclaimer (4) ☐ Adverse

b Did the accountant perform a limited scope audit pursuant to 29 CFR 2520.103-8 and/or 103-12(d)? ☐ Yes ☒ No

c Enter the name and EIN of the accountant (or accounting firm) below:

(1) Name: **SALTER & COMPANY, LLC**

(2) EIN: **20-8078757**

d The opinion of an independent qualified public accountant is **not attached** because:

(1) ☐ This form is filed for a CCT, PSA, 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.

During the plan year:

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.).....

	Yes	No	Amount
4a		X	
4b		X	

	Yes	No	Amount
c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)		X	
4c			
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.).....	X		52225
4d			
e Was this plan covered by a fidelity bond?	X		1000000
4e			
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		X	
4f			
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?.....		X	
4g			
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?.....		X	
4h			
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	X		
4i			
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked, and see instructions for format requirements.)		X	
4j			
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?		X	
4k			
l Has the plan failed to provide any benefit when due under the plan?.....		X	
4l			
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)		X	
4m			
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.		X	
4n			

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

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 If the plan is a defined benefit plan, is it covered under the PBGC insurance program (see ERISA section 4021)? ☒ Yes ☐ No ☐ Not determined

Part V Trust Information (optional)

6a Name of trust	6b Trust's EIN

SCHEDULE R (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Retirement Plan Information This schedule is required to be filed under section 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110 2014 This Form is Open to Public Inspection.
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For calendar plan year 2014 or fiscal plan year beginning 07/01/2014 and ending 06/30/2015

A Name of plan <u>PLUMBERS AND PIPEFITTERS NATIONAL PENSION FUND</u>	B Three-digit plan number (PN) ▶ <u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>B/O/T PLUMBERS & PIPEFITTERS NATIONAL PENSION FUND</u>	D Employer Identification Number (EIN) <u>52-6152779</u>

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

1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions.....	1	<u>0</u>
2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits): EIN(s): _____ Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.		
3 Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year.....	3	<u>773</u>

Part II	Funding Information (If the plan is not subject to the minimum funding requirements of section 412 of the Internal Revenue Code or ERISA section 302, skip this Part)
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4 Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)?.....	☐ Yes	☒ No	☐ N/A
If the plan is a defined benefit plan, go to line 8.			
5 If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. Date: Month _____ Day _____ Year _____ If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.			
6 a Enter the minimum required contribution for this plan year (include any prior year accumulated funding deficiency not waived).....	6a		
b Enter the amount contributed by the employer to the plan for this plan year.....	6b		
c Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount)	6c		
If you completed line 6c, skip lines 8 and 9.			
7 Will the minimum funding amount reported on line 6c be met by the funding deadline?.....	☐ Yes	☐ No	☐ N/A
8 If a change in actuarial cost method was made for this plan year pursuant to a revenue procedure or other authority providing automatic approval for the change or a class ruling letter, does the plan sponsor or plan administrator agree with the change?.....	☐ Yes	☐ No	☒ N/A

Part III	Amendments
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9 If this is a defined benefit pension plan, were any amendments adopted during this plan year that increased or decreased the value of benefits? If yes, check the appropriate box. If no, check the "No" box.....	☐ Increase	☐ Decrease	☐ Both	☒ No
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Part IV	ESOPs (see instructions). If this is not a plan described under Section 409(a) or 4975(e)(7) of the Internal Revenue Code, skip this Part.
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10 Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan?	☐ Yes	☐ No
11 a Does the ESOP hold any preferred stock?	☐ Yes	☐ No
b If the ESOP has an outstanding exempt loan with the employer as lender, is such loan part of a "back-to-back" loan? (See instructions for definition of "back-to-back" loan.).....	☐ Yes	☐ No
12 Does the ESOP hold any stock that is not readily tradable on an established securities market?	☐ Yes	☐ No

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

13 Enter the following information for each employer that contributed more than 5% of total contributions to the plan during the plan year (measured in dollars). See instructions. *Complete as many entries as needed to report all applicable employers.*

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

- 14** Enter the number of participants on whose behalf no contributions were made by an employer as an employer of the participant for:

a The current year	14a	23
b The plan year immediately preceding the current plan year	14b	18
c The second preceding plan year	14c	123

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

a The corresponding number for the plan year immediately preceding the current plan year	15a	93.24
b The corresponding number for the second preceding plan year	15b	95.75

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

a Enter the number of employers who withdrew during the preceding plan year	16a	14
b If line 16a is greater than 0, enter the aggregate amount of withdrawal liability assessed or estimated to be assessed against such withdrawn employers	16b	2245527

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

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

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

- 19** If the total number of participants is 1,000 or more, complete lines (a) through (c)

- a** Enter the percentage of plan assets held as:

Stock: 44.0% Investment-Grade Debt: 11.0% High-Yield Debt: 0.0% Real Estate: 0.0% Other: 45.0%

- b** Provide the average duration of the combined investment-grade and high-yield debt:

☐ 0-3 years ☒ 3-6 years ☐ 6-9 years ☐ 9-12 years ☐ 12-15 years ☐ 15-18 years ☐ 18-21 years ☐ 21 years or more

- c** What duration measure was used to calculate line 19(b)?

☒ Effective duration ☐ Macaulay duration ☐ Modified duration ☐ Other (specify):

PLUMBERS AND PIPEFITTERS NATIONAL PENSION FUND

AND SUBSIDIARY

CONSOLIDATED FINANCIAL STATEMENTS

AND

SUPPLEMENTAL SCHEDULES

FOR THE FISCAL YEARS ENDED JUNE 30, 2015 AND 2014

Plumbers and Pipefitters National Pension Fund and Subsidiary
Consolidated Financial Statements and Supplemental Schedules

For the Fiscal Years Ended June 30, 2015 and 2014

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Salter & Company, LLC
Certified Public Accountants

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REPORT OF INDEPENDENT CERTIFIED PUBLIC ACCOUNTANTS

Board of Trustees
Plumbers and Pipefitters National
Pension Fund

We have audited the accompanying consolidated financial statements of Plumbers and Pipefitters National Pension Fund and subsidiary, which comprise the consolidated statements of net assets available for benefits as of June 30, 2015 and 2014, and the related consolidated statements of changes in net assets available for benefits for the years then ended, and the related notes to the consolidated financial statements.

Management's Responsibility for the Financial Statements

The Plan's management is responsible for the preparation and fair presentation of these consolidated financial statements in accordance with U.S. generally accepted accounting principles; this includes the design, implementation and maintenance of internal control relevant to the preparation and fair presentation of consolidated financial statements that are free from material misstatement, whether due to fraud or error.

Auditor's Responsibility

Our responsibility is to express an opinion on these consolidated financial statements based on our audits. We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the consolidated financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the consolidated financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the consolidated financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the consolidated financial statements 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 entity's internal control. Accordingly, we express no such opinion. An audit includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the consolidated financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Salter & Company, LLC

Board of Trustees
Plumbers and Pipefitters National
Pension Fund

Opinion

In our opinion, based on our audits and the report of other auditors, the consolidated financial statements referred to above present fairly, in all material respects, information regarding the Fund's consolidated net assets available for benefits as of June 30, 2015, and changes therein for the year then ended and its consolidated financial status as of June 30, 2014, and changes therein for the year then ended in conformity with accounting principles generally accepted in the United States of America.

Report on Supplementary Information

Our audits were performed for the purpose of forming an opinion on the consolidated financial statements as a whole. The supplemental schedules, appearing in pages 24 to 66 are presented for the purpose of additional analysis and are not a required part of the basic consolidated financial statements. Such information is the responsibility of the Plan's management and was derived from and related directly to the underlying accounting and other records used to prepare the consolidated financial statements. The information has been subjected to the auditing procedures applied in the audits of the basic consolidated 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, which insofar as it relates to Diplomat Properties Limited Partnership, is based on the report of other auditors, such information is fairly stated in all material respects in relation to the consolidated financial statements as a whole.

Other Matters

We did not audit the financial statements of Diplomat Properties Limited Partnership, a wholly owned subsidiary, which statements reflect total assets of \$11,932,035 and \$561,994,045 as of June 30, 2015 and 2014, respectively, and total revenues of \$18,034,374 and \$146,531,326 for the years then ended. Those statements were audited by other auditors whose report has been furnished to us and, in our opinion insofar as it relates to the amounts included for Diplomat Properties Limited Partnership, is based solely on the report of the other auditors.

Salter & Company LLC

Bethesda, MD
March 28, 2016

PLUMBERS AND PIPEFITTERS NATIONAL PENSION FUND
AND SUBSIDIARY

CONSOLIDATED STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
AS OF JUNE 30, 2015 AND 2014

	June 30, 2015	2014
<u>ASSETS</u>		
<u>Investments, at Fair Value</u>		
Temporary	\$ 93,113,173	\$ 93,522,279
Government and Agencies		
Notes and Bonds	182,579,999	202,559,022
Corporate and Other Notes and Bonds	337,690,261	334,564,733
Common and Preferred Stocks	2,219,807,440	2,480,989,789
Mutual And Other Funds	1,665,314,908	905,793,684
Real Estate Funds	485,312,876	438,368,447
Partnerships	498,669,771	502,605,079
Property and Improvements - Hollywood, Florida	-	525,500,000
Investment Contract with Insurance Company	1,682,789	1,625,883
<u>Total Investments</u>	<u>\$ 5,484,171,217</u>	<u>\$ 5,485,528,916</u>
Investments on Loan	(433,499,331)	(578,111,643)
Investments on Hand	<u>\$ 5,050,671,886</u>	<u>\$ 4,907,417,273</u>
<u>Securities Lending</u>		
Investments on Loan	\$ 433,499,331	\$ 578,111,643
Cash Collateral Held for Securities on Loan	444,370,409	593,222,455
Obligations to Refund Collateral	(444,370,409)	(593,222,455)
<u>Net Investments on Loan</u>	<u>\$ 433,499,331</u>	<u>\$ 578,111,643</u>
<u>Receivables</u>		
Employer Contributions and Reciprocals	\$ 47,226,278	\$ 55,090,550
Withdrawal Liability (Net)	2,585,232	3,346,367
Interest and Dividends	9,200,232	12,497,448
Securities Sold	3,403,880	7,076,425
Other	378,844	11,117,358
<u>Total Receivables</u>	<u>\$ 62,794,466</u>	<u>\$ 89,128,148</u>
<u>Prepaid Expenses and Deposits</u>	<u>\$ 1,411,069</u>	<u>\$ 393,718</u>
<u>Inventories and other Assets</u>	<u>\$ -</u>	<u>\$ 7,784,449</u>
<u>Property and Equipment (Net of</u>		
<u>Depreciation and Amortization)</u>	<u>\$ 7,682,249</u>	<u>\$ 7,981,764</u>
<u>Cash</u>	<u>\$ 44,539,992</u>	<u>\$ 49,909,751</u>
<u>TOTAL ASSETS</u>	<u><u>\$ 5,600,598,993</u></u>	<u><u>\$ 5,640,726,746</u></u>
<u>LIABILITIES</u>		
Reciprocal Payments	\$ 2,677	\$ 306,472
Securities Purchased	14,449,911	3,456,967
Trade Creditors	9,442,951	26,928,417
Others	1,875,727	1,623,997
Advance Deposits - Conferences and Rooms	-	4,761,755
<u>TOTAL LIABILITIES</u>	<u><u>\$ 25,771,266</u></u>	<u><u>\$ 37,077,608</u></u>
<u>NET ASSETS AVAILABLE FOR BENEFITS</u>	<u><u>\$ 5,574,827,727</u></u>	<u><u>\$ 5,603,649,138</u></u>

See notes to consolidated financial statements.

PLUMBERS AND PIPEFITTERS NATIONAL PENSION FUND
AND SUBSIDIARY

CONSOLIDATED STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE
FOR BENEFITS FOR THE FISCAL YEARS ENDED JUNE 30, 2015 AND 2014

	Fiscal Year Ended June 30, 2015	2014
<u>ADDITIONS</u>		
<u>Investment Income</u>		
Net Appreciation or (Depreciation) in Fair Value of Investments, etc.	\$ 122,194,073	\$ 704,784,652
Dividends	39,057,467	44,090,095
Interest	29,991,959	39,504,596
Commissions Recovered	172,001	140,548
Rental Income (Net of Expenses)	8,402,346	77,389,970
	<u>\$ 199,817,846</u>	<u>\$ 865,909,861</u>
Less:		
Investment Expenses	\$ 18,331,843	\$ 19,770,030
	<u>\$ 181,486,003</u>	<u>\$ 846,139,831</u>
<u>Contributions</u>		
Employer Contributions and Reciprocal (Net)	\$ 366,973,881	\$ 365,158,473
Withdrawal Liability (Net)	671,251	1,986,453
	<u>\$ 367,645,132</u>	<u>\$ 367,144,926</u>
 <u>TOTAL ADDITIONS</u>	 <u>\$ 549,131,135</u>	 <u>\$ 1,213,284,757</u>
 <u>DEDUCTIONS</u>		
Benefits Paid Directly to Participants	\$ 550,401,045	\$ 531,159,502
Administrative Expenses	27,532,781	71,709,209
Merger Expenses	18,720	-
	<u>\$ 577,952,546</u>	<u>\$ 602,868,711</u>
 <u>TOTAL DEDUCTIONS</u>	 <u>\$ 577,952,546</u>	 <u>\$ 602,868,711</u>
 <u>NET (DECREASE)/INCREASE</u>	 <u>\$ (28,821,411)</u>	 <u>\$ 610,416,046</u>
 <u>NET ASSETS AVAILABLE FOR BENEFITS:</u>		
Beginning of Year	\$ 5,603,649,138	\$ 4,993,233,092
 End of Year	 <u>\$ 5,574,827,727</u>	 <u>\$ 5,603,649,138</u>

See notes to consolidated financial statements.

PLUMBERS AND PIPEFITTERS NATIONAL PENSION FUND
AND SUBSIDIARY

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS
JUNE 30, 2015 AND 2014

Note A Description of Entities

Plumbers and Pipefitters National Pension Fund

The following brief description of Plumbers and Pipefitters National Pension Fund (Plan) is provided for general information purposes only. Participants should refer to the Plan Booklet for more complete information.

1. The Plan is a defined benefit pension plan. It is subject to provisions of the Employee Retirement Income Security Act of 1974 (ERISA). The Plan is funded by participating employers' contributions to the Plan in accordance with Collective Bargaining Agreements.
2. The Plan Provides normal, reduced, early retirement, deferred, disability, vested, surviving spouse pensions, and severance or death benefits.

Diplomat Properties Limited Partnership

Diplomat Properties Limited Partnership (the Partnership) is a Delaware operating limited partnership formed on September 26, 1997 for the purpose of acquiring, redeveloping and managing the Diplomat Hotel and Convention Center (the Hotel), The Diplomat Landings and The Diplomat Country Club and Spa (the Country Club), collectively, the Resort, located in Hollywood and Hallandale, Florida.

The original partners of the Partnership were the United Association of Journeymen and Apprentices of the Plumbers and Pipe Fitting Industry of the United States and Canada (UA) as limited partner with a 99% interest; and Diplomat Properties, LLC., a wholly-owned subsidiary of UA as general partner with a 1% interest. On October 7, 1997, the UA assigned and transferred its limited partner interest to the Plumbers and Pipefitters National Pension Fund as well as its ownership interest in the general partner.

On October 1, 1997, the Partnership purchased the existing Diplomat Hotel and Country Club (DHCC) for a total purchase price of \$40 million. The DHCC was subsequently razed for construction of the Resort.

The Partnership agreement sets forth the basis for determining capital contributions, allocations and distributions to the partners including allocation of profit and loss, special allocations for federal income tax purposes and distribution of net cash flow of the Partnership.

On August 28, 2014, the Partnership sold substantially all of its assets. The assets were sold for \$535.5 million, subject to various credits to the purchase price applied including an adjusted net operating income sharing credit of \$10.0 million, resulting in the net purchase price of \$525.5 million. A true-up to the various credits took place with the purchaser of assets within 180 days of the closing date. \$10.0 million of the sales proceeds were placed into an indemnity escrow for 365 days following the closing date. The purchaser had various rights under the purchase & sale agreement to file claims against the escrow. The indemnity escrow funds were released to the seller on August 28, 2015.

The Partnership terminates on December 31, 2017, unless sooner terminated pursuant to the provisions in the Partnership agreement.

PLUMBERS AND PIPEFITTERS NATIONAL PENSION FUND
AND SUBSIDIARY

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS
JUNE 30, 2015 AND 2014

Note B Summary of Significant Accounting Policies

Basis of Accounting

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

Basis of Consolidation

The consolidated financial statements include the accounts of Plumbers and Pipefitters National Pension Fund and its wholly-owned subsidiary, Diplomat Properties Limited Partnership. All significant transactions and balances between the entities have been eliminated.

Use of Estimates

The preparation of financial statements in conformity with accounting principles generally accepted in the United States requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

The fair value of Diplomat Properties Limited Partnership property and improvements may differ significantly from the price at which it could be sold to a willing buyer at a particular point in time. Accordingly, the current value of the property and improvements, as reflected on the accompanying consolidated statements of net assets available for benefits, does not necessarily represent the liquidation value of the property and improvements. It is the opinion of management that the total value of the property and improvements included in the accompanying consolidated statements of net assets available for benefits represents its fair value.

Determination of estimated current value involves inherent uncertainty and subjectivity because the actual current value of real estate can be determined only by negotiation between the parties in an arm's-length sale transaction. Such differences could be material to the consolidated financial statements.

Foreign Currency Translation

The accounting records of the Fund are maintained in U.S. dollars. The market value of foreign securities, currency holdings, and other assets and liabilities are recorded in the books and records of the Fund after translation to U.S. dollars based on the exchange rates on that day. The cost of each security is determined using historical exchange rates. Income and withholding taxes are translated at prevailing exchange rates when accrued or incurred. The Fund does not isolate that portion of realized or unrealized gains or losses resulting from changes in the foreign exchange rate on investments from fluctuations arising from changes in the market prices of the securities. Such gains and losses are included with the net realized and unrealized gain or loss on investments.

PLUMBERS AND PIPEFITTERS NATIONAL PENSION FUND
AND SUBSIDIARY

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS
JUNE 30, 2015 AND 2014

Note B Summary of Significant Accounting Policies (Continued)

Foreign Currency Translation (Continued)

Net realized gains and losses of foreign currency transactions represent net realized exchange gains or losses on closed foreign currency contracts and disposition of foreign currencies.

Forward Currency Contracts

The Fund has engaged in forward currency contracts, which are agreements between two parties to buy and sell currencies at a set price on a future date, to protect against a decline in value relative to the U.S. dollar of the currencies in which its portfolio securities are denominated or quoted. When the contract is closed, the Fund records a realized gain or loss equal to the difference between the value of the contract at the time it was opened and the value at the time it was closed. The Fund could be exposed to risk if the value of the currency changes unfavorably, if the counterparties to the contracts are unable to meet the terms of their contracts or if the Fund is unable to enter into a closing position.

Payment of Benefits

Benefit payments to participants are recorded upon distribution.

Property and Equipment

Property and equipment are stated at cost, less accumulated depreciation or amortization computed on the straight-line method.

The following is a summary of fixed assets - at cost, less accumulated depreciation:

	As of June 30,	
	2015	2014
Building and Improvements	\$ 11,238,063	\$ 11,230,257
Office Furniture and Furnishings	1,311,732	1,311,161
Data Processing Equipment	11,148,674	10,989,226
Office Equipment	452,007	452,007
	<u>\$ 24,150,476</u>	<u>\$ 23,982,651</u>
Less: Accumulated Depreciation	<u>16,468,227</u>	<u>16,000,887</u>
Total	<u>\$ 7,682,249</u>	<u>\$ 7,981,764</u>

PLUMBERS AND PIPEFITTERS NATIONAL PENSION FUND
AND SUBSIDIARY

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS
JUNE 30, 2015 AND 2014

Note B Summary of Significant Accounting Policies (Continued)

Contributions and Reciprocals (Net)

Contributions paid from Contractors Under Union Agreements and Reciprocals Received, less Reciprocals Paid (Net) for the fiscal years ended June 30, 2015 and 2014, is comprised of the following:

	Year Ended June 30,	
	2015	2014
Contributions from Contractors	\$ 358,207,062	\$ 351,737,429
Reciprocal Receipts	<u>29,717,063</u>	<u>31,617,475</u>
	\$ 387,924,125	\$ 383,354,904
Deduct:		
Reciprocal Payments	<u>20,950,244</u>	<u>18,196,431</u>
	<u>\$ 366,973,881</u>	<u>\$ 365,158,473</u>

Inventories

Inventories, consisting of food and beverage, as well as operating supplies and equipment are valued at the lower of cost or market. Cost is determined using an first-in, first-out method of accounting. The carrying amount of inventories approximate fair value due to the nature of the inventory components, which turn over quickly.

Advertising Costs

Diplomat Properties Limited Partnership's policy is to expense advertising costs as incurred. For the years ended June 30, 2015 and 2014, advertising costs totaled \$1,362,412 and \$9,999,281, respectively, and are included in marketing in the consolidating schedule of administrative expenses.

Subsequent Events

Subsequent events were evaluated through March 28, 2016, which is the date the financial statements were available to be issued.

PLUMBERS AND PIPEFITTERS NATIONAL PENSION FUND
AND SUBSIDIARY

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS
JUNE 30, 2015 AND 2014

Note C Actuarial Present Value of Accumulated Plan Benefits

The actuarial present value of accumulated plan benefits as of July 1, 2014 and 2013, was as follows:

	July 1, 2014	2013
Vested Benefits	\$ 7,406,437,750	\$ 7,261,773,067
Non-vested Benefits	<u>159,140,766</u>	<u>126,656,898</u>
Total Actuarial Present Value	<u>\$ 7,565,578,516</u>	<u>\$ 7,388,429,965</u>

The factors which affected the change in the actuarial present value of accumulated plan benefits from the preceding to the current benefit information date are as follows:

<u>Factors</u>	Change in Actuarial Present Value of Accumulated Plan Benefits
Increase in Benefit Levels due to Increase in Benefit Accruals	\$ 117,759,653
Benefits Accumulated, Net Experience Gain or Loss, Changes in Data	35,932,169
Benefits Paid	(531,159,502)
Changes in Assumptions	11,210,400
Interest	<u>543,405,831</u>
	<u>\$ 177,148,551</u>

The actuarial present value of accumulated plan benefits is determined by an actuary from Cheiron and is that amount that results from applying actuarial assumptions to adjust the accumulated plan benefits to reflect the time value of money (through discounts for interest) and the probability of payments (by means of decrements such as for death, disability, withdrawal or retirement) between the valuation date and expected date of payment. The significant actuarial assumptions used in the valuations as of July 1, 2014 and 2013, were:

PLUMBERS AND PIPEFITTERS NATIONAL PENSION FUND
AND SUBSIDIARY

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS
JUNE 30, 2015 AND 2014

Note C Actuarial Present Value of Accumulated Plan Benefits (Continued)

Healthy life mortality rates - RP-2000 Combined Mortality (Blue Collar)

Disabled life mortality rates - RP-2000 Disabled Mortality

Disability rates - 60.45% of the rates used under the Old Age Survivors and Disability Insurance Program.

Rate of turnover - Sample termination rates before retirement:

Age	Rate %
25	9.38
30	8.75
35	8.13
40	7.60
45	7.10
50	6.60
55	6.10
60	5.60
63	0.00

Rate of Retirement - starting at age 55 with a 10% retirement probability moving in increments up to age 70 which has a 100% retirement probability.

Percent married - Social Security awards in 1972

Spouse's Age - Assumed that husbands are three years older than their spouses.

Net investment return - 7.50%

Net investment return for current liability - 3.59% for current valuation; 3.61% for prior valuation.

Annual service credits - 1.02 service credits per year per active employee included in the valuation.

PLUMBERS AND PIPEFITTERS NATIONAL PENSION FUND
AND SUBSIDIARY

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS
JUNE 30, 2015 AND 2014

Note C Actuarial Present Value of Accumulated Plan Benefits (Continued)

Administration expenses - \$19,500,000

Actuarial value of assets - Market value of assets less a portion of the actual market value returns that are more or less than expected returns. The gain or loss for the year equals the market value net investment income less the expected return on an actuarial value based on the net investment return assumption and 25% of the gain or loss is recognized each year for four years. However, the 2009 investment loss is recognized at a rate of 10% per plan year due to funding relief. If necessary, the actuarial value is further adjusted to be within 20% of market value. If such a further adjustment is necessary, the gain or loss in the following year is adjusted by an amount equal to the further adjustment, but of the opposite sign.

Actuarial cost method - Unit Credit Cost Method.

PRA 2010 Funding Relief - The Fund's Board of Trustees elected funding relief under 431(b)(8) of the Code and 304(b)(8) of ERISA, specifically:

The "special amortization rule", which allowed the Plan's investment losses for the plan year ended June 30, 2009 to be separately amortized over 29 years, whereas they were previously required to be amortized over 15 years. The "special asset valuation rule" in determining the actuarial value of plan assets which allows the Plan to recognize the 2009 loss over 10 years, at 10% per year. Prior to the relief, this investment loss would be recognized over four years, or 25% per year.

The foregoing actuarial 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 accumulated plan benefits. If the Plan terminates, certain benefits under the Plan are insured by PBGC.

Note D Retirement Plans

The Plan has a retirement plan for employees. The total pension expense for the fiscal years ended June 30, 2015 and 2014, was \$0 and \$700,000, respectively, which includes amortization of past services cost over 30 years. Actuarial valuations prepared by an actuary of Cheiron as of July 1, 2014 showed the following:

	<u>July 1, 2014</u>
Actuarial Present Value of	
Accumulated Plan Benefits:	
Vested	\$ 23,404,252
Non-vested	763,698
	<u>\$ 24,167,950</u>

The net investment return rate used in determining the actuarial present value of accumulated plan benefits was 7.5%.

PLUMBERS AND PIPEFITTERS NATIONAL PENSION FUND
AND SUBSIDIARY

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS
JUNE 30, 2015 AND 2014

Note D Retirement Plans (Continued)

The Plan has also established an employee savings plan under which employees may defer a portion of their annual compensation, pursuant to Section 401 (k) of the Internal Revenue Code. All employees are eligible to participate and may contribute a percentage of their income on a pretax basis up to the dollar limits set by law. There is no matching employer contribution.

Diplomat Properties Limited Partnership (the Company) contributes to the Starwood Corporation Savings and Retirement Plan (the Plan), which is qualified under Section 401(k) of the Internal Revenue Code. The Plan is a defined contribution plan covering employees of the Company who are 21 years of age and have completed three months of service at the Company. An employee may contribute from 1 to 50% of his/her pay, subject to IRS limits. Employees are eligible for Company matching of contributions upon the completion of 1,000 hours of service during the first twelve months of employment or upon the commencement of a plan year, following the year the employee commences service. The Company matches 100% of the first 1% of the employee's gross income contributed and 50% of any additional amounts contributed up to a maximum of 6% of the employee's gross income. All contributions are invested at the direction of the employee in one or more investment funds. The amount charged to earnings for this plan during the years ended June 30, 2015 and 2014 was approximately \$64,898 and \$444,211.

Note E Investments

The following table presents the fair value of investments held at June 30, 2015 and 2014.

	Fair Value June 30,	
	2015	2014
<u>Investments at Fair Value</u>		
Temporary Investments	\$ 93,113,173	\$ 93,522,279
Government and Agencies		
Notes and Bonds	182,579,999	202,559,022
Corporate and Other Notes		
And Bonds	337,690,261	334,564,733
Mutual And Other Funds	1,665,314,908	905,793,684
Common and Preferred Stocks	2,219,807,440	2,480,989,789
Real Estate Funds	485,312,876	438,368,447
Partnerships	498,669,771	502,605,079
Investment Contracts with		
Insurance Company	1,682,789	1,625,883
Property and Improvements,		
Hollywood, Florida	-	525,500,000
<u>Total Fair Value of Investments</u>	<u>\$ 5,484,171,217</u>	<u>\$ 5,485,528,916</u>

PLUMBERS AND PIPEFITTERS NATIONAL PENSION FUND
AND SUBSIDIARY

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS

JUNE 30, 2015 AND 2014

Note E Investments (Continued)

The fair value of individual investments that represent 5 percent or more of the Plan's net assets at June 30, 2015, are as follows:

AFL-CIO Equity Index Fund	\$ 335,614,366
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During the years ended June 30, 2015 and 2014, the Plan's investments and other assets listed below (including investments bought, sold, as well as held during the year) appreciated/(depreciated) in value by \$122,194,073 and \$704,784,652, respectively as follows:

Net Appreciation (Depreciation) in Fair Value

<u>Investments at Fair Value</u>	Year Ended June 30,	
	2015	2014
Temporary Investments	\$ 214,701	\$ 1,154,055
Government and Agencies		
Notes and Bonds	(8,548,705)	5,044,658
Corporate and Other Notes		
and Bonds	(17,308,789)	15,681,851
Common and Preferred Stocks	127,394,377	453,952,102
Mutual And Other Funds	10,443,314	144,598,481
Real Estate Funds	47,502,384	40,545,239
Partnerships	(33,713,097)	26,608,417
Property and Improvements,		
Hollywood, Florida	(3,790,112)	17,199,849
	\$ 122,194,073	\$ 704,784,652

Note F Funding Policy

The Plan is financed by employer contributions in accordance with the formulas set forth in the Collective Bargaining Agreements. The Plan met the minimum funding requirements of ERISA as of June 30, 2015 and 2014.

Note G Plan Termination

1. Right to Terminate - The Trustees shall have the right to discontinue or terminate the Plan in whole or in part. The rights of all affected Participants to benefits accrued to the date of termination, partial termination or discontinuance to the extend funded as of such date shall be nonforfeitable.

PLUMBERS AND PIPEFITTERS NATIONAL PENSION FUND
AND SUBSIDIARY

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS
JUNE 30, 2015 AND 2014

Note G Plan Termination (continued)

2. Priorities of Allocation - In the event of termination, assets then remaining in the Plan after providing for any administrative expenses, shall be allocated among the Pensioners, Beneficiaries, and Participants, in the following order:

(a) First, in the case of benefits payable as a pension:

(i) In the case of the pension of a Participant or Beneficiary which was in pay status as of the beginning of the 3-year period ending on the termination date of the Plan, to each such pension, based on the provisions of the Plan (as in effect during the 5-year period ending on such date) under which such pension would be the least. The lowest pension in pay status during the 3-year period shall be considered the pension in pay for such period.

(ii) In the case of a pension of a Participant or Beneficiary which would have been in pay status as of the beginning of such 3-year period if the Participant had retired if his pension has commenced (in the standard form) as of the beginning of such period, to each such pension based on the provisions of the Plan (as in effect during the 5-year period ending on such date) under which the pension would be the least.

(b) Second, to all other benefits (if any) of the individuals under the Plan guaranteed under Title IV of ERISA.

(c) Third, to all other vested benefits under this Plan.

(d) Fourth, to all other benefits under this Plan.

Note H Litigation

Based on advice of Fund Counsel there is no litigation either threatened or pending which would have a material adverse effect on the Fund's financial position.

Diplomat Properties Limited Partnership is subject to proceedings and other claims which arise in the ordinary course of its business. In the opinion of management, the amount of ultimate liability, if any, in excess of applicable insurance coverage, is not likely to have a material effect on the financial condition or results of operations. However, as the outcome of litigation or other legal claims is difficult to predict, changes in the estimated exposures could occur.

On March 19, 2007, DPLP signed a Settlement Agreement agreeing to pay \$725,000 to the Hallmark Condominium Association, Inc. on the date on which the City of Hollywood, Florida, issues a full building permit for the project contemplated on a site adjacent to the Hallmark Condominiums. As of June 30, 2014, the City of Hollywood has not issued a full building permit and no accrual has been recorded for the pending settlement. This contract expired on March 19, 2014.

PLUMBERS AND PIPEFITTERS NATIONAL PENSION FUND
AND SUBSIDIARY

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS
JUNE 30, 2015 AND 2014

Note I Significant Plan Amendments

None

Note J Income Tax Status

The Plan obtained its latest determination letter on January 30, 2013, in which the Internal Revenue Service stated that the Plan, as then designed, was in compliance with the applicable requirements of the Internal Revenue Code. The Plan has been amended since receiving the determination letter. However, the Plan administrator and the Plan's tax counsel believe that the Plan is designed and is currently being operated in compliance with the applicable requirements of the IRC.

Accounting principles generally accepted in the United States of America require plan management to evaluate tax positions taken by the Plan and recognize a tax liability if the plan has taken an uncertain position that more likely than not would not be sustained upon examination by the Internal Revenue Service. The Plan is subject to routine audits by taxing jurisdictions, however, there are currently no audits for any tax periods in progress. The plan administrator believes it is no longer subject to income tax examinations for the years prior to 2012.

Note K Commitments and Contingencies
Diplomat Properties Limited Partnership

On September 12, 2000, the Plan entered into an Independent Named Fiduciary Agreement whereby the Fiduciary (Gallagher Fiduciary Advisors, LLC. (GFA), an assigned of Independent Fiduciary Services, Inc. (IFS) is to manage the Partnership and its assets with respect to the construction, use, and sale of the Partnership assets.

Since May 1, 2006, Capital Hotel Management (CHM) has served as a qualified professional asset manager (QPAM) and is responsible for the supervision and direction of management and administration of the day-to-day operations of the Partnership. The term of the agreement between GFA and CHM is indefinite, requiring written notice from either party for its termination. Prior to December 31, 2010 as its compensation for the services performed under the agreement, CHM received a base annual fee payable monthly in the amount of \$850,000 and an additional base fee of 20% of the increase over a base amount in annual income of the Partnership arising from the Hotel Property and the Country Club payable in arrears on an annual basis up to a maximum of \$400,000. In addition, CHM would have received an additional payment upon the sale of DPLP's assets or an increase in its base fee depending on the outcome of and GFA (then IFS) request for an Advisory Opinion from the Department of Labor.

PLUMBERS AND PIPEFITTERS NATIONAL PENSION FUND
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NOTES TO CONSOLIDATED FINANCIAL STATEMENTS
JUNE 30, 2015 AND 2014

Note K Commitments and Contingencies

Diplomat Properties Limited Partnership (Continued)

Effective December 1, 2010, GFA (then IFS) and CHM agreed that the request for an Advisory Opinion would be withdrawn. In accordance with the agreement, CHM would no longer be eligible for an additional payment upon the sale of DPLP's assets and CHM's base fee would be adjusted to \$1,700,000 annually. The adjustment was retroactive to May 1, 2006. The retroactive portion totaled \$3,966,667 which was included in asset management fees and other expense for the year ended June 30, 2011. Of that, \$1,500,000 was paid upon the execution of the 2nd Amendment and the balance shall be paid with interest in three equal installments on December 1, 2011, December 1, 2012 and December 1, 2013. CHM was also paid \$25,000 to defray costs associated with its participation in litigation in Note H. For the years ended June 30, 2015 and 2014, the total annual management fee accrued in connection with the agreement by and between the Partnership and CHM was \$349,635 and \$2,100,000, respectively, which is included in asset management fees and other expense in the accompanying consolidated statements of changes in net assets.

In addition, CHM is entitled to reimbursement of all third-party professional fees and expenses incurred as further defined in the agreement. During the twelve-month periods ended June 30, 2015 and 2014, the Partnership paid \$16,980 and \$17,524, respectively, to the CHM under this agreement. As of June 30, 2015 and 2014, there was an outstanding balance of \$0 and \$341,667, respectively, due to the CHM, which is included in accounts payable.

At June 30, 2015 the Plumbers and Pipefitters National Pension Fund had outstanding commitments to fund partnership investments as follows:

<u>Partnership Name</u>	<u>Total Commitment</u>	<u>Amount Funded</u>	<u>Outstanding Commitment</u>
GESD Investors, LP	\$ 10,000,000	\$ 9,943,661	\$ 56,339
Paladin Capital Partners Fund, LP	50,000,000	\$ 49,872,851	127,149
Potomac Energy Fund	26,000,000	25,924,198	75,802
Potomac Energy Fund II	36,099,135	36,046,135	53,000
Gerding Edlen Green Cities, LP	35,000,000	26,812,787	8,187,213
Harrison Street Real Estate Partners IV, LP	30,000,000	20,613,599	9,386,401
Mesirow Financial Real Estate Value Fund, LP	40,000,000	40,000,000	-
Mesirow Financial Real Estate Value Fund II, LP	50,000,000	8,918,014	41,081,986
Mesirow Financial Private Equity Partnership Fund VI, LP	100,000,000	13,000,000	87,000,000

PLUMBERS AND PIPEFITTERS NATIONAL PENSION FUND
AND SUBSIDIARY

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS
JUNE 30, 2015 AND 2014

Note L Securities Lending Program

The Trustees of the Plan have entered into an agreement with the bank that acts as custodian for the Plan's investments, which authorized the bank to lend securities held in the Plan's accounts to third parties. The bank must obtain collateral from the borrower in the form of cash, letters of credit issued by an entity other than the borrower, or acceptable securities. Both the collateral and the securities loaned are marked-to-market on a daily basis so that all loaned securities are more than fully collateralized at all times. In the event that the loaned securities are not returned by the borrower, the bank will, at its own expense, either replace the loaned securities or, if unable to purchase those securities on the open market, credit the Plan's accounts with cash equal to the fair value of the loaned securities.

The Plan receives 80% of the net revenue derived from all securities lending activities, and the bank receives the remainder of the net revenue. "Interest income" reported in the statement of changes in net assets available for benefits includes \$2,517,373 and \$1,981,920 earned by the Plan during the plan year ended June 30, 2015 and 2014, respectively, in connection with the securities lending program.

Although the Plan's securities lending activities are collateralized as described above, and although the terms of the securities lending agreement with the custodial bank require the bank to comply with government rules and regulations related to the lending of securities held by ERISA plans, the securities lending program involves both market and credit risk. In this context, market risk refers to the possibility that the borrower of securities will be unable to collateralize their loan upon a sudden material change in the fair value of the loaned securities or the collateral, or that the bank's investment of cash collateral received from the borrowers of the Plan's securities may be subject to unfavorable market fluctuations. Credit risk refers to the possibility that counterparties involved in the securities lending program may fail to perform in accordance with the terms of their contracts.

At June 30, 2015 and 2014, the fair value of securities loaned was \$ 433,499,331 and \$578,111,643, respectively, while the cash collateral held was \$444,370,409 and \$593,222,455, respectively. In accordance with Statement of Financial Accounting Standards No. 140 the value of the cash collateral held and a corresponding liability to return the collateral have been reported on the accompanying statement of net assets available for benefits.

Note M Other Risks and Uncertainties

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

PLUMBERS AND PIPEFITTERS NATIONAL PENSION FUND
AND SUBSIDIARY

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS
JUNE 30, 2015 AND 2014

Note M Other Risks and Uncertainties (Continued)

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

Note N 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 prices for identical assets or liabilities in active markets that the plan has the ability to access.

Level 2 - Inputs to the valuation methodology include:

- quoted prices for similar assets or liabilities in active markets;
- quoted prices for identical or similar assets or liabilities in inactive markets;
- inputs other than quoted prices that are observable for the asset or liability;
- inputs that are derived principally from or corroborated by observable market data by correlation or other means.

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

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

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

Following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodologies used at June 30, 2015 and 2014.

Corporate bonds: 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. When quoted prices are not available for identical or similar bonds, the bond is valued under a discounted cash flows approach that maximizes observable inputs, such as current yields of similar instruments, but includes adjustments for certain risks that may not be observable, such as credit and liquidity risks or a broker quote if available.

U.S. government securities: Valued using pricing models maximizing the use of observable inputs for similar securities.

PLUMBERS AND PIPEFITTERS NATIONAL PENSION FUND
AND SUBSIDIARY

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS
JUNE 30, 2015 AND 2014

Note N Fair Value Measurements (Continued)

Mutual Funds: Valued at the daily closing price as reported by the fund. Mutual funds held by the Plan are open-end 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 and Preferred stocks: Valued at the closing price reported on the active market on which the individual securities are traded.

Limited Partnerships: The fair values of limited partnerships recorded by the Plan are determined from financial statements received by the Plan from the limited partnerships or other entities in which the Plan has invested. Some of these financial statements are financial statements audited by independent accountants other than the Plan's independent auditors and some are unaudited financial statements.

Collective Trusts: Valued at the NAV of units of a bank collective trust. The NAV, as provided by the trustee, is used as a practical expedient to estimate fair value. The NAV is based on the fair value of the underlying investments held by the fund less its liabilities. This practical expedient is not used when it is determined to be probable that the fund will sell the investment for an amount different than the reported NAV. Participant transactions (purchased and sales) may occur daily. Were the Plan to initiate a full redemption of the collective trust, the investment adviser reserves the right to temporarily delay withdrawal from the trust in order to ensure that securities liquidations will be carried out in an orderly business manner.

The following table sets forth by level, within the fair value hierarchy, the Plan's assets at fair value as of June 30, 2015 and 2014.

	<u>Assets at Fair Value as of June 30, 2015</u>			
	<u>Level 1</u>	<u>Level 2</u>	<u>Level 3</u>	<u>Totals</u>
Temporary Investments	\$ 93,113,173	\$ -	\$ -	\$ 93,113,173
<u>Fixed Income</u>				
U.S. Government Agencies				
Notes and Bonds	104,694,314	64,557,044	13,328,641	182,579,999
Corporate Bonds	-	322,448,759	15,241,502	337,690,261
	<u>104,694,314</u>	<u>387,005,803</u>	<u>28,570,143</u>	<u>520,270,260</u>
Common and Preferred Stocks	2,180,892,102	-	38,915,338	2,219,807,440
Mutual and Other Funds	141,193,742	809,615,929	714,505,237	1,665,314,908
Real Estate Funds	-	-	485,312,876	485,312,876
Partnerships	-	187,691,888	310,977,883	498,669,771
Investment Contracts with				-
Insurance Company	-	-	1,682,789	1,682,789
Total Assets at Fair Value	<u>\$ 2,519,893,331</u>	<u>\$ 1,384,313,620</u>	<u>\$ 1,579,964,266</u>	<u>\$ 5,484,171,217</u>

PLUMBERS AND PIPEFITTERS NATIONAL PENSION FUND
AND SUBSIDIARY

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS
JUNE 30, 2015 AND 2014

Note N Fair Value Measurements (Continued)

	<u>Assets at Fair Value as of June 30, 2014</u>			
	<u>Level 1</u>	<u>Level 2</u>	<u>Level 3</u>	<u>Totals</u>
Temporary Investments	\$ 93,522,279	\$ -	\$ -	\$ 93,522,279
<u>Fixed Income</u>				
U.S. Government Agencies				
Notes and Bonds	91,061,990	100,455,977	11,041,055	202,559,022
Corporate Bonds	-	308,864,325	25,700,408	334,564,733
	<u>91,061,990</u>	<u>409,320,302</u>	<u>36,741,463</u>	<u>537,123,755</u>
<u>Common and Preferred Stocks</u>				
Consumer Discretionary	355,790,602	-	3,525,576	359,316,178
Consumer Staples	101,892,456	-	795,332	102,687,788
Energy	201,596,239	-	4,307,573	205,903,812
Financial	483,050,985	-	6,297,377	489,348,362
Health Care	289,544,990	-	5,683,100	295,228,090
Industrials	301,624,307	-	2,265,475	303,889,782
Information Technology	414,499,372	-	-	414,499,372
Materials	98,114,928	-	1,037,182	99,152,110
Telecommunication Services	47,990,347	-	-	47,990,347
Utilities	74,759,737	-	1,430,331	76,190,068
Other	73,102,581	-	13,681,299	86,783,880
	<u>2,441,966,544</u>	<u>-</u>	<u>39,023,245</u>	<u>2,480,989,789</u>
Mutual and Other Funds	56,059,808	192,311,546	657,422,330	905,793,684
Real Estate Funds	-	-	438,368,447	438,368,447
Partnerships	-	222,988,886	279,616,193	502,605,079
Property and Improvements				-
Hollywood, Florida	-	-	525,500,000	525,500,000
Investment Contracts with				
Insurance Company	-	-	1,625,883	1,625,883
Total Assets at Fair Value	<u>\$ 2,682,610,621</u>	<u>\$ 824,620,734</u>	<u>\$ 1,978,297,561</u>	<u>\$ 5,485,528,916</u>

PLUMBERS AND PIPEFITTERS NATIONAL PENSION FUND
AND SUBSIDIARY

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS
JUNE 30, 2015 AND 2014

Note N Fair Value Measurements (Continued)

The following table sets forth a summary of changes in the fair value of the Plan's level 3 assets for the year ended June 30, 2015:

	Government and Corporate Bonds and Equities	Mutual Funds and Real Estate Funds	Partnerships and Other Investments	Totals
<u>Level 3 Gains and Losses</u>				
Beginning balance, July 1, 2014	\$ 75,764,708	\$ 1,095,790,777	\$ 806,742,076	\$ 1,978,297,561
Realized gains (losses)	2,214,563	1,297,226	(5,166,132)	(1,654,343)
Unrealized gains (losses)	(1,390,547)	17,219,751	24,959,920	40,789,124
Purchases	27,565,633	90,000,000	46,007,352	163,572,985
Sales and settlements	(36,668,876)	(4,489,640)	(559,882,545)	(601,041,061)
Transfers in or out of Level 3	-	-	-	-
Ending balance, June 30, 2015	<u>\$ 67,485,481</u>	<u>\$ 1,199,818,114</u>	<u>\$ 312,660,671</u>	<u>\$ 1,579,964,266</u>

Gains and losses (realized and unrealized) included in changes in net assets for the period above are reported in net appreciation in fair value of investments in the statement of changes in net assets available for benefits.

Changes in Fair Value Levels

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

We evaluated 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 year ended June 30, 2015, there were no significant transfers between levels 2 and 3.

Quantitative Information about Significant Unobservable Inputs Used in Level 3 Fair Value Measurements

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 June 30, 2015, and the significant unobservable inputs and the ranges of values for those inputs:

<u>Instrument</u>	<u>Fair Value</u>	<u>Principal Valuation Technique</u>	<u>Significant Unobservable Inputs</u>	<u>Range of Significant Input Value</u>	<u>Weighted Average</u>
U.S. Government					
Bonds	\$ 13,328,641	Various	Various	Various	Various
Corporate bonds	\$ 15,241,502	Various	Various	Various	Various
Common stocks	38,915,338	Various	Various	Various	Various
Mutual funds	\$ 714,505,237	Various	Various	Various	Various
Real Estate funds	\$ 485,312,876	Various	Various	Various	Various
Limited partnerships and other invsts	\$ 312,660,672	Various	Various	Various	Various

PLUMBERS AND PIPEFITTERS NATIONAL PENSION FUND
AND SUBSIDIARY

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS

JUNE 30, 2015 AND 2014

Note N Fair Value Measurements (Continued)

In estimating fair value of the investments in level 3, the Board of Trustees may use third-party pricing sources or appraisers. In substantiating the reasonableness of the pricing data provided by third parties, the Board of Trustees evaluates a variety of factors including review of methods and assumptions used by external sources, recently executed transactions, existing contracts, economic conditions, industry and market developments, and overall credit ratings.

Fair Value of Investments that Calculate Net Asset Value

The following table summarizes investments measured at fair value based on net asset value (NAVs) per share as of June 30, 2015 and 2014, respectively.

<u>June 30, 2015</u>		<u>Fair Value</u>	<u>Unfunded</u> <u>Commitments</u>	<u>Redemption</u> <u>Frequency</u> <u>(if currently eligible)</u>	<u>Redemption</u> <u>Notice Period</u>
Real Estate Funds	\$	485,312,876	n/a	monthly	30 days
Limited Partnerships	\$	498,669,771	145,967,890	n/a	n/a
<u>June 30, 2014</u>		<u>Fair Value</u>	<u>Unfunded</u> <u>Commitments</u>	<u>Redemption</u> <u>Frequency</u> <u>(if currently eligible)</u>	<u>Redemption</u> <u>Notice Period</u>
Real Estate Funds	\$	438,368,447	n/a	monthly	30 days
Limited Partnerships	\$	502,605,079	86,825,215	n/a	n/a

The Plan's investment in the real estate funds category is comprised of several investments. Underlying assets in these funds primarily include publicly traded equity securities and fixed income securities and are valued at their Net Asset Values calculated by the fund sponsor and have monthly liquidity.

The Plan's investment in the limited partnership category consists of numerous individual investments. These investments seek to achieve long term-growth of capital consistent with risk reduction through diversification. These investments are subject to various restrictions on redemption and frequency.

Note O Pension Protection Act of 2006

Under ERISA, as amended by the Pension Protection Act of 2006 (PPA) the actuary of the Plan certified that the Plan is in endangered (Yellow Zone) status for the plan year beginning July 1, 2009. Based on the endangered status certification, the Plan's board of trustees developed and adopted a "Funding Improvement Plan" (FIP).

The Plan's board of trustees adopted the FIP on April 5, 2010. The FIP included four contribution rate increase options, from which parties to the collective bargaining agreements may choose when those collective bargaining agreements expire, if not sooner.

PLUMBERS AND PIPEFITTERS NATIONAL PENSION FUND
AND SUBSIDIARY

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS
JUNE 30, 2015 AND 2014

Note P Reconciliation of Financial Statement Amounts to Form 5500

In accordance with Sec. 2520.130-1(b)(3) of the Labor Regulations, the differences between the information in the financial statements and the information contained in Schedule H of Form 5500 are enumerated and explained, as follows:

Reconciliation of Other Receivables:

Interest and Dividend Receivable	
per Financial Statements	\$ 9,200,232
Securities Sold per Financial Statements	\$ 3,403,880
Other Receivables per Financial Statements	\$ 378,844
Total Line 1(b)(3)	<u>\$ 12,982,956</u>

Reconciliation of Buildings and Other Property

Used in Plan Operation:

Property and Equipment per Financial Statements	\$ 7,682,249
Prepaid Expenses and Deposits per Financial Statements	1,411,069
Total Line 1(e)	<u>\$ 9,093,318</u>

Note Q Non-Exempt Transactions with Party in Interest

Plumbers and Pipefitters National Pension Fund wholly owned subsidiary of Diplomat Properties Limited Properties, enterent into a Resort Operating Agreement with Starwood Hotels and Resorts Worldwide, Inc. (Starwood) to operate the Diplomat Resort Country Club, and spa. Under ERISA, Starwood is a party-in-interest and affiliates of Starwood are also parties-in-interest.

Form 5500, Schedule G disclosed 14 separate instances where Starwood or its affiliate entered into party-in-interest transactions with the Diplomat. The cost of these 14 transactions amounted to approximately \$52,225.

An exemption application has been filed with the Department of Labor.

PLUMBERS AND PIPEFITTERS NATIONAL PENSION FUND
ALEXANDRIA, VIRGINIA

SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES
AS OF JUNE 30, 2015

Form 5500, Schedule H, Line 4i

EIN: 52-6152779
Plan No. 001

(c) Description of investment, including maturity date, rate of interest, collateral, par or maturity value						
(a)	(b)				(d)	(e)
Identity of issuer, borrower, lessor or similar party	Description	Maturity Date	Rate of Interest		Cost	Current Value
<u>Short Term Investments</u>						
PNC Advantage Institutional MM Fd	Money market	N/A	N/A	74,542,947	\$ 74,542,947	\$ 74,542,947
Foreign Currencies	Money market	N/A	N/A	92,679,485	4,274,705	4,181,753
Dreyfus Capital Management Fund	Money market	N/A	N/A	6,025	6,025	6,025
Dreyfus Treasury Prime Cash Mgmt	Money market	N/A	N/A	7,886,779	7,876,620	7,886,779
United States Treasury Bills	Treasury Bill	7/23/15	DTD	4,500,000	4,496,256	4,496,256
United States Treasury Bills	Treasury Bill	08/20/15	DTD	1,500,000	1,499,462	1,499,462
United States Treasury Bills	Treasury Bill	11/12/15	DTD	500,000	499,951	499,951
Total Short Term Investments					\$ 93,195,966	\$ 93,113,173
<u>US Government & Agencies Notes and Bonds</u>						
Federal Home Loan Mortgage Corporation	Notes	04/15/20	Var	349,813	\$ 350,961	\$ 351,391
Federal Home Loan Mortgage Corporation	Notes	08/25/23	Var	866,809	866,809	868,794
Federal Home Loan Mortgage Corporation	Notes	05/01/26	7.500%	10,476	10,406	12,168
Federal Home Loan Mortgage Corporation	Notes	07/01/32	7.000%	32,539	33,683	39,316
Federal Home Loan Mortgage Corporation	Notes	09/01/32	7.000%	100,636	104,173	120,267
Federal Home Loan Mortgage Corporation	Notes	10/01/32	7.000%	95,952	99,326	116,179
Federal Home Loan Mortgage Corporation	Notes	11/01/32	7.000%	112,809	116,775	134,362
Federal Home Loan Mortgage Corporation	Notes	05/01/35	5.500%	394,469	427,136	444,050
Federal Home Loan Mortgage Corporation	Notes	07/01/39	5.500%	15,986	16,995	17,885
Federal Home Loan Mortgage Corporation	Notes	01/01/39	5.500%	936,303	1,065,191	1,054,183
Federal Home Loan Mortgage Corporation	Notes	10/15/42	3.000%	662,410	674,483	675,400
Federal Home Loan Mortgage Corporation	Notes	01/01/43	3.000%	1,821,313	1,876,237	1,816,322
Federal Home Loan Mortgage Corporation	Notes	06/01/44	3.500%	329,885	338,210	339,752
Federal National Mortgage Association	Notes	06/01/21	6.000%	1,328	1,387	1,419
Federal National Mortgage Association	Notes	10/01/22	6.000%	1,978	2,068	2,188
Federal National Mortgage Association	Notes	07/25/25	4.000%	329,264	356,943	356,284
Federal National Mortgage Association	Notes	01/01/29	6.000%	17,420	16,217	19,752
Federal National Mortgage Association	Notes	06/01/29	6.000%	34,993	32,577	39,693
Federal National Mortgage Association	Notes	11/01/29	7.000%	47,383	49,226	54,626
Federal National Mortgage Association	Notes	12/01/29	7.000%	885	1,058	1,057
Federal National Mortgage Association	Notes	08/01/32	7.000%	90,278	93,791	108,637
Federal National Mortgage Association	Notes	10/01/35	5.500%	61,795	65,146	69,528
Federal National Mortgage Association	Notes	10/01/35	5.500%	368,050	379,852	413,722
Federal National Mortgage Association	Notes	04/01/37	Var %	12,611	12,660	13,363
Federal National Mortgage Association	Notes	02/01/41	4.500%	302,704	328,339	328,095
Federal National Mortgage Association	Notes	10/25/41	2.500%	320,496	250,748	267,073
Federal National Mortgage Association	Notes	06/01/42	3.247%	195,900	203,061	204,141
Federal National Mortgage Association	Notes	04/01/43	3.000%	197,856	193,465	198,060
Federal National Mortgage Association	Notes	05/01/43	3.000%	104,314	103,147	104,438
Federal National Mortgage Association	Notes	06/01/43	3.000%	350,470	346,554	350,775
Federal National Mortgage Association	Notes	08/01/43	3.000%	247,119	241,684	247,221
Federal National Mortgage Association	Notes	08/01/43	3.000%	373,980	365,755	374,193
Federal National Mortgage Association	Notes	08/25/43	3.500%	614,031	645,860	648,282
Federal National Mortgage Association	Notes	04/01/45	5.500%	1,530,023	1,746,346	1,724,811
Fannie Mae	Notes	05/25/18	0.402%	226,568	226,507	226,953
Fannie Mae	Notes	12/25/17	0.442%	893,594	893,330	894,639
Fico Strips	Notes	11/30/17	Zero Cpn	3,745,000	2,547,802	3,660,288
Fico Strips	Notes	09/26/19	Zero Cpn	715,000	440,862	662,791
Fico Corporation	Notes	05/02/17	Zero Cpn	610,000	418,515	600,679
Financing Corporation	Bonds	10/15/19	Zero Cpn	610,000	548,274	563,036
Financing Corporation	Notes	07/15/20	Zero Cpn	550,000	485,885	497,783
FREMF Mortgage Trust	Notes	12/25/46	4.360%	280,000	275,901	292,354
FREMF Mortgage Trust	Notes	02/25/22	3.669%	570,000	567,555	570,000

PLUMBERS AND PIPEFITTERS NATIONAL PENSION FUND
ALEXANDRIA, VIRGINIA

SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES
AS OF JUNE 30, 2015

Form 5500, Schedule H, Line 4i

EIN: 52-6152779
Plan No. 001

		(c) Description of investment, including maturity date, rate of interest, collateral, par or maturity value			Plan No.	001	
(a)	(b)					(e)	
Identity of issuer, borrower, lessor or similar party	Description	Maturity Date	Rate of Interest		(d) Cost	Current Value	
<u>US Government & Agencies Notes and Bonds (continued)</u>							
Government National Mortgage Association	Bonds	12/15/23	7.000%	28,880 \$	29,661 \$	33,203	
Government National Mortgage Association	Bonds	09/15/28	7.500%	1,281	3,231	1,541	
Government National Mortgage Association	Bonds	10/15/29	7.500%	531	595	626	
Government National Mortgage Association	Bonds	11/15/29	7.000%	479	1	486	
Government National Mortgage Association	Bonds	02/20/34	5.500%	69,786	77,495	79,478	
Government National Mortgage Association	Bonds	01/15/37	5.500%	45,211	49,732	52,384	
Government National Mortgage Association	Bonds	12/15/38	6.000%	35,162	39,469	40,662	
Government National Mortgage Association	Bonds	07/20/41	4.500%	65,195	70,360	70,453	
Government National Mortgage Association	Bonds	03/20/42	4.000%	69,950	75,425	74,583	
Government National Mortgage Association	Bonds	12/20/43	5.000%	79,039	86,349	87,288	
Government National Mortgage Association	Bonds	04/20/44	2.000%	2,864,489	2,940,577	2,931,804	
United States Treasury Notes	Notes	01/15/16	0.375%	925,000	924,617	926,304	
United States Treasury Notes	Notes	06/30/16	0.500%	1,755,000	1,755,974	1,757,878	
United States Treasury Notes	Notes	07/31/16	Var%	2,595,000	2,595,537	2,595,597	
United States Treasury Notes	Notes	09/30/16	0.500%	361,000	361,749	361,480	
United States Treasury Notes	Notes	10/15/16	0.500%	1,665,000	1,667,022	1,669,429	
United States Treasury Notes	Notes	10/31/16	0.375%	350,000	349,236	349,783	
United States Treasury Notes	Notes	01/31/17	Var%	5,345,000	5,347,345	5,347,833	
United States Treasury Notes	Notes	02/28/17	0.500%	2,985,000	2,981,162	2,983,149	
United States Treasury Notes	Notes	03/31/17	0.500%	267,500	2,674,781	2,672,272	
United States Treasury Notes	Notes	04/30/17	Var%	630,000	630,102	629,943	
United States Treasury Notes	Notes	05/31/17	0.625%	524,700	524,003	524,616	
United States Treasury Notes	Notes	11/15/17	0.875%	1,005,000	1,007,354	1,006,889	
United States Treasury Notes	Notes	12/15/17	1.000%	575,000	578,743	577,473	
United States Treasury Notes	Notes	01/15/18	0.875%	755,000	755,233	755,234	
United States Treasury Notes	Notes	02/15/18	1.000%	1,540,000	1,543,656	1,544,574	
United States Treasury Bond	Bonds	03/15/18	1.000%	245,000	245,153	245,573	
United States Treasury Notes	Notes	03/31/18	2.750%	2,235,000	2,359,643	2,352,695	
United States Treasury Notes	Notes	05/15/19	3.125%	2,995,000	3,201,527	3,195,994	
United States Treasury Bond	Bonds	08/15/19	3.625%	780,000	852,152	849,100	
United States Treasury Notes	Notes	09/30/19	1.750%	6,650,000	7,613,274	7,422,906	
United States Treasury Notes	Notes	11/30/19	1.000%	5,335,000	5,265,012	5,218,324	
United States Treasury Notes	Notes	12/31/19	1.625%	3,295,000	3,308,970	3,308,641	
United States Treasury Notes	Notes	04/30/20	1.375%	12,820,000	12,700,931	12,679,749	
United States Treasury Notes	Notes	08/15/21	2.125%	925,000	951,260	935,406	
United States Treasury Notes	Notes	09/30/21	2.125%	460,000	474,914	464,600	
United States Treasury Notes	Notes	05/15/23	1.750%	810,000	792,359	783,489	
United States Treasury Notes	Notes	08/15/24	2.375%	2,870,000	2,851,381	2,885,469	
United States Treasury Notes	Notes	02/15/25	2.000%	3,270,000	3,155,230	3,177,001	
United States Treasury Notes	Notes	05/15/25	2.125%	1,350,000	1,322,420	1,325,538	
United States Treasury Notes	Notes	05/15/43	2.875%	3,015,000	2,676,026	2,873,205	
United States Treasury Notes	Notes	05/15/43	2.875%	12,480,000	10,852,138	11,893,066	
United States Treasury Notes	Notes	11/15/43	3.750%	2,385,000	2,456,035	2,682,743	
United States Treasury Notes	Notes	02/15/44	3.500%	3,170,000	3,391,133	3,485,257	
United States Treasury Notes	Notes	08/15/44	3.125%	1,015,000	1,049,690	1,016,665	
United States Treasury Notes	Notes	11/15/44	3.000%	2,875,000	3,107,006	2,812,325	
United States Treasury Notes	Notes	11/15/44	3.000%	1,460,000	1,546,014	1,428,172	
United States Treasury Notes	Notes	02/15/45	2.500%	2,450,000	2,219,145	2,156,196	
United States Treasury Notes	Notes	02/15/45	2.500%	1,105,000	973,526	972,488	
United States Treasury Notes	Notes	02/15/45	2.500%	8,545,000	7,949,522	7,520,284	
Buoni Poliennalidel Tes	Bonds	08/01/39	5.000%	2,965,000	3,929,260	4,244,613	
Korea Treasury Bond	Bonds	09/10/18	5.750%	3,499,000	3,426,991	3,510,897	
Korea Treasury Bond	Bonds	09/10/23	3.375%	1,132,400	1,079,322	1,088,916	

PLUMBERS AND PIPEFITTERS NATIONAL PENSION FUND
ALEXANDRIA, VIRGINIA

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Form 5500, Schedule H, Line 4i

EIN: 52-6152779
Plan No. 001

		(c) Description of investment, including maturity date, rate of interest, collateral, par or maturity value				
(a)	(b)				(d)	(e)
Identity of issuer, borrower, lessor or similar party	Description	Maturity Date	Rate of Interest		Cost	Current Value
<u>US Government & Agencies Notes and Bonds (continued)</u>						
Malaysian Government	Bonds	10/15/20	3.659%	3,860,000	\$ 1,082,626	\$ 1,025,638
Malaysian Government	Bonds	09/30/21	4.048%	2,865,000	882,029	768,930
Malaysian Government	Bonds	03/15/23	3.480%	4,460,000	1,380,560	1,143,961
Mex Bonos Desarr Fixed Rate	Bonds	05/31/29	8.500%	612,800	5,627,325	4,652,378
Mex Bonos Desarr Fixed Rate	Bonds	11/18/38	8.500%	483,200	4,479,620	3,682,950
Mex Bonos Desarr Fixed Rate	Bonds	11/13/42	7.750%	874,000	7,307,335	6,197,534
Neder Waterschapsbank	Bonds	02/14/18	Var	3,260,000	3,274,148	3,275,919
New South Wales Treasury Corporation	Bonds	08/20/24	5.000%	3,185,000	2,963,290	2,798,723
New Zealand Government	Bonds	05/15/21	6.000%	1,570,000	1,997,534	1,227,279
New Zealand Government	Bonds	03/15/19	5.000%	1,205,000	946,602	875,114
New Zealand Government	Bonds	04/15/23	5.500%	1,610,000	1,515,783	1,255,352
Noto Do Tesouro Nacional	Bonds	01/01/23	10.000%	11,145	4,646,724	3,161,502
Noto Do Tesouro Nacional	Bonds	01/01/21	10.000%	2,240	954,018	648,814
Poland Government Bond	Bonds	10/25/23	4.000%	1,400,000	452,375	394,234
Poland Government Bond	Bonds	10/25/20	5.250%	6,840,000	2,040,376	2,041,813
Queensland Treasury Corporation	Bonds	02/21/20	6.250%	3,945,000	4,280,566	3,505,461
Queensland Treasury Corporation	Bonds	07/21/22	6.000%	1,560,000	1,666,598	1,415,118
Republic Of South Africa	Bonds	03/31/21	6.750%	12,545,000	1,539,952	975,676
Republic Of South Africa	Bonds	02/28/41	6.500%	41,570,000	3,681,261	2,598,549
Republic Of South Africa	Bonds	02/28/48	8.750%	9,055,000	900,887	729,103
Swedish Export Credit	Bonds	11/09/17	0.611%	1,920,000	1,941,504	1,932,730
Swedish Export Credit	Bonds	06/12/17	Var	1,180,000	1,181,418	1,182,997
Total US Government & Agencies Notes and Bonds					\$ 189,382,874	\$ 182,579,999
<u>Corporate and Other Notes and Bonds</u>						
Abbvie, Incorporated	Notes	11/06/42	4.400%	320,000	\$ 327,558	\$ 302,778
Abbvie, Incorporated	Notes	11/06/22	3.200%	65,000	64,872	64,363
Abbvie, Incorporated	Notes	05/14/25	3.600%	625,000	623,906	617,744
Abbvie, Incorporated	Notes	05/14/35	4.500%	260,000	258,203	254,358
Abengoa Finance SAU	Notes	11/01/17	8.875%	195,000	203,775	202,800
ABN Amro Bank NV	Bonds	10/28/16	Var %	1,565,000	1,565,000	1,571,933
Acosta, Incorporated	Notes		n/a	105,000	105,753	105,000
Actavis Funding Services	Notes	06/15/24	3.850%	350,000	354,633	345,783
Actavis Funding Services	Notes	06/15/44	4.850%	425,000	420,300	410,036
Actavis Funding Services	Notes	03/15/22	3.450%	630,000	629,105	624,034
Actavis Funding Services	Notes	03/15/22	3.450%	473,000	472,328	468,521
Actavis Funding Services	Notes	03/15/25	3.800%	95,000	94,663	93,320
Actavis Funding Services	Notes	03/15/25	3.800%	241,000	240,144	236,739
Activision Blizzard	Notes	09/15/21	5.625%	996,000	1,030,535	1,043,310
ADT Corporation	Notes	07/15/17	2.250%	320,000	315,275	316,864
ADT Corporation	Notes	07/15/42	4.875%	300,000	246,100	229,500
Advantage Sales & Marketing	Term Loan	-	0.000%	102,323	102,525	102,323
Advantage Sales & Marketing	Term Loan	-	0.000%	2,419	2,410	2,419
Advantage Sales & Marketing	Term Loan	-	0.000%	743,750	739,488	743,750
Aecom Technology	Bonds	10/15/24	5.875%	615,000	627,700	623,456
Aercap Ireland Cap Limited	Notes	05/15/19	3.750%	900,000	900,000	889,875
Aercap Ireland Cap Limited	Notes	05/15/21	4.500%	590,000	590,000	592,950
Aetna, Incorporated	Bonds	03/15/19	2.200%	135,000	134,865	135,178
Alcoa, Incorporated	Notes	02/01/37	5.950%	20,000	21,400	19,950
Alcoa, Incorporated	Notes	10/01/24	5.125%	235,000	235,000	237,938
Alere, Incorporated	Notes	06/15/20	6.500%	345,000	356,513	355,350
Alere, Incorporated	Notes	07/01/23	6.375%	505,000	508,225	513,838
Allstate Corporation	Notes	06/15/23	3.150%	140,000	139,724	140,179

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Identity of issuer, borrower, lessor or similar party	Description	Maturity Date	Rate of Interest		Cost	Current Value
<u>Corporate and Other Notes and Bonds (continued)</u>						
Ally Auto Receivables Trust	Notes	02/15/17	0.480%	389,837 \$	389,804 \$	389,661
Ally Financial Inc	Notes	12/01/17	6.250%	750,000	804,559	800,625
Ally Financial Inc	Notes	03/15/20	8.000%	1,460,000	1,699,364	1,719,150
Ally Financial Inc	Notes	02/15/17	5.500%	150,000	157,125	156,375
Ally Financial Inc	Notes	09/30/24	5.125%	470,000	460,999	471,175
Ally Financial Inc	Notes	05/21/18	3.600%	620,000	616,509	620,775
Ally Financial Inc	Notes	06/17/19	1.340%	695,000	694,828	696,703
Altice SA	Notes	05/15/22	7.750%	1,060,000	1,087,906	1,025,550
Altice SA	Notes	02/15/25	7.625%	335,000	335,000	314,900
Altria Group, Incorporated	Notes	11/10/38	9.950%	359,000	545,645	578,076
Altria Group, Incorporated	Notes	01/31/24	4.000%	220,000	218,632	223,406
AMC Networks, Incorporated	Notes	07/15/21	7.750%	340,000	371,750	367,200
Amazon Com, Incorporated	Notes	12/05/24	3.800%	310,000	308,878	311,159
Amazon Com, Incorporated	Notes	12/05/44	4.950%	130,000	137,960	126,684
American Credit Acceptance	Bonds	04/16/18	1.450%	29,338	29,335	29,341
American Express Credit	Bonds	08/15/19	2.250%	460,000	459,719	460,773
American Express Credit	Bonds	12/15/21	0.521%	2,245,000	2,245,867	2,242,508
American Express Issuance Trust	Bonds	08/15/19	0.610%	220,000	221,057	220,640
American Municipal Power Ohio, Inc	Bonds	02/15/50	8.084%	170,000	251,411	250,010
Americredit Automobile Rec	Notes	03/09/20	2.670%	380,000	379,876	381,098
Americredit Automobile Rec	Notes	11/08/19	2.290%	515,000	515,901	521,118
Amerigas Finance LLC	Notes	05/20/22	7.000%	1,468,000	1,581,942	1,556,080
Amerigas Finance LLC	Notes	05/20/20	6.750%	775,000	801,169	815,688
Ameristar Casinos, Incorporated	Notes	04/15/21	7.500%	475,000	525,750	502,906
Amgen, Incorporated	Notes	11/15/41	5.150%	545,000	543,286	559,688
Amkor Technology, Incorporated	Notes	10/01/22	6.375%	265,000	261,413	268,313
Amsurg Corporation	Notes	07/15/22	5.625%	560,000	560,000	564,900
Anheuser Busch Inbev Worldwide, Inc.	Bonds	07/15/42	3.750%	140,000	128,289	123,606
Anna Merger, Incorporated	Bonds	10/01/22	7.750%	1,055,000	1,066,725	1,062,913
Apple, Incorporated	Notes	05/04/43	3.850%	265,000	251,949	241,198
Apple, Incorporated	Notes	05/13/45	4.375%	190,000	189,307	187,236
APX Group, Incorporated	Bonds	12/01/20	8.750%	1,490,000	1,525,600	1,341,000
Aramark Corporation	Notes	-	Var %	750,500	743,850	750,500
Arcelormittal	Notes	06/01/18	6.125%	320,000	325,135	340,800
Arcelormittal	Notes	10/15/39	7.500%	845,000	900,525	840,775
Arcelormittal	Notes	08/05/20	4.250%	678,000	675,239	708,510
Arcelormittal	Notes	06/01/20	5.125%	155,000	155,000	157,131
Arcelormittal	Notes	06/01/25	6.125%	225,000	225,000	224,298
Argos Merger, Incorporated	Bonds	03/15/23	7.125%	840,000	842,194	879,900
AT&T, Incorporated	Notes	08/15/41	5.550%	150,000	149,004	153,686
AT&T, Incorporated	Notes	03/11/24	3.900%	570,000	592,029	574,834
AT&T, Incorporated	Notes	05/15/25	3.400%	640,000	638,106	610,374
AT&T, Incorporated	Notes	05/15/35	4.500%	275,000	274,205	252,805
AT&T, Incorporated	Notes	05/15/46	4.750%	260,000	259,074	236,592
Avago Technologies	Bonds	-	0.000%	803,864	799,196	803,864
BAE Systems PLC	Notes	10/11/21	4.750%	545,000	544,444	597,080
Bank of America	Notes	05/01/18	5.650%	135,000	128,839	148,299
Bank Of America Corporation	Notes	08/01/16	6.500%	665,000	663,331	701,489
Bank Of America Corporation	Notes	01/11/23	3.300%	915,000	904,130	901,129
Bank Of America Corporation	Notes	04/01/19	Var %	630,000	630,000	631,153
Bank Of America Corporation	Bonds	08/26/24	4.200%	215,000	214,843	214,482
Bank Of America Corporation	Notes	01/22/25	4.000%	30,000	29,819	29,229
Bank Of America Corporation	Notes	01/22/25	4.000%	572,000	568,551	557,294

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Identity of issuer, borrower, lessor or similar party	Description	Maturity Date	Rate of Interest		Cost	Current Value
<u>Corporate and Other Notes and Bonds (continued)</u>						
Bank Of America Corporation	Notes	04/21/25	3.950%	255,000	\$ 254,446	\$ 245,613
Bank Of America Credit Card Trust	Notes	06/15/21	0.557%	1,520,000	1,520,000	1,519,088
Bank of New York Mellon	Notes	03/04/19	2.200%	270,000	269,700	271,139
Bank of New York Mellon	Notes	05/15/24	3.400%	805,000	804,589	809,460
Barclays PLC	Notes	03/16/25	3.650%	215,000	214,323	203,347
Barclays Bank PLC	Notes	12/09/16	Var %	1,020,000	1,020,000	1,020,643
Barclays Bank PLC	Notes	06/12/21	10.179%	630,000	847,583	834,687
Barclays Dryrock Issuance Trust	Notes	03/16/20	Var %	490,000	490,249	489,907
Barrick Gold Corporation	Notes	05/01/23	4.100%	359,000	338,116	349,799
Baxalta, Incorporated	Notes	06/23/22	3.600%	405,000	405,154	404,749
Bayer US Finance LLC	Notes	10/06/17	1.500%	535,000	534,642	537,306
BBVA Banco Continental	Notes	04/08/18	3.250%	245,000	243,591	248,369
Becton Dickinson & Company	Notes	12/15/19	2.675%	200,000	200,000	200,152
Berry Plastics Corp	Bonds	-	n/a	55,000	55,275	55,000
Berry Plastics Corp	Bonds	01/15/21	9.750%	2,805,000	3,049,351	3,073,999
Bev Pack Holdings	Bonds	12/15/16	5.625%	195,000	195,000	194,635
Bev Pack Holdings	Bonds	06/15/17	6.000%	460,000	463,680	460,000
BG Energy Capital	Notes	10/15/21	4.000%	425,000	421,643	450,866
BHP Billiton Finance USA Limited	Notes	09/30/23	3.850%	200,000	199,754	205,374
BMC Software Finance	Notes	-	n/a	269,268	265,893	269,268
Boston Scientific Corporation	Notes	10/01/18	2.650%	250,000	249,885	253,603
Boyd Acquisition	Bonds	02/15/18	8.375%	880,000	888,700	885,063
Burlington Northern Santa Fe	Notes	04/01/44	4.900%	55,000	58,585	56,943
Cabela's Master Credit Card Trust	Notes	10/15/19	1.900%	230,000	234,061	232,820
Cabela's Master Credit Card Trust	Notes	07/15/22	0.603%	362,000	362,679	361,276
California Resources Corporation	Bonds	01/15/20	5.000%	915,000	859,406	805,200
California Resources Corporation	Bonds	09/15/21	5.500%	645,000	628,238	561,279
California Resources Corporation	Bonds	11/15/24	6.000%	600,000	565,382	516,000
Calpine Corporation	Bonds	01/15/22	6.000%	235,000	236,099	248,513
Capital One Bank USA	Bonds	02/15/23	3.375%	835,000	836,728	811,102
Case New Holland, Incorporated	Notes	12/01/17	7.875%	1,115,000	1,246,121	1,220,925
Caterpillar Financial Services Corporation	Notes	08/20/21	2.750%	280,000	279,434	283,100
CBS Corporation	Notes	01/15/45	4.600%	315,000	310,908	281,263
CCO Holdings LLC Cap Corporation	Bonds	01/15/19	7.000%	246,000	261,571	255,533
CCO Holdings LLC Cap Corporation	Bonds	05/01/23	5.125%	115,000	114,313	111,838
Cedar Fair LP	Bonds	03/15/21	5.250%	580,000	582,650	595,950
Centurytel, Incorporated	Notes	09/15/39	7.600%	120,000	123,800	108,750
Centurylink, Incorporated	Notes	06/15/21	6.450%	801,000	863,727	807,007
Centurylink, Incorporated	Notes	04/01/20	5.625%	500,000	500,000	500,625
Centurylink, Incorporated	Notes	12/01/23	6.750%	240,000	240,000	240,751
Cequel Communications Holdings	Bonds	09/15/20	6.375%	600,000	617,307	595,950
Cequel Communications Holdings	Bonds	12/15/21	5.125%	212,000	210,624	192,524
Chase Issuance Trust	Bonds	04/15/19	Var	1,155,000	1,144,724	1,150,322
Chase Issuance Trust	Bonds	08/15/17	0.590%	255,000	255,269	255,000
Chase Issuance Trust	Bonds	10/16/17	0.540%	345,000	345,040	345,041
Chase Issuance Trust	Bonds	01/15/19	1.150%	300,000	299,946	300,621
Chase Issuance Trust	Bonds	04/15/21	0.521%	2,415,000	2,415,000	2,411,378
Chesapeake Energy Corporation	Notes	02/15/21	6.125%	275,000	280,331	258,500
Chesapeake Energy Corporation	Bonds	04/15/22	4.875%	1,685,000	1,656,826	1,461,738
Chesapeake Midstream PT	Bonds	07/15/22	6.125%	530,000	558,398	563,125
Chrysler GP	Bonds	06/15/21	8.250%	1,815,000	2,009,069	1,978,350
CHS/Community Health Systems	Bonds	11/15/19	8.000%	335,000	371,906	353,006
CHS/Community Health Systems	Bonds	08/15/18	5.125%	340,000	350,447	348,500

PLUMBERS AND PIPEFITTERS NATIONAL PENSION FUND
ALEXANDRIA, VIRGINIA

SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES
AS OF JUNE 30, 2015

Form 5500, Schedule H, Line 4i

EIN: 52-6152779
Plan No. 001

(c) Description of investment, including maturity date, rate of interest, collateral, par or maturity value						
(a)	(b)				(d)	(e)
Identity of issuer, borrower, lessor or similar party	Description	Maturity Date	Rate of Interest		Cost	Current Value
<u>Corporate and Other Notes and Bonds (continued)</u>						
CHS/Community Health Systems	Bonds	08/01/21	5.125%	305,000	\$ 305,000	\$ 310,719
CHS/Community Health Systems	Bonds	02/01/22	6.875%	545,000	550,908	574,975
Cit Group, Incorporated	Notes	04/01/18	6.625%	1,375,000	1,519,286	1,459,219
Cit Group, Incorporated	Notes	03/15/18	5.250%	575,000	617,906	594,406
Cit Group, Incorporated	Notes	05/15/17	5.000%	70,000	72,800	72,184
Cit Group, Incorporated	Notes	05/15/20	5.375%	295,000	316,276	307,538
Citigroup, Incorporated	Notes	02/19/19	3.875%	825,000	825,850	818,813
Citigroup, Incorporated	Notes	07/15/39	8.125%	375,000	565,489	538,260
Citigroup, Incorporated	Notes	01/14/22	4.500%	475,000	521,441	511,651
Citigroup, Incorporated	Notes	09/26/18	2.500%	305,000	303,664	308,434
Citigroup, Incorporated	Notes	03/10/17	Var	340,000	340,000	339,065
Citigroup, Incorporated	Bonds	03/26/25	3.875%	600,000	599,112	574,740
Citigroup, Incorporated	Notes	04/27/18	Var	810,000	810,000	807,530
Citigroup, Incorporated	Bonds	06/10/25	4.400%	1,170,000	1,165,226	1,165,636
Citibank Credit Card Issuance	Bonds	09/10/18	0.610%	625,000	625,000	626,244
Citizens Communications Company	Notes	08/15/31	9.000%	1,068,000	1,067,318	971,880
Clear Channel Communications	Bonds	10/15/27	7.250%	355,000	282,079	276,900
Clear Channel Communications	Bonds	06/15/18	6.875%	225,000	201,926	203,625
Clear Channel Communications	Bonds	12/15/19	9.000%	60,000	60,481	57,180
Clear Channel Communications	Bonds	03/01/21	11.250%	1,556,000	1,635,374	1,511,265
Clear Channel Communications	Bonds	1/15/2018	10.000%	380,000	366,016	305,900
Clear Channel Worldwide	Bonds	03/15/20	7.625%	645,000	654,912	672,413
Clear Channel Worldwide	Bonds	11/15/22	6.500%	145,000	143,550	148,625
Clear Channel Worldwide	Bonds	11/15/22	6.500%	945,000	979,909	983,981
CNH Equipment Trust	Bonds	06/15/17	0.490%	43,291	43,289	43,291
Coca-Cola CO/The	Notes	11/26/18	2.375%	190,000	189,751	192,679
Columbia HCA Healthcare	Notes	06/15/25	7.690%	760,000	731,813	862,600
Columbia Healthcare, Incorporated	Bonds	12/01/27	7.050%	100,000	74,000	104,500
Comcast Corporation	Notes	08/15/35	4.400%	540,000	539,671	536,204
Commscope Holdings, Incorporated	Bonds	06/01/20	6.625%	155,000	159,263	160,813
Commscope, Incorporated	Bonds	06/15/21	5.000%	145,000	145,000	141,375
Commscope, Incorporated	Bonds	06/15/24	5.500%	195,000	195,000	189,638
Commscope Tech Finance	Bonds	06/15/25	6.000%	360,000	360,000	358,650
Communications Sales	Bonds	10/15/23	8.250%	540,000	528,823	530,550
Conagra Foods, Incorporated	Notes	01/25/18	1.900%	40,000	40,000	39,404
Concho Resources, Incorporated	Notes	04/01/23	5.500%	190,000	197,460	190,000
Conoco Phillips Company	Bonds	11/15/34	4.150%	280,000	279,885	270,808
Consol Energy, Incorporated	Bonds	04/15/22	5.875%	1,435,000	1,426,962	1,219,750
Cons Edison Company of New York	Bonds	03/15/44	4.450%	350,000	349,706	345,321
Constellation Brands, Incorporated	Notes	05/01/23	4.250%	105,000	105,440	103,425
Constellation Brands, Incorporated	Notes	11/15/19	3.875%	125,000	125,000	126,875
Constellation Brands, Incorporated	Notes	11/15/24	4.750%	190,000	196,434	190,475
Corp Andina De Fomento	Notes	01/29/18	Var	1,350,000	1,350,000	1,355,819
CPS Auto Trust	Bonds	02/15/19	1.310%	378,513	378,506	378,456
Credit Suisse New York	Notes	04/27/18	1.700%	895,000	895,152	888,762
Crestwood Midstream Partnerships	Bonds	04/01/23	6.250%	855,000	880,088	889,200
Crown Castle International Corporation	Notes	04/15/22	4.875%	380,000	385,523	383,800
CSC Holdings, Inc.	Notes	07/15/18	7.625%	330,000	368,520	361,350
Cumulus Media Holdings	Notes	05/01/19	7.750%	1,085,000	1,071,437	995,488
Daimler Finance NA LLC	Bonds	08/01/18	2.375%	385,000	384,045	390,355
Daimler Finance NA LLC	Bonds	03/10/17	1.125%	330,000	329,815	328,175
Davita, Incorporated	Bonds	08/15/22	5.750%	300,000	314,512	318,000
Davita Healthcare Partners	Bonds	07/15/24	5.125%	335,000	335,000	329,349

PLUMBERS AND PIPEFITTERS NATIONAL PENSION FUND
ALEXANDRIA, VIRGINIA

SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES
AS OF JUNE 30, 2015

Form 5500, Schedule H, Line 4i

EIN: 52-6152779
Plan No. 001

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Identity of issuer, borrower, lessor or similar party	Description	Maturity Date	Rate of Interest		Cost	Current Value
<u>Corporate and Other Notes and Bonds (continued)</u>						
Davita Healthcare Partners	Bonds	05/01/25	5.000%	285,000 \$	285,000 \$	274,313
DCP Midstream LLC	Notes	03/15/20	5.350%	135,000	135,731	138,777
DCP Midstream LLC	Notes	09/30/21	4.750%	170,000	167,669	167,977
DCP Midstream LLC	Notes	12/01/17	2.500%	250,000	243,525	241,975
DCP Midstream LLC	Notes	04/01/44	5.600%	270,000	249,900	240,813
Denbury Resources, Incorporated	Bonds	07/15/23	4.625%	2,060,000	1,924,073	1,730,400
Deutsche Bank AG	Bonds	02/13/17	Var	1,590,000	1,599,306	1,587,615
Deutsche Bank AG	Bonds	05/30/17	1.350%	345,000	344,879	342,689
Deutsche Telekom Int Finance	Bonds	03/06/17	2.250%	445,000	442,495	450,140
Devon Energy Corporation	Notes	07/15/41	5.600%	155,000	173,085	162,277
Devon Energy Corporation	Notes	05/15/22	3.250%	165,000	164,023	163,079
Devon Energy Corporation	Notes	06/15/45	5.000%	574,000	566,968	566,658
Dexia Credit Local SA	Bonds	06/05/18	Var	3,175,000	3,175,000	3,173,127
Digital Realty Trust LP	Bonds	07/01/22	3.950%	1,415,000	1,404,189	1,412,071
Directv Holdings Financial	Bonds	08/15/40	6.000%	395,000	389,703	409,911
Dish DBS Corporation	Notes	06/01/21	6.750%	395,000	433,953	411,788
Dish DBS Corporation	Notes	07/15/17	4.625%	155,000	161,350	159,650
Dish DBS Corporation	Notes	04/01/18	4.250%	565,000	571,610	574,888
Dish DBS Corporation	Notes	05/01/20	5.125%	1,025,000	1,022,897	1,036,531
Dish DBS Corporation	Notes	11/15/24	5.875%	870,000	871,719	835,748
DJO Finance LLC	Notes	06/15/21	8.125%	885,000	886,306	911,550
DJO Finance LLC	Notes	-	n/a	101,500	102,478	101,500
Dominion Resources, Incorporated	Notes	08/15/16	1.950%	140,000	139,966	141,082
Donnelley RR & Sons	Notes	06/15/20	7.625%	1,000,000	996,881	1,125,000
Donnelley RR & Sons	Notes	03/15/19	8.250%	1,160,000	1,180,134	1,328,200
Donnelley RR & Sons	Notes	02/15/22	7.000%	170,000	170,000	182,750
Donnelley RR & Sons	Notes	11/15/23	6.500%	300,000	300,247	309,750
Donnelley RR & Sons	Notes	04/01/24	6.000%	275,000	275,000	276,375
Dow Chemical Company	Notes	11/15/22	3.000%	535,000	525,723	514,681
D.R. Horton, Incorporated	Bonds	08/15/23	5.750%	870,000	880,983	920,025
Dryrock Issuance Trust	Bonds	12/16/19	0.510%	200,000	200,226	200,000
Duke Energy	Notes	08/16/30	8.125%	90,000	100,712	100,769
Dynegy Finance, Incorporated	Bonds	11/01/19	6.750%	245,000	246,320	254,922
Eastman Chemical Company	Notes	01/15/20	2.700%	310,000	309,352	308,996
Eastman Chemical Company	Notes	10/15/44	4.650%	920,000	894,763	871,599
ECAF Limited	Bonds	06/15/40	3.473%	510,000	510,000	510,000
Ecopetrol SA	Bonds	06/26/26	5.375%	355,000	352,614	351,450
Eldorado Resorts LLC	Bonds	06/15/19	8.625%	185,000	194,019	192,863
Embarq Corporation	Notes	06/01/36	7.995%	672,000	753,430	745,046
EMD Finance LLC	Bonds	03/19/18	1.700%	265,000	264,955	264,992
EMD Finance LLC	Bonds	03/19/20	2.400%	305,000	304,985	303,292
EMD Finance LLC	Bonds	03/19/20	2.400%	1,240,000	1,239,938	1,233,056
Encana Corporation	Bonds	11/15/41	5.150%	335,000	332,618	308,997
Energizer Holdings, Incorporated	Notes	05/19/21	4.700%	345,000	350,738	349,278
Energizer Holdings, Incorporated	Notes	05/24/22	4.700%	105,000	106,038	105,292
Endo Finance LLC	Bonds	07/15/19	7.000%	405,000	423,149	419,985
Endo Finance LLC	Bonds	01/15/22	7.250%	185,000	196,862	196,562
Endo Finance LLC	Bonds	01/15/23	5.375%	1,125,000	1,125,212	1,110,938
Endo Finance LLC	Bonds	07/15/23	6.000%	470,000	470,000	480,575
Energy Transfer Partners	Bonds	10/01/20	4.150%	480,000	479,179	493,325
Energy Transfer Equity	Bonds	10/15/20	7.500%	530,000	569,050	597,575
Energy Transfer Equity	Bonds	01/15/24	5.875%	385,000	392,700	399,245
Ensco PLC	Notes	03/15/21	4.700%	325,000	343,138	331,045

PLUMBERS AND PIPEFITTERS NATIONAL PENSION FUND
ALEXANDRIA, VIRGINIA

SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES
AS OF JUNE 30, 2015

Form 5500, Schedule H, Line 4i

EIN: 52-6152779
Plan No. 001

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(a)	(b)	(c)	(d)	(e)	(f)
Identity of issuer, borrower, lessor or similar party	Description	Maturity Date	Rate of Interest	Cost	Current Value
<u>Corporate and Other Notes and Bonds (continued)</u>					
Ensco PLC	Notes	10/01/24	4.500%	276,000	\$ 271,913
Ensco PLC	Notes	10/01/44	5.750%	770,000	779,833
Ensco PLC	Notes	03/15/25	5.200%	180,000	179,320
Enterprise Products	Bonds	03/15/44	4.850%	371,000	382,182
Enterprise Products	Bonds	10/15/54	4.950%	130,000	127,863
Envision Healthcare Corporation	Bonds	07/01/22	5.125%	320,000	320,000
EP Enrgy/EP Finance, Incorporated	Bonds	05/01/20	9.375%	572,000	620,492
Erste Abwicklungsanstalt Emtn	Notes	6/7/2016	Var	800,000	801,464
ESC Energy Conversion	Notes	-	3.000%	7,408,000	799,176
Exco Resources Inc	Notes	09/15/18	7.500%	1,480,000	1,374,796
Exco Resources Inc	Notes	04/15/22	8.500%	595,000	597,894
Exelon Corporation	Notes	06/15/25	3.950%	235,000	234,518
Export-Import Bank Korea	Bonds	05/12/17	Var	2,230,000	2,233,841
Export-Import Bank Korea	Bonds	08/14/17	Var	2,085,000	2,089,764
Family Tree Escrow LLC	Bonds	03/01/23	5.750%	620,000	620,000
FCA US LLC	Term Loan	-	n/a	104,457	104,326
Ferrellgas LP	Bonds	01/15/22	6.750%	850,000	859,025
First Data Corporation	Notes	01/15/21	12.625%	2,503,000	2,821,245
First Data Corporation	Notes	06/15/19	7.375%	380,000	389,470
First Data Corporation	Notes	08/15/21	11.750%	269,000	269,000
First Data Corporation	Notes	01/15/21	11.250%	276,000	281,708
First Data Corporation	Notes	06/15/21	10.625%	520,000	520,000
Flagship Credit Auto Trust	Bonds	04/16/18	1.320%	131,689	131,674
Flextronics Intl LTD	Bonds	02/15/23	5.000%	425,000	419,939
Florida Power Corporation	Notes	11/15/42	3.850%	70,000	69,778
Florida State Hurricane Catastrophe	Bonds	07/01/20	2.995%	1,120,000	1,120,000
FMG Resources	Bonds	03/01/22	9.750%	190,000	193,597
Ford Credit Auto Owner Trust	Bonds	12/15/16	0.580%	28,091	28,120
Ford Credit Auto Owner Trust	Bonds	07/15/26	2.150%	360,000	359,872
Ford Credit Auto Owner Trust	Bonds	11/15/25	2.260%	535,000	534,867
Ford Credit Floorplan Master	Bonds	09/15/18	1.500%	215,000	214,954
Ford Credit Floorplan Master	Bonds	08/15/19	1.400%	455,000	454,870
Ford Motor Company	Notes	07/16/31	7.450%	130,000	165,750
Ford Motor Credit Company	Notes	05/15/18	5.000%	200,000	221,946
Ford Motor Credit Company	Notes	05/09/16	1.700%	325,000	324,688
Ford Motor Credit Company	Notes	11/04/19	2.597%	340,000	340,000
Ford Motor Credit Company	Notes	01/09/22	3.219%	210,000	210,000
Ford Motor Credit Company	Notes	01/09/18	Var	515,000	515,000
Ford Motor Credit Company	Notes	03/27/17	Var	600,000	600,000
Ford Motor Credit Company	Notes	06/15/18	Var	945,000	945,000
Freescale Semiconductor	Bonds	01/15/22	6.000%	445,000	447,165
Freescale Semiconductor	Term Loan	12/31/49	4.250%	255,592	256,634
Fresenius Med Care US	Notes	09/15/18	6.500%	750,000	798,452
Fresenius Med Care US	Notes	07/31/19	5.625%	585,000	607,976
Fresenius Med Care US	Notes	01/31/22	5.875%	300,000	323,650
Fresenius Med Care US	Notes	10/15/24	4.750%	310,000	313,987
Gannett Company, Incorporated	Notes	09/01/18	7.125%	705,000	734,923
Gannett Company, Incorporated	Bonds	07/15/20	5.125%	445,000	438,619
Gannett Company, Incorporated	Notes	10/15/19	5.125%	760,000	752,297
Gannett Company, Incorporated	Bonds	09/15/21	4.875%	85,000	83,751
Gannett Company, Incorporated	Bonds	09/15/24	5.500%	60,000	59,423
GCB 144A Cequel	Bonds	09/15/20	6.375%	600,000	-
GE Equipment Transportation LLC	Bonds	09/25/17	0.920%	330,000	329,984

PLUMBERS AND PIPEFITTERS NATIONAL PENSION FUND
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Identity of issuer, borrower, lessor or similar party	Description	Maturity Date	Rate of Interest		Cost	Current Value
<u>Corporate and Other Notes and Bonds (continued)</u>						
General Elec Cap Corporation	Notes	03/11/44	4.500%	280,000 \$	326,950 \$	284,365
General Elec Cap Corporation	Notes	02/11/21	5.300%	345,000	365,517	387,928
General Motors Acceptance Corporation	Bonds	11/01/31	8.000%	268,000	346,388	341,700
George Washington Univer	Bonds	09/15/22	3.485%	230,000	230,000	233,708
Gilead Sciences, Incorporated	Bonds	04/01/24	3.700%	350,000	349,436	357,644
GLP Capital LP	Notes	11/01/18	4.375%	220,000	222,304	225,775
GLP Capital LP	Notes	11/01/20	4.875%	2,010,000	2,048,031	2,045,175
GLP Capital LP	Notes	11/01/23	5.375%	335,000	335,000	344,213
Goldman Sachs Group, Incorporated	Notes	11/15/18	Var	3,225,000	3,269,075	3,253,574
Goldman Sachs Group, Incorporated	Notes	11/29/23	Var	555,000	555,000	564,080
Goldman Sachs Group, Incorporated	Bonds	04/23/20	2.600%	429,000	430,240	426,851
Goldman Sachs Group, Incorporated	Notes	07/27/21	5.250%	860,000	861,746	955,047
Goldman Sachs Group, Incorporated	Notes	05/22/17	Var	590,000	590,000	589,988
Goodyear Tire TL	Bonds	03/01/21	6.500%	215,000	215,000	227,631
Graton Economic Development Auth	Bonds	09/01/19	9.625%	1,430,000	1,532,658	1,542,112
Halcon Resources Corporation	Bonds	02/01/20	8.625%	445,000	461,231	439,438
HCA, Incorporated	Notes	03/15/24	5.000%	665,000	667,282	676,638
HCA, Incorporated	Notes	10/15/19	4.250%	515,000	515,000	527,231
HCA, Incorporated	Notes	02/01/25	5.375%	265,000	265,000	269,320
HCA, Incorporated	Notes	02/15/20	6.500%	630,000	701,431	704,025
HCA, Incorporated	Notes	05/01/23	4.750%	105,000	105,491	106,313
HJ Heinz Company	Bonds	07/15/45	5.200%	235,000	234,074	240,833
HJ Heinz Company	Bonds	07/15/22	3.500%	220,000	219,481	220,517
HJ Heinz Company	Bonds	07/15/22	3.500%	505,000	503,808	506,187
Hologic Incorporated	Bonds	07/15/22	5.250%	275,000	275,000	280,844
Home Depot, Incorporated	Bonds	06/01/22	2.625%	250,000	249,080	245,878
Home Depot, Incorporated	Bonds	06/01/22	2.625%	650,000	647,608	639,282
Honda Auto Receivables Owner Trust	Bonds	09/21/16	0.410%	107,423	107,415	107,401
HSBC Holdings PLC	Notes	09/15/37	6.500%	610,000	490,837	736,099
HSBC Holdings PLC	Bonds	03/30/22	4.000%	325,000	322,881	340,265
HSBC Holdings PLC	Bonds	03/14/44	5.250%	290,000	286,845	300,808
Hughes Satellite Systems	Notes	06/15/19	6.500%	443,000	489,515	480,655
Humana Inc	Bonds	10/01/24	3.850%	350,000	349,535	348,600
Huntsman International	Bonds	11/15/22	5.125%	145,000	145,250	142,825
Huntsman International LLC	Bonds	03/15/21	8.625%	993,000	1,138,999	1,045,053
Huntsman International LLC	Bonds	11/15/20	4.875%	590,000	604,256	588,525
IAC/Interactive Corporation	Bonds	11/30/18	4.875%	310,000	310,000	319,688
Iasis Healthcare	Bonds	05/15/19	8.375%	1,530,000	1,609,628	1,583,550
Icahn Enterprises Financial	Bonds	03/15/17	3.500%	1,075,000	1,080,356	1,081,719
IHS, Incorporated	Bonds	11/01/22	5.000%	665,000	664,225	660,844
Infor US, Incorporated	Bonds	05/15/22	6.500%	890,000	900,013	905,575
Infor Software Parent	Bonds	05/01/21	7.125%	439,000	439,995	440,098
Inmarsat Finance PLC	Bonds	05/15/22	4.875%	555,000	550,510	535,575
Integra Telecom	Bonds	-	n/a	881	870	881
Intelsat Luxembourg SA	Notes	06/01/21	7.750%	665,000	671,663	555,275
Intelsat Luxembourg SA	Notes	06/01/23	8.125%	310,000	311,277	257,300
Intelsat Jackson Holdings	Bonds	8/1/2023	5.500%	215,000	215,000	190,383
International Lease Finance Corporation	Notes	05/15/19	6.250%	1,310,000	1,394,824	1,416,438
International Lease Finance Corporation	Notes	08/15/22	5.875%	85,000	93,606	91,800
International Lease Finance Corporation	Notes	09/01/17	8.875%	755,000	876,370	843,713
International Lease Finance Corporation	Notes	01/15/22	8.625%	710,000	852,338	866,200
International Lease Finance Corporation	Notes	04/15/18	3.875%	290,000	282,488	291,450
International Paper Company	Notes	09/15/35	5.000%	305,000	302,831	298,802

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<u>Corporate and Other Notes and Bonds (continued)</u>								
	Identity of issuer, borrower, lessor or similar party							
	Ipalco Enterprises, Incorporated	Notes	05/01/18	5.000%	255,000	\$ 265,073	\$ 269,025	
	Iron Mountain Inc	Notes	10/01/19	7.750%	650,000	699,275	679,250	
	Iron Mountain Inc	Notes	08/15/21	8.375%	211,000	234,017	217,858	
	Iron Mountain Inc	Notes	08/15/24	5.750%	1,230,000	1,204,863	1,230,775	
	Isle of Capri Casinos	Bonds	06/15/20	8.875%	390,000	415,883	421,200	
	Isle of Capri Casinos	Bonds	03/15/21	5.875%	540,000	553,600	554,850	
	Jaguar Holding Co/Merger	Bonds	12/01/19	9.500%	565,000	617,310	601,725	
	JP Morgan Chase & Company	Notes	01/15/18	6.000%	1,155,000	1,121,459	1,272,233	
	JP Morgan Chase & Company	Notes	09/10/24	3.875%	785,000	778,186	772,369	
	JP Morgan Chase & Company	Notes	01/23/20	2.250%	450,000	449,533	442,206	
	JP Morgan Chase Bank National	Bonds	10/01/17	6.000%	500,000	558,322	545,175	
	Kinder Morgan Energy Partners	Notes	09/01/24	4.250%	290,000	286,653	282,440	
	Kinder Morgan Energy Partners	Notes	06/01/25	4.300%	720,000	717,106	695,081	
	Kinder Morgan Energy Partners	Notes	06/01/25	4.300%	590,000	587,628	569,580	
	Kommunalbanken AS	Bonds	03/27/17	Var	1,096,000	1,107,224	1,102,160	
	Kommunalbanken AS	Bonds	02/20/18	Var	2,062,000	2,070,321	2,069,320	
	Kommunalbanken AS	Bonds	05/02/17	Var	734,000	734,741	735,072	
	Kraft Foods, Incorporated	Notes	02/09/40	6.500%	105,000	132,285	123,435	
	Kraft Foods, Incorporated	Notes	06/06/22	3.500%	115,000	113,965	115,282	
	Kratos Defense & Sec	Bonds	05/15/19	7.000%	305,000	301,846	277,931	
	Kroger Company	Notes	11/01/21	2.950%	165,000	164,947	163,944	
	Laredo Petroleum, Incorporated	Notes	05/01/22	7.375%	195,000	202,447	205,238	
	Laredo Petroleum, Incorporated	Notes	01/15/22	5.625%	120,000	112,650	118,800	
	Lennar Corporation	Notes	12/15/17	4.750%	400,000	418,389	416,000	
	Lennar Corporation	Notes	11/15/22	4.750%	625,000	601,231	614,063	
	Level 3 Communications TL B3 1L	Bonds	-	Var	908,218	908,980	908,218	
	Level 3 Financing, Incorporated	Bonds	07/15/20	8.625%	575,000	604,638	614,503	
	Liberty Interactive LLC	Notes	07/15/29	8.500%	305,000	342,363	329,400	
	Linn Energy LLC Financial Corporation	Notes	11/01/19	6.250%	2,550,000	2,489,898	1,995,375	
	Linn Energy LLC Linn Eney Financial	Notes	04/15/20	8.625%	1,400,000	1,455,020	1,148,294	
	Linn Energy LLC Linn Eney Financial	Notes	02/01/21	7.750%	1,212,000	1,258,470	942,330	
	Linn Energy LLC Linn Eney Financial	Notes	05/15/19	6.500%	90,000	73,125	72,675	
	Linn Energy LLC Linn Eney Financial	Notes	09/15/21	6.500%	585,000	530,164	438,750	
	Lockheed Martin Corporation	Notes	09/15/21	3.350%	460,000	458,758	473,446	
	Lstar Commercial Mortgage Trust	Bonds	01/20/41	4.205%	155,000	154,994	157,897	
	LYB International Finance BV	Bonds	03/15/44	4.875%	340,000	336,025	330,337	
	Lynx I Corporation	Notes	04/15/21	5.375%	337,500	337,500	347,625	
	Macquarie Group Limited	Bonds	01/31/17	Var	1,160,000	1,160,000	1,165,394	
	Macquarie Bank Limited	Notes	10/27/17	Var	850,000	850,000	851,530	
	Macys Retail Holdings, Incorporated	Bonds	01/15/42	5.125%	55,000	54,916	55,248	
	Mallinckrodt Fin/SB	Bonds	04/15/20	4.875%	275,000	275,813	279,826	
	Mallinckrodt Fin/SB	Bonds	04/15/25	5.500%	360,000	358,400	349,200	
	Manitowoc Companu Incorporated	Notes	11/01/20	8.500%	440,000	468,333	464,750	
	Marathon Petroleum Corporation	Notes	09/15/24	5.000%	480,000	481,373	434,899	
	Markwest Energy Partners	Bonds	07/15/23	4.500%	855,000	865,387	837,900	
	Markwest Energy Partners	Bonds	12/01/24	4.875%	410,000	416,663	400,775	
	Markwest Energy Partners	Bonds	06/01/25	4.875%	225,000	222,809	219,937	
	Masco Corporation	Notes	03/15/22	5.950%	290,000	320,450	325,525	
	Mass Mutual Life Insurance Company	Notes	06/01/39	8.875%	225,000	265,983	337,239	
	Master Resecuritization Trust	Bonds	06/27/36	6.000%	426,772	396,898	377,245	
	Medtronic, Incorporated	Notes	03/15/24	3.625%	405,000	404,214	415,182	
	Medtronic, Incorporated	Bonds	03/15/20	2.500%	370,000	369,626	370,618	
	Merck & Company, Incorporated	Notes	02/10/22	2.350%	380,000	379,487	367,532	

PLUMBERS AND PIPEFITTERS NATIONAL PENSION FUND
ALEXANDRIA, VIRGINIA

SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES
AS OF JUNE 30, 2015

Form 5500, Schedule H, Line 4i

EIN: 52-6152779
Plan No. 001

(c) Description of investment, including maturity date, rate of interest, collateral, par or maturity value						
(a)	(b)				(d)	(e)
Identity of issuer, borrower, lessor or similar party	Description	Maturity Date	Rate of Interest		Cost	Current Value
<u>Corporate and Other Notes and Bonds (continued)</u>						
Metropcs Wireless, Incorporated	Notes	11/15/20	6.625%	195,000	\$ 204,038	\$ 202,800
MGM Resorts International	Bonds	02/01/19	8.625%	630,000	747,256	711,900
MGM Resorts International	Notes	03/15/23	6.000%	145,000	150,021	146,842
Microsoft Corporation	Bonds	07/01/42	5.000%	395,000	390,458	361,109
Midamerican Energy Company	Notes	10/15/36	5.800%	750,000	573,068	897,173
Mohegan Tribal Gaming	Bonds	09/15/18	11.000%	335,000	274,983	335,419
Mohegan Tribal Gaming	Bonds	09/01/21	9.750%	1,550,000	1,619,869	1,623,625
Mohegan Tribal Gaming	Term Loan	11/19/19	n/a	809,063	809,063	809,063
Momentive Performance	Bonds	10/24/21	3.880%	300,000	271,213	269,250
Monsanto Company	Bonds	07/15/64	4.700%	355,000	351,745	307,320
Morgan Stanley	Notes	01/09/17	5.450%	145,000	148,844	153,657
Morgan Stanley	Notes	09/08/26	4.350%	400,000	400,784	391,952
Morgan Stanley	Notes	02/25/23	3.750%	435,000	432,895	439,846
Morgan Stanley	Notes	05/13/19	7.300%	100,000	114,477	117,648
Morgan Stanley	Notes	01/27/45	4.300%	150,000	148,875	140,160
Morgan Stanley	Notes	01/27/45	4.300%	280,000	277,900	261,632
MPT Oper Partnership	Bonds	05/01/24	5.500%	880,000	915,346	906,400
MSCI, Incorporated	Bonds	11/15/24	5.250%	505,000	519,950	511,313
MTR Gaming Group, Incorporated	Bonds	08/01/19	11.500%	830,000	936,069	882,913
Municipal Elec Authority GA	Bonds	04/01/57	6.637%	275,000	299,377	329,772
Municipal Elec Authority GA	Bonds	04/01/57	6.637%	540,000	541,134	631,076
Mylan, Incorporated	Notes	03/28/19	2.550%	285,000	284,299	282,521
Navient Corporation	Notes	03/25/21	5.875%	485,000	481,988	484,694
Navistar International Group	Term Loan	08/17/17	Var	308,213	310,612	311,680
NCUA Guaranteed Notes	Notes	10/29/20	2.650%	386,630	385,864	390,825
NCR Corporation	Notes	12/15/21	5.875%	115,000	120,556	118,450
NCL Corporation	Bonds	11/15/19	5.250%	340,000	340,000	348,075
New York Life Insurance	Notes	11/15/39	6.750%	165,000	214,460	216,536
New York Life Global Funding	Bonds	01/02/19	2.100%	265,000	264,695	266,275
Newfield Exploration Co	Notes	01/30/22	5.750%	1,247,000	1,327,162	1,265,705
Nielsen Finance LLC	Bonds	04/15/22	5.000%	1,370,000	1,371,300	1,342,600
Nissan Master Owner Trust	Bonds	02/15/18	0.501%	590,000	590,530	590,000
Noble Energy Inc	Bonds	03/01/41	6.000%	185,000	183,772	195,850
Noble Energy Inc	Bonds	12/15/21	4.150%	400,000	405,515	416,708
Northrop Grumman Corporation	Notes	08/01/23	3.250%	1,090,000	1,084,136	1,067,851
Northwestern Mutual Life	Notes	03/30/40	6.063%	365,000	420,695	436,463
Nova Chemicals Corporation	Bonds	05/01/25	5.000%	185,000	187,241	185,694
NRG Energy, Incorporated	Notes	09/01/20	8.250%	1,470,000	1,596,544	1,539,825
NRG Energy, Incorporated	Notes	01/15/18	7.625%	445,000	484,364	487,831
NRG Energy, Incorporated	Notes	05/15/21	7.875%	1,740,000	1,841,722	1,853,100
NRG Energy, Incorporated	Notes	07/15/22	6.250%	865,000	865,000	877,975
Nuance Communications	Bonds	08/15/20	5.375%	585,000	593,775	587,925
Numericalbe Group SA	Bonds	05/15/19	4.875%	925,000	925,000	915,750
Numericalbe Group SA	Bonds	05/15/22	6.000%	1,365,000	1,362,875	1,345,385
Numericalbe Group SA	Bonds	05/15/24	6.250%	260,000	260,000	255,775
Nuveen Investments	Bonds	-	Var	750,000	752,813	750,000
Oasis Petroleum, Incorporated	Notes	03/15/22	6.875%	530,000	528,908	537,950
Omega Healthcare Investors	Bonds	03/15/24	5.875%	545,000	583,150	579,744
Oracle Corporation	Notes	05/15/35	3.900%	525,000	521,456	488,245
Oracle Corporation	Notes	10/08/19	2.250%	160,000	159,821	160,926
Owens Brockway	Bonds	01/15/22	5.000%	340,000	340,000	335,750
Pacific Gas & Electric	Notes	11/30/17	5.625%	410,000	382,000	447,523
Par Pharmaceutical	Notes	10/15/20	7.375%	110,000	116,950	117,425

PLUMBERS AND PIPEFITTERS NATIONAL PENSION FUND
ALEXANDRIA, VIRGINIA

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Form 5500, Schedule H, Line 4i

EIN: 52-6152779
Plan No. 001

(c) Description of investment, including maturity date, rate of interest, collateral, par or maturity value		(d) Cost		(e) Current Value	
(a) Identity of issuer, borrower, lessor or similar party	(b) Description	Maturity Date	Rate of Interest		
<u>Corporate and Other Notes and Bonds (continued)</u>					
Parker Hannifin Corporation	Bonds	11/21/24	3.300%	185,000 \$	185,636 \$
Party City Holdings, Incorporated	Bonds	08/01/20	8.875%	200,000	213,500
PCCW Limited	Bonds	-	0.000%	231,185	79,759
Peco Energy Company	Bonds	10/1/1944	4.150%	280,000	271,970
Pepsico, Incorporated	Notes	10/22/44	4.250%	85,000	83,341
Perrigo Finance PLC	Notes	12/15/21	3.500%	200,000	200,388
Petroleos Mexicanos	Notes	01/23/45	6.375%	340,000	348,925
Petsmart	Bonds	-	n/a	61,500	615,000
Philadelphia PA Authority	Bonds	04/15/26	3.964%	440,000	430,720
Phillips 66	Notes	04/01/22	4.300%	415,000	435,530
Phillips 66	Notes	05/01/42	5.875%	220,000	239,701
Phillips 66	Notes	11/15/34	4.650%	738,000	721,971
Phillips 66 Partners LP	Notes	02/15/25	3.605%	160,000	150,578
Pinnacle Entertainment	Notes	04/01/22	7.750%	395,000	416,403
Pinnacle Entertainment	Notes	08/01/21	6.375%	435,000	461,644
Playa Pacific Partners, LLC	Bonds	n/a	Second Lien Bd	23,910,000	-
PNC Bank NA	Bonds	07/02/19	2.250%	280,000	279,082
PNC Bank NA	Notes	10/18/19	2.400%	250,000	251,655
Post Holdings, Incorporated	Bonds	12/15/22	6.000%	1,320,000	1,270,500
PPL Energy Supply LLC	Notes	06/01/25	6.500%	270,000	270,000
PQ Corporation	Bonds	05/01/18	8.750%	1,200,000	1,212,000
Presifo	Term Loan	-	n/a	305,900	305,900
Project Homestake Merger	Bonds	03/01/23	8.875%	250,000	242,500
PSEG Power LLC	Notes	09/15/16	2.750%	160,000	163,210
Public Service New Hamp	Notes	11/01/23	3.500%	135,000	138,619
QVC, Incorporated	Bonds	08/15/34	5.450%	195,000	176,951
Rabobank Nederland Utrec	Notes	02/08/22	3.875%	145,000	150,845
Realogy Corporation	Bonds	01/15/20	7.625%	350,000	370,650
Realogy Corporation	Bonds	03/05/20	3.750%	454,930	454,930
Regal Entertainment Group	Notes	03/15/22	5.750%	573,000	579,418
Regency Energy Partners	Notes	07/15/21	6.500%	230,000	242,362
Regency Energy Partners	Notes	04/15/23	5.500%	375,000	381,675
Regency Energy Partners	Bonds	11/01/23	4.500%	140,000	135,100
Regency Energy Partners	Notes	03/01/22	5.875%	580,000	617,416
Reynolds American, Incorporated	Bonds	06/15/37	7.250%	85,000	101,936
Reynolds American, Incorporated	Notes	09/15/43	6.150%	115,000	123,502
Reynolds American, Incorporated	Notes	08/15/35	5.700%	212,000	219,816
Reynolds American, Incorporated	Notes	08/15/45	5.850%	293,000	307,325
Reynolds Group ISS	Bonds	02/15/21	6.875%	465,000	484,763
Reynolds Group ISS	Notes	02/15/21	8.250%	300,000	311,250
Reynolds Group ISS	Bonds	08/15/19	9.875%	546,000	573,398
Reynolds Group ISS	Bonds	10/15/20	5.750%	110,000	112,750
Rio Tinto Fin USA LTD	Bonds	03/22/22	3.500%	340,000	342,910
Rite Aid Corporation	Bonds	08/15/20	8.000%	1,073,000	1,118,603
Rite Aid Corporation	Notes	03/15/20	9.250%	405,000	438,919
Rite Aid Corporation	Notes	06/15/21	6.750%	295,000	309,750
Rite Aid Corporation	Bonds	04/01/23	6.125%	630,000	648,900
Riverbed Technology	Notes	-	0.000%	255,000	255,000
RJS Power Holdings LLC	Bonds	07/15/19	5.125%	975,000	955,500
Rockies Express Pipeline	Notes	07/15/18	6.850%	185,000	197,256
Rockies Express Pipeline	Bonds	07/15/38	7.500%	275,000	298,375
Rockies Express Pipeline	Notes	04/15/20	5.625%	200,000	204,500
Rockies Express Pipeline	Bonds	04/15/40	6.875%	350,000	366,625

PLUMBERS AND PIPEFITTERS NATIONAL PENSION FUND
ALEXANDRIA, VIRGINIA

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Form 5500, Schedule H, Line 4i

EIN: 52-6152779
Plan No. 001

(c) Description of investment, including maturity date, rate of interest, collateral, par or maturity value		(d)		(e)	
(a)	(b)	(c)	(d)	(e)	(f)
Identity of issuer, borrower, lessor or similar party	Description	Maturity Date	Rate of Interest	Cost	Current Value
<u>Corporate and Other Notes and Bonds (continued)</u>					
Rose Rock Midstream	Bonds	11/15/23	5.625%	320,000 \$	315,407 \$
Royal Bank of Canada	Bonds	12/04/15	0.625%	1,155,000	1,155,578
Royal Bank of Canada	Bonds	10/01/19	2.000%	960,000	973,574
RR Donnelley & Sons Co	Notes	03/15/21	7.875%	525,000	592,594
RSB Bondco LLC	Bonds	04/01/17	5.820%	455,000	482,882
RSC Equipment Rent RSC Holdings	Notes	02/01/21	8.250%	364,000	389,025
Ryland Group Company	Notes	10/01/22	5.375%	285,000	287,850
Sabine Pass Liquefaction	Notes	04/15/23	5.625%	185,000	184,364
Sabine Pass Liquefaction	Notes	02/01/21	5.625%	320,000	326,400
Sabine Pass Liquefaction	Notes	05/15/24	5.750%	525,000	523,031
Sabine Pass Liquefaction	Bonds	03/01/25	5.625%	1,435,000	1,420,650
Sabra Healthcare Corporation	Notes	02/01/21	5.500%	395,000	408,825
Sandridge Energy Inc	Notes	03/15/21	7.500%	2,930,000	1,281,875
Sandridge Energy Inc	Notes	10/15/22	8.125%	330,000	301,725
Sandridge Energy Inc	Notes	02/15/23	7.500%	775,000	327,593
Sandridge Energy Inc	Bonds	06/01/20	8.750%	500,000	453,750
Santander Drive Auto Receivable	Bonds	06/17/19	2.250%	635,000	642,671
Santander Drive Auto Receivable	Bonds	04/15/19	1.810%	170,000	170,983
Santander Drive Auto Receivable	Bonds	01/15/20	3.250%	700,000	716,436
Santander Drive Auto Receivable	Bonds	04/15/20	2.360%	625,000	629,263
Santander Drive Auto Receivable	Bonds	11/15/19	2.330%	380,000	384,780
Santander Drive Auto Receivable	Bonds	08/17/20	2.130%	550,000	554,637
SBA Telecommunications	Notes	07/15/20	5.750%	165,000	171,188
Scientific Games International	Notes	09/01/20	6.250%	260,000	202,150
Scientific Games International	Notes	05/15/21	6.625%	495,000	383,625
Scientific Games International	Bonds	01/01/22	7.000%	270,000	278,775
Scientific Games International	Bonds	12/01/22	10.000%	1,965,000	1,881,487
Sealed Air Corporation	Bonds	09/15/25	5.500%	365,000	367,738
Service Corp International	Bonds	05/15/24	5.375%	345,000	360,525
Service Master Company	Notes	02/15/20	8.000%	384,000	405,600
SGMS Escrow Corporation	Notes	-	n/a	148,579	148,579
Shell International Finance	Bonds	08/12/23	3.400%	275,000	282,224
Shell International Finance	Bonds	05/11/35	4.125%	1,000,000	978,920
Siemens Finance	Notes	05/27/22	2.900%	690,000	680,996
Signet UK Finance PLC	Bonds	06/15/24	4.700%	180,000	181,777
Sirius XM Radio, Incorporated	Bonds	05/15/20	4.250%	85,000	84,575
Sirius XM Radio, Incorporated	Bonds	10/01/20	5.875%	175,000	179,375
SLM Corporation	Notes	01/25/16	6.250%	210,000	214,200
SLM Corporation	Notes	09/25/17	4.625%	120,000	121,950
SLM Corporation	Notes	01/25/23	5.500%	235,000	223,250
SLM Corporation	Notes	01/15/19	5.500%	660,000	672,949
SLM Corporation	Notes	06/17/19	4.875%	1,810,000	1,019,115
SLM Corporation	Notes	03/25/24	6.125%	413,000	395,448
Sophia LP/Fin Incorporated	Bonds	01/15/19	9.750%	960,000	1,020,000
Sophia LP/Fin Incorporated	Bonds	12/01/18	9.625%	585,000	592,313
Sophia LP/Fin Incorporated	Bonds	07/31/18	6.250%	194,417	194,417
Southern Cal Edison	Bonds	10/01/23	3.500%	150,000	153,878
Southern Company	Notes	09/01/19	2.150%	275,000	272,168
Spectrum Brands	Bonds	-	n/a	200,000	200,000
Sprint Cap Corporation	Notes	11/15/28	6.875%	890,000	765,400
Sprint Cap Corporation	Notes	03/15/32	8.750%	1,032,000	1,003,620
Sprint Corporation	Notes	09/15/21	7.250%	426,000	415,350
Sprint Corporation	Notes	09/15/23	7.875%	985,000	960,671

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	<u>Corporate and Other Notes and Bonds (continued)</u>						
	Sprint Corporation	Notes	06/15/24	7.125%	825,000 \$	825,000 \$	765,270
	Sprint Nextel Corporation	Notes	08/15/17	8.375%	285,000	302,813	308,513
	Sprint Nextel Corporation	Bonds	11/15/18	9.000%	245,000	287,313	276,669
	Standard Chartered PLC	Bonds	01/26/24	5.700%	285,000	306,116	298,418
	Standard Chartered PLC	Bonds	04/17/18	1.700%	610,000	609,323	607,487
	Standard Pacific Corporation	Notes	01/15/21	8.375%	245,000	262,017	284,200
	Stations Casinos	Notes	-	5.000%	223,638	220,578	223,638
	Stations Casinos	Notes	03/01/21	7.500%	945,000	949,276	1,011,150
	Statoil ASA	Bonds	03/01/24	3.700%	160,000	167,429	165,370
	Store Master Funding LLC	Bonds	04/20/45	3.750%	309,742	309,675	309,742
	Suburban Propane Partners LP	Notes	08/01/21	7.375%	319,000	367,177	340,533
	Suburban Propane Partners LP	Notes	03/01/25	5.750%	60,000	60,000	59,850
	Suncor Energy, Incorporated	Bonds	12/01/24	3.600%	480,000	476,328	477,658
	Suncor Energy, Incorporated	Bonds	06/15/38	6.500%	245,000	307,991	298,510
	Sungard Data Systems, Incorporated	Notes	11/15/18	7.375%	72,000	72,146	74,556
	Sungard Data Systems, Incorporated	Notes	11/15/20	7.625%	640,000	691,907	668,800
	Syniverse Holdings Inc	Bonds	01/15/19	9.130%	625,000	629,548	550,000
	Synchrony Credit Card Master	Bonds	11/16/20	1.610%	750,000	749,792	752,543
	Sysco Corporation	Notes	10/02/19	2.350%	380,000	379,483	383,800
	Sysco Corporation	Notes	10/02/21	3.000%	270,000	269,409	272,700
	Targe Resources Partners	Notes	11/15/23	4.250%	160,000	160,400	148,000
	Targe Resources Partners	Bonds	11/15/19	4.125%	400,000	400,000	396,000
	Targe Resources Partners	Bonds	01/15/18	5.000%	345,000	358,056	352,763
	Taylor Morrison Comm	Bonds	04/15/21	5.250%	900,000	884,594	886,500
	Taylor Morrison Comm	Bonds	03/01/24	5.625%	164,000	152,903	157,850
	Telecom Italia Capital	Notes	09/30/34	6.000%	335,000	333,846	325,992
	Tenet Healthcare Corporation	Notes	11/01/18	6.250%	490,000	543,214	532,263
	Tenet Healthcare Corporation	Notes	02/01/20	6.750%	205,000	216,738	214,225
	Tenet Healthcare Corporation	Notes	04/01/22	8.125%	360,000	367,479	393,660
	Tenet Healthcare Corporation	Notes	11/15/31	6.875%	205,000	198,138	189,625
	Terex Corporation	Notes	04/01/20	6.500%	335,000	351,157	350,913
	Terex Corporation	Notes	05/15/21	6.000%	515,000	519,500	517,575
	Tesoro Logistics LP	Bonds	10/15/19	5.500%	155,000	155,000	160,813
	Tesoro Logistics LP	Bonds	10/15/22	6.250%	400,000	409,000	414,000
	Texas Instruments, Incorporated	Notes	03/12/21	2.750%	205,000	203,553	209,153
	THC Escrow Corporation	Notes	10/01/20	6.000%	335,000	335,000	357,194
	Thermo Fisher Scientific	Notes	03/01/16	3.200%	285,000	288,767	289,389
	Thornburg Mortgage Secs Trust	Bonds	04/25/45	4.759%	219,920	220,470	220,945
	Time Warner Cable, Incorporated	Bonds	11/15/40	5.875%	145,000	150,542	140,379
	Time Warner, Incorporated	Bonds	04/15/31	7.625%	100,000	115,394	130,033
	Time Warner, Incorporated	Notes	05/15/29	6.625%	250,000	188,745	298,263
	Time Warner, Incorporated	Notes	06/01/24	3.550%	240,000	239,779	234,053
	T-Mobile USA, Incorporated	Notes	04/28/21	6.633%	450,000	450,000	466,875
	T-Mobile USA, Incorporated	Notes	04/28/23	6.836%	250,000	245,000	262,813
	T-Mobile USA, Incorporated	Notes	04/28/20	6.542%	970,000	970,000	1,015,580
	T-Mobile USA, Incorporated	Notes	04/28/22	6.731%	310,000	306,900	323,175
	T-Mobile USA, Incorporated	Notes	01/15/22	6.125%	460,000	454,465	474,950
	T-Mobile USA, Incorporated	Notes	01/15/24	6.500%	240,000	240,000	247,800
	T-Mobile USA, Incorporated	Notes	03/01/23	6.000%	550,000	550,272	563,063
	T-Mobile USA, Incorporated	Notes	03/01/25	6.375%	300,000	300,000	306,750
	Total Capital Intl SA	Bonds	02/17/22	2.875%	375,000	378,487	374,625
	Toyota Auto Receivables	Bonds	08/15/16	0.410%	114,843	114,842	114,824
	Toyota Auto Receivables	Bonds	12/15/16	0.400%	156,713	156,700	156,682

PLUMBERS AND PIPEFITTERS NATIONAL PENSION FUND
ALEXANDRIA, VIRGINIA

SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES
AS OF JUNE 30, 2015

Form 5500, Schedule H, Line 4i

EIN: 52-6152779
Plan No. 001

(c) Description of investment, including maturity date, rate of interest, collateral, par or maturity value		(e)	
(a)	(b)	(d)	(e)
Identity of issuer, borrower, lessor or similar party	Description	Cost	Current Value
<u>Corporate and Other Notes and Bonds (continued)</u>			
Trans-Canada Pipelines	Bonds	348,418	\$ 347,025
Tranche D Term Loans	Term Loans	105,261	104,736
Transdigm	Bonds	394,070	396,055
Transocean, Incorporated	Notes	246,469	252,500
Transocean, Incorporated	Bonds	574,006	591,700
Tribune Media Company	Bonds	208,474	208,568
Tribune Media Company	Bonds	985,000	992,388
TSMC Global LTD	Bonds	234,843	232,312
Twin River Management	Bonds	79,045	78,750
UBS AG Stamford CT	Bonds	379,643	379,111
Union Pacific Corporation	Notes	235,527	250,731
Union Pacific Corporation	Notes	194,355	193,083
United Auto Credit	Bonds	179,978	180,970
United Rentals NA	Notes	418,197	400,121
United Surgical Partners	Bonds	352,176	346,938
Unitedhealth Group, Incorporated	Notes	324,649	324,964
Univision Communication	Bonds	710,700	669,300
Univision Communication	Bonds	412,592	413,080
Univision Communication	Bonds	54,993	54,856
US Bank NA Cincinnati	Bonds	284,744	285,325
US Coat Acquisitions	Bonds	382,500	401,719
USG Corporation	Notes	1,119,813	1,160,250
USG Corporation	Bonds	175,000	174,344
US West Communications	Bonds	376,156	375,740
Valeant Pharmaceuticals	Notes	214,463	214,463
Verizon Communications	Notes	169,760	140,299
Verizon Communications	Notes	32,967	37,816
Verizon Communications	Notes	62,926	73,694
Verizon Communications	Notes	402,532	469,806
Verizon Communications	Notes	521,199	486,024
Verizon Communications	Bonds	406,242	462,980
Verizon Communications	Bonds	452,355	530,670
Virgin Media Finance PLC	Bonds	465,000	471,975
Virginia Electric & Power Company	Bonds	169,918	176,375
Vodafone Group PLC	Notes	318,518	298,883
Volkswagen Group America	Bonds	214,518	215,737
VPI Escrow Corporation	Bonds	1,283,865	1,295,350
VPI Escrow Corporation	Bonds	27,735	27,736
VPI Escrow Corporation	Bonds	400,000	419,500
VRX Escrow Corporation	Bonds	1,010,000	1,035,250
VRX Escrow Corporation	Bonds	920,000	946,450
Wal-Mart Stores, Incorporated	Notes	457,005	461,219
Walgreen Boots Alliance	Notes	319,126	317,779
Walter Investment Management	Bonds	366,772	405,474
Walter Investment Management	Notes	1,231,764	1,194,581
Wellpoint, Incorporated	Notes	377,800	348,369
Wells Fargo & Company	Notes	429,273	437,009
Wells Fargo & Company	Notes	195,000	195,766
Wells Fargo & Company	Bonds	309,681	311,305
Whiting Petroleum Corporation	Notes	570,837	573,300
Whiting Petroleum Corporation	Bonds	99,750	99,250
Wideopenwest Financial	Notes	307,837	314,912
Williams Partners LP	Notes	284,077	260,501

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Identity of issuer, borrower, lessor or similar party	Description	Maturity Date	Rate of Interest		Cost	Current Value
<u>Corporate and Other Notes and Bonds (continued)</u>						
Wind Acquisition Fin SA	Bonds	04/23/21	7.375%	290,000	\$ 300,150	\$ 293,263
Wind Acquisition Fin SA	Bonds	07/15/20	4.750%	1,270,000	1,239,969	1,250,950
Windstream Corporation	Bonds	06/01/22	7.500%	695,000	735,982	610,731
World Financial Network Credit	Bonds	12/15/19	0.533%	595,000	595,465	594,923
WPX Energy, Incorporated	Bonds	01/15/22	6.000%	530,000	530,975	523,375
WPX Energy, Incorporated	Notes	09/15/24	5.250%	265,000	256,866	244,131
Wynn Las Vegas LLC/Corp	Bonds	05/30/23	4.250%	95,000	91,288	87,400
Wynn Las Vegas LLC/Corp	Bonds	03/01/25	5.500%	95,000	96,306	90,488
ZF NA Capital	Bonds	04/29/20	4.000%	545,000	541,948	544,319
Total Corporate and Other Notes and Bonds					\$ 366,689,579	\$ 337,690,261
<u>Common & Preferred Stocks</u>						
Aaron's, Incorporated Class A	Equity	N/A	N/A	17,581	\$ 627,339	\$ 636,608
Abacus Property Group	Equity	N/A	N/A	27,366	65,494	61,654
Abbott Laboratories, Incorporated	Equity	N/A	N/A	106,469	4,350,368	5,225,499
Acadia Health Care Company, Incorporated	Equity	N/A	N/A	20,750	930,363	1,625,348
Acadia Realty Trust	Equity	N/A	N/A	62,490	1,619,927	1,819,084
Accor SA	Equity	N/A	N/A	23,839	1,159,751	1,188,613
Achillion Pharmaceuticals	Equity	N/A	N/A	42,500	610,768	376,550
ACS Actividades De Construccion	Equity	N/A	N/A	9,000	341,816	289,521
Actua Corporation	Equity	N/A	N/A	72,429	952,862	1,032,838
Adobe Systems, Incorporated	Equity	N/A	N/A	70,094	5,313,356	5,678,315
Advanced Auto Parts	Equity	N/A	N/A	11,460	1,787,618	1,825,463
Advanced Drainage Systems	Equity	N/A	N/A	46,955	1,317,818	1,377,190
Advanced Emissions Solutions	Equity	N/A	N/A	9,800	206,850	127,400
Advanced Energy Industries, Incorporated	Equity	N/A	N/A	15,863	407,106	436,074
Aegon NV	Equity	N/A	N/A	124,808	1,541,373	916,287
AES Corporation	Equity	N/A	N/A	207,700	2,608,220	2,754,102
Aerie Pharmaceuticals, Incorporated	Equity	N/A	N/A	33,505	357,304	591,363
Aetna, Incorporated	Equity	N/A	N/A	29,170	1,864,465	3,718,008
Affiliated Managers Group, Incorporated	Equity	N/A	N/A	23,582	4,416,036	5,155,025
Aflac, Incorporated	Equity	N/A	N/A	9,700	205,895	603,340
African Barrick Gold PLC	Equity	N/A	N/A	43,000	283,842	203,974
Agco Corporation	Equity	N/A	N/A	30,400	1,395,692	1,726,112
Agios Pharmaceuticals, Incorporated	Equity	N/A	N/A	2,569	67,111	285,519
AIA Group Limited	Equity	N/A	N/A	361,400	1,518,485	2,341,872
AIN Pharmaciez	Equity	N/A	N/A	8,000	196,637	371,287
Air New Zealand	Equity	N/A	N/A	104,447	179,888	180,484
Aircastle Limited	Equity	N/A	N/A	34,800	419,584	788,916
Aisin Seiki Company, Limited	Equity	N/A	N/A	41,900	1,535,449	1,783,707
Akamai Technologies	Equity	N/A	N/A	170,900	8,998,577	11,932,238
Akzo Nobel NV	Equity	N/A	N/A	18,339	1,393,544	1,342,415
Alamo Group Incorporated	Equity	N/A	N/A	8,215	231,009	448,868
Alapis Holding Industrial	Equity	N/A	N/A	357	6,786	15
Alaska Air Group, Incorporated	Equity	N/A	N/A	40,900	2,083,618	2,635,187
Albany International Corporation Class A	Equity	N/A	N/A	23,188	438,272	922,882
Alcoa, Incorporated	Equity	N/A	N/A	23,270	382,241	259,461
Alexander & Bladwin, Incorporated	Equity	N/A	N/A	29,255	1,055,255	1,152,647
Alexion Pharmaceuticals, Incorporated	Equity	N/A	N/A	18,497	3,251,042	3,343,740
Alfresa Holdings Corporation	Equity	N/A	N/A	15,900	244,131	247,623
Alibaba Group Holding Limited	Equity	N/A	N/A	55,380	4,563,074	4,556,113
Align Technology Incorporated	Equity	N/A	N/A	85,021	3,657,461	5,331,667
Allergan PLC	Equity	N/A	N/A	20,738	5,854,849	6,293,153

PLUMBERS AND PIPEFITTERS NATIONAL PENSION FUND
ALEXANDRIA, VIRGINIA

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Form 5500, Schedule H, Line 4i

EIN: 52-6152779
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Identity of issuer, borrower, lessor or similar party	Description	Maturity Date	Rate of Interest		Cost	Current Value
<u>Common & Preferred Stocks (continued)</u>						
Allete, Incorporated	Equity	N/A	N/A	50,250	\$ 2,052,839	\$ 2,331,097
Alliance Data Systems Corporation	Equity	N/A	N/A	16,783	3,126,818	4,899,629
Allianz SE	Equity	N/A	N/A	18,390	3,004,014	2,884,472
Allscripts Healthcare Solutions Incorporated	Equity	N/A	N/A	57,928	714,685	792,455
Allstate Corporation	Equity	N/A	N/A	174,267	5,980,490	11,304,700
Ally Financial, Incorporated	Equity	N/A	N/A	121,000	2,560,202	2,714,030
Alon Usa Energy, Incorporated	Equity	N/A	N/A	28,400	489,100	536,760
Alstom	Equity	N/A	N/A	19,500	718,170	551,850
Alten Boulogne Billancourt	Equity	N/A	N/A	8,700	448,118	404,118
Altra Industrial Motion Corporation	Equity	N/A	N/A	59,569	1,183,584	1,619,085
Altria Group, Incorporated	Equity	N/A	N/A	88,720	4,687,614	4,339,295
Amadeus IT Holding SA	Equity	N/A	N/A	11,942	468,066	476,026
Amazon Com, Incorporated	Equity	N/A	N/A	37,581	11,839,123	16,313,536
Ambarella, Incorporated	Equity	N/A	N/A	10,210	217,465	1,048,465
Ambev SA	Equity	N/A	N/A	123,800	885,291	758,942
Amcort Limited	Equity	N/A	N/A	127,821	993,825	1,353,072
Amdocs Limited	Equity	N/A	N/A	40,190	1,336,627	2,193,972
Amerco	Equity	N/A	N/A	3,000	275,249	980,730
American Assets Trust, Incorporated	Equity	N/A	N/A	34,775	927,578	1,363,528
American Campus Communities, Inc.	Equity	N/A	N/A	24,888	725,913	938,029
American Capital Mortgage	Equity	N/A	N/A	53,360	1,078,809	853,226
American Electric Power, Incorporated	Equity	N/A	N/A	124,585	5,707,041	6,599,267
American Financial Group, Incorporated	Equity	N/A	N/A	16,400	474,284	1,066,656
American International Group, Incorporated	Equity	N/A	N/A	114,094	5,544,336	7,053,291
American Tower Corporation	Equity	N/A	N/A	28,653	2,561,827	2,673,038
American Woodmark Corporation	Equity	N/A	N/A	39,814	1,450,569	2,183,798
Ameriprise Financial, Incorporated	Equity	N/A	N/A	18,550	1,012,497	2,317,452
Ameris Bancorp	Equity	N/A	N/A	90,812	1,482,092	2,296,635
Amira Nature Foods Limited	Equity	N/A	N/A	58,458	818,063	671,682
Amkor Technology, Incorporated	Equity	N/A	N/A	122,500	568,113	732,550
AMP Limited	Equity	N/A	N/A	55,986	293,630	260,040
AMS AG	Equity	N/A	N/A	10,052	349,430	440,223
Amsurg Corporation	Equity	N/A	N/A	13,816	671,863	966,429
Anacor Pharmaceuticals, Incorporated	Equity	N/A	N/A	20,767	117,885	1,607,989
Anadarko Petroleum Corporation	Equity	N/A	N/A	78,271	7,343,110	6,109,834
Anglo American PLC	Equity	N/A	N/A	30,800	753,943	444,501
Anheuser Busch Inbev	Equity	N/A	N/A	8,960	-	1,073,825
Anthem, Incorporated	Equity	N/A	N/A	11,440	976,375	1,877,762
Aozara Bank Limited	Equity	N/A	N/A	163,000	516,053	615,320
AP Moller - Maersk A/S	Equity	N/A	N/A	200	465,731	362,229
Aperam	Equity	N/A	N/A	19,334	525,142	777,473
Apogee Enterprises, Incorporated	Equity	N/A	N/A	6,996	198,742	368,269
Apple, Incorporated	Equity	N/A	N/A	253,142	20,414,087	31,750,335
Applied Industrial Technologies, Incorporated	Equity	N/A	N/A	25,745	821,400	1,020,789
Applied Materials, Incorporated	Equity	N/A	N/A	105,857	2,492,696	2,034,572
Aratana Therapeutics, Incorporated	Equity	N/A	N/A	52,820	571,438	798,638
Arcelormittal	Equity	N/A	N/A	34,560	538,587	336,614
Archer Daniels Midland Company	Equity	N/A	N/A	29,500	776,719	1,422,490
Arctic Cat, Incorporated	Equity	N/A	N/A	32,560	1,295,232	1,081,318
Argo Group International	Equity	N/A	N/A	23,455	1,056,366	1,306,444
Arkema	Equity	N/A	N/A	810	1	58,363
Arm Holdings PLC	Equity	N/A	N/A	211,743	7,907,241	9,656,124
Armstrong World Industries	Equity	N/A	N/A	15,049	696,804	801,811

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Identity of issuer, borrower, lessor or similar party	Description	Maturity Date	Rate of Interest			Cost	Current Value
<u>Common & Preferred Stocks (continued)</u>							
Arrow Electronics, Incorporated	Equity	N/A	N/A	4,770	\$	252,291	\$ 266,166
Arrium Limited	Equity	N/A	N/A	933,600		1,263,576	97,234
Asahi Glass Company Limited	Equity	N/A	N/A	37,000		238,402	222,208
Asahi Kasei Corporation	Equity	N/A	N/A	16,000		97,894	131,454
Asbury Automotive Group	Equity	N/A	N/A	9,976		528,067	904,025
Ashland, Incorporated	Equity	N/A	N/A	49,700		4,981,670	6,508,430
Ashtead Group PLC	Equity	N/A	N/A	40,867		698,283	705,688
Asian Pay Television	Equity	N/A	N/A	95,700		83,759	60,396
ASML Holding NV	Equity	N/A	N/A	5,350		507,783	552,905
Aspen Insurance Holdings Limited	Equity	N/A	N/A	15,400		420,343	737,660
Assa Abloy AB-B	Equity	N/A	N/A	60,084		1,189,397	1,131,397
Assurant, Incorporated	Equity	N/A	N/A	28,040		1,465,932	1,878,680
Assured Guaranty Limited	Equity	N/A	N/A	41,270		1,179,992	990,067
Astellas Pharma, Incorporated	Equity	N/A	N/A	75,100		681,662	1,071,103
Astrazeneca PLC	Equity	N/A	N/A	8,200		416,795	518,230
AT&T, Incorporated	Equity	N/A	N/A	115,740		3,870,019	4,111,085
Atmel Corporation	Equity	N/A	N/A	90,400		898,531	890,892
Atwood Oceanics, Incorporated	Equity	N/A	N/A	8,800		259,998	232,672
Aurubis AG	Equity	N/A	N/A	10,200		409,123	599,482
Ausdrill Limited	Equity	N/A	N/A	105,700		379,819	31,805
Aust & NZ Banking Group Limited	Equity	N/A	N/A	22,678		610,540	562,641
Autodesk, Incorporated	Equity	N/A	N/A	178,319		7,103,045	8,929,324
Autoliv, Incorporated	Equity	N/A	N/A	10,600		536,402	1,237,550
Avago Technologies	Equity	N/A	N/A	30,530		4,413,992	4,058,353
Avalonbay Communities, Incorporated	Equity	N/A	N/A	35,620		4,942,353	5,694,569
Avis Budget Group, Incorporated	Equity	N/A	N/A	19,989		756,607	881,115
Avista Corporation	Equity	N/A	N/A	27,800		768,493	852,070
AVX Corporation	Equity	N/A	N/A	28,200		374,036	379,572
AXA	Equity	N/A	N/A	64,872		1,143,249	1,634,774
Axalta Coating Systems Limited	Equity	N/A	N/A	101,600		3,381,659	3,360,928
Axis Capital Holdings LTD	Equity	N/A	N/A	24,980		1,099,877	1,333,183
AZZ, Incorporated	Equity	N/A	N/A	7,494		154,589	388,189
Babcock & Wilcox Company	Equity	N/A	N/A	41,573		1,325,240	1,363,594
Bae Systems PLC	Equity	N/A	N/A	198,000		1,185,414	1,415,700
Baloise Holding AG	Equity	N/A	N/A	7,500		426,029	914,487
Banca Monte Dei Paschi Siena	Equity	N/A	N/A	13,359		146,427	26,004
Banca Popolare Di Milano	Equity	N/A	N/A	584,587		560,646	760,009
Banco Bilbao Vizcaya Argenta	Equity	N/A	N/A	180,424		1,826,674	1,768,475
Banco Latinoamericano De Comercio	Equity	N/A	N/A	29,200		535,039	939,656
Banco Santander S.A.	Equity	N/A	N/A	87,100		783,798	621,023
Bancorpsouth, Incorporated	Equity	N/A	N/A	61,860		940,523	1,593,514
Bank Hapolim Limited	Equity	N/A	N/A	127,000		485,979	684,139
Bank of America Corporation	Equity	N/A	N/A	281,070		4,791,645	4,783,811
Bank of Queensland	Equity	N/A	N/A	36,250		286,414	357,161
BankUnited, Incorporated	Equity	N/A	N/A	13,635		490,763	489,906
Barclays PLC	Equity	N/A	N/A	667,578		3,623,102	2,706,307
Barnes & Noble, Incorporated	Equity	N/A	N/A	28,382		449,772	736,797
Barratt Developments PLC	Equity	N/A	N/A	125,353		744,851	1,223,445
BASF SE	Equity	N/A	N/A	21,105		1,668,044	2,576,229
Bayerische Motoren Werke AG	Equity	N/A	N/A	13,151		1,534,274	1,446,070
Beacon Roofing Supply, Incorporated	Equity	N/A	N/A	15,860		504,730	526,869
Belden, Incorporated	Equity	N/A	N/A	19,208		812,820	1,560,266
Bellway PLC	Equity	N/A	N/A	13,000		344,571	484,508

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		(c) Description of investment, including maturity date, rate of interest, collateral, par or maturity value			Plan No.	001
(a)	(b)				(e)	
Identity of issuer, borrower, lessor or similar party	Description	Maturity Date	Rate of Interest	(d) Cost	Current Value	
<u>Common & Preferred Stocks (continued)</u>						
Bendigo and Adelaide Bank	Equity	N/A	N/A	67,300	\$	560,143 \$ 636,606
Benefit Focus, Incorporated	Equity	N/A	N/A	19,035		536,381 834,685
Berkeley Group Holding	Equity	N/A	N/A	19,372		703,976 1,018,457
Best Buy Company, Incorporated	Equity	N/A	N/A	4,730		163,807 154,245
BG Group PLC	Equity	N/A	N/A	54,429		1,022,164 895,901
BHP Billington Limited	Equity	N/A	N/A	25,330		749,911 521,798
BHP Billiton PLC	Equity	N/A	N/A	72,469		2,163,366 1,413,146
Bio Reference Labs, Incorporated	Equity	N/A	N/A	13,737		354,702 566,651
Biocryst Pharmaceuticals, Incorporated	Equity	N/A	N/A	65,450		451,633 977,169
Biomarin Pharmaceutical, Incorporated	Equity	N/A	N/A	31,979		2,012,174 4,374,088
Biogen Idec, Incorporated	Equity	N/A	N/A	26,614		7,817,363 10,750,459
Biomed Realty Trust, Incorporated	Equity	N/A	N/A	52,897		927,458 1,023,028
Bioscrip, Incorporated	Equity	N/A	N/A	44,042		321,573 159,872
Blackrock, Incorporated	Equity	N/A	N/A	8,395		2,235,904 2,904,502
Blueprint Medicines Corporation	Equity	N/A	N/A	2,200		39,600 58,278
BM & Fbovespa SA	Equity	N/A	N/A	131,900		517,079 497,631
BNC Bancorp	Equity	N/A	N/A	59,481		1,101,274 1,149,768
BNP Paribas	Equity	N/A	N/A	40,833		2,726,573 2,495,713
Boart Longyear Limited	Equity	N/A	N/A	117,800		285,967 11,348
Boc Hong Kong Holdings Limited	Equity	N/A	N/A	113,500		339,794 473,295
Boeing Company	Equity	N/A	N/A	37,077		5,053,470 5,143,321
Boise Cascade Company	Equity	N/A	N/A	41,505		1,147,421 1,522,403
Boliden AB	Equity	N/A	N/A	58,627		800,482 1,068,600
Bonanza Creek Energy, Incorporated	Equity	N/A	N/A	43,629		1,377,565 796,229
Booz Allen Hamilton Holding	Equity	N/A	N/A	20,717		529,475 522,897
Boral Limited	Equity	N/A	N/A	17,123		86,656 77,286
Boston Private Financial Holdings, Inc	Equity	N/A	N/A	4,705		59,788 63,094
Bovis Homes PLC	Equity	N/A	N/A	27,300		368,006 477,420
BP PLC	Equity	N/A	N/A	477,701		4,167,384 3,186,266
Bradken Limited	Equity	N/A	N/A	70,800		520,702 78,388
Brady Corporation Class A	Equity	N/A	N/A	60,700		1,908,149 1,501,718
Brambles Limited	Equity	N/A	N/A	127,382		1,127,110 1,041,786
Brandywine Reality	Equity	N/A	N/A	93,800		1,068,157 1,245,664
Bridge Capital Holdings	Equity	N/A	N/A	53,522		937,520 1,594,956
Bridgestone	Equity	N/A	N/A	38,200		1,183,662 1,411,841
Brilliance China Automotive	Equity	N/A	N/A	578,000		952,976 878,560
Brinker International, Incorporated	Equity	N/A	N/A	15,800		689,117 910,870
Brinks Company	Equity	N/A	N/A	21,100		632,339 620,973
Bristol Myers Squibb Company	Equity	N/A	N/A	142,696		7,643,191 9,494,992
Bristow Group, Incorporated	Equity	N/A	N/A	25,999		1,580,755 1,385,747
Britvic PLC	Equity	N/A	N/A	56,830		576,903 640,681
Broadcom Corporation	Equity	N/A	N/A	4,345		196,689 223,724
Broadsoft, Incorporated	Equity	N/A	N/A	12,534		458,232 433,300
Brocade Communications Systems	Equity	N/A	N/A	108,900		1,089,510 1,293,732
Brother Industris Limited	Equity	N/A	N/A	28,600		390,502 405,216
Brunswick Corporation	Equity	N/A	N/A	104,470		2,722,397 5,313,344
Bryn Mawr Bank Corporation	Equity	N/A	N/A	20,340		606,015 613,454
BT Group PLC	Equity	N/A	N/A	535,558		2,651,184 3,788,387
BT Investment Management Limited	Equity	N/A	N/A	7,602		12,215 49,562
Buffalo Wild Wings, Incorporated	Equity	N/A	N/A	6,000		726,715 940,140
Bunge Limited	Equity	N/A	N/A	26,500		2,220,535 2,326,700
Burberry Group PLC	Equity	N/A	N/A	41,069		1,101,882 1,013,755
Burlington Stores, Incorporated	Equity	N/A	N/A	14,335		597,728 733,952

PLUMBERS AND PIPEFITTERS NATIONAL PENSION FUND
ALEXANDRIA, VIRGINIA

SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES
AS OF JUNE 30, 2015

Form 5500, Schedule H, Line 4i

EIN: 52-6152779
Plan No. 001

(c) Description of investment, including maturity date, rate of interest, collateral, par or maturity value							
(a)	(b)					(d)	(e)
Identity of issuer, borrower, lessor or similar party	Description	Maturity Date	Rate of Interest			Cost	Current Value
<u>Common & Preferred Stocks (continued)</u>							
CA, Incorporated	Equity	N/A	N/A	16,600	\$	424,421	\$ 486,214
Cabelas, Incorporated	Equity	N/A	N/A	112,200		7,547,844	5,607,756
Cabot Corporation	Equity	N/A	N/A	28,973		1,073,277	1,080,403
C&C Group PLC	Equity	N/A	N/A	93,300		435,143	365,719
Cache Logistics Trust	Equity	N/A	N/A	89,000		76,574	76,322
CACI International, Incorporated	Equity	N/A	N/A	10,906		858,829	882,186
Calix Networks, Incorporated	Equity	N/A	N/A	65,565		558,415	498,950
Callon Pete Company	Equity	N/A	N/A	225,836		1,514,413	1,878,956
Cameron Intl Corporation	Equity	N/A	N/A	53,050		3,344,858	2,778,229
Canadian Pacific Railway Limited	Equity	N/A	N/A	15,699		2,868,678	2,515,451
Canon, Incorporated	Equity	N/A	N/A	14,850		512,252	483,230
CAP Gemini	Equity	N/A	N/A	15,170		1,123,194	1,359,232
Capita Group PLC	Equity	N/A	N/A	92,987		1,328,791	1,808,778
Capital Acquisition Corporation	Equity	N/A	N/A	28,690		334,049	302,680
Capital One Financial Corporation	Equity	N/A	N/A	43,800		3,130,871	3,853,086
Capitol Federal Financial Incorporated	Equity	N/A	N/A	19,093		217,929	229,880
Cardinal Health, Incorporated	Equity	N/A	N/A	31,320		2,004,400	2,619,918
Cardtronics, Incorporated	Equity	N/A	N/A	57,555		1,603,832	2,132,413
Carillion PLC	Equity	N/A	N/A	90,200		348,615	484,561
Carlisle Companies, Incorporated	Equity	N/A	N/A	21,800		2,166,589	2,182,616
Carmike Cinemas, Incorporated	Equity	N/A	N/A	37,180		721,673	986,757
Carnival Corporation	Equity	N/A	N/A	36,130		1,715,754	1,784,461
Carnival PLC	Equity	N/A	N/A	18,566		705,247	951,466
Carrizo Oil & Gas, Incorporated	Equity	N/A	N/A	7,655		335,292	376,932
Carrols Restaurant Group, Incorporated	Equity	N/A	N/A	37,782		309,418	392,933
Cascade Bancorp	Equity	N/A	N/A	139,071		655,230	720,388
Catalent, Incorporated	Equity	N/A	N/A	26,051		773,019	764,076
Cathay General Bancorp	Equity	N/A	N/A	61,066		806,171	1,981,592
Cathay Pacific Airways Limited	Equity	N/A	N/A	61,000		155,909	149,990
CBL \$ Associates Properties Incorporated	Equity	N/A	N/A	247,400		4,887,063	4,007,880
CBOE Holdings	Equity	N/A	N/A	2,780		131,572	159,072
CBRE Group, Incorporated	Equity	N/A	N/A	111,830		3,828,081	4,137,710
CDL Hospitality Trusts	Equity	N/A	N/A	119,100		161,987	144,138
CEB, Incorporated	Equity	N/A	N/A	65,300		3,884,481	5,685,018
Celadon Group, Incorporated	Equity	N/A	N/A	21,060		489,695	435,521
Celanese Corporation	Equity	N/A	N/A	15,300		814,466	1,099,764
Celgene Corporation	Equity	N/A	N/A	60,230		5,549,732	6,970,719
Cempra, Incorporated	Equity	N/A	N/A	24,276		518,128	834,123
Cenovus Energy, Incorporated	Equity	N/A	N/A	38,729		666,285	620,051
Central Japan Railway Company	Equity	N/A	N/A	1,300		95,709	234,804
Centric A PLC	Equity	N/A	N/A	150,200		852,414	608,310
Century Tokyo Leasing Corporation	Equity	N/A	N/A	16,900		204,362	546,832
Cepheid, Incorporated	Equity	N/A	N/A	20,900		800,923	1,278,035
Centurylink, Incorporated	Equity	N/A	N/A	47,300		1,798,129	1,389,674
CF Industries Holdings, Incorporated	Equity	N/A	N/A	87,100		4,526,850	5,598,788
Challenger Financial Services, Incorporated	Equity	N/A	N/A	88,400		374,585	458,338
Charter Hall Group	Equity	N/A	N/A	32,439		119,200	113,128
Chatham Lodging Trust	Equity	N/A	N/A	48,045		1,400,946	1,271,751
Cheesecake Factory, Incorporated	Equity	N/A	N/A	71,065		2,864,520	3,875,530
Chemed Corporation	Equity	N/A	N/A	5,900		511,188	773,490
Cheniere Energy, Incorporated	Equity	N/A	N/A	24,900		1,740,649	1,724,574
Chevron Corporation	Equity	N/A	N/A	20,677		2,042,653	1,994,710
Chicos Fas, Incorporated	Equity	N/A	N/A	48,915		814,224	813,456

PLUMBERS AND PIPEFITTERS NATIONAL PENSION FUND
ALEXANDRIA, VIRGINIA

SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES
AS OF JUNE 30, 2015

Form 5500, Schedule H, Line 4i

EIN: 52-6152779
Plan No. 001

		(c) Description of investment, including maturity date, rate of interest, collateral, par or maturity value			Plan No.	001
(a)	(b)				(e)	
	Identity of issuer, borrower, lessor or similar party	Description	Maturity Date	Rate of Interest	(d) Cost	Current Value
	<u>Common & Preferred Stocks (continued)</u>					
	Chimera Investment Corporation	Equity	N/A	N/A	29,140 \$	459,786 \$ 399,509
	China Shineway Pharmaceuticals	Equity	N/A	N/A	178,000	261,855 265,912
	Chipotle Mexican Grill Class A	Equity	N/A	N/A	3,626	2,192,137 2,193,694
	Christopher & Banks Corporation	Equity	N/A	N/A	58,149	423,507 233,177
	Chubb Corporation	Equity	N/A	N/A	3,700	317,640 352,018
	Chugoku Electric Power	Equity	N/A	N/A	3,400	45,067 49,617
	Churchill Downs, Incorporated	Equity	N/A	N/A	21,990	1,356,475 2,749,850
	Ciena Corporation	Equity	N/A	N/A	56,900	1,172,183 1,347,392
	Cigna Corporation	Equity	N/A	N/A	36,340	2,754,216 5,887,080
	Cinemark Holdings Incororated	Equity	N/A	N/A	21,609	405,982 868,034
	Circor International, Incorporated	Equity	N/A	N/A	8,910	510,724 485,862
	Cirrus Logic, Incorporated	Equity	N/A	N/A	22,038	786,913 749,953
	Cisco Systems, Incorporated	Equity	N/A	N/A	8,280	235,181 227,369
	Cit Group, Incorporated	Equity	N/A	N/A	99,500	4,322,359 4,625,755
	Citigroup, Incorporated	Equity	N/A	N/A	197,369	9,854,755 10,902,664
	Citrix Systems, Incorporated	Equity	N/A	N/A	19,260	1,367,460 1,351,282
	City National Corporation	Equity	N/A	N/A	8,033	447,036 726,103
	CK Hutchinson Holdings Limited	Equity	N/A	N/A	5,000	75,447 7,200
	Clayton Williams Energy	Equity	N/A	N/A	18,605	1,487,858 1,223,279
	Cliffs Natural Resources, Incorporated	Equity	N/A	N/A	13,900	1,357,373 60,187
	Cloud Peak Energy, Incorporated	Equity	N/A	N/A	32,420	451,285 151,077
	CLP Holdings Limited	Equity	N/A	N/A	25,000	216,067 212,538
	CNO Financial Group, Incorporated	Equity	N/A	N/A	64,100	597,010 1,176,235
	Coach, Incorporated	Equity	N/A	N/A	4,540	161,344 157,129
	Cobiz Financial, Incorporated	Equity	N/A	N/A	97,948	1,118,221 1,280,180
	Coca Cola Enterprises, Incorporated	Equity	N/A	N/A	11,200	226,972 486,528
	Cognex Corporation	Equity	N/A	N/A	42,385	1,994,822 2,038,719
	Cognizant Technology Solutions	Equity	N/A	N/A	26,600	1,699,216 1,624,994
	Commercial Metals Company	Equity	N/A	N/A	42,725	646,814 687,018
	Commerzbank AG	Equity	N/A	N/A	45,213	646,893 580,574
	Common Wealth Bank Of Australia	Equity	N/A	N/A	11,231	723,548 729,341
	Compag Nie De Saint Gobain	Equity	N/A	N/A	14,910	656,625 679,300
	Computacenter PLC	Equity	N/A	N/A	46,500	- 566,966
	Computer Sciences Corporation	Equity	N/A	N/A	88,493	3,473,562 5,808,681
	Conagra Foods, Incorporated	Equity	N/A	N/A	32,300	999,300 1,412,156
	Concho Resources, Incorporated	Equity	N/A	N/A	23,032	3,182,381 2,622,424
	Conocophillips	Equity	N/A	N/A	47,291	3,693,932 2,904,140
	Constellation Brands, Incorporated Class A	Equity	N/A	N/A	33,194	1,555,429 3,851,168
	Continental AG	Equity	N/A	N/A	8,361	1,567,168 1,986,085
	Convergys Corporation	Equity	N/A	N/A	159,430	1,840,249 4,063,871
	Cooper Tire & Rubber Company	Equity	N/A	N/A	58,300	2,066,148 1,972,289
	Core Laboratories N V	Equity	N/A	N/A	26,300	2,621,886 2,999,252
	Core Mark Holding Company, Incorporated	Equity	N/A	N/A	15,894	265,624 941,720
	Coresite Realty Corporation	Equity	N/A	N/A	30,685	1,120,392 1,394,326
	Costco Wholesale Corporation	Equity	N/A	N/A	26,183	3,044,297 3,536,276
	Cott Corporation	Equity	N/A	N/A	88,205	766,382 862,645
	Cracker Barrel Old Country	Equity	N/A	N/A	3,161	149,263 471,495
	Crane Company	Equity	N/A	N/A	11,300	619,973 663,649
	Credit Acceptance Corporation	Equity	N/A	N/A	2,193	228,718 539,873
	Credit Agricole SA	Equity	N/A	N/A	240,480	2,124,809 1,924,589
	Credit Suisse Group	Equity	N/A	N/A	74,852	2,282,204 2,066,664
	Cromwell Property Group	Equity	N/A	N/A	35,938	31,066 28,421
	Cross Country Healthcare, Incorporated	Equity	N/A	N/A	19,000	233,885 240,920

PLUMBERS AND PIPEFITTERS NATIONAL PENSION FUND
ALEXANDRIA, VIRGINIA

SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES
AS OF JUNE 30, 2015

Form 5500, Schedule H, Line 4i

EIN: 52-6152779
Plan No. 001

(c) Description of investment, including maturity date, rate of interest, collateral, par or maturity value						
(a)	(b)				(d)	(e)
Identity of issuer, borrower, lessor or similar party	Description	Maturity Date	Rate of Interest		Cost	Current Value
Common & Preferred Stocks (continued)						
CSG Systems International, Incorporated	Equity	N/A	N/A	34,734 \$	884,503 \$	1,099,678
CSL Limited	Equity	N/A	N/A	958	67,905	63,914
CSR Limited	Equity	N/A	N/A	43,666	138,897	120,082
CSX Corporation	Equity	N/A	N/A	28,170	1,007,844	919,751
CU Bancorp	Equity	N/A	N/A	51,227	966,388	1,135,190
Cubesmart, Incorporated	Equity	N/A	N/A	120,759	2,040,145	2,796,778
Curtiss Wright Corporation	Equity	N/A	N/A	14,750	840,763	1,068,490
CVB Financial Corporation	Equity	N/A	N/A	70,178	731,983	1,235,835
CVSL, Incorporated	Equity	N/A	N/A	47,885	110,316	57,462
CVS Health Corporation	Equity	N/A	N/A	73,244	5,037,243	7,681,830
Cynosure, Incorporated Class A	Equity	N/A	N/A	17,153	360,429	661,763
Cypress Semiconductor Corporation	Equity	N/A	N/A	120,999	1,590,487	1,422,948
Cytec Inds, Incorporated	Equity	N/A	N/A	23,930	1,354,812	1,448,483
Dah Chong Hong Holdings Limited	Equity	N/A	N/A	703,000	420,731	365,483
Dah Sing Banking Group	Equity	N/A	N/A	9,600	15,380	21,004
Dah Sing Financial Holdings	Equity	N/A	N/A	18,400	114,721	120,703
Dai-Chi Life Insurance	Equity	N/A	N/A	3,200	47,164	62,923
Daiichi Sankyo Company Limited	Equity	N/A	N/A	14,400	237,801	266,385
Daikin Industries Limited	Equity	N/A	N/A	20,000	1,336,510	1,439,555
Dai Nippon Printing Company Limited	Equity	N/A	N/A	16,000	129,329	165,314
Daimler AG	Equity	N/A	N/A	17,000	752,322	1,563,490
Dairy Crest Group PLC	Equity	N/A	N/A	46,800	441,667	391,569
Daito Trust Construction Company Limited	Equity	N/A	N/A	1,400	133,884	145,050
Daiwa House Industries Company Limited	Equity	N/A	N/A	9,000	117,415	209,805
Daiwa Securities Group, Incorporated	Equity	N/A	N/A	18,000	147,751	134,899
Dana Holding Corporation	Equity	N/A	N/A	207,200	4,411,114	4,264,176
Danaher Corporation	Equity	N/A	N/A	33,406	2,337,033	2,859,220
Darden Restaurants, Incorporated	Equity	N/A	N/A	43,800	1,862,207	3,113,304
DBS Group Holdings Limited	Equity	N/A	N/A	172,235	2,277,397	2,666,198
DCM Holdings Company Limited	Equity	N/A	N/A	46,100	414,052	451,639
Delhaize Group	Equity	N/A	N/A	21,537	1,494,141	1,778,223
Delphi Automotive PLC	Equity	N/A	N/A	76,887	4,299,676	6,542,315
Delta Air Lines, Incorporated	Equity	N/A	N/A	91,940	3,308,454	3,776,895
Demandware	Equity	N/A	N/A	6,500	411,258	462,020
Denki Kagaku Kogyo	Equity	N/A	N/A	20,000	81,693	88,900
Densco Corporation	Equity	N/A	N/A	1,300	63,471	64,753
Deutsche Bank AG	Equity	N/A	N/A	64,060	2,813,561	1,932,050
Deutsche Telecom AG	Equity	N/A	N/A	75,636	1,249,090	1,311,896
Dexcom, Incorporated	Equity	N/A	N/A	42,034	1,464,384	1,388,179
Diageo PLC	Equity	N/A	N/A	60,872	1,243,889	1,750,679
Dialog Semiconductor	Equity	N/A	N/A	3,132	124,084	168,345
Diamond Resorts International	Equity	N/A	N/A	69,588	1,569,964	2,195,501
Diamond Back Energy, Incorporated	Equity	N/A	N/A	24,500	1,011,842	1,846,810
Dicerna Pharmaceuticals, Incorporated	Equity	N/A	N/A	30,900	573,118	431,055
Dick's Sporting Goods, Incorporated	Equity	N/A	N/A	3,710	200,494	192,067
Digi International, Incorporated	Equity	N/A	N/A	45,970	456,770	439,014
Digital China Holdings Limited	Equity	N/A	N/A	121,000	134,987	163,277
Digital Globe, Incorporated	Equity	N/A	N/A	38,176	1,158,719	1,060,911
Dillard's, Incorporated	Equity	N/A	N/A	11,200	253,844	1,178,128
DineEquity, Incorporated	Equity	N/A	N/A	10,385	1,125,573	1,029,050
Diodes, Incorporated	Equity	N/A	N/A	32,794	884,055	790,663
Direct Line Insurance Group	Equity	N/A	N/A	94,600	381,561	503,275
Disco Corporation	Equity	N/A	N/A	9,500	582,092	786,330

PLUMBERS AND PIPEFITTERS NATIONAL PENSION FUND
ALEXANDRIA, VIRGINIA

SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES
AS OF JUNE 30, 2015

Form 5500, Schedule H, Line 4i

EIN: 52-6152779
Plan No. 001

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(a)	(b)					(d)	(e)
Identity of issuer, borrower, lessor or similar party	Description	Maturity Date	Rate of Interest			Cost	Current Value
<u>Common & Preferred Stocks (continued)</u>							
Disney Walt Company	Equity	N/A	N/A	103,114	\$	9,258,001	\$ 11,769,432
Dish Network Corporation Class A	Equity	N/A	N/A	22,605		1,452,574	1,530,585
Discover Financial	Equity	N/A	N/A	55,910		1,495,610	3,221,534
DNB Nor ASA	Equity	N/A	N/A	161,398		2,229,434	2,692,556
Dolby Laboratories, Incorporated	Equity	N/A	N/A	56,200		1,944,342	2,230,016
Dollar General Corporation	Equity	N/A	N/A	23,498		1,823,719	1,826,735
Domtar Corporation	Equity	N/A	N/A	16,800		714,288	695,520
Donnelly R R & Sons Company	Equity	N/A	N/A	32,800		1,139,780	571,704
Dover Corporation	Equity	N/A	N/A	53,499		3,269,568	3,754,560
Downer Edi Limited	Equity	N/A	N/A	125,042		634,890	461,156
DR Horton, Incorporated	Equity	N/A	N/A	115,300		2,740,638	3,154,608
Dr Pepper Snapple Group, Incorporated	Equity	N/A	N/A	8,000		415,312	583,200
Dreamworks Animation Class A	Equity	N/A	N/A	77,005		1,779,906	2,031,392
Drill Quip, Incorporated	Equity	N/A	N/A	2,320		716,801	174,580
DS Smith PLC	Equity	N/A	N/A	50,800		272,680	308,101
DST Systems, Incorporated	Equity	N/A	N/A	13,307		1,165,521	1,676,416
DTE Energy Company	Equity	N/A	N/A	62,417		4,800,121	4,658,805
Duet Group	Equity	N/A	N/A	80,896		157,517	144,179
Duke Realty Corporation	Equity	N/A	N/A	163,358		2,444,866	3,033,558
Dupont Fabros Technology	Equity	N/A	N/A	30,600		851,121	901,170
DXP Enterprises, Incorporated	Equity	N/A	N/A	8,951		460,352	416,222
Dynegy, Incorporated	Equity	N/A	N/A	36,005		1,167,060	1,053,146
E.On SE	Equity	N/A	N/A	21,700		621,358	292,733
Eads NV	Equity	N/A	N/A	14,333		823,328	929,988
East Asiatic Company Limited	Equity	N/A	N/A	8,900		658,884	74,478
East Japan Railway Company	Equity	N/A	N/A	3,500		249,242	314,867
East West Bancorp, Incorporated	Equity	N/A	N/A	34,870		1,462,880	1,562,873
Eastman Chemical Company	Equity	N/A	N/A	49,723		3,616,138	4,068,336
Easyjet PLC	Equity	N/A	N/A	26,566		700,045	645,324
Ebro Foods SA	Equity	N/A	N/A	12,700		245,358	245,794
Echo Entertainment Group Limited	Equity	N/A	N/A	84,576		252,575	284,510
Edison International	Equity	N/A	N/A	84,800		3,470,486	4,713,184
EDP Energias De Portugal SA	Equity	N/A	N/A	109,096		506,000	414,136
Edwards Lifesciences Corporation	Equity	N/A	N/A	85,300		5,624,228	12,149,279
8Ponts3 Energy Partners LP	Equity	N/A	N/A	4,300		90,300	80,066
Eizo Nanao Corporation	Equity	N/A	N/A	17,300		463,575	397,920
El Paso Electric Company	Equity	N/A	N/A	20,460		661,517	709,144
Electricite De France	Equity	N/A	N/A	31,786		751,533	708,734
Eletronic Art	Equity	N/A	N/A	3,120		210,683	207,480
El Pollo Loco Holdings, Incorporated	Equity	N/A	N/A	20,320		506,670	420,827
EMC Corporation	Equity	N/A	N/A	109,120		3,087,362	2,879,677
Empire State Realty Trust	Equity	N/A	N/A	167,855		2,912,123	2,863,606
Employers Holdings, Incorporated	Equity	N/A	N/A	59,291		1,081,591	1,350,649
Endo International PLC	Equity	N/A	N/A	42,300		3,560,113	3,369,195
Endurance Specialty Holdings	Equity	N/A	N/A	55,300		2,040,503	3,633,210
Enel SPA	Equity	N/A	N/A	454,079		2,686,626	2,052,437
Energen Corporation	Equity	N/A	N/A	14,200		657,153	969,860
Endologix, Incorporated	Equity	N/A	N/A	47,550		605,744	729,417
Endochoice Holdings, Incorporated	Equity	N/A	N/A	14,900		223,617	243,615
Enersys	Equity	N/A	N/A	17,500		718,393	1,230,075
Engility Holdings, Incorporated	Equity	N/A	N/A	1,100		21,131	27,676
Eni SPA	Equity	N/A	N/A	35,100		982,314	622,970
Ennis, Incorporated	Equity	N/A	N/A	22,300		505,692	414,557

PLUMBERS AND PIPEFITTERS NATIONAL PENSION FUND
ALEXANDRIA, VIRGINIA

SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES
AS OF JUNE 30, 2015

Form 5500, Schedule H, Line 4i

EIN: 52-6152779
Plan No. 001

(c) Description of investment, including maturity date, rate of interest, collateral, par or maturity value						
(a)	(b)				(d)	(e)
Identity of issuer, borrower, lessor or similar party	Description	Maturity Date	Rate of Interest		Cost	Current Value
<u>Common & Preferred Stocks (continued)</u>						
Ensco PLC Class A	Equity	N/A	N/A	120,610	\$ 2,699,449	\$ 2,685,985
Entergy Corporation	Equity	N/A	N/A	61,300	4,326,324	4,321,650
Entravision Communications	Equity	N/A	N/A	119,020	628,138	979,535
Envestnet, Incorporated	Equity	N/A	N/A	21,945	267,308	887,236
EOG Resources, Incorporated	Equity	N/A	N/A	22,522	2,445,424	1,971,801
Epam Systems, Incorporated	Equity	N/A	N/A	30,452	1,000,526	2,169,096
EPR Properties	Equity	N/A	N/A	52,788	2,264,221	2,891,727
Essilor International	Equity	N/A	N/A	10,576	771,141	1,261,602
Esperion Therapeutics, Incorporated	Equity	N/A	N/A	2,893	336,319	236,532
Esterline Technologies Corporation	Equity	N/A	N/A	7,210	692,941	687,401
E Trade Financial Corporation	Equity	N/A	N/A	169,400	1,957,352	5,073,530
Ethan Allen Interiors, Incorporated	Equity	N/A	N/A	156,338	4,829,255	4,117,943
Euronet Worldwide, Incorporated	Equity	N/A	N/A	27,802	493,978	1,715,383
Everest Re Group Limited	Equity	N/A	N/A	14,350	1,648,566	2,611,844
Evercore Partners, Incorporated Class A	Equity	N/A	N/A	9,675	529,076	522,063
Evertec, Incorporated	Equity	N/A	N/A	31,115	710,014	660,883
Evolution Mining Limited	Equity	N/A	N/A	54,510	53,548	48,366
EW Scripps Company Class A	Equity	N/A	N/A	47,137	753,824	1,077,080
Exar Corporation	Equity	N/A	N/A	29,965	298,802	293,058
Exedy Corporation	Equity	N/A	N/A	2,400	61,530	60,007
Exelon Corporation	Equity	N/A	N/A	83,390	3,014,366	2,620,114
Exlservice Holdings, Incorporated	Equity	N/A	N/A	52,397	1,207,150	1,811,888
Exxon Mobil Corporation	Equity	N/A	N/A	166,921	13,952,840	13,887,827
Facebook, Incorporated Class A	Equity	N/A	N/A	169,180	10,343,186	14,509,723
Factset Resh Systems, Incorporated	Equity	N/A	N/A	57,900	6,274,495	9,409,329
Fairfax Media Limited	Equity	N/A	N/A	138,838	117,929	87,303
Fanuc Limited	Equity	N/A	N/A	5,300	816,152	1,098,425
Fast Retailing Company Limited	Equity	N/A	N/A	100	35,691	45,355
FCB Financial Holdings, Incorporated	Equity	N/A	N/A	5,600	178,654	178,080
Federal Agriculture Mtg Corporation	Equity	N/A	N/A	15,066	507,907	437,818
Fedex Corporation	Equity	N/A	N/A	28,385	4,594,603	4,836,804
Fei Company	Equity	N/A	N/A	9,005	778,933	746,785
Ferro Corporation	Equity	N/A	N/A	123,555	1,131,967	2,073,253
FNF Group	Equity	N/A	N/A	92,800	2,831,465	3,432,672
FNFV Group	Equity	N/A	N/A	76,207	874,325	1,172,064
Fiesta Restaurant Group	Equity	N/A	N/A	6,394	392,276	319,700
Fifth Third Bancorp	Equity	N/A	N/A	243,800	4,073,499	5,075,916
Financial Engines, Incorporated	Equity	N/A	N/A	8,720	379,423	370,426
Financial Institutions Incorporated	Equity	N/A	N/A	40,332	693,416	1,001,847
Fireeye, Incorporated	Equity	N/A	N/A	43,235	1,573,893	2,114,624
First American Financial	Equity	N/A	N/A	17,705	644,999	658,803
FirstEnergy Corporation	Equity	N/A	N/A	34,900	1,226,486	1,135,995
First Financial Bankshares, Incorporated	Equity	N/A	N/A	37,266	802,741	1,290,894
First Financial Bancorp	Equity	N/A	N/A	71,305	1,080,134	1,279,212
First Group PLC	Equity	N/A	N/A	100,500	568,892	188,702
First Merchants Corporation	Equity	N/A	N/A	63,751	1,079,761	1,574,650
First Pacific Company	Equity	N/A	N/A	100,000	96,576	85,900
Fitbit, Incorporated	Equity	N/A	N/A	1,659	33,180	63,424
Five Below	Equity	N/A	N/A	23,825	869,443	941,802
Fiveprime Therapeutics, Incorporated	Equity	N/A	N/A	21,735	286,898	539,897
Flamel Technologies SA	Equity	N/A	N/A	38,686	709,645	819,756
Fleetcor Technologies, Incorporated	Equity	N/A	N/A	19,360	2,593,827	3,021,322
Fleetmatics Group PLC	Equity	N/A	N/A	19,600	722,193	917,868

PLUMBERS AND PIPEFITTERS NATIONAL PENSION FUND
ALEXANDRIA, VIRGINIA

SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES
AS OF JUNE 30, 2015

Form 5500, Schedule H, Line 4i

EIN: 52-6152779
Plan No. 001

(c) Description of investment, including maturity date, rate of interest, collateral, par or maturity value						
(a)	(b)				(d)	(e)
Identity of issuer, borrower, lessor or similar party	Description	Maturity Date	Rate of Interest		Cost	Current Value
<u>Common & Preferred Stocks (continued)</u>						
Flextronics International Limited	Equity	N/A	N/A	195,680 \$	1,858,489 \$	2,213,141
Footlocker, Incorporated	Equity	N/A	N/A	42,300	1,597,340	2,834,523
Ford Motor Company	Equity	N/A	N/A	172,252	2,446,183	2,585,503
Forest City Enterprises Class A	Equity	N/A	N/A	83,425	1,941,413	1,843,693
Forrester Resh, Incorporated	Equity	N/A	N/A	13,101	387,717	471,898
Fox Factory Holding Corporation	Equity	N/A	N/A	50,967	811,249	819,549
Franklin Street Properties	Equity	N/A	N/A	66,200	764,467	748,722
Frasers Commercial Trust	Equity	N/A	N/A	23,000	26,540	26,128
Freds, Incorporated Class A	Equity	N/A	N/A	35,780	612,764	690,196
Freenet AG	Equity	N/A	N/A	24,600	386,206	830,358
Fresenius Medical Care	Equity	N/A	N/A	17,996	1,515,818	1,499,067
Fresh Del Monte Produce, Incorporated	Equity	N/A	N/A	20,300	462,844	784,798
Freshpet, Incorporated	Equity	N/A	N/A	52,335	930,235	973,431
Fresh Market, Incorporated	Equity	N/A	N/A	5,956	232,656	191,426
FTI Consulting, Incorporated	Equity	N/A	N/A	34,314	1,245,654	1,415,109
Fuji Electric Holdings Company Limited	Equity	N/A	N/A	32,000	105,029	137,795
Fuji Heavy Industries Limited	Equity	N/A	N/A	1,900	54,493	69,986
Fujifilm Holdings Corporation	Equity	N/A	N/A	10,300	106,962	368,076
Fujitsu Limited	Equity	N/A	N/A	33,000	195,841	184,542
Gamestop Corporation Class A	Equity	N/A	N/A	14,400	379,011	618,624
Gannett, Incorporated	Equity	N/A	N/A	13,500	135,175	188,865
Garmin Limited	Equity	N/A	N/A	114,000	4,414,286	5,008,020
Gas Natural SDG SA	Equity	N/A	N/A	8,300	151,954	188,212
GEA Group AG	Equity	N/A	N/A	31,323	899,698	1,407,366
Generac Holdings, Incorporated	Equity	N/A	N/A	45,990	2,085,318	1,828,103
General Dynamics Corporation	Equity	N/A	N/A	22,111	2,871,376	3,132,908
General Electric Company	Equity	N/A	N/A	133,752	3,285,701	3,553,791
General Motors Company	Equity	N/A	N/A	49,500	1,724,796	1,649,835
Genesco, Incorporated	Equity	N/A	N/A	17,537	655,416	1,157,968
Genesee & Wyoming, Incorporated	Equity	N/A	N/A	6,439	217,582	490,523
Gentex Corporation	Equity	N/A	N/A	326,400	3,743,709	5,359,488
Genworth Financial, Incorporated	Equity	N/A	N/A	45,313	1,127,103	300,230
Georg Fischer Limited	Equity	N/A	N/A	1,705	964,169	1,171,680
G-III Apparel Group	Equity	N/A	N/A	11,385	211,325	800,935
Gilead Sciences, Incorporated	Equity	N/A	N/A	68,163	5,500,208	7,980,524
Glaukos Corporation	Equity	N/A	N/A	100	1,800	2,898
Glaxosmithkline PLC	Equity	N/A	N/A	29,800	747,938	634,442
Global Brass & Copper Holding	Equity	N/A	N/A	13,980	201,440	237,800
Globant SA	Equity	N/A	N/A	14,980	207,600	455,841
Globe Specialty Metals, Incorporated	Equity	N/A	N/A	82,820	1,437,409	1,465,914
Globus Medical, Incorporated Class A	Equity	N/A	N/A	51,369	802,731	1,318,642
Glycomimetics, Incorporated	Equity	N/A	N/A	36,200	299,067	287,790
Go Ahead Group PLC	Equity	N/A	N/A	14,700	307,129	608,381
Goldman Sachs Group, Incorporated	Equity	N/A	N/A	20,478	3,527,737	4,275,602
Goodyear Tire & Rubber Company	Equity	N/A	N/A	26,030	833,440	784,804
Google, Incorporated Class A	Equity	N/A	N/A	20,889	11,323,994	11,114,851
GPT Group	Equity	N/A	N/A	16,966	58,823	56,026
Graco, Incorporated	Equity	N/A	N/A	36,200	2,298,252	2,571,286
Great Eagle Holdings Limited	Equity	N/A	N/A	9,000	32,337	33,555
Great Plains Energy, Incorporated	Equity	N/A	N/A	123,200	2,656,079	2,976,512
Great Western Bancorp, Incorporated	Equity	N/A	N/A	29,700	643,743	716,067
Greenbriar Cos, Incorporated	Equity	N/A	N/A	11,917	666,873	558,311
Greggs PLC	Equity	N/A	N/A	21,200	1,269,664	394,061

PLUMBERS AND PIPEFITTERS NATIONAL PENSION FUND
ALEXANDRIA, VIRGINIA

SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES
AS OF JUNE 30, 2015

Form 5500, Schedule H, Line 4i

EIN: 52-6152779
Plan No. 001

(c) Description of investment, including maturity date, rate of interest, collateral, par or maturity value		(d)		(e)	
(a)	(b)	(c)	(d)	(e)	(f)
Identity of issuer, borrower, lessor or similar party	Description	Maturity Date	Rate of Interest	Cost	Current Value
<u>Common & Preferred Stocks (continued)</u>					
Group 1 Automotive	Equity	N/A	N/A	5,000 \$	432,768 \$
Grubhub, Incorporated	Equity	N/A	N/A	53,355	1,916,256
Grupo Financiero Banorte	Equity	N/A	N/A	90,762	583,932
Guidewire Software, Incorporated	Equity	N/A	N/A	14,416	512,584
H & E Equipment Services, Incorporated	Equity	N/A	N/A	23,621	371,461
H3 Contingent Value	Equity	N/A	N/A	247,800	-
Hain Celestial Group, Incorporated	Equity	N/A	N/A	12,940	250,100
Halyard Health, Incorporated	Equity	N/A	N/A	14,733	616,747
Hannon Armstrong	Equity	N/A	N/A	22,200	416,752
Hanover Insurance Group, Inc	Equity	N/A	N/A	26,705	1,011,817
Harman Int'l Industries	Equity	N/A	N/A	19,900	2,499,309
Harris Corporation	Equity	N/A	N/A	20,400	754,396
Hartford Financial Services Group, Inc.	Equity	N/A	N/A	144,014	4,939,174
Haynes International, Incorporated	Equity	N/A	N/A	20,740	862,925
HCC Insurance Holdings, Incorporated	Equity	N/A	N/A	48,619	1,260,951
Headwaters, Incorporated	Equity	N/A	N/A	169,902	2,025,936
Health Net, Incorporated	Equity	N/A	N/A	15,140	769,938
Heartland Payment Systems, Incorporated	Equity	N/A	N/A	59,220	2,069,728
Heartware International, Incorporated	Equity	N/A	N/A	14,835	1,118,465
Heico Corporation	Equity	N/A	N/A	15,191	616,890
Heidelbergcement AG	Equity	N/A	N/A	19,205	1,393,161
Heineken NV	Equity	N/A	N/A	4,545	325,370
Heiwa Corporation	Equity	N/A	N/A	21,500	367,960
Helix Energy Solutions Group	Equity	N/A	N/A	79,352	1,509,493
Helmerich & Payne, Incorporated	Equity	N/A	N/A	19,435	1,357,690
Helvetia Holding AG	Equity	N/A	N/A	2,100	375,047
Herbalife Limtied	Equity	N/A	N/A	2,740	144,081
Hercules Technology Growth	Equity	N/A	N/A	56,628	730,733
Heritage Crystal Clean, Incorporated	Equity	N/A	N/A	30,530	369,157
Hersha Hospitality Trust	Equity	N/A	N/A	35,563	808,771
Hess Corporation	Equity	N/A	N/A	13,220	706,136
Hewlett Packard Company	Equity	N/A	N/A	8,620	267,666
Hexagon AB	Equity	N/A	N/A	25,046	544,886
Hilltop Worldwide Holdings	Equity	N/A	N/A	5,600	1,288,917
Hilton Worldwide Holdings, Incorporated	Equity	N/A	N/A	131,800	3,664,813
Hino Motors Limited	Equity	N/A	N/A	5,700	78,100
Hitachi Construction Machine	Equity	N/A	N/A	5,500	98,382
Hitachi Limited	Equity	N/A	N/A	63,000	275,094
HKT Trust and HKT Limited	Equity	N/A	N/A	41,000	48,974
Hokuriku Electric Power Company	Equity	N/A	N/A	8,000	104,087
Home Bancshars, Incorporated	Equity	N/A	N/A	27,045	921,796
Home Depot, Incorporated	Equity	N/A	N/A	40,700	4,325,673
Home Properties Incorporated	Equity	N/A	N/A	24,572	1,493,338
Home Retail Group PLC	Equity	N/A	N/A	72,400	276,023
Honda Motor Company Limited	Equity	N/A	N/A	11,300	458,824
Honeywell International, Incorporated	Equity	N/A	N/A	30,238	2,122,838
Hong Kong Exchanges & Clear	Equity	N/A	N/A	5,300	182,828
Hong Kong Land Holdings Limited	Equity	N/A	N/A	124,000	928,120
Hong Leong Asia Limited	Equity	N/A	N/A	205,000	521,767
Horsehead Holdings Corporation	Equity	N/A	N/A	66,043	813,117
Hospitality Properties Trust	Equity	N/A	N/A	67,700	2,170,559
Howard Hughes Corporation	Equity	N/A	N/A	12,000	1,790,763
Hoya Corporation	Equity	N/A	N/A	1,000	33,845

PLUMBERS AND PIPEFITTERS NATIONAL PENSION FUND
ALEXANDRIA, VIRGINIA

SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES
AS OF JUNE 30, 2015

Form 5500, Schedule H, Line 4i

EIN: 52-6152779
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(c) Description of investment, including maturity date, rate of interest, collateral, par or maturity value						
(a)	(b)				(d)	(e)
Identity of issuer, borrower, lessor or similar party	Description	Maturity Date	Rate of Interest		Cost	Current Value
<u>Common & Preferred Stocks (continued)</u>						
HSBC Holdings PLC	Equity	N/A	N/A	615,159 \$	5,907,185 \$	5,493,370
HSN, Incorporated	Equity	N/A	N/A	46,560	2,139,778	3,268,046
Huabao International Holdings	Equity	N/A	N/A	744,000	415,403	448,215
Hubspot, Incorporated	Equity	N/A	N/A	4,700	1,054,095	1,054,095
Huntington Bancshares, Incorporated	Equity	N/A	N/A	208,750	1,422,528	2,154,894
Huntington Ingalls Industries, Incorporated	Equity	N/A	N/A	18,220	1,612,581	2,051,390
Huntsman Corporation	Equity	N/A	N/A	47,000	719,083	1,037,290
Huron Consulting Group, Incorporated	Equity	N/A	N/A	38,910	1,231,362	2,727,202
Hyster Yale Materials Class A	Equity	N/A	N/A	9,400	284,423	651,232
Hyundai Motor Company	Equity	N/A	N/A	2,923	604,518	356,384
Iberdrola SA	Equity	N/A	N/A	105,100	726,835	695,762
Iberibank Corporation	Equity	N/A	N/A	51,908	2,970,446	3,541,683
Idacorp, Incorporated	Equity	N/A	N/A	11,100	417,626	623,154
Idemitsu Kosan Company	Equity	N/A	N/A	4,600	111,823	90,320
IHS, Incorporated Class A	Equity	N/A	N/A	18,400	1,941,596	2,366,792
Illumina, Incorporated	Equity	N/A	N/A	18,299	3,129,312	3,995,770
Imax Corporation	Equity	N/A	N/A	80,015	2,146,380	3,222,204
Immoeast AG	Equity	N/A	N/A	8,127	8,127	8,127
Imperial Tobacco Group	Equity	N/A	N/A	51,283	2,176,059	2,486,713
Implenia AG	Equity	N/A	N/A	3,900	240,899	217,953
Incyte Corporation	Equity	N/A	N/A	7,821	439,618	815,026
Inditex De Diseno Textil SA	Equity	N/A	N/A	27,825	698,460	904,410
ING Groep NV	Equity	N/A	N/A	229,753	3,142,239	3,793,440
Independence Group NL	Equity	N/A	N/A	115,100	399,469	370,318
Industria De Diseno Textil Industries	Equity	N/A	N/A	183,441	2,802,626	2,977,247
Infineon Technologies AG	Equity	N/A	N/A	44,762	519,810	552,363
Infrareit, Incorporated	Equity	N/A	N/A	7,515	197,810	213,125
Ingersoll Rand PLC	Equity	N/A	N/A	65,962	4,060,378	4,447,158
Ingram Micro, Incorporated	Equity	N/A	N/A	20,200	412,451	505,606
Inland Real Estate	Equity	N/A	N/A	57,600	611,209	542,592
Inpex Corporation	Equity	N/A	N/A	13,500	198,461	153,493
Inphi Corporation	Equity	N/A	N/A	9,900	259,670	226,314
Insteel Industries, Incorporated	Equity	N/A	N/A	31,329	629,961	585,852
Integrated Device Technology, Incorporated	Equity	N/A	N/A	46,817	810,018	1,015,929
Intel Corporation	Equity	N/A	N/A	125,450	3,983,148	3,815,562
Intercontinental Exchange, Incorporated	Equity	N/A	N/A	8,232	1,528,430	1,840,758
Interface, Incorporated	Equity	N/A	N/A	15,155	269,486	379,633
International Consolidated Airline	Equity	N/A	N/A	43,472	380,868	338,090
International Paper Company	Equity	N/A	N/A	28,800	1,540,537	1,370,592
Intersect Ent, Incorporated	Equity	N/A	N/A	12,900	151,014	369,327
Intersil Corporation	Equity	N/A	N/A	20,705	308,252	259,020
Intesa San Paolo	Equity	N/A	N/A	620,867	1,770,811	2,241,330
Intuit Software	Equity	N/A	N/A	114,000	6,600,925	11,487,780
Intuitive Surgical, Incorporated	Equity	N/A	N/A	12,200	5,483,452	5,910,900
Invensense, Incorporated	Equity	N/A	N/A	13,095	205,481	197,735
Ironwood Pharmaceuticals, Incorporated	Equity	N/A	N/A	51,275	652,772	618,377
Israel Discount Bank	Equity	N/A	N/A	226,720	389,840	435,241
Isuzu Motors Limited	Equity	N/A	N/A	41,600	582,552	539,552
Italeменти SPA	Equity	N/A	N/A	36,990	276,144	244,131
Itochu Corporation	Equity	N/A	N/A	26,600	324,984	351,450
ITV PLC	Equity	N/A	N/A	360,061	1,037,073	1,472,649
J & J Snack Foods Corporation	Equity	N/A	N/A	3,083	85,499	341,196
Jabil Circuit	Equity	N/A	N/A	61,170	1,320,182	1,302,309

PLUMBERS AND PIPEFITTERS NATIONAL PENSION FUND
ALEXANDRIA, VIRGINIA

SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES
AS OF JUNE 30, 2015

Form 5500, Schedule H, Line 4i

EIN: 52-6152779
Plan No. 001

(c) Description of investment, including maturity date, rate of interest,
collateral, par or maturity value

(a)	(b)				(d)	(e)
Identity of issuer, borrower, lessor or similar party	Description	Maturity Date	Rate of Interest		Cost	Current Value
<u>Common & Preferred Stocks (continued)</u>						
James River Group Holdings Limited	Equity	N/A	N/A	58,305	\$ 1,331,037	\$ 1,508,350
Jamba, Incorporated	Equity	N/A	N/A	38,736	614,627	600,021
Janus Capital Group, Incorporated	Equity	N/A	N/A	183,075	1,817,031	3,134,244
Japan Airlines Company Limited	Equity	N/A	N/A	29,000	895,054	1,011,807
Japan Prime Realty Investment	Equity	N/A	N/A	22	73,859	68,399
Japan Tobacco, Incorporated	Equity	N/A	N/A	15,400	465,709	550,550
Jarden Corporation	Equity	N/A	N/A	92,749	4,011,324	4,799,761
Jardine Strategic Holdings Limited	Equity	N/A	N/A	41,577	542,747	1,254,378
JD.Com, Incorporated	Equity	N/A	N/A	23,247	780,845	792,723
Jenoptik AG	Equity	N/A	N/A	31,700	403,803	383,907
Jetblue Airways	Equity	N/A	N/A	364,420	2,470,044	7,565,359
J Front Retailing Company Limited	Equity	N/A	N/A	4,800	85,727	90,364
Jiangnan Group Limited	Equity	N/A	N/A	1,181,000	379,040	339,750
John Bean Technology	Equity	N/A	N/A	46,897	1,025,040	1,762,858
Johnson & Johnson	Equity	N/A	N/A	120,566	10,868,683	11,750,362
Jones Lang Lasalle, Incorporated	Equity	N/A	N/A	3,570	588,775	610,470
JPM CW17 Idea Cellular	Equity	N/A	N/A	451,373	896,907	857,609
JP Morgan Chase & Company	Equity	N/A	N/A	226,766	11,786,570	15,365,664
J2 Global, Incorporated	Equity	N/A	N/A	11,260	783,669	765,004
Juniper Networks, Incorporated	Equity	N/A	N/A	68,800	1,827,532	1,786,736
JX Holdings, Incorporated	Equity	N/A	N/A	109,376	747,307	472,054
Kaiser Aluminum Corporation	Equity	N/A	N/A	11,485	852,476	954,174
Kamigumi Company Limited	Equity	N/A	N/A	7,000	71,794	65,776
Kaneka Corporation	Equity	N/A	N/A	9,000	56,337	65,817
Kao Corporation	Equity	N/A	N/A	1,400	54,944	65,124
Kar Auction Services, Incorporated	Equity	N/A	N/A	40,517	660,698	1,515,336
Kasukornbank PCL	Equity	N/A	N/A	92,000	454,584	514,811
Kawasaki Kissen Kaisha Limited	Equity	N/A	N/A	32,000	68,333	75,565
KBC Groep NV	Equity	N/A	N/A	23,449	1,456,703	1,564,048
Kcom Group PLC	Equity	N/A	N/A	321,000	255,570	471,581
Kddi Corporation	Equity	N/A	N/A	87,200	1,527,446	2,104,741
Kennedy Wilson Holdings, Incorporated	Equity	N/A	N/A	84,497	1,777,088	2,077,781
Kerry Group PLC	Equity	N/A	N/A	17,655	1,246,675	1,308,704
Kerry Properties Limited	Equity	N/A	N/A	17,500	69,295	68,631
Keiyo Bank Limited	Equity	N/A	N/A	74,000	395,796	389,394
Keycorp	Equity	N/A	N/A	288,210	4,048,559	4,328,914
Keyence Corporation	Equity	N/A	N/A	200	91,942	107,800
Keysight Technologies, Incorporated	Equity	N/A	N/A	81,700	2,811,205	2,548,223
K Force, Incorporated	Equity	N/A	N/A	72,137	1,392,620	1,649,773
Kilroy Realty Corporation	Equity	N/A	N/A	54,237	3,625,773	3,642,015
Kimball International, Incorporated Class B	Equity	N/A	N/A	46,315	416,903	563,190
Kingboard Chemicals Holding	Equity	N/A	N/A	105,600	425,168	182,821
Kirby Corporation	Equity	N/A	N/A	9,013	340,353	690,937
Kirin Holdings Company Limited	Equity	N/A	N/A	15,800	215,634	217,460
Kite Pharma, Incorporated	Equity	N/A	N/A	14,415	759,149	878,883
Kite Realty Group Trust	Equity	N/A	N/A	22,926	599,065	560,999
KLX, Incorporated	Equity	N/A	N/A	8,668	351,529	382,519
Knoll, Incorporated	Equity	N/A	N/A	31,260	541,913	782,438
Knight Transportation, Incorporated	Equity	N/A	N/A	16,430	406,895	439,338
Kobe Steel Limited	Equity	N/A	N/A	92,000	136,185	154,855
Kohls Corporation	Equity	N/A	N/A	41,510	2,255,727	2,598,941
Komatsu Limited	Equity	N/A	N/A	7,700	176,124	154,585
Konica Minolta Holdings, Incorporated	Equity	N/A	N/A	19,500	161,126	227,687

PLUMBERS AND PIPEFITTERS NATIONAL PENSION FUND
ALEXANDRIA, VIRGINIA

SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES
AS OF JUNE 30, 2015

Form 5500, Schedule H, Line 4i

EIN: 52-6152779
Plan No. 001

(c) Description of investment, including maturity date, rate of interest, collateral, par or maturity value					(e)	
(a)	(b)				(d)	(e)
Identity of issuer, borrower, lessor or similar party	Description	Maturity Date	Rate of Interest		Cost	Current Value
<u>Common & Preferred Stocks (continued)</u>						
Koninklijke Ahold	Equity	N/A	N/A	52,100 \$	704,961 \$	975,807
Koninklijke Philips NV	Equity	N/A	N/A	19,209	650,586	488,695
Kroger Company	Equity	N/A	N/A	60,500	1,432,021	4,386,855
Kubota Corporation	Equity	N/A	N/A	74,000	1,110,947	1,161,060
Kurita Water Industries	Equity	N/A	N/A	5,500	123,846	128,259
Kyocera Corporation	Equity	N/A	N/A	4,600	210,081	239,162
Kyorin Company Limited	Equity	N/A	N/A	32,000	495,527	652,890
Kyowa Exeo Corporation	Equity	N/A	N/A	30,000	272,856	349,553
L 3 Communications Holdings, Incorporated	Equity	N/A	N/A	8,500	1,001,297	963,730
L Brands, Incorporated	Equity	N/A	N/A	128,500	6,680,021	11,016,305
Lafarge SA	Equity	N/A	N/A	7,050	458,531	465,609
La Z Boy Incorporated	Equity	N/A	N/A	12,526	175,349	329,935
Laboratory Corporation of America Holdings	Equity	N/A	N/A	6,600	659,908	800,052
Laclede Group, Incorporated	Equity	N/A	N/A	23,145	1,210,002	1,204,929
Lakeland Bancorp, Incorporated	Equity	N/A	N/A	141,522	1,399,329	1,682,697
Lam Research Corporation	Equity	N/A	N/A	57,020	4,699,837	4,638,577
Lands End, Incorporated	Equity	N/A	N/A	38,505	1,466,272	956,079
Landstar Systems, Incorporated	Equity	N/A	N/A	73,800	3,893,808	4,935,006
Lannett, Incorporated	Equity	N/A	N/A	10,500	673,035	624,120
Larson & Toubro	Equity	N/A	N/A	15,882	435,917	416,108
Las Vegas Sands Corporation	Equity	N/A	N/A	27,690	2,054,875	1,455,663
Lattice Semiconductor Corporation	Equity	N/A	N/A	50,400	213,454	296,856
LDR Holding Corporation	Equity	N/A	N/A	21,371	452,079	924,296
Lear Corporation	Equity	N/A	N/A	27,230	1,841,914	3,056,840
Legacy Texas Financial Group	Equity	N/A	N/A	10,620	1,822,570	320,724
Lend Lease Group	Equity	N/A	N/A	72,244	692,614	833,696
Lending Club Corporation	Equity	N/A	N/A	20,567	397,004	303,363
Leroy Seafood Group	Equity	N/A	N/A	4,801	174,432	156,758
Level 3 Communications, Incorporated	Equity	N/A	N/A	68,200	3,714,683	3,592,024
Levy Acquisition Corporation	Equity	N/A	N/A	26,310	389,475	400,438
Lexmark International, Incorporated	Equity	N/A	N/A	48,000	2,750,705	2,121,600
Lexington Realty Trust	Equity	N/A	N/A	93,500	668,744	792,880
Liberbank SA	Equity	N/A	N/A	178,653	140,729	148,061
Liberty Global PLC	Equity	N/A	N/A	82,330	3,324,027	4,168,368
Libbey, Incorporated	Equity	N/A	N/A	30,617	851,252	1,265,401
Liberty Ventures	Equity	N/A	N/A	14,799	333,547	581,157
Lilly Eli & Company	Equity	N/A	N/A	23,300	1,508,596	1,945,317
Lincoln National Corporation	Equity	N/A	N/A	145,072	3,893,856	8,591,164
LinkedIn Corporation	Equity	N/A	N/A	26,241	5,039,023	5,422,178
Link REIT	Equity	N/A	N/A	9,500	64,031	55,639
Lithia Motors, Incorporated Class A	Equity	N/A	N/A	8,676	719,216	981,776
Littelfuse, Incorporated	Equity	N/A	N/A	17,315	865,343	1,643,020
Lloyds Banking Group PLC	Equity	N/A	N/A	1,624,434	-	2,187,089
Lonza AG-Reg	Equity	N/A	N/A	9,446	668,772	1,261,891
L'Oreal	Equity	N/A	N/A	5,291	659,542	966,137
Louisiana Pacific Corporation	Equity	N/A	N/A	29,810	514,447	507,664
Lululemon Athletica, Incorporated	Equity	N/A	N/A	46,700	3,201,813	3,049,510
Luxfer Holdings PLC	Equity	N/A	N/A	41,265	473,276	536,445
Luxoft Holding, Incorporated Class A	Equity	N/A	N/A	21,743	798,766	1,229,567
Lyondellbasell Industries NV	Equity	N/A	N/A	7,800	613,938	807,456
M&T Bank Corporation	Equity	N/A	N/A	29,300	2,782,258	3,660,449
Macquarie Group Limited	Equity	N/A	N/A	25,989	974,105	1,215,331
Macquarie Infrastructure Company LLC	Equity	N/A	N/A	13,110	767,783	1,083,279

PLUMBERS AND PIPEFITTERS NATIONAL PENSION FUND
ALEXANDRIA, VIRGINIA

SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES
AS OF JUNE 30, 2015

Form 5500, Schedule H, Line 4i

EIN: 52-6152779
Plan No. 001

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Identity of issuer, borrower, lessor or similar party	Description	Maturity Date	Rate of Interest			Cost	Current Value
<u>Common & Preferred Stocks (continued)</u>							
Macy's, Incorporated	Equity	N/A	N/A	66,063	\$	3,189,427	\$ 4,457,271
Madden Steven Limited	Equity	N/A	N/A	21,975		553,127	940,091
Man Group PLC	Equity	N/A	N/A	567,280		1,626,149	1,398,498
Manhattan Assocs, Incorporated	Equity	N/A	N/A	20,862		767,511	1,244,418
Mapletree Commercial Trust	Equity	N/A	N/A	74,000		12,350	80,491
Mapletree Industrial Trust	Equity	N/A	N/A	96,200		110,655	111,424
Mapletree Logistics Trust	Equity	N/A	N/A	32,000		27,013	26,848
Marathon Oil Corporation	Equity	N/A	N/A	144,975		4,490,575	3,847,636
Marathon Petroleum Corporation	Equity	N/A	N/A	99,860		3,685,827	5,223,677
Marinemax, Incorporated	Equity	N/A	N/A	33,087		518,564	777,875
Marketaxess Holdings, Incorporated	Equity	N/A	N/A	14,021		737,910	1,300,728
Marketo, Incorporated	Equity	N/A	N/A	25,810		861,904	724,229
Marriott International, Incorporated	Equity	N/A	N/A	44,322		2,810,020	3,297,114
Marriott Vacations Worldwide Corporation	Equity	N/A	N/A	29,946		1,158,134	2,747,546
Marsh & McLennan Companies, Incorporated	Equity	N/A	N/A	59,334		2,761,721	3,364,238
Marubeni Corporation	Equity	N/A	N/A	171,800		873,853	985,864
Marvell Technology Group Limited	Equity	N/A	N/A	208,600		2,955,937	2,750,391
Masonite International Corporation	Equity	N/A	N/A	42,988		2,373,754	3,013,889
Mastercard, Incorporated Class A	Equity	N/A	N/A	83,614		6,359,720	7,816,237
Matsushita Electric Ind	Equity	N/A	N/A	12,400		143,007	170,369
Mcgrath Rentcorp	Equity	N/A	N/A	17,206		456,340	523,579
McGraw Hill Financial, Incorporated	Equity	N/A	N/A	93,796		7,956,749	9,421,808
Mckesson Corporation	Equity	N/A	N/A	31,262		4,197,925	7,028,010
Mediobanca SPA	Equity	N/A	N/A	48,578		442,201	476,313
Medipal Holdings Corporation	Equity	N/A	N/A	33,400		399,697	545,000
Medivation, Incorporated	Equity	N/A	N/A	14,400		1,851,247	1,644,480
Medtronic PLC	Equity	N/A	N/A	77,981		5,866,854	5,778,392
Merck KGAA	Equity	N/A	N/A	7,831		691,959	795,003
Meritor, Incorporated	Equity	N/A	N/A	59,800		612,043	784,576
Metaldyne Performance Group	Equity	N/A	N/A	41,819		775,362	759,015
Metcash Limited	Equity	N/A	N/A	132,600		503,406	112,975
Methode Electronics, Incorporated	Equity	N/A	N/A	25,105		432,708	689,132
Metlife, Incorporated	Equity	N/A	N/A	51,731		2,594,107	2,896,419
MFA Financial, Incorporated	Equity	N/A	N/A	416,100		3,248,250	3,074,979
MGIC Investment Corporation	Equity	N/A	N/A	272,935		2,258,056	3,106,000
Michelin	Equity	N/A	N/A	9,384		1,041,037	986,258
Micrel, Incorporated	Equity	N/A	N/A	9,825		153,506	136,568
Micron Technology, Incorporated	Equity	N/A	N/A	73,500		2,785,628	3,485,738
Microsemi Corporation	Equity	N/A	N/A	29,631		709,033	1,035,603
Microsoft Corporation	Equity	N/A	N/A	167,807		7,333,848	7,408,679
Mid Amer Apt Communities Incorporated	Equity	N/A	N/A	15,882		911,533	1,156,368
Middleby Corporation	Equity	N/A	N/A	125,243		6,924,874	14,056,022
Milacron Holdings Corporation	Equity	N/A	N/A	24,740		494,800	486,883
Mineral Resources Limited	Equity	N/A	N/A	43,800		407,435	223,040
Minerals Technologies, Incorporated	Equity	N/A	N/A	15,407		631,469	1,049,679
Miraca Holdings, Incorporated	Equity	N/A	N/A	6,500		195,969	324,735
Mitsubishi Chemical Holding	Equity	N/A	N/A	49,100		266,833	309,119
Mitsubishi Electric Corporation	Equity	N/A	N/A	72,900		1,174,472	1,311,709
Mitsubishi Estate Company Limited	Equity	N/A	N/A	7,000		211,101	150,799
Mitsubishi Heavy Industries Limited	Equity	N/A	N/A	30,000		124,188	183,900
Mitsubishi Materials Corporation	Equity	N/A	N/A	54,000		177,298	207,378
Mitsubishi Tanabe Pharma	Equity	N/A	N/A	11,500		156,683	172,427
Mitsubishi UFJ Financial Group	Equity	N/A	N/A	349,500		2,972,577	2,512,479

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<u>Common & Preferred Stocks (continued)</u>						
Mitsubishi UFJ Lease & Finance	Equity	N/A	N/A	22,500 \$	118,211 \$	123,177
Mitsui Fudosan Company Limited	Equity	N/A	N/A	5,000	115,641	140,009
Mitsui Mining & Smelting Company	Equity	N/A	N/A	66,100	884,695	897,914
Mizuho Financial Group, Incorporated	Equity	N/A	N/A	841,000	1,961,200	1,821,009
MKS Instrs, Incorporated	Equity	N/A	N/A	45,205	1,463,111	1,715,078
Moelis & Company	Equity	N/A	N/A	4,100	130,175	117,711
Monarch Casino & Resort, Incorporated	Equity	N/A	N/A	21,562	368,485	443,315
Mondelez International	Equity	N/A	N/A	91,700	3,447,457	3,772,538
Mondi PLC	Equity	N/A	N/A	61,693	1,202,027	1,328,972
Monolithic Power Systems, Incorporated	Equity	N/A	N/A	8,165	389,131	414,047
Monotype Imaging Holdings, Incorporated	Equity	N/A	N/A	12,140	162,837	292,695
Monsanto Company	Equity	N/A	N/A	33,636	4,082,065	3,585,261
Moody's Corporation	Equity	N/A	N/A	26,300	2,494,141	2,839,348
Moog, Incorporated Class A	Equity	N/A	N/A	15,261	835,666	1,078,647
Morgan Stanley	Equity	N/A	N/A	205,364	6,849,363	7,966,070
Morrison Supermarkets	Equity	N/A	N/A	267,800	1,233,335	776,620
Mosaic Company	Equity	N/A	N/A	30,900	1,560,473	1,447,665
MS & AD Insurance	Equity	N/A	N/A	6,500	194,352	202,513
Muenchener Rueckver AG	Equity	N/A	N/A	6,300	1,194,390	1,125,180
Murata Manufacturing Company	Equity	N/A	N/A	1,000	110,939	174,990
Murphy Oil Corporation	Equity	N/A	N/A	65,300	3,240,320	2,714,521
Myer Holdings Limited	Equity	N/A	N/A	205,700	405,078	194,417
MYR Group, Incorporated	Equity	N/A	N/A	30,775	566,300	952,794
Myriad Genetics, Incorporated	Equity	N/A	N/A	113,300	3,360,798	3,851,067
Nabors Industries Limited	Equity	N/A	N/A	76,020	1,332,904	1,096,969
Nabtesco Corporation	Equity	N/A	N/A	34,100	770,033	855,391
NACCO Industries, Incorporated	Equity	N/A	N/A	4,700	138,829	285,572
National Australia Bank Limited	Equity	N/A	N/A	34,839	919,806	886,652
National Cinemedia, Incorporated	Equity	N/A	N/A	165,074	2,506,508	2,634,581
National General Holdings	Equity	N/A	N/A	32,810	644,244	683,432
National Oilwell Varco, Incorporated	Equity	N/A	N/A	9,440	463,551	455,763
National Retail Properties, Incorporated	Equity	N/A	N/A	19,182	408,061	671,562
Natural Gas Services Group, Incorporated	Equity	N/A	N/A	15,448	381,588	352,523
Natus Medical, Incorporated	Equity	N/A	N/A	22,301	568,210	949,131
Navient Corporation	Equity	N/A	N/A	35,100	252,697	639,171
NCI Building Systems, Incorporated	Equity	N/A	N/A	95,129	1,538,652	1,433,594
Nelnet, Incorporated	Equity	N/A	N/A	28,610	1,127,563	1,239,099
Nestle SA	Equity	N/A	N/A	63,567	3,750,556	4,584,452
Neopost SA	Equity	N/A	N/A	6,700	484,055	288,286
Netflix, Incorporated	Equity	N/A	N/A	8,433	3,666,663	5,539,975
New Media Investment Group	Equity	N/A	N/A	68,730	1,185,926	1,232,329
New Relic, Incorporated	Equity	N/A	N/A	11,460	393,316	403,277
New World Development	Equity	N/A	N/A	102,000	127,626	133,428
Next Group PLC	Equity	N/A	N/A	4,214	252,889	493,280
Nichi-Iko Pharmaceutical Company	Equity	N/A	N/A	15,200	243,636	412,959
Nichirei Corporation	Equity	N/A	N/A	76,000	341,963	524,737
Nidec Corporation	Equity	N/A	N/A	300	19,909	22,466
Nike, Incorporated Class B	Equity	N/A	N/A	90,038	7,069,551	9,725,905
Nimble Storage, Incorporated	Equity	N/A	N/A	58,630	1,455,180	1,645,158
Nippon Electric Gas Company	Equity	N/A	N/A	27,000	14,627	136,781
Nippon Konpo Unyu Soko Company	Equity	N/A	N/A	20,200	363,058	352,553
Nippon Steel & Sumitomo Metal Corporation	Equity	N/A	N/A	99,400	264,323	257,789
Nippon Telegraph & Telephone	Equity	N/A	N/A	24,500	1,141,120	834,960

PLUMBERS AND PIPEFITTERS NATIONAL PENSION FUND
ALEXANDRIA, VIRGINIA

SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES
AS OF JUNE 30, 2015

Form 5500, Schedule H, Line 4i

EIN: 52-6152779
Plan No. 001

(c) Description of investment, including maturity date, rate of interest, collateral, par or maturity value					(e)	
(a)	(b)				(d)	
Identity of issuer, borrower, lessor or similar party	Description	Maturity Date	Rate of Interest		Cost	Current Value
<u>Common & Preferred Stocks (continued)</u>						
Nippon Yusen Kabushiki Kaish	Equity	N/A	N/A	58,000 \$	170,755 \$	161,604
Nipro Corporation	Equity	N/A	N/A	10,300	98,334	105,453
Nissan Motor Company Limited	Equity	N/A	N/A	110,000	1,024,773	1,145,973
Nisshin Seifun Group, Incorporated	Equity	N/A	N/A	5,800	72,937	77,153
Nitto Kogyo Corporation	Equity	N/A	N/A	20,300	336,173	457,138
Nivalis Therapeutics, Incorporated	Equity	N/A	N/A	6,200	89,206	93,930
NKSJ Holdings, Incorporated	Equity	N/A	N/A	1,200	30,935	44,040
Noble Corporation PLC	Equity	N/A	N/A	263,610	6,517,304	4,056,958
Nokia OYJ	Equity	N/A	N/A	147,038	1,044,137	1,007,210
Nomura Real Estate Holdings	Equity	N/A	N/A	5,900	104,824	123,896
Nomura Securities Company Limited	Equity	N/A	N/A	23,300	177,332	158,132
Nordstrom, Incorporated	Equity	N/A	N/A	70,600	4,057,961	5,259,700
Northrop Grumman Corporation	Equity	N/A	N/A	40,840	3,735,157	6,478,449
Northwestern Corporation	Equity	N/A	N/A	26,122	1,042,537	1,273,448
Novartis AG	Equity	N/A	N/A	55,181	3,861,928	5,424,292
Novavax, Incorporated	Equity	N/A	N/A	117,849	372,365	1,312,838
Novo Nordisk A/S	Equity	N/A	N/A	134,764	6,021,539	7,370,237
NRG Yield, Incorporated Class A	Equity	N/A	N/A	14,360	195,163	315,058
NTT Docomo, Incorporated	Equity	N/A	N/A	51,200	795,124	980,617
Nuplex Industries Limited	Equity	N/A	N/A	4,865	14,144	13,846
NVR, Incorporated	Equity	N/A	N/A	180	245,198	241,200
NXP Semiconductors	Equity	N/A	N/A	54,992	4,026,360	5,400,214
Occidental Petroleum Corporation	Equity	N/A	N/A	79,020	6,246,418	6,145,385
Oceaneering International, Incorporated	Equity	N/A	N/A	6,050	285,871	281,870
Ocular Therapeutix, Incorporated	Equity	N/A	N/A	22,500	291,851	473,175
Oil States International, Incorporated	Equity	N/A	N/A	48,000	2,662,390	1,787,040
Old Dominion Freight Lines, Incorporated	Equity	N/A	N/A	36,929	1,977,756	2,533,514
Omega Healthcare Investors, Incorporated	Equity	N/A	N/A	54,606	1,398,536	1,874,624
Omnova Solutions, Incorporated	Equity	N/A	N/A	110,670	823,764	828,918
Omnicare, Incorporated	Equity	N/A	N/A	740	41,367	69,745
On Assignment, Incorporated	Equity	N/A	N/A	15,567	605,819	611,472
Onebeacon Insurance Group Limited	Equity	N/A	N/A	53,575	759,949	777,373
Open Text Corporation	Equity	N/A	N/A	174,100	6,169,225	7,056,273
Oracle Corporation	Equity	N/A	N/A	34,790	1,426,884	1,404,800
Orexigen Therapeutics, Incorporated	Equity	N/A	N/A	72,266	504,341	357,717
Oriflame Cosmetics SA	Equity	N/A	N/A	9,100	315,303	139,213
Orix Corporation	Equity	N/A	N/A	97,100	1,382,256	1,444,777
Orora Limited	Equity	N/A	N/A	55,997	93,450	93,515
Osaka Gas Company Limited	Equity	N/A	N/A	40,000	148,273	157,960
Oshkosh Corporation Class B	Equity	N/A	N/A	12,500	455,480	529,750
Otonomy, Incorporated	Equity	N/A	N/A	24,765	641,207	569,347
Otsuka Holdings Company	Equity	N/A	N/A	17,100	555,898	542,925
Oversea Chinese Banking Corporation	Equity	N/A	N/A	12,500	97,913	93,000
Owens & Minor, Incorporated	Equity	N/A	N/A	21,700	728,290	737,800
Owens Ill, Incorporated	Equity	N/A	N/A	173,300	4,743,149	3,975,502
OZ Minerals Limited	Equity	N/A	N/A	16,710	64,538	51,313
Pacific Andes Resources	Equity	N/A	N/A	1,533,000	434,271	70,564
Pacific Textiles Holdings	Equity	N/A	N/A	28,000	35,692	47,666
Packging Corporation	Equity	N/A	N/A	44,200	2,991,907	2,762,058
Pact Group Holdings Limited	Equity	N/A	N/A	8,901	31,919	32,140
Pacwest Bancorp	Equity	N/A	N/A	41,809	1,256,716	1,954,989
Palo Alto Networks, Incorporated	Equity	N/A	N/A	21,430	1,775,057	3,743,821
Pandora A/S	Equity	N/A	N/A	13,660	1,080,748	1,467,676

PLUMBERS AND PIPEFITTERS NATIONAL PENSION FUND
ALEXANDRIA, VIRGINIA

SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES
AS OF JUNE 30, 2015

Form 5500, Schedule H, Line 4i

EIN: 52-6152779
Plan No. 001

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Identity of issuer, borrower, lessor or similar party	Description	Maturity Date	Rate of Interest		Cost	Current Value
<u>Common & Preferred Stocks (continued)</u>						
Panoramic Resources Limited	Equity	N/A	N/A	169,800	\$ 583,982	\$ 56,034
Papa John's International, Incorporated	Equity	N/A	N/A	23,477	1,407,813	1,775,096
Paramount Bed Holdings Company Limited	Equity	N/A	N/A	7,800	256,879	230,396
Pargesa Holding SA	Equity	N/A	N/A	6,100	444,989	406,870
Parker Drilling Company	Equity	N/A	N/A	148,545	738,283	493,169
Paperlinx Limited	Equity	N/A	N/A	115,200	284,957	2,221
Partnerre Limited	Equity	N/A	N/A	9,200	714,557	1,182,200
Pattern Energy Group, Incorporated	Equity	N/A	N/A	21,940	557,461	622,657
Paychex, Incorporated	Equity	N/A	N/A	51,900	1,933,882	2,433,072
PDC Energy, Incorporated	Equity	N/A	N/A	37,564	1,576,946	2,019,761
PDF Solutions, Incorporated	Equity	N/A	N/A	37,370	716,494	597,920
Peapack Gladstone Financial Corporation	Equity	N/A	N/A	18,605	350,921	413,403
Pebblebrook Hotel Trust	Equity	N/A	N/A	57,666	1,939,403	2,472,718
Perficient, Incorporated	Equity	N/A	N/A	42,129	454,563	810,562
Petrofac Limited	Equity	N/A	N/A	21,200	435,534	309,701
Peugeot SA	Equity	N/A	N/A	41,721	610,619	857,927
Pfizer, Incorporated	Equity	N/A	N/A	438,560	12,910,143	14,704,917
PG&E Corporation	Equity	N/A	N/A	96,100	4,157,987	4,718,510
Philip Morris International	Equity	N/A	N/A	44,400	3,805,148	3,559,548
Physicians Realty Trust	Equity	N/A	N/A	82,840	1,412,866	1,272,422
Piedmont Office Realty Trust	Equity	N/A	N/A	32,800	566,559	576,952
Pilgrim's Pride Corporation	Equity	N/A	N/A	6,420	199,919	147,467
Pinnacle Financial	Equity	N/A	N/A	35,079	857,514	1,907,245
Pinnacle West Capital Corporation	Equity	N/A	N/A	79,600	3,347,586	4,528,444
Pitney Bowes, Incorporated	Equity	N/A	N/A	35,900	532,862	747,079
Plantronics, Incorporated	Equity	N/A	N/A	97,053	4,476,527	5,465,054
Platform Specialty Products	Equity	N/A	N/A	89,700	2,427,717	2,294,526
Plenus Company Limited	Equity	N/A	N/A	20,300	278,687	365,743
Plexus Corporation	Equity	N/A	N/A	202,230	5,965,608	8,873,852
Plus500 Limited	Equity	N/A	N/A	38,761	357,042	237,521
Ply Gem Holdings, Incorporated	Equity	N/A	N/A	12,900	179,273	152,091
PNM Res, Incorporated	Equity	N/A	N/A	32,510	898,716	799,746
Poly Property Group Company	Equity	N/A	N/A	275,000	163,955	133,037
Popeyes Louisiana Kitchen	Equity	N/A	N/A	10,525	175,336	631,395
Popular, Incorporated	Equity	N/A	N/A	36,690	1,258,692	1,058,873
Postnl NV	Equity	N/A	N/A	98,300	432,176	436,935
Portland General Electric Company	Equity	N/A	N/A	26,050	606,828	863,818
Portola Pharmaceuticals, Incorporated	Equity	N/A	N/A	28,420	678,409	1,294,531
Post Holdings, Incorporated	Equity	N/A	N/A	93,650	4,078,792	5,050,544
Power Assets Holdings Limited	Equity	N/A	N/A	10,700	96,480	97,592
Power Integrations, Incorporated	Equity	N/A	N/A	77,370	3,921,482	3,495,577
PRA Health Sciences, Incorporated	Equity	N/A	N/A	28,122	584,618	1,021,672
Premier Oil PLC	Equity	N/A	N/A	96,300	535,226	225,603
Press Ganey Holdings, Incorporated	Equity	N/A	N/A	18,880	518,846	541,290
Price T Rowe Group, Incorporated	Equity	N/A	N/A	12,100	999,736	940,533
Priceline Group, Incorporated	Equity	N/A	N/A	4,010	4,879,689	4,616,994
Primary Health Care Limited	Equity	N/A	N/A	104,400	450,499	405,971
Primerica Incorporated	Equity	N/A	N/A	14,663	368,346	669,952
Primoris Services Corporation	Equity	N/A	N/A	43,787	686,504	866,983
Principal Financial Group	Equity	N/A	N/A	17,500	478,811	897,575
Privatebancorp, Incorporated	Equity	N/A	N/A	44,580	1,659,158	1,775,176
Proassurance Corporation	Equity	N/A	N/A	19,475	542,686	899,940
Procter & Gamble Company	Equity	N/A	N/A	35,953	2,727,437	2,812,963

PLUMBERS AND PIPEFITTERS NATIONAL PENSION FUND
ALEXANDRIA, VIRGINIA

SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES
AS OF JUNE 30, 2015

Form 5500, Schedule H, Line 4i

EIN: 52-6152779
Plan No. 001

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Identity of issuer, borrower, lessor or similar party	Description	Maturity Date	Rate of Interest			Cost	Current Value
<u>Common & Preferred Stocks (continued)</u>							
Prosperity Bancshares, Incorporated	Equity	N/A	N/A	26,470	\$	1,094,878	\$ 1,528,378
Prosperity Real Estate Investment Trust	Equity	N/A	N/A	66,000		20,589	23,670
Prudential Financial, Incorporated	Equity	N/A	N/A	2,320		196,008	203,046
Prudential PLC	Equity	N/A	N/A	66,050		696,007	1,614,923
PTC Therapeutics, Incorporated	Equity	N/A	N/A	16,485		274,315	793,423
Public Service Enterprise Group, Incorporated	Equity	N/A	N/A	63,800		2,055,676	2,506,064
Qantas Airways Limited	Equity	N/A	N/A	70,913		149,819	172,893
QBE Insurance Group Limited	Equity	N/A	N/A	3,382		39,270	35,670
QEP Resources Incorporated	Equity	N/A	N/A	123,849		3,545,673	2,292,445
Qlik technologies, Incorporated	Equity	N/A	N/A	106,500		2,349,839	3,723,240
Quest Diagnostics, Incorporated	Equity	N/A	N/A	28,200		2,053,078	2,045,064
Quidel Corporation	Equity	N/A	N/A	63,290		1,616,060	1,452,506
Rackspace Hosting, Incorporated	Equity	N/A	N/A	8,670		324,575	322,437
Radware Limited	Equity	N/A	N/A	131,205		2,391,769	2,912,751
Ralph Lauren Corporation	Equity	N/A	N/A	30,900		5,469,680	4,089,924
Raven Industries, Incorporated	Equity	N/A	N/A	32,616		651,448	663,083
Raymond James Financial, Incorporated	Equity	N/A	N/A	54,100		3,083,024	3,223,278
Raytheon Company	Equity	N/A	N/A	11,700		615,653	1,119,456
RBC Bearings, Incorporated	Equity	N/A	N/A	18,398		675,738	1,320,240
Realpage, Incorporated	Equity	N/A	N/A	117,000		2,342,536	2,231,190
Reckitt Benckiser Group PLC	Equity	N/A	N/A	19,693		1,681,007	1,721,168
Red Electrica Corporation SA	Equity	N/A	N/A	16,690		1,359,543	1,337,463
Red Hat, Incorporated	Equity	N/A	N/A	51,483		2,733,747	3,909,104
Redrow PLC	Equity	N/A	N/A	83,953		563,897	584,230
Regal Entertainment Group	Equity	N/A	N/A	47,152		650,780	985,948
Regeneron Pharmaceuticals, Incorporated	Equity	N/A	N/A	14,039		5,758,136	7,161,715
Regions Financial Corporation	Equity	N/A	N/A	55,400		1,059,118	573,944
Regulus Therapeutics, Incorporated	Equity	N/A	N/A	29,395		410,176	322,169
Reinsurance Group Of America	Equity	N/A	N/A	22,452		1,299,759	2,130,021
Reliance Steel & Aluminum Company	Equity	N/A	N/A	7,900		433,204	477,792
Religare Health Trust	Equity	N/A	N/A	50,500		36,947	38,245
Relx NV	Equity	N/A	N/A	22,187		521,363	526,242
Relypsa, Incorporated	Equity	N/A	N/A	18,700		205,700	618,783
Remy International, Incorporated	Equity	N/A	N/A	49,185		977,254	1,087,480
Renaissance Holdings Limited	Equity	N/A	N/A	7,960		830,834	808,020
Renault SA	Equity	N/A	N/A	21,882		1,772,547	2,278,999
Repsol SA	Equity	N/A	N/A	192,048		2,227,080	1,735,806
Republic Services, Incorporated	Equity	N/A	N/A	33,800		1,173,448	1,323,946
Resona Holdings, Incorporated	Equity	N/A	N/A	236,700		1,192,514	1,308,478
Retail Opportunity Investment	Equity	N/A	N/A	87,329		1,292,845	1,364,079
Revlon, Incorporated Class A	Equity	N/A	N/A	15,705		576,191	576,531
Rexnord Corporation	Equity	N/A	N/A	22,955		597,435	548,854
Rheinmetall AG	Equity	N/A	N/A	8,200		732,730	417,834
RHI AG	Equity	N/A	N/A	14,343		385,319	356,984
Ricoh Company Limited	Equity	N/A	N/A	12,800		121,898	132,827
Rieter Holding AG	Equity	N/A	N/A	2,500		410,988	395,208
RLJ Lodging Trust	Equity	N/A	N/A	18,100		439,216	539,018
Rio Tinto PLC	Equity	N/A	N/A	53,965		2,737,997	2,220,903
Roche Holding AG	Equity	N/A	N/A	10,872		2,053,002	3,057,641
Rock-Tenn Company Class A	Equity	N/A	N/A	59,410		3,177,101	3,576,482
Rogers Corporation	Equity	N/A	N/A	51,502		1,909,556	3,406,342
Rollins, Incorporated	Equity	N/A	N/A	15,765		104,146	449,775
Rowan Companies PLC	Equity	N/A	N/A	32,800		661,895	692,408

PLUMBERS AND PIPEFITTERS NATIONAL PENSION FUND
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<u>Common & Preferred Stocks (continued)</u>						
Royal Caribbean Cruises Limited	Equity	N/A	N/A	116,500	\$ 4,880,291	\$ 9,167,385
Royal Dutch Shell PLC	Equity	N/A	N/A	187,004	4,156,886	5,328,131
RPX Corporation	Equity	N/A	N/A	57,310	896,872	968,387
RSP Permian, Incorporated	Equity	N/A	N/A	58,310	1,409,102	1,639,094
Rush Enterprises Incorporated Class A	Equity	N/A	N/A	19,724	431,716	516,966
Ryder System, Incorporated	Equity	N/A	N/A	31,072	2,018,725	2,714,761
Saab Ab-B	Equity	N/A	N/A	19,600	168,594	479,251
Sabra Health Care Reit, Incorporated	Equity	N/A	N/A	13,160	332,462	338,738
Safeguard Scientifics, Incorporated	Equity	N/A	N/A	26,113	438,573	508,159
Safran SA	Equity	N/A	N/A	24,638	911,514	1,669,763
Saft Groupe SA	Equity	N/A	N/A	10,100	411,149	394,100
SAI Global Limited	Equity	N/A	N/A	9,913	30,894	31,894
Saia, Incorporated	Equity	N/A	N/A	8,949	374,142	351,606
Sainsbury J PLC	Equity	N/A	N/A	163,800	746,030	701,064
Salesforce.Com	Equity	N/A	N/A	112,956	6,513,434	7,865,126
Sally Beauty Company	Equity	N/A	N/A	22,645	424,933	715,129
Salmar ASA	Equity	N/A	N/A	30,603	544,372	448,870
Salzgitter AG	Equity	N/A	N/A	10,351	393,609	373,983
Sanchez Energy Corporation	Equity	N/A	N/A	15,085	192,020	147,833
Sands China Limited	Equity	N/A	N/A	136,000	795,069	469,200
Sankyo Company Limited	Equity	N/A	N/A	1,700	68,328	60,216
Sankyu, Incorporated	Equity	N/A	N/A	97,000	465,489	530,236
Sanofi	Equity	N/A	N/A	60,085	5,601,768	5,984,466
Sap SE	Equity	N/A	N/A	24,361	1,924,858	1,713,309
SBA Communications Corporation	Equity	N/A	N/A	23,256	2,071,297	2,673,742
Scana Corporation	Equity	N/A	N/A	21,100	990,885	1,068,715
Schneider Electric SA	Equity	N/A	N/A	12,920	831,480	901,816
Schwab Charles Corporation	Equity	N/A	N/A	50,300	1,676,087	1,642,295
Scor	Equity	N/A	N/A	18,300	476,559	666,120
Seaboard Corporation	Equity	N/A	N/A	94	326,297	338,306
Seacoast Banking Corporation of Florida	Equity	N/A	N/A	87,035	1,149,353	1,375,153
Seacor Holdings, Incorporated	Equity	N/A	N/A	34,300	2,661,832	2,433,242
Seagate Technology	Equity	N/A	N/A	210,300	8,734,352	9,989,250
Securitas AB-B	Equity	N/A	N/A	31,600	359,823	417,783
Sekisui Chemical Company Limited	Equity	N/A	N/A	134,000	1,119,402	1,645,642
Sekisui House Limited	Equity	N/A	N/A	99,500	1,340,973	1,580,488
Select Comfort Corporation	Equity	N/A	N/A	188,500	4,101,355	5,668,195
Select Harvests Limited	Equity	N/A	N/A	2,214	18,956	18,376
Sembcorp Industries Limited	Equity	N/A	N/A	93,000	360,940	268,604
Semgroup Corporation Class A	Equity	N/A	N/A	15,335	626,475	1,218,826
Semtech Corporation	Equity	N/A	N/A	29,142	774,081	578,469
Seven Group Holdings Limited	Equity	N/A	N/A	46,500	513,120	234,636
Seven & I Holdings Company Limited	Equity	N/A	N/A	30,000	932,930	1,289,374
Service Now, Incorporated	Equity	N/A	N/A	31,366	1,776,200	2,330,807
Sherwin Williams Company	Equity	N/A	N/A	5,700	1,639,307	1,567,614
Shimachu Company Limited	Equity	N/A	N/A	5,100	106,600	147,101
Shinetsu Chemical Company Limited	Equity	N/A	N/A	1,300	83,469	80,718
Shire PLC	Equity	N/A	N/A	31,143	6,041,994	6,733,047
Shougang Fushan Resources	Equity	N/A	N/A	976,000	264,472	227,896
Shun Tak Holdings Limited	Equity	N/A	N/A	74,000	44,315	40,954
Sias SPA	Equity	N/A	N/A	45,300	409,708	483,312
Siemens AG	Equity	N/A	N/A	3,135	392,326	318,516
Sigma Pharmaceuticals Limited	Equity	N/A	N/A	64,743	44,598	38,463

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Identity of issuer, borrower, lessor or similar party	Description	Maturity Date	Rate of Interest		Cost	Current Value
<u>Common & Preferred Stocks (continued)</u>						
Signature Bank New York	Equity	N/A	N/A	13,521 \$	390,285 \$	1,979,339
Signet Jewelers Limited	Equity	N/A	N/A	13,100	1,773,198	1,679,944
Six Flags Entertainment Corporation	Equity	N/A	N/A	27,927	577,021	1,252,526
Skechers USA, Incorporated Class A	Equity	N/A	N/A	5,680	389,299	623,607
SKF AB-B	Equity	N/A	N/A	24,528	621,512	562,182
Sky Networks Television Limited	Equity	N/A	N/A	97,200	489,151	395,864
Skyworks Solutions, Incorporated	Equity	N/A	N/A	23,193	482,624	2,414,396
SMC Corporation	Equity	N/A	N/A	4,300	768,424	1,298,643
Smartone Telecommunications Holdings	Equity	N/A	N/A	18,000	34,123	31,395
Smurfit Kappa Group PLC	Equity	N/A	N/A	27,400	452,671	754,815
Societe Generale	Equity	N/A	N/A	19,308	820,357	901,275
Softbank Corporation	Equity	N/A	N/A	6,300	291,043	371,448
Solar Capital Limited	Equity	N/A	N/A	45,305	1,013,486	815,490
Sonic Corporation	Equity	N/A	N/A	26,542	823,986	764,410
Sonic Healthcare Limited	Equity	N/A	N/A	5,253	84,860	86,097
Sonoco Products Company	Equity	N/A	N/A	29,498	980,602	1,264,284
Sonus Networks, Incorporated	Equity	N/A	N/A	70,040	1,280,631	484,677
Sony Corporation	Equity	N/A	N/A	6,300	166,891	180,243
Sorin Spa Milano	Equity	N/A	N/A	24,800	69,783	69,397
South Jersey Industries, Incorporated	Equity	N/A	N/A	32,810	887,266	811,391
South State Corporation	Equity	N/A	N/A	25,440	1,489,093	1,933,186
South 32 Limited	Equity	N/A	N/A	25,876	46,836	34,415
Southwest Airlines Company	Equity	N/A	N/A	111,485	3,044,395	3,689,039
Southwest Gas Corporation	Equity	N/A	N/A	24,830	975,706	1,321,204
Sovran Self Storage, Incorporated	Equity	N/A	N/A	13,452	528,012	1,169,113
Spartanash Company	Equity	N/A	N/A	40,597	728,257	1,321,026
Spirit Aerosystems Holdings Class A	Equity	N/A	N/A	36,500	1,644,342	2,011,515
Spirit Airlines, Incorporated	Equity	N/A	N/A	5,783	138,731	359,124
Splunk, Incorporated	Equity	N/A	N/A	82,088	4,845,150	5,714,967
Springleaf Holdings, Incorporated	Equity	N/A	N/A	40,920	2,064,678	1,878,637
SS&C Technologies Holdings	Equity	N/A	N/A	13,020	816,471	813,750
Stada Arzneimittel AG	Equity	N/A	N/A	11,500	550,897	389,009
Standard Pacific Corporation	Equity	N/A	N/A	98,490	735,875	877,546
Starbucks Corporation	Equity	N/A	N/A	115,385	4,560,402	6,686,367
Starwood Property Trust, Incorporated	Equity	N/A	N/A	22,400	535,438	483,168
Starz Series A	Equity	N/A	N/A	32,900	981,259	1,471,288
State Street Corporation	Equity	N/A	N/A	16,300	624,141	1,255,100
Statoil ASA	Equity	N/A	N/A	90,273	2,465,497	1,613,076
Steelcase, Incorporated	Equity	N/A	N/A	120,600	1,145,048	2,280,546
Sterling Construction, Incorporated	Equity	N/A	N/A	108,906	702,868	435,624
Stewart Information Services Corporation	Equity	N/A	N/A	33,165	533,930	1,319,967
Stifel Financial Corporation	Equity	N/A	N/A	28,126	696,907	1,623,995
Sumitomo Chemical Company Limited	Equity	N/A	N/A	40,000	123,519	240,552
Sumitomo Corporation	Equity	N/A	N/A	84,600	1,072,099	984,356
Sumitomo Electric Industries	Equity	N/A	N/A	13,200	186,661	204,603
Sumitomo Heavy Industries	Equity	N/A	N/A	43,000	210,319	250,864
Sumitomo Metal Mining Company Limited	Equity	N/A	N/A	40,000	541,524	609,061
Sumitomo Mitsui Financial GR	Equity	N/A	N/A	90,900	3,578,370	4,804,607
Sumitomo Mitsui Trust Holding	Equity	N/A	N/A	23,000	85,156	107,180
Sumitomo Rubber	Equity	N/A	N/A	14,800	238,786	229,404
Summit Materials, Incorporated Class A	Equity	N/A	N/A	62,238	1,244,732	1,587,069
Suncoke Energy, Incorporated	Equity	N/A	N/A	67,617	997,237	879,021
Suncorp Group Limited	Equity	N/A	N/A	20,741	203,368	214,917

PLUMBERS AND PIPEFITTERS NATIONAL PENSION FUND
ALEXANDRIA, VIRGINIA

SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES
AS OF JUNE 30, 2015

Form 5500, Schedule H, Line 4i

EIN: 52-6152779
Plan No. 001

(c) Description of investment, including maturity date, rate of interest, collateral, par or maturity value					(e)	
(a)	(b)				(d)	(e)
Identity of issuer, borrower, lessor or similar party	Description	Maturity Date	Rate of Interest		Cost	Current Value
<u>Common & Preferred Stocks (continued)</u>						
Sunedison, Incorporated	Equity	N/A	N/A	21,500	\$ 328,245	\$ 371,305
Sunopta, Incorporated	Equity	N/A	N/A	166,779	1,898,158	1,789,539
Sunstone Hotel Investments Incorporated	Equity	N/A	N/A	41,675	371,225	625,542
Suntory Beverage & Food Limited	Equity	N/A	N/A	24,200	752,496	963,966
Suntrust Banks, Incorporated	Equity	N/A	N/A	77,394	2,986,348	3,329,490
Super Micro Circuits, Incorporated	Equity	N/A	N/A	89,400	2,960,681	2,644,452
Supervalu, Incorporated	Equity	N/A	N/A	75,500	666,583	610,795
Surmodics, Incorporated	Equity	N/A	N/A	18,696	328,782	437,860
Suzuki Motor Corporation	Equity	N/A	N/A	26,300	674,341	888,593
Svenska Cellulo SA	Equity	N/A	N/A	23,058	533,594	586,335
Swedbank AB	Equity	N/A	N/A	28,700	461,204	669,217
Swift Transportation Company	Equity	N/A	N/A	37,511	912,304	850,374
Swire Pacific Limited	Equity	N/A	N/A	22,800	279,685	286,634
Swiss Life Holding AG	Equity	N/A	N/A	7,377	975,675	1,689,305
Swiss RE Limited	Equity	N/A	N/A	12,800	119,618	1,137,280
Symantec Corporation	Equity	N/A	N/A	161,990	3,846,423	3,766,268
Symetra Financial Corporation	Equity	N/A	N/A	20,430	442,109	493,793
Symrise AG	Equity	N/A	N/A	10,780	289,289	670,009
Synchronoss Technologies, Incorporated	Equity	N/A	N/A	20,486	517,212	936,825
Synaptics, Incorporated	Equity	N/A	N/A	43,900	2,785,501	3,807,667
Synergy Res Corporation	Equity	N/A	N/A	44,130	505,962	504,406
3I Group PLC	Equity	N/A	N/A	133,474	958,780	1,101,161
Tab Corp Holdings	Equity	N/A	N/A	24,591	85,552	86,328
Tableau Software, Incorporated Class A	Equity	N/A	N/A	12,900	1,532,557	1,487,370
Taiwan Semiconductor Mtg Company	Equity	N/A	N/A	68,233	1,331,636	1,549,571
Takashimaya Company	Equity	N/A	N/A	12,000	108,125	108,837
Takeda Chemical Industries	Equity	N/A	N/A	6,200	292,729	299,450
Tal International Group, Incorporated	Equity	N/A	N/A	14,800	307,511	467,680
Talmer Bancorp, Incorporated	Equity	N/A	N/A	64,666	879,165	1,083,156
Target Corporation	Equity	N/A	N/A	41,375	2,761,476	3,377,441
Taser International, Incorporated	Equity	N/A	N/A	44,018	1,229,077	1,466,240
Tate & Lyle PLC	Equity	N/A	N/A	43,200	467,511	347,328
Tatts Group Limited	Equity	N/A	N/A	54,350	156,031	155,994
TCF Financial Corporation	Equity	N/A	N/A	218,563	2,943,360	3,630,331
TDC A/S	Equity	N/A	N/A	96,600	731,478	700,350
TE Connectivity Limited	Equity	N/A	N/A	16,720	1,031,084	1,075,096
Team Health Holdings, Incorporated	Equity	N/A	N/A	44,061	1,315,532	2,878,505
Teco Energy, Incorporated	Equity	N/A	N/A	82,920	1,614,649	1,464,367
Technicolor	Equity	N/A	N/A	64,400	422,393	420,009
Tegna, Incorporated	Equity	N/A	N/A	27,000	570,307	865,890
Teladoc, Incorporated	Equity	N/A	N/A	1,700	32,300	52,411
Telecom Italia SPA	Equity	N/A	N/A	653,382	606,023	666,868
Teledyne Technologies, Incorporated	Equity	N/A	N/A	13,011	1,101,430	1,372,791
Teleflex, Incorporated	Equity	N/A	N/A	8,187	483,079	1,108,929
Telefonica SA	Equity	N/A	N/A	102,261	1,511,811	1,453,575
Teleperformance	Equity	N/A	N/A	14,324	927,946	1,011,964
Teliasonera AB	Equity	N/A	N/A	151,200	1,100,428	890,254
Telstra Corporation Limited	Equity	N/A	N/A	78,223	292,870	363,737
Tencent Holdings Limited	Equity	N/A	N/A	258,963	4,873,583	5,184,615
Tenneco, Incorporated	Equity	N/A	N/A	7,643	243,456	439,014
Teradata Corporation	Equity	N/A	N/A	52,500	2,444,511	1,942,500
Teradyne, Incorporated	Equity	N/A	N/A	46,788	494,665	902,541
Tesaro, Incorporated	Equity	N/A	N/A	22,409	321,392	1,317,425

PLUMBERS AND PIPEFITTERS NATIONAL PENSION FUND
ALEXANDRIA, VIRGINIA

SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES
AS OF JUNE 30, 2015

Form 5500, Schedule H, Line 4i

EIN: 52-6152779
Plan No. 001

(c) Description of investment, including maturity date, rate of interest, collateral, par or maturity value						
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Identity of issuer, borrower, lessor or similar party	Description	Maturity Date	Rate of Interest		Cost	Current Value
<u>Common & Preferred Stocks (continued)</u>						
Tesla Motors, Incorporated	Equity	N/A	N/A	14,459	\$ 3,096,172	\$ 3,878,771
Tesoro Corporation	Equity	N/A	N/A	37,110	2,093,901	3,132,455
Tetraphase Pharmaceuticals	Equity	N/A	N/A	57,952	1,090,591	2,749,243
Texas Cap Bancshares, Incorporated	Equity	N/A	N/A	16,851	755,847	1,048,806
Texas Roadhouse, Incorporated	Equity	N/A	N/A	16,305	310,594	610,296
Texwinca Holdings Limited	Equity	N/A	N/A	12,000	12,783	12,741
Thales SA	Equity	N/A	N/A	14,871	690,605	897,916
Thorn Group Limited	Equity	N/A	N/A	5,592	12,201	11,347
The Travelers Companies, Incorporated	Equity	N/A	N/A	32,300	2,320,829	3,122,118
Tieto OYJ	Equity	N/A	N/A	26,300	100,121	613,974
Tiffany & Company	Equity	N/A	N/A	19,260	1,861,239	1,768,068
Time, Incorporated	Equity	N/A	N/A	43,714	1,017,505	1,005,859
Time Warner, Incorporated	Equity	N/A	N/A	66,692	5,212,621	6,579,548
Timken Company	Equity	N/A	N/A	9,300	186,777	340,101
TJX Companies, Incorporated	Equity	N/A	N/A	260,452	13,417,864	17,234,109
T-Mobile US, Incorporated	Equity	N/A	N/A	41,338	1,336,174	1,602,674
Toagosei Company Limited	Equity	N/A	N/A	101,000	428,883	842,595
Toho Holding Company Limited	Equity	N/A	N/A	20,200	364,676	465,284
Tokai Rika Company Limited	Equity	N/A	N/A	38,300	800,592	957,617
Tokai Tokyo Financial Holdings	Equity	N/A	N/A	11,200	81,237	81,539
Tokio Marine Holdings, Incorporated	Equity	N/A	N/A	7,000	218,406	291,359
Tokyo Gas Company Limited	Equity	N/A	N/A	32,000	169,510	168,000
Tokyu Fudosan Holdings Corporation	Equity	N/A	N/A	6,500	55,634	50,137
Tongda Group Holdings Limited	Equity	N/A	N/A	3,520,000	487,840	681,155
Toppan Forms Company Limited	Equity	N/A	N/A	40,500	502,397	558,267
Toppan Printing Company Limited	Equity	N/A	N/A	16,000	101,881	133,747
Toronto-Dominion Bank	Equity	N/A	N/A	37,920	1,435,147	1,611,979
Total SA	Equity	N/A	N/A	32,400	2,105,788	1,610,089
Toyo Ink SC Holdings Company	Equity	N/A	N/A	10,000	44,077	40,119
Toyo Tire & Rubber Company	Equity	N/A	N/A	40,500	229,525	856,428
Toyoda Gosei Company	Equity	N/A	N/A	5,000	110,426	120,644
Toyota Motor Corporation	Equity	N/A	N/A	23,700	1,078,235	1,588,520
Transdigm Group, Incorporated	Equity	N/A	N/A	21,520	1,934,257	4,834,898
Transocean Limited	Equity	N/A	N/A	11,082	226,403	179,218
Treehouse Foods, Incorporated	Equity	N/A	N/A	37,575	3,057,702	3,044,702
Trelleborg AB	Equity	N/A	N/A	27,943	514,145	516,736
Trex Company, Incorporated	Equity	N/A	N/A	9,652	310,710	477,098
Trevena, Incorporated	Equity	N/A	N/A	43,395	259,525	271,653
Trico Bancshares	Equity	N/A	N/A	27,630	638,952	664,502
Trimas Corporation	Equity	N/A	N/A	28,898	751,369	855,381
Trimble Navigation Limited	Equity	N/A	N/A	107,100	2,966,819	2,512,566
Trinet Group, Incorporated	Equity	N/A	N/A	19,080	352,644	483,678
Trinty Mirror PLC	Equity	N/A	N/A	76,300	731,141	179,828
Tripadvisor, Incorporated	Equity	N/A	N/A	23,016	2,410,822	2,005,614
Triumph Group, Incorporated	Equity	N/A	N/A	4,730	320,177	312,133
Trivascular Technologies, Incorporated	Equity	N/A	N/A	58,570	590,643	313,350
Tronox Limited	Equity	N/A	N/A	31,544	659,220	461,489
TS Tech Company Limited	Equity	N/A	N/A	11,100	267,293	297,034
Tsumura & Company	Equity	N/A	N/A	15,300	430,784	329,290
TUI AG	Equity	N/A	N/A	12,318	125,999	199,352
Tuesday Morning Corporation	Equity	N/A	N/A	130,295	1,849,374	1,467,773
Tumi Holdings, Incorporated	Equity	N/A	N/A	135,812	2,867,235	2,786,862
Tutor Perini Corporation	Equity	N/A	N/A	26,100	553,890	563,238

PLUMBERS AND PIPEFITTERS NATIONAL PENSION FUND
ALEXANDRIA, VIRGINIA

SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES
AS OF JUNE 30, 2015

Form 5500, Schedule H, Line 4i

EIN: 52-6152779
Plan No. 001

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Identity of issuer, borrower, lessor or similar party	Description	Maturity Date	Rate of Interest		Cost	Current Value
<u>Common & Preferred Stocks (continued)</u>						
Twitter, Incorporated	Equity	N/A	N/A	59,252 \$	2,495,897 \$	2,146,107
Two Harbors Investment Corporation	Equity	N/A	N/A	59,800	660,879	582,452
Tyson Foods, Incorporated	Equity	N/A	N/A	65,480	2,376,399	2,791,412
Ubi Banca	Equity	N/A	N/A	20,531	165,325	164,687
Ubiquiti Networks, Incorporated	Equity	N/A	N/A	95,200	2,846,456	3,038,308
Ublox Holding AG	Equity	N/A	N/A	840	116,112	169,986
UBS AG	Equity	N/A	N/A	800	17,331	16,992
UBS Group AG	Equity	N/A	N/A	28,125	495,434	609,881
UCB SA	Equity	N/A	N/A	13,838	93,232	993,365
UDG Healthcare PLC	Equity	N/A	N/A	28,253	232,579	217,255
UGI Holding Corporation	Equity	N/A	N/A	42,900	771,212	1,477,905
UIL Holdings Corporation	Equity	N/A	N/A	40,014	1,287,417	1,833,441
Ullico, Incorporated	Equity	N/A	N/A	2,012,767	35,004,712	22,261,203
Ultra Salon Cosmetics & Fragrances	Equity	N/A	N/A	7,200	1,131,005	1,112,040
Ultra Petroleum Corporation	Equity	N/A	N/A	178,900	4,785,412	3,739,828
Ultragenex Pharmaceutical, Incorporated	Equity	N/A	N/A	6,885	373,101	704,955
Ultratech, Incorporated	Equity	N/A	N/A	28,615	810,318	531,094
Unicharm Corporation	Equity	N/A	N/A	24,700	641,601	587,201
Unicredit SPA	Equity	N/A	N/A	48,412	-	190,017
Unilever PLC	Equity	N/A	N/A	31,017	1,057,839	1,317,913
Unipol Gruppo Finanzia	Equity	N/A	N/A	81,327	422,759	413,444
Under Armour, Incorporated Class A	Equity	N/A	N/A	79,897	4,914,295	6,666,606
Union Financial Corporation	Equity	N/A	N/A	28,332	558,707	42,730
Union Pacific Corporation	Equity	N/A	N/A	18,300	2,197,455	1,745,271
United Community Banks	Equity	N/A	N/A	101,665	1,934,719	2,121,749
United Continental Holdings, Incorporated	Equity	N/A	N/A	34,300	2,283,228	1,818,243
United Laboratories Intl Holdings	Equity	N/A	N/A	36,000	27,967	26,054
United Overseas Bank Limited	Equity	N/A	N/A	15,640	265,447	267,895
United Technologies Corporation	Equity	N/A	N/A	24,655	2,868,821	2,734,979
United Therapeutics Corporation	Equity	N/A	N/A	19,250	1,199,824	3,348,538
Unitedhealth Group, Incorporated	Equity	N/A	N/A	27,900	3,366,656	3,403,800
Universal Health Services, Incorporated	Equity	N/A	N/A	32,000	3,543,044	4,547,200
Unum Group	Equity	N/A	N/A	76,100	2,183,462	2,720,575
UPM Kymmene Corporation	Equity	N/A	N/A	43,966	858,037	777,080
Urban Outfitters, Incorporated	Equity	N/A	N/A	69,800	2,496,593	2,443,000
USANA Health Sciences, Incorporated	Equity	N/A	N/A	3,500	128,276	478,310
US Concrete, Incorporated	Equity	N/A	N/A	38,420	1,283,126	1,455,734
Valeo	Equity	N/A	N/A	5,500	574,858	866,714
Valero Energy Corporation	Equity	N/A	N/A	109,879	4,239,675	6,878,425
Validus Holdings Limited	Equity	N/A	N/A	24,700	745,396	1,086,553
Value Partners Group Limited	Equity	N/A	N/A	30,000	55,080	47,250
Varian Medical Systems, Incorporated	Equity	N/A	N/A	58,200	3,918,998	4,908,006
Venture Corporation Limited	Equity	N/A	N/A	11,000	66,827	63,051
Vectrus, Incorporated	Equity	N/A	N/A	23,128	619,854	575,193
Verint Systems, Incorporated	Equity	N/A	N/A	62,027	3,120,885	3,767,830
Verisign, Incorporated	Equity	N/A	N/A	32,900	2,070,814	2,030,588
Verizon Communications, Incorporated	Equity	N/A	N/A	26,950	1,325,325	1,256,140
Vertex Pharmaceuticals, Incorporated	Equity	N/A	N/A	35,924	3,169,085	4,435,896
Vesuvius PLC	Equity	N/A	N/A	45,400	247,255	303,171
Viad Corporation	Equity	N/A	N/A	25,205	625,750	683,308
Viasat, Incorporated	Equity	N/A	N/A	32,700	2,301,272	1,970,502
Voilin Memory, Incorporated	Equity	N/A	N/A	261,010	975,289	639,475
Visa, Incorporated	Equity	N/A	N/A	187,299	8,372,647	12,577,128

PLUMBERS AND PIPEFITTERS NATIONAL PENSION FUND
ALEXANDRIA, VIRGINIA

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<u>Common & Preferred Stocks (continued)</u>						
Vishay Intertechnology, Incorporated	Equity	N/A	N/A	111,421	\$ 1,174,766	\$ 1,301,397
VMWare, Incorporated Class A	Equity	N/A	N/A	18,684	1,780,212	1,601,966
Vodafone Group PLC	Equity	N/A	N/A	759,821	3,441,687	2,744,086
Voestal Pine AG	Equity	N/A	N/A	11,200	274,089	466,115
Volkswagen AG	Equity	N/A	N/A	10,831	2,035,094	2,500,990
Volvo AB	Equity	N/A	N/A	27,043	362,423	335,679
Vontobel Holding AG	Equity	N/A	N/A	6,000	272,751	278,197
Voya Financial, Incorporated	Equity	N/A	N/A	102,570	4,294,194	4,766,428
Vulcan Materials Company	Equity	N/A	N/A	24,800	1,777,446	2,081,464
VWR Corporation	Equity	N/A	N/A	35,565	871,588	950,652
Wabtec Corporation	Equity	N/A	N/A	38,059	2,638,625	3,586,680
Wageworks, Incorporated	Equity	N/A	N/A	36,839	1,302,725	1,490,138
Wal-Mart Stores, Incorporated	Equity	N/A	N/A	11,000	858,858	780,230
Waste Connections, Incorporated	Equity	N/A	N/A	14,574	242,602	686,727
Watsco, Incorporated	Equity	N/A	N/A	12,740	930,989	1,576,448
Watts Water Technologies, Incorporated	Equity	N/A	N/A	27,190	982,574	1,409,802
Wayfair, Incorporated Class A	Equity	N/A	N/A	46,965	1,027,060	1,767,763
Web.Com Group, Incorporated	Equity	N/A	N/A	18,010	574,832	436,202
Weir Group PLC	Equity	N/A	N/A	25,822	924,044	688,516
Wellcare Health Plans, Incorporated	Equity	N/A	N/A	25,925	1,323,922	2,199,218
Wells Fargo & Company	Equity	N/A	N/A	134,290	4,802,582	7,547,914
Werner Enterprises, Incorporated	Equity	N/A	N/A	148,800	3,094,451	3,906,000
Wesfarmers Limited	Equity	N/A	N/A	10,317	351,959	311,594
West Japan Railway Company	Equity	N/A	N/A	4,400	183,690	281,685
West Corporation	Equity	N/A	N/A	48,035	1,301,859	1,445,854
Western Alliance Bancorp	Equity	N/A	N/A	7,440	259,434	251,174
Western Digital Corporation	Equity	N/A	N/A	59,509	3,461,316	4,666,696
Westpac Banking Corporation	Equity	N/A	N/A	19,502	429,473	468,633
Wex, Incorporated	Equity	N/A	N/A	40,578	1,243,775	4,624,675
WH Group Limited	Equity	N/A	N/A	83,000	59,337	56,535
WH Smith PLC	Equity	N/A	N/A	18,297	-	439,284
Wheelock & Company Limited	Equity	N/A	N/A	114,900	549,671	586,984
Whirlpool Corporation	Equity	N/A	N/A	14,540	3,546,553	4,700,102
Whole Foods Market, Incorporated	Equity	N/A	N/A	18,910	865,632	745,810
Wienberger AG	Equity	N/A	N/A	22,562	360,077	354,787
Wiley John A Sons, Incorporated	Equity	N/A	N/A	19,788	717,375	1,075,874
Wilmar International Limited	Equity	N/A	N/A	165,600	410,351	403,287
Wingstop, Incorporated	Equity	N/A	N/A	6,900	187,167	195,960
Wintrust Financial Corporation	Equity	N/A	N/A	27,714	910,597	1,479,373
Wisdomtree Investments Incorporated	Equity	N/A	N/A	40,098	307,814	880,753
Wolters Kluwer CVA	Equity	N/A	N/A	11,331	379,000	336,590
Wolverine World Wide, Incorporated	Equity	N/A	N/A	22,160	665,464	631,117
Woodside Petroleum Limited	Equity	N/A	N/A	10,815	312,679	285,626
Workday, Incorporated Class A	Equity	N/A	N/A	45,529	3,992,447	3,477,960
WPP PLC	Equity	N/A	N/A	41,399	501,021	927,581
Wuxi Pharmatech, Incorporated	Equity	N/A	N/A	64,975	1,283,315	2,745,844
Wyndham Worldwide Corporation	Equity	N/A	N/A	53,800	1,769,084	4,602,034
Xenoport, Incorporated	Equity	N/A	N/A	114,643	942,631	702,762
Xerox Corporation	Equity	N/A	N/A	121,300	1,616,255	1,290,632
XL Group PLC	Equity	N/A	N/A	37,350	1,543,861	1,389,420
XPO Logistics, Incorporated	Equity	N/A	N/A	33,185	1,154,440	1,499,298
Yahoo, Incorporated	Equity	N/A	N/A	180,900	4,780,771	7,107,561
Yangzijiang Shipbuilding	Equity	N/A	N/A	315,300	306,925	331,119

PLUMBERS AND PIPEFITTERS NATIONAL PENSION FUND
ALEXANDRIA, VIRGINIA

SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES
AS OF JUNE 30, 2015

Form 5500, Schedule H, Line 4i

EIN: 52-6152779
Plan No. 001

(c) Description of investment, including maturity date, rate of interest, collateral, par or maturity value						
(a)	(b)				(d)	(e)
Identity of issuer, borrower, lessor or similar party	Description	Maturity Date	Rate of Interest		Cost	Current Value
<u>Common & Preferred Stocks (continued)</u>						
Yara International ASA	Equity	N/A	N/A	14,500	\$ 695,301	\$ 755,288
Yokohama Rubber Company Limited	Equity	N/A	N/A	68,400	521,684	1,373,757
Yue Yuen Industrial Holdings	Equity	N/A	N/A	203,000	737,461	679,586
Z Energy Limited	Equity	N/A	N/A	5,251	18,806	20,816
Zeltec Aesthetics, Incorporated	Equity	N/A	N/A	21,922	553,686	646,041
Zoetis, Incorporated	Equity	N/A	N/A	78,300	3,529,871	3,775,626
Zulily, Incorporated Class A	Equity	N/A	N/A	36,945	519,328	481,763
Zurich Financial Services	Equity	N/A	N/A	7,821	1,490,178	2,377,584
Total Common & Preferred Stocks					\$ 1,858,245,375	\$ 2,219,807,440
<u>Mutual and Other Funds</u>						
Aetos Capital Distressed Inv Strategies Fund	Mutual Fund	N/A	N/A	373,337	\$ 44,987,950	\$ 49,630,131
Aetos Capital Multi Strategy Arbitrage Fund	Mutual Fund	N/A	N/A	124,090	14,987,922	15,050,143
AFL-CIO Equity Index Fund	Mutual Fund	N/A	N/A	19,809,373	313,785,444	335,614,366
AQR Global Risk Premium Offshore Fund	Mutual Fund	N/A	N/A	323	50,000,000	55,887,570
Bell Australia Trust	Mutual Fund	N/A	N/A	2,214,343	33,382,537	166,091,108
Bell Global Trust	Mutual Fund	N/A	N/A	946,286	9,460,301	17,302,361
Boston Company Emerging Markets Equity Fd	Mutual Fund	N/A	N/A	1,693,191	111,618,643	99,356,439
Frontier Mfg Core Infrastructure Fund	Mutual Fund	N/A	N/A	4,810,169	65,646,257	62,965,111
Ishares Tr Russell 2000 Index Fund	Mutual Fund	N/A	N/A	58,620	6,757,680	7,319,293
JP Morgan Emerging Markets Equity Fund	Mutual Fund	N/A	N/A	9,193,332	160,368,039	157,941,443
JP Morgan Infrastructure Investments Fund	Mutual Fund	N/A	N/A	81,371,018	70,000,000	73,029,132
Loomis Sayles Bond Nhit	Mutual Fund	N/A	N/A	7,187,284	84,716,566	92,212,851
Lord Abnett International Small Cap Trust	Mutual Fund	N/A	N/A	75,000	75,000,000	85,393,500
NIS Preferred Stock Fund II	Mutual Fund	N/A	N/A	10,424,207	40,000,000	43,891,629
Northern Trust Aggregate Bond Index Fund	Mutual Fund	N/A	N/A	1,181,036	152,386,570	155,306,225
Northern Trust Russell 2000 Growth Index	Mutual Fund	N/A	N/A	351,553	100,643,715	97,640,397
Vanguard REIT Index Fund	Mutual Fund	N/A	N/A	2,956,155	49,415,463	48,480,949
Voya Senior Loan Trust Fund	Mutual Fund	N/A	N/A	6,813,039	99,761,047	102,202,260
Total Mutual and Other Funds					\$ 1,482,918,134	\$ 1,665,314,908
<u>Real Estate Investment Funds</u>						
AFL-CIO Building Investment Trust	CCT	N/A	N/A	29,541	\$ 36,213,920	\$ 171,362,484
Multi Employer Property Trust	CCT	N/A	N/A	24,709	39,326,264	219,295,278
Ullico J for Jobs Mortgage Fund	PSA	N/A	N/A	7,110	86,016,966	94,655,114
Total Real Estate Funds					\$ 161,557,150	\$ 485,312,876
<u>Partnerships</u>						
Boyd Watterson GSA Fund, LP	LP	N/A	N/A	N/A	\$ 13,000,000	\$ 13,951,589
Clifton Commodities Fund, LP	LP	N/A	N/A	N/A	186,000,000	138,716,590
Diplomat Properties LP,						
A Delaware Limited Partnership	LP	N/A	N/A	N/A	11,690,531	11,690,531
Entrust Cap Div C Class Fund, LP	LP	N/A	N/A	N/A	22,000,000	21,622,398
Gerding Edlen Green Cities II, LP	LP	N/A	N/A	N/A	26,588,896	34,192,465
GESD Investors LP	LP	N/A	N/A	N/A	7,789,518	1,832,397
Harrison Street Real Estate Partners IV, LP	LP	N/A	N/A	N/A	20,613,599	20,670,580
Intercontinental Real Estate Investment Fund	LP	N/A	N/A	N/A	2,014,013	2,169,794
Mesirow Finl Real Estate Value Fund, LP	LP	N/A	N/A	N/A	30,030,783	43,642,222
Mesirow Finl Real Estate Value Fund II, LP	LP	N/A	N/A	N/A	9,089,385	8,975,050
Mesirow Finl Private Equity Partnership Fd VI	LP	N/A	N/A	N/A	13,774,608	12,579,089
Paladin Capital Partners Fund, LP	LP	N/A	N/A	N/A	29,207,831	10,747,228
Permal Fixed Income Holdings LTD	LP	N/A	N/A	N/A	25,000,000	27,352,900
Pinnacle Natural Resources Offshore ERISA	LP	N/A	N/A	N/A	50,000,000	55,165,941

PLUMBERS AND PIPEFITTERS NATIONAL PENSION FUND
ALEXANDRIA, VIRGINIA

SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES
AS OF JUNE 30, 2015

Form 5500, Schedule H, Line 4i

EIN: 52-6152779
Plan No. 001

		(c) Description of investment, including maturity date, rate of interest, collateral, par or maturity value					
(a)	(b)					(d)	(e)
Identity of issuer, borrower, lessor or similar party		Description	Maturity Date	Rate of Interest		Cost	Current Value
<u>Partnerships (continued)</u>							
Potomac Energy Fund, LP		LP	N/A	N/A	N/A	\$ 25,994,198	\$ 23,324,843
Potomac Energy Fund II, LP		LP	N/A	N/A	N/A	36,046,135	48,959,165
Realty Associate Fund VIII		LP	N/A	N/A	N/A	48,844,652	34,767,520
Total Partnerships						<u>\$ 557,684,149</u>	<u>\$ 510,360,302</u>
<u>Investment Contract with Insurance Company</u>							
Metlife Annuity Insurance Contract		GIC	N/A	N/A	N/A	\$ 1,682,789	\$ 1,682,789
						<u>\$ 1,682,789</u>	<u>\$ 1,682,789</u>
Total assets held for investment purposes						<u>\$ 4,711,356,016</u>	<u>\$ 5,495,861,748</u>

PLUMBERS AND PIPEFITTERS NATIONAL PENSION FUND

ATTACHMENT TO FORM 5500

EIN: 52-06152779 PLAN NO.: 001

SCHEDULE G, PART III

SCHEDULE OF NONEXEMPT TRANSACTIONS
FOR THE TWELVE-MONTH PERIOD ENDED JUNE 30, 2015

(a) Identity of Party <u>Involved</u>	(b) Relationship to <u>Partnership</u>	(c) Description <u>of Transactions</u>	(g) Expenses Incurred in Connection with <u>Transaction</u>
AIA Cliiper LLC	Related party vendor	Reimbursement for task force labor	\$ 7,915
Birmingham Jefferson Civi	Related party vendor	Reimbursement for task force labor	3,171
Capri Hotel	Related party vendor	Reimbursement for task force labor	4,500
CJUF II Stratus Block 21	Related party vendor	Reimbursement for task force labor	571
Deer Crest Janna, LLC	Related party vendor	Reimbursement for task force labor	108
Dolphin Hotel Associates	Related party vendor	Reimbursement for task force labor	10,061
Seldar Florida Finance, L	Related party vendor	Reimbursement for task force labor	10,566
Starport I LLC	Related party vendor	Reimbursement for task force labor	966
Starwood Associate Relief	Related party vendor	Reimbursement for task force labor	1,387
Starwood Hotels & Resorts	Related party vendor	Reimbursement for task force labor	3,865
The Westin Peachtree Plaza	Related party vendor	Reimbursement for task force labor	218
W Atlanta Hotel, LLC	Related party vendor	Reimbursement for task force labor	207
W South Beach	Related party vendor	Reimbursement for task force labor	2,877
Westin Resort & Villas St	Related party vendor	Reimbursement for task force labor	5,813
			<u>\$ 52,225</u>

Exhibit 2
Schedule MB, Line 6 – Summary of Plan Provisions

1. Normal Pension

Age Requirement	65 or, if later, the fifth anniversary of participation.
Commencement of Credited Service	A participant receives one full year of Pension Credit, for each year of 1,500 which is prorated for each 150 hours less than 1,500 for service following the Contribution Date.
Benefit	The monthly Normal Pension amount is equal to the benefit accrued under the Plan in effect December 31, 2004 under Schedule A plus accrual of benefits under Schedule B for service in 2005 plus benefits accrual under Schedule B or C, depending on whether a 25% increase in the current contribution rate was adopted as of July 1, 2006 for 2006, plus Schedule D thereafter, based on the contribution rate and prorated for less than 35 years of credited service as follows:

Schedule A – benefit rates prior to January 1, 2005			
Hourly Contribution Rate	Monthly Normal Pension	Hourly Contribution Rate	Monthly Normal Pension
\$0.10	\$140	\$2.10	\$2,333
0.20	281	2.20	2,418
0.30	420	2.30	2,495
0.40	559	2.40	2,570
0.50	699	2.50	2,647
0.60	825	2.60	2,722
0.70	937	2.70	2,800
0.80	1,054	2.80	2,876
0.90	1,167	2.90	2,951
1.00	1,280	3.00	3,027
1.10	1,394	3.10	3,104
1.20	1,494	3.20	3,181
1.30	1,593	3.30	3,256
1.40	1,692	3.40	3,325
1.50	1,793	3.50	3,396
1.60	1,893	3.60	3,460
1.70	1,987	3.70	3,536
1.80	2,071	3.80	3,606
1.90	2,158	3.90	3,676
2.00	2,245	4.00	3,746

For contribution rates over \$4.00 per hour, 2.25% of the additional contribution is added to the monthly normal pension, or if greater, the pension determined from the \$1.10 contribution rate plus 2.25% of the contribution rate in excess of \$1.10.

Exhibit 2
Schedule MB, Line 6 – Summary of Plan Provisions

Schedule B – for benefits earned in 2005 and for 2006 and later under agreements if the 25% contribution increase is not adopted as of July 1, 2006.

Hourly Contribution Rate	Monthly Normal Pension	Hourly Contribution Rate	Monthly Normal Pension
\$ 0.10	\$ 35	\$ 2.10	\$ 583
0.20	70	2.20	604
0.30	105	2.30	624
0.40	140	2.40	643
0.50	175	2.50	662
0.60	206	2.60	680
0.70	234	2.70	700
0.80	264	2.80	719
0.90	292	2.90	738
1.00	320	3.00	757
1.10	349	3.10	776
1.20	373	3.20	795
1.30	398	3.30	814
1.40	423	3.40	831
1.50	448	3.50	849
1.60	473	3.60	867
1.70	497	3.70	884
1.80	518	3.80	902
1.90	540	3.90	919
2.00	561	4.00	937

On and after January 1, 2005, contribution rates at \$4.01 and above provide additional monthly benefits of 0.375% of all contributions above \$4.00 per hour under Schedule B.

Schedule C – for benefits earned in 2006 under agreements if the 25% increase in contributions is adopted as of July 1, 2006.

Hourly Contribution Rate	Monthly Normal Pension	Hourly Contribution Rate	Monthly Normal Pension
\$0.10	\$73	\$2.60	\$1,157
0.20	112	2.70	1,191
0.30	169	2.80	1,225
0.40	224	2.90	1,255
0.50	280	3.00	1,285
0.60	336	3.10	1,316
0.70	386	3.20	1,345
0.80	431	3.30	1,376
0.90	476	3.40	1,407
1.00	527	3.50	1,438
1.10	572	3.60	1,468
1.20	617	3.70	1,498
1.30	664	3.80	1,528
1.40	706	3.90	1,559
1.50	747	4.00	1,590
1.60	786	4.10	1,621
1.70	826	4.20	1,649
1.80	867	4.30	1,676
1.90	907	4.40	1,705
2.00	946	4.50	1,733
2.10	985	4.60	1,761
2.20	1,019	4.70	1,789
2.30	1,054	4.80	1,817
2.40	1,088	4.90	1,845
2.50	1,122	5.00	1,873

On and after January 1, 2006, contribution rates at \$5.01 and above provide additional monthly benefits of 0.75% of all contributions above \$5.00 per hour under Schedule C.



Exhibit 2
Schedule MB, Line 6 – Summary of Plan Provisions

Schedule D – for benefits earned in 2007 and later under agreements if the 25% increase in contributions is adopted as of January 1, 2007.

Hourly Contribution Rate	Monthly Normal Pension	Hourly Contribution Rate	Monthly Normal Pension
\$0.10	\$109	\$2.60	\$1,736
0.20	169	2.70	1,787
0.30	254	2.80	1,837
0.40	337	2.90	1,882
0.50	420	3.00	1,927
0.60	504	3.10	1,974
0.70	579	3.20	2,018
0.80	647	3.30	2,064
0.90	714	3.40	2,111
1.00	791	3.50	2,157
1.10	859	3.60	2,202
1.20	926	3.70	2,247
1.30	995	3.80	2,293
1.40	1,059	3.90	2,339
1.50	1,120	4.00	2,386
1.60	1,180	4.10	2,431
1.70	1,240	4.20	2,473
1.80	1,301	4.30	2,514
1.90	1,360	4.40	2,557
2.00	1,420	4.50	2,599
2.10	1,477	4.60	2,641
2.20	1,528	4.70	2,683
2.30	1,581	4.80	2,725
2.40	1,632	4.90	2,767
2.50	1,684	5.00	2,809

On and after January 1, 2007, contribution rates at \$5.01 and above provide additional monthly benefits of 1.125% of all contributions above \$5.00 per hour under Schedule D.

The benefits valued in this report do not reflect any other benefits structure adopted that may be contingent on accrual rates based on the adoption of higher contributions subsequent to July 1, 2007.

For contracts bargained in accordance with Option 2 of the Funding Improvement Plan (Reduction in Future Accruals), the accrual schedules above are reduced by 75% for benefits earned on or after July 1, 2012 (referred to as Schedule G).

2. Reduced Pension

Age Requirement	65
Credited Service Requirement	Pension Credit, including 1,500 hours after the Contribution Date.
Benefit	Normal Pension proportionately reduced for service less than 35 years. Reduction does not apply to the portion of the benefit, if any, based on 2.25% of contributions.



Exhibit 2
Schedule MB, Line 6 – Summary of Plan Provisions

3. Early Pension

Age Requirement	55
Credited Service Requirement	Five years of Pension Credit, including 1,500 hours after the Contribution Date.
Benefit	<p>Normal or Reduced Pension (based on number of Pension Credits at retirement) reduced by 1.5% for each year of age less than 62 (to age 60) and by 6% for each year less than age 60.</p> <p>For certain groups making supplemental contributions, unreduced early retirement benefits are payable at ages 55 – 61, if age plus years of service totals at least 85.</p>

4. Disability Pension

Age Requirement	None
Credited Service Requirement	Five years of Pension Credit, including 1,500 hours after the Contribution Date, 500 hours in the 24 month period preceding disability and a Social Security Disability Award.
Benefit	Normal or Reduced Pension based on number of Pension Credits at disability.

5. Deferred Pension

Age Requirement	40
Credited Service Requirement	15 years of Pension Credit, including five years of Future Service Credit.
Benefit	Normal or Reduced Pension (based on Pension Credits at termination). Payable on or after age 55, reduced by 1.5% for each year of age less than 62 (to age 60) and by 6% for each year less than age 60.

6. Vesting

Age Requirement	None
Credited Service Requirement	Five years of Vesting Credit
Benefit	Normal or Reduced Pension based on Future Service only payable at Normal Retirement Age.
Normal Retirement Age	Later of age 65 or age on fifth anniversary of participation.

Exhibit 2
Schedule MB, Line 6 – Summary of Plan Provisions

7. Severance Benefit

Age Requirement	None
Credited Service Requirement	Five years of Future Service Credit as of June 30, 1982, but before eligibility for vesting.
Benefit	50% of contributions made on the employee's behalf through June 30, 1982.

8. Disability Severance Benefit

Credited Service Requirement	Less than five years of Pension Credit by 1,500 hours after the Contribution Date, 500 hours in the 24 month period preceding disability and a Social Security Disability Award.
Benefit	100% of contributions made on the employee's behalf. If vested, the greater of 100% of contributions or the present value of the accrued benefit.

9. Spouse's Pre-Retirement Death Benefit

Age Requirement	None
Credited Service Requirement	Eligible for an immediate or deferred pension.
Benefit	100% of the benefit the employee would have received had he retired the day before he died and elected the Husband and Wife option. If the employee dies before age 55, then the benefit is computed as if he died on his 55 th birthday and payments will be made commencing on the first of the month following the date he would have attained age 55.

10. Pre-Retirement Lump Sum Death Benefit

Age Requirement	None
Credited Service Requirement	None. Not eligible for a Pre-retirement Spouse Pension.
Benefit	100% of contributions made on the employee's behalf.

Exhibit 2
Schedule MB, Line 6 – Summary of Plan Provisions

11. Post-Retirement Death Benefit(s)

Five Year Certain Guarantee if Husband and Wife coverage is rejected.

Husband and Wife – If married, pension benefits are paid in the form of a joint and survivor annuity unless this form is rejected. If not rejected, the benefit amount otherwise payable is reduced to reflect the joint and survivor coverage. In the event that the spouse predeceases the pensioner, the benefit shall be increased by the percentage reduction previously applied. If rejected or not married, benefits are payable for the life of the employee with five years of payment guaranteed to all pensioners without reduction or in any other available option form elected by the employee in an actuarially equivalent amount.

12. Past Service Credit

Years of Service after the Contribution Date:

Contribution Date	Maximum Years of Past Service Credit
Prior to January 1, 1980	24
January 1, 1980 through December 31, 1982	20
January 1, 1983 through December 31, 1985	15
January 1, 1986 through December 31, 1999	10
On or after January 1, 2000	5

13. Future Service Credit

Years of Service after the Contribution Date:

Hours Worked in the Calendar Year	Future Service Credit
2,100 or more	1-2/10
1,800 – 2,099	1-1/10
1,500 – 1,799	1
1,350 – 1,499	9/10
1,200 – 1,349	8/10
1,050 – 1,199	7/10
900 – 1,049	6/10
750 – 899	5/10
600 – 749	4/10
450 – 599	3/10
300 – 449	2/10
150 – 299	1/10
Less than 150	0

14. Pension Credit

Sum of Past Service Credit and Future Service Credit.

Participation	Effective upon working in Covered Employment for at least 870 hours in a period of 12 consecutive months.
Vesting Service	870 hours = 1 year

Exhibit 2
Schedule MB, Line 6 – Summary of Plan Provisions

15. Contribution Date

First date a contributing employer makes contributions to the Plan under a Collective Bargaining Agreement.

16. Changes in Benefits Since Last Year

None.

PLUMBERS AND PIPEFITTERS NATIONAL PENSION FUND
ALEXANDRIA, VIRGINIA

SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES
AS OF JUNE 30, 2015

Form 5500, Schedule H, Line 4i

EIN: 52-6152779
Plan No. 001

(c) Description of investment, including maturity date, rate of interest, collateral, par or maturity value					(e)	
(a)	(b)				(d)	
Identity of issuer, borrower, lessor or similar party	Description	Maturity Date	Rate of Interest		Cost	Current Value
<u>Short Term Investments</u>						
PNC Advantage Institutional MM Fd	Money market	N/A	N/A	74,542,947	\$ 74,542,947	\$ 74,542,947
Foreign Currencies	Money market	N/A	N/A	92,679,485	4,274,705	4,181,753
Dreyfus Capital Management Fund	Money market	N/A	N/A	6,025	6,025	6,025
Dreyfus Treasury Prime Cash Mgmt	Money market	N/A	N/A	7,886,779	7,876,620	7,886,779
United States Treasury Bills	Treasury Bill	7/23/15	DTD	4,500,000	4,496,256	4,496,256
United States Treasury Bills	Treasury Bill	08/20/15	DTD	1,500,000	1,499,462	1,499,462
United States Treasury Bills	Treasury Bill	11/12/15	DTD	500,000	499,951	499,951
Total Short Term Investments					\$ 93,195,966	\$ 93,113,173
<u>US Government & Agencies Notes and Bonds</u>						
Federal Home Loan Mortgage Corporation	Notes	04/15/20	Var	349,813	\$ 350,961	\$ 351,391
Federal Home Loan Mortgage Corporation	Notes	08/25/23	Var	866,809	866,809	868,794
Federal Home Loan Mortgage Corporation	Notes	05/01/26	7.500%	10,476	10,406	12,168
Federal Home Loan Mortgage Corporation	Notes	07/01/32	7.000%	32,539	33,683	39,316
Federal Home Loan Mortgage Corporation	Notes	09/01/32	7.000%	100,636	104,173	120,267
Federal Home Loan Mortgage Corporation	Notes	10/01/32	7.000%	95,952	99,326	116,179
Federal Home Loan Mortgage Corporation	Notes	11/01/32	7.000%	112,809	116,775	134,362
Federal Home Loan Mortgage Corporation	Notes	05/01/35	5.500%	394,469	427,136	444,050
Federal Home Loan Mortgage Corporation	Notes	07/01/39	5.500%	15,986	16,995	17,885
Federal Home Loan Mortgage Corporation	Notes	01/01/39	5.500%	936,303	1,065,191	1,054,183
Federal Home Loan Mortgage Corporation	Notes	10/15/42	3.000%	662,410	674,483	675,400
Federal Home Loan Mortgage Corporation	Notes	01/01/43	3.000%	1,821,313	1,876,237	1,816,322
Federal Home Loan Mortgage Corporation	Notes	06/01/44	3.500%	329,885	338,210	339,752
Federal National Mortgage Association	Notes	06/01/21	6.000%	1,328	1,387	1,419
Federal National Mortgage Association	Notes	10/01/22	6.000%	1,978	2,068	2,188
Federal National Mortgage Association	Notes	07/25/25	4.000%	329,264	356,943	356,284
Federal National Mortgage Association	Notes	01/01/29	6.000%	17,420	16,217	19,752
Federal National Mortgage Association	Notes	06/01/29	6.000%	34,993	32,577	39,693
Federal National Mortgage Association	Notes	11/01/29	7.000%	47,383	49,226	54,626
Federal National Mortgage Association	Notes	12/01/29	7.000%	885	1,058	1,057
Federal National Mortgage Association	Notes	08/01/32	7.000%	90,278	93,791	108,637
Federal National Mortgage Association	Notes	10/01/35	5.500%	61,795	65,146	69,528
Federal National Mortgage Association	Notes	10/01/35	5.500%	368,050	379,852	413,722
Federal National Mortgage Association	Notes	04/01/37	Var %	12,611	12,660	13,363
Federal National Mortgage Association	Notes	02/01/41	4.500%	302,704	328,339	328,095
Federal National Mortgage Association	Notes	10/25/41	2.500%	320,496	250,748	267,073
Federal National Mortgage Association	Notes	06/01/42	3.247%	195,900	203,061	204,141
Federal National Mortgage Association	Notes	04/01/43	3.000%	197,856	193,465	198,060
Federal National Mortgage Association	Notes	05/01/43	3.000%	104,314	103,147	104,438
Federal National Mortgage Association	Notes	06/01/43	3.000%	350,470	346,554	350,775
Federal National Mortgage Association	Notes	08/01/43	3.000%	247,119	241,684	247,221
Federal National Mortgage Association	Notes	08/01/43	3.000%	373,980	365,755	374,193
Federal National Mortgage Association	Notes	08/25/43	3.500%	614,031	645,860	648,282
Federal National Mortgage Association	Notes	04/01/45	5.500%	1,530,023	1,746,346	1,724,811
Fannie Mae	Notes	05/25/18	0.402%	226,568	226,507	226,953
Fannie Mae	Notes	12/25/17	0.442%	893,594	893,330	894,639
Fico Strips	Notes	11/30/17	Zero Cpn	3,745,000	2,547,802	3,660,288
Fico Strips	Notes	09/26/19	Zero Cpn	715,000	440,862	662,791
Fico Corporation	Notes	05/02/17	Zero Cpn	610,000	418,515	600,679
Financing Corporation	Bonds	10/15/19	Zero Cpn	610,000	548,274	563,036
Financing Corporation	Notes	07/15/20	Zero Cpn	550,000	485,885	497,783
FREMF Mortgage Trust	Notes	12/25/46	4.360%	280,000	275,901	292,354
FREMF Mortgage Trust	Notes	02/25/22	3.669%	570,000	567,555	570,000

PLUMBERS AND PIPEFITTERS NATIONAL PENSION FUND
ALEXANDRIA, VIRGINIA

SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES
AS OF JUNE 30, 2015

Form 5500, Schedule H, Line 4i

EIN: 52-6152779
Plan No. 001

		(c) Description of investment, including maturity date, rate of interest, collateral, par or maturity value			Plan No.	001	
(a)	(b)					(e)	
Identity of issuer, borrower, lessor or similar party	Description	Maturity Date	Rate of Interest		(d) Cost	Current Value	
<u>US Government & Agencies Notes and Bonds (continued)</u>							
Government National Mortgage Association	Bonds	12/15/23	7.000%	28,880	\$	29,661	\$ 33,203
Government National Mortgage Association	Bonds	09/15/28	7.500%	1,281		3,231	1,541
Government National Mortgage Association	Bonds	10/15/29	7.500%	531		595	626
Government National Mortgage Association	Bonds	11/15/29	7.000%	479		1	486
Government National Mortgage Association	Bonds	02/20/34	5.500%	69,786		77,495	79,478
Government National Mortgage Association	Bonds	01/15/37	5.500%	45,211		49,732	52,384
Government National Mortgage Association	Bonds	12/15/38	6.000%	35,162		39,469	40,662
Government National Mortgage Association	Bonds	07/20/41	4.500%	65,195		70,360	70,453
Government National Mortgage Association	Bonds	03/20/42	4.000%	69,950		75,425	74,583
Government National Mortgage Association	Bonds	12/20/43	5.000%	79,039		86,349	87,288
Government National Mortgage Association	Bonds	04/20/44	2.000%	2,864,489		2,940,577	2,931,804
United States Treasury Notes	Notes	01/15/16	0.375%	925,000		924,617	926,304
United States Treasury Notes	Notes	06/30/16	0.500%	1,755,000		1,755,974	1,757,878
United States Treasury Notes	Notes	07/31/16	Var%	2,595,000		2,595,537	2,595,597
United States Treasury Notes	Notes	09/30/16	0.500%	361,000		361,749	361,480
United States Treasury Notes	Notes	10/15/16	0.500%	1,665,000		1,667,022	1,669,429
United States Treasury Notes	Notes	10/31/16	0.375%	350,000		349,236	349,783
United States Treasury Notes	Notes	01/31/17	Var%	5,345,000		5,347,345	5,347,833
United States Treasury Notes	Notes	02/28/17	0.500%	2,985,000		2,981,162	2,983,149
United States Treasury Notes	Notes	03/31/17	0.500%	267,500		2,674,781	2,672,272
United States Treasury Notes	Notes	04/30/17	Var%	630,000		630,102	629,943
United States Treasury Notes	Notes	05/31/17	0.625%	524,700		524,003	524,616
United States Treasury Notes	Notes	11/15/17	0.875%	1,005,000		1,007,354	1,006,889
United States Treasury Notes	Notes	12/15/17	1.000%	575,000		578,743	577,473
United States Treasury Notes	Notes	01/15/18	0.875%	755,000		755,233	755,234
United States Treasury Notes	Notes	02/15/18	1.000%	1,540,000		1,543,656	1,544,574
United States Treasury Bond	Bonds	03/15/18	1.000%	245,000		245,153	245,573
United States Treasury Notes	Notes	03/31/18	2.750%	2,235,000		2,359,643	2,352,695
United States Treasury Notes	Notes	05/15/19	3.125%	2,995,000		3,201,527	3,195,994
United States Treasury Bond	Bonds	08/15/19	3.625%	780,000		852,152	849,100
United States Treasury Notes	Notes	09/30/19	1.750%	6,650,000		7,613,274	7,422,906
United States Treasury Notes	Notes	11/30/19	1.000%	5,335,000		5,265,012	5,218,324
United States Treasury Notes	Notes	12/31/19	1.625%	3,295,000		3,308,970	3,308,641
United States Treasury Notes	Notes	04/30/20	1.375%	12,820,000		12,700,931	12,679,749
United States Treasury Notes	Notes	08/15/21	2.125%	925,000		951,260	935,406
United States Treasury Notes	Notes	09/30/21	2.125%	460,000		474,914	464,600
United States Treasury Notes	Notes	05/15/23	1.750%	810,000		792,359	783,489
United States Treasury Notes	Notes	08/15/24	2.375%	2,870,000		2,851,381	2,885,469
United States Treasury Notes	Notes	02/15/25	2.000%	3,270,000		3,155,230	3,177,001
United States Treasury Notes	Notes	05/15/25	2.125%	1,350,000		1,322,420	1,325,538
United States Treasury Notes	Notes	05/15/43	2.875%	3,015,000		2,676,026	2,873,205
United States Treasury Notes	Notes	05/15/43	2.875%	12,480,000		10,852,138	11,893,066
United States Treasury Notes	Notes	11/15/43	3.750%	2,385,000		2,456,035	2,682,743
United States Treasury Notes	Notes	02/15/44	3.500%	3,170,000		3,391,133	3,485,257
United States Treasury Notes	Notes	08/15/44	3.125%	1,015,000		1,049,690	1,016,665
United States Treasury Notes	Notes	11/15/44	3.000%	2,875,000		3,107,006	2,812,325
United States Treasury Notes	Notes	11/15/44	3.000%	1,460,000		1,546,014	1,428,172
United States Treasury Notes	Notes	02/15/45	2.500%	2,450,000		2,219,145	2,156,196
United States Treasury Notes	Notes	02/15/45	2.500%	1,105,000		973,526	972,488
United States Treasury Notes	Notes	02/15/45	2.500%	8,545,000		7,949,522	7,520,284
Buoni Poliennalidel Tes	Bonds	08/01/39	5.000%	2,965,000		3,929,260	4,244,613
Korea Treasury Bond	Bonds	09/10/18	5.750%	3,499,000		3,426,991	3,510,897
Korea Treasury Bond	Bonds	09/10/23	3.375%	1,132,400		1,079,322	1,088,916

PLUMBERS AND PIPEFITTERS NATIONAL PENSION FUND
ALEXANDRIA, VIRGINIA

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EIN: 52-6152779
Plan No. 001

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Identity of issuer, borrower, lessor or similar party	Description	Maturity Date	Rate of Interest		Cost	Current Value
<u>US Government & Agencies Notes and Bonds (continued)</u>						
Malaysian Government	Bonds	10/15/20	3.659%	3,860,000	\$ 1,082,626	\$ 1,025,638
Malaysian Government	Bonds	09/30/21	4.048%	2,865,000	882,029	768,930
Malaysian Government	Bonds	03/15/23	3.480%	4,460,000	1,380,560	1,143,961
Mex Bonos Desarr Fixed Rate	Bonds	05/31/29	8.500%	612,800	5,627,325	4,652,378
Mex Bonos Desarr Fixed Rate	Bonds	11/18/38	8.500%	483,200	4,479,620	3,682,950
Mex Bonos Desarr Fixed Rate	Bonds	11/13/42	7.750%	874,000	7,307,335	6,197,534
Neder Waterschapsbank	Bonds	02/14/18	Var	3,260,000	3,274,148	3,275,919
New South Wales Treasury Corporation	Bonds	08/20/24	5.000%	3,185,000	2,963,290	2,798,723
New Zealand Government	Bonds	05/15/21	6.000%	1,570,000	1,997,534	1,227,279
New Zealand Government	Bonds	03/15/19	5.000%	1,205,000	946,602	875,114
New Zealand Government	Bonds	04/15/23	5.500%	1,610,000	1,515,783	1,255,352
Noto Do Tesouro Nacional	Bonds	01/01/23	10.000%	11,145	4,646,724	3,161,502
Noto Do Tesouro Nacional	Bonds	01/01/21	10.000%	2,240	954,018	648,814
Poland Government Bond	Bonds	10/25/23	4.000%	1,400,000	452,375	394,234
Poland Government Bond	Bonds	10/25/20	5.250%	6,840,000	2,040,376	2,041,813
Queensland Treasury Corporation	Bonds	02/21/20	6.250%	3,945,000	4,280,566	3,505,461
Queensland Treasury Corporation	Bonds	07/21/22	6.000%	1,560,000	1,666,598	1,415,118
Republic Of South Africa	Bonds	03/31/21	6.750%	12,545,000	1,539,952	975,676
Republic Of South Africa	Bonds	02/28/41	6.500%	41,570,000	3,681,261	2,598,549
Republic Of South Africa	Bonds	02/28/48	8.750%	9,055,000	900,887	729,103
Swedish Export Credit	Bonds	11/09/17	0.611%	1,920,000	1,941,504	1,932,730
Swedish Export Credit	Bonds	06/12/17	Var	1,180,000	1,181,418	1,182,997
Total US Government & Agencies Notes and Bonds					\$ 189,382,874	\$ 182,579,999
<u>Corporate and Other Notes and Bonds</u>						
Abbvie, Incorporated	Notes	11/06/42	4.400%	320,000	\$ 327,558	\$ 302,778
Abbvie, Incorporated	Notes	11/06/22	3.200%	65,000	64,872	64,363
Abbvie, Incorporated	Notes	05/14/25	3.600%	625,000	623,906	617,744
Abbvie, Incorporated	Notes	05/14/35	4.500%	260,000	258,203	254,358
Abengoa Finance SAU	Notes	11/01/17	8.875%	195,000	203,775	202,800
ABN Amro Bank NV	Bonds	10/28/16	Var %	1,565,000	1,565,000	1,571,933
Acosta, Incorporated	Notes		n/a	105,000	105,753	105,000
Actavis Funding Services	Notes	06/15/24	3.850%	350,000	354,633	345,783
Actavis Funding Services	Notes	06/15/44	4.850%	425,000	420,300	410,036
Actavis Funding Services	Notes	03/15/22	3.450%	630,000	629,105	624,034
Actavis Funding Services	Notes	03/15/22	3.450%	473,000	472,328	468,521
Actavis Funding Services	Notes	03/15/25	3.800%	95,000	94,663	93,320
Actavis Funding Services	Notes	03/15/25	3.800%	241,000	240,144	236,739
Activision Blizzard	Notes	09/15/21	5.625%	996,000	1,030,535	1,043,310
ADT Corporation	Notes	07/15/17	2.250%	320,000	315,275	316,864
ADT Corporation	Notes	07/15/42	4.875%	300,000	246,100	229,500
Advantage Sales & Marketing	Term Loan	-	0.000%	102,323	102,525	102,323
Advantage Sales & Marketing	Term Loan	-	0.000%	2,419	2,410	2,419
Advantage Sales & Marketing	Term Loan	-	0.000%	743,750	739,488	743,750
Aecom Technology	Bonds	10/15/24	5.875%	615,000	627,700	623,456
Aercap Ireland Cap Limited	Notes	05/15/19	3.750%	900,000	900,000	889,875
Aercap Ireland Cap Limited	Notes	05/15/21	4.500%	590,000	590,000	592,950
Aetna, Incorporated	Bonds	03/15/19	2.200%	135,000	134,865	135,178
Alcoa, Incorporated	Notes	02/01/37	5.950%	20,000	21,400	19,950
Alcoa, Incorporated	Notes	10/01/24	5.125%	235,000	235,000	237,938
Alere, Incorporated	Notes	06/15/20	6.500%	345,000	356,513	355,350
Alere, Incorporated	Notes	07/01/23	6.375%	505,000	508,225	513,838
Allstate Corporation	Notes	06/15/23	3.150%	140,000	139,724	140,179

PLUMBERS AND PIPEFITTERS NATIONAL PENSION FUND
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EIN: 52-6152779
Plan No. 001

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	Identity of issuer, borrower, lessor or similar party	Description	Maturity Date	Rate of Interest	Cost	Current Value
	<u>Corporate and Other Notes and Bonds (continued)</u>					
	Ally Auto Receivables Trust	Notes	02/15/17	0.480%	389,837 \$	389,661
	Ally Financial Inc	Notes	12/01/17	6.250%	750,000	800,625
	Ally Financial Inc	Notes	03/15/20	8.000%	1,460,000	1,719,150
	Ally Financial Inc	Notes	02/15/17	5.500%	150,000	156,375
	Ally Financial Inc	Notes	09/30/24	5.125%	470,000	471,175
	Ally Financial Inc	Notes	05/21/18	3.600%	620,000	620,775
	Ally Financial Inc	Notes	06/17/19	1.340%	695,000	696,703
	Altice SA	Notes	05/15/22	7.750%	1,060,000	1,025,550
	Altice SA	Notes	02/15/25	7.625%	335,000	314,900
	Altria Group, Incorporated	Notes	11/10/38	9.950%	359,000	578,076
	Altria Group, Incorporated	Notes	01/31/24	4.000%	220,000	223,406
	AMC Networks, Incorporated	Notes	07/15/21	7.750%	340,000	367,200
	Amazon Com, Incorporated	Notes	12/05/24	3.800%	310,000	311,159
	Amazon Com, Incorporated	Notes	12/05/44	4.950%	130,000	126,684
	American Credit Acceptance	Bonds	04/16/18	1.450%	29,338	29,341
	American Express Credit	Bonds	08/15/19	2.250%	460,000	460,773
	American Express Credit	Bonds	12/15/21	0.521%	2,245,000	2,242,508
	American Express Issuance Trust	Bonds	08/15/19	0.610%	220,000	220,640
	American Municipal Power Ohio, Inc	Bonds	02/15/50	8.084%	170,000	250,010
	Americredit Automobile Rec	Notes	03/09/20	2.670%	380,000	381,098
	Americredit Automobile Rec	Notes	11/08/19	2.290%	515,000	521,118
	Amerigas Finance LLC	Notes	05/20/22	7.000%	1,468,000	1,556,080
	Amerigas Finance LLC	Notes	05/20/20	6.750%	775,000	815,688
	Ameristar Casinos, Incorporated	Notes	04/15/21	7.500%	475,000	502,906
	Amgen, Incorporated	Notes	11/15/41	5.150%	545,000	559,688
	Amkor Technology, Incorporated	Notes	10/01/22	6.375%	265,000	268,313
	Amsurg Corporation	Notes	07/15/22	5.625%	560,000	564,900
	Anheuser Busch Inbev Worldwide, Inc.	Bonds	07/15/42	3.750%	140,000	123,606
	Anna Merger, Incorporated	Bonds	10/01/22	7.750%	1,055,000	1,062,913
	Apple, Incorporated	Notes	05/04/43	3.850%	265,000	241,198
	Apple, Incorporated	Notes	05/13/45	4.375%	190,000	187,236
	APX Group, Incorporated	Bonds	12/01/20	8.750%	1,490,000	1,341,000
	Aramark Corporation	Notes	-	Var %	750,500	750,500
	Arcelormittal	Notes	06/01/18	6.125%	320,000	340,800
	Arcelormittal	Notes	10/15/39	7.500%	845,000	840,775
	Arcelormittal	Notes	08/05/20	4.250%	678,000	708,510
	Arcelormittal	Notes	06/01/20	5.125%	155,000	157,131
	Arcelormittal	Notes	06/01/25	6.125%	225,000	224,298
	Argos Merger, Incorporated	Bonds	03/15/23	7.125%	840,000	879,900
	AT&T, Incorporated	Notes	08/15/41	5.550%	150,000	153,686
	AT&T, Incorporated	Notes	03/11/24	3.900%	570,000	574,834
	AT&T, Incorporated	Notes	05/15/25	3.400%	640,000	610,374
	AT&T, Incorporated	Notes	05/15/35	4.500%	275,000	252,805
	AT&T, Incorporated	Notes	05/15/46	4.750%	260,000	236,592
	Avago Technologies	Bonds	-	0.000%	803,864	803,864
	BAE Systems PLC	Notes	10/11/21	4.750%	545,000	597,080
	Bank of America	Notes	05/01/18	5.650%	135,000	148,299
	Bank Of America Corporation	Notes	08/01/16	6.500%	665,000	701,489
	Bank Of America Corporation	Notes	01/11/23	3.300%	915,000	901,129
	Bank Of America Corporation	Notes	04/01/19	Var %	630,000	631,153
	Bank Of America Corporation	Bonds	08/26/24	4.200%	215,000	214,482
	Bank Of America Corporation	Notes	01/22/25	4.000%	30,000	29,229
	Bank Of America Corporation	Notes	01/22/25	4.000%	572,000	557,294

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	<u>Corporate and Other Notes and Bonds (continued)</u>					
	Bank Of America Corporation	Notes	04/21/25	3.950%	255,000 \$	254,446 \$
	Bank Of America Credit Card Trust	Notes	06/15/21	0.557%	1,520,000	1,519,088
	Bank of New York Mellon	Notes	03/04/19	2.200%	270,000	271,139
	Bank of New York Mellon	Notes	05/15/24	3.400%	805,000	809,460
	Barclays PLC	Notes	03/16/25	3.650%	215,000	203,347
	Barclays Bank PLC	Notes	12/09/16	Var %	1,020,000	1,020,643
	Barclays Bank PLC	Notes	06/12/21	10.179%	630,000	834,687
	Barclays Dryrock Issuance Trust	Notes	03/16/20	Var %	490,000	489,907
	Barrick Gold Corporation	Notes	05/01/23	4.100%	359,000	349,799
	Baxalta, Incorporated	Notes	06/23/22	3.600%	405,000	404,749
	Bayer US Finance LLC	Notes	10/06/17	1.500%	535,000	537,306
	BBVA Banco Continental	Notes	04/08/18	3.250%	245,000	248,369
	Becton Dickinson & Company	Notes	12/15/19	2.675%	200,000	200,152
	Berry Plastics Corp	Bonds	-	n/a	55,000	55,000
	Berry Plastics Corp	Bonds	01/15/21	9.750%	2,805,000	3,073,999
	Bev Pack Holdings	Bonds	12/15/16	5.625%	195,000	194,635
	Bev Pack Holdings	Bonds	06/15/17	6.000%	460,000	460,000
	BG Energy Capital	Notes	10/15/21	4.000%	425,000	450,866
	BHP Billiton Finance USA Limited	Notes	09/30/23	3.850%	200,000	205,374
	BMC Software Finance	Notes	-	n/a	269,268	269,268
	Boston Scientific Corporation	Notes	10/01/18	2.650%	250,000	253,603
	Boyd Acquisition	Bonds	02/15/18	8.375%	880,000	885,063
	Burlington Northern Santa Fe	Notes	04/01/44	4.900%	55,000	56,943
	Cabela's Master Credit Card Trust	Notes	10/15/19	1.900%	230,000	232,820
	Cabela's Master Credit Card Trust	Notes	07/15/22	0.603%	362,000	361,276
	California Resources Corporation	Bonds	01/15/20	5.000%	915,000	805,200
	California Resources Corporation	Bonds	09/15/21	5.500%	645,000	561,279
	California Resources Corporation	Bonds	11/15/24	6.000%	600,000	516,000
	Calpine Corporation	Bonds	01/15/22	6.000%	235,000	248,513
	Capital One Bank USA	Bonds	02/15/23	3.375%	835,000	811,102
	Case New Holland, Incorporated	Notes	12/01/17	7.875%	1,115,000	1,220,925
	Caterpillar Financial Services Corporation	Notes	08/20/21	2.750%	280,000	283,100
	CBS Corporation	Notes	01/15/45	4.600%	315,000	281,263
	CCO Holdings LLC Cap Corporation	Bonds	01/15/19	7.000%	246,000	255,533
	CCO Holdings LLC Cap Corporation	Bonds	05/01/23	5.125%	115,000	111,838
	Cedar Fair LP	Bonds	03/15/21	5.250%	580,000	595,950
	Centurytel, Incorporated	Notes	09/15/39	7.600%	120,000	108,750
	Centurylink, Incorporated	Notes	06/15/21	6.450%	801,000	807,007
	Centurylink, Incorporated	Notes	04/01/20	5.625%	500,000	500,625
	Centurylink, Incorporated	Notes	12/01/23	6.750%	240,000	240,751
	Cequel Communications Holdings	Bonds	09/15/20	6.375%	600,000	595,950
	Cequel Communications Holdings	Bonds	12/15/21	5.125%	212,000	192,524
	Chase Issuance Trust	Bonds	04/15/19	Var	1,155,000	1,150,322
	Chase Issuance Trust	Bonds	08/15/17	0.590%	255,000	255,000
	Chase Issuance Trust	Bonds	10/16/17	0.540%	345,000	345,041
	Chase Issuance Trust	Bonds	01/15/19	1.150%	300,000	300,621
	Chase Issuance Trust	Bonds	04/15/21	0.521%	2,415,000	2,411,378
	Chesapeake Energy Corporation	Notes	02/15/21	6.125%	275,000	258,500
	Chesapeake Energy Corporation	Bonds	04/15/22	4.875%	1,685,000	1,461,738
	Chesapeake Midstream PT	Bonds	07/15/22	6.125%	530,000	563,125
	Chrysler GP	Bonds	06/15/21	8.250%	1,815,000	1,978,350
	CHS/Community Health Systems	Bonds	11/15/19	8.000%	335,000	353,006
	CHS/Community Health Systems	Bonds	08/15/18	5.125%	340,000	348,500

PLUMBERS AND PIPEFITTERS NATIONAL PENSION FUND
ALEXANDRIA, VIRGINIA

SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES
AS OF JUNE 30, 2015

Form 5500, Schedule H, Line 4i

EIN: 52-6152779
Plan No. 001

(c) Description of investment, including maturity date, rate of interest, collateral, par or maturity value						
(a)	(b)				(d)	(e)
Identity of issuer, borrower, lessor or similar party	Description	Maturity Date	Rate of Interest		Cost	Current Value
<u>Corporate and Other Notes and Bonds (continued)</u>						
CHS/Community Health Systems	Bonds	08/01/21	5.125%	305,000	\$ 305,000	\$ 310,719
CHS/Community Health Systems	Bonds	02/01/22	6.875%	545,000	550,908	574,975
Cit Group, Incorporated	Notes	04/01/18	6.625%	1,375,000	1,519,286	1,459,219
Cit Group, Incorporated	Notes	03/15/18	5.250%	575,000	617,906	594,406
Cit Group, Incorporated	Notes	05/15/17	5.000%	70,000	72,800	72,184
Cit Group, Incorporated	Notes	05/15/20	5.375%	295,000	316,276	307,538
Citigroup, Incorporated	Notes	02/19/19	3.875%	825,000	825,850	818,813
Citigroup, Incorporated	Notes	07/15/39	8.125%	375,000	565,489	538,260
Citigroup, Incorporated	Notes	01/14/22	4.500%	475,000	521,441	511,651
Citigroup, Incorporated	Notes	09/26/18	2.500%	305,000	303,664	308,434
Citigroup, Incorporated	Notes	03/10/17	Var	340,000	340,000	339,065
Citigroup, Incorporated	Bonds	03/26/25	3.875%	600,000	599,112	574,740
Citigroup, Incorporated	Notes	04/27/18	Var	810,000	810,000	807,530
Citigroup, Incorporated	Bonds	06/10/25	4.400%	1,170,000	1,165,226	1,165,636
Citibank Credit Card Issuance	Bonds	09/10/18	0.610%	625,000	625,000	626,244
Citizens Communications Company	Notes	08/15/31	9.000%	1,068,000	1,067,318	971,880
Clear Channel Communications	Bonds	10/15/27	7.250%	355,000	282,079	276,900
Clear Channel Communications	Bonds	06/15/18	6.875%	225,000	201,926	203,625
Clear Channel Communications	Bonds	12/15/19	9.000%	60,000	60,481	57,180
Clear Channel Communications	Bonds	03/01/21	11.250%	1,556,000	1,635,374	1,511,265
Clear Channel Communications	Bonds	1/15/2018	10.000%	380,000	366,016	305,900
Clear Channel Worldwide	Bonds	03/15/20	7.625%	645,000	654,912	672,413
Clear Channel Worldwide	Bonds	11/15/22	6.500%	145,000	143,550	148,625
Clear Channel Worldwide	Bonds	11/15/22	6.500%	945,000	979,909	983,981
CNH Equipment Trust	Bonds	06/15/17	0.490%	43,291	43,289	43,291
Coca-Cola CO/The	Notes	11/26/18	2.375%	190,000	189,751	192,679
Columbia HCA Healthcare	Notes	06/15/25	7.690%	760,000	731,813	862,600
Columbia Healthcare, Incorporated	Bonds	12/01/27	7.050%	100,000	74,000	104,500
Comcast Corporation	Notes	08/15/35	4.400%	540,000	539,671	536,204
Commscope Holdings, Incorporated	Bonds	06/01/20	6.625%	155,000	159,263	160,813
Commscope, Incorporated	Bonds	06/15/21	5.000%	145,000	145,000	141,375
Commscope, Incorporated	Bonds	06/15/24	5.500%	195,000	195,000	189,638
Commscope Tech Finance	Bonds	06/15/25	6.000%	360,000	360,000	358,650
Communications Sales	Bonds	10/15/23	8.250%	540,000	528,823	530,550
Conagra Foods, Incorporated	Notes	01/25/18	1.900%	40,000	40,000	39,404
Concho Resources, Incorporated	Notes	04/01/23	5.500%	190,000	197,460	190,000
Conoco Phillips Company	Bonds	11/15/34	4.150%	280,000	279,885	270,808
Consol Energy, Incorporated	Bonds	04/15/22	5.875%	1,435,000	1,426,962	1,219,750
Cons Edison Company of New York	Bonds	03/15/44	4.450%	350,000	349,706	345,321
Constellation Brands, Incorporated	Notes	05/01/23	4.250%	105,000	105,440	103,425
Constellation Brands, Incorporated	Notes	11/15/19	3.875%	125,000	125,000	126,875
Constellation Brands, Incorporated	Notes	11/15/24	4.750%	190,000	196,434	190,475
Corp Andina De Fomento	Notes	01/29/18	Var	1,350,000	1,350,000	1,355,819
CPS Auto Trust	Bonds	02/15/19	1.310%	378,513	378,506	378,456
Credit Suisse New York	Notes	04/27/18	1.700%	895,000	895,152	888,762
Crestwood Midstream Partnership	Bonds	04/01/23	6.250%	855,000	880,088	889,200
Crown Castle International Corporation	Notes	04/15/22	4.875%	380,000	385,523	383,800
CSC Holdings, Inc.	Notes	07/15/18	7.625%	330,000	368,520	361,350
Cumulus Media Holdings	Notes	05/01/19	7.750%	1,085,000	1,071,437	995,488
Daimler Finance NA LLC	Bonds	08/01/18	2.375%	385,000	384,045	390,355
Daimler Finance NA LLC	Bonds	03/10/17	1.125%	330,000	329,815	328,175
Davita, Incorporated	Bonds	08/15/22	5.750%	300,000	314,512	318,000
Davita Healthcare Partners	Bonds	07/15/24	5.125%	335,000	335,000	329,349

PLUMBERS AND PIPEFITTERS NATIONAL PENSION FUND
ALEXANDRIA, VIRGINIA

SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES
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Form 5500, Schedule H, Line 4i

EIN: 52-6152779
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Identity of issuer, borrower, lessor or similar party	Description	Maturity Date	Rate of Interest		Cost	Current Value
<u>Corporate and Other Notes and Bonds (continued)</u>						
Davita Healthcare Partners	Bonds	05/01/25	5.000%	285,000 \$	285,000 \$	274,313
DCP Midstream LLC	Notes	03/15/20	5.350%	135,000	135,731	138,777
DCP Midstream LLC	Notes	09/30/21	4.750%	170,000	167,669	167,977
DCP Midstream LLC	Notes	12/01/17	2.500%	250,000	243,525	241,975
DCP Midstream LLC	Notes	04/01/44	5.600%	270,000	249,900	240,813
Denbury Resources, Incorporated	Bonds	07/15/23	4.625%	2,060,000	1,924,073	1,730,400
Deutsche Bank AG	Bonds	02/13/17	Var	1,590,000	1,599,306	1,587,615
Deutsche Bank AG	Bonds	05/30/17	1.350%	345,000	344,879	342,689
Deutsche Telekom Int Finance	Bonds	03/06/17	2.250%	445,000	442,495	450,140
Devon Energy Corporation	Notes	07/15/41	5.600%	155,000	173,085	162,277
Devon Energy Corporation	Notes	05/15/22	3.250%	165,000	164,023	163,079
Devon Energy Corporation	Notes	06/15/45	5.000%	574,000	566,968	566,658
Dexia Credit Local SA	Bonds	06/05/18	Var	3,175,000	3,175,000	3,173,127
Digital Realty Trust LP	Bonds	07/01/22	3.950%	1,415,000	1,404,189	1,412,071
Directv Holdings Financial	Bonds	08/15/40	6.000%	395,000	389,703	409,911
Dish DBS Corporation	Notes	06/01/21	6.750%	395,000	433,953	411,788
Dish DBS Corporation	Notes	07/15/17	4.625%	155,000	161,350	159,650
Dish DBS Corporation	Notes	04/01/18	4.250%	565,000	571,610	574,888
Dish DBS Corporation	Notes	05/01/20	5.125%	1,025,000	1,022,897	1,036,531
Dish DBS Corporation	Notes	11/15/24	5.875%	870,000	871,719	835,748
DJO Finance LLC	Notes	06/15/21	8.125%	885,000	886,306	911,550
DJO Finance LLC	Notes	-	n/a	101,500	102,478	101,500
Dominion Resources, Incorporated	Notes	08/15/16	1.950%	140,000	139,966	141,082
Donnelley RR & Sons	Notes	06/15/20	7.625%	1,000,000	996,881	1,125,000
Donnelley RR & Sons	Notes	03/15/19	8.250%	1,160,000	1,180,134	1,328,200
Donnelley RR & Sons	Notes	02/15/22	7.000%	170,000	170,000	182,750
Donnelley RR & Sons	Notes	11/15/23	6.500%	300,000	300,247	309,750
Donnelley RR & Sons	Notes	04/01/24	6.000%	275,000	275,000	276,375
Dow Chemical Company	Notes	11/15/22	3.000%	535,000	525,723	514,681
D.R. Horton, Incorporated	Bonds	08/15/23	5.750%	870,000	880,983	920,025
Dryrock Issuance Trust	Bonds	12/16/19	0.510%	200,000	200,226	200,000
Duke Energy	Notes	08/16/30	8.125%	90,000	100,712	100,769
Dynegy Finance, Incorporated	Bonds	11/01/19	6.750%	245,000	246,320	254,922
Eastman Chemical Company	Notes	01/15/20	2.700%	310,000	309,352	308,996
Eastman Chemical Company	Notes	10/15/44	4.650%	920,000	894,763	871,599
ECAF Limited	Bonds	06/15/40	3.473%	510,000	510,000	510,000
Ecopetrol SA	Bonds	06/26/26	5.375%	355,000	352,614	351,450
Eldorado Resorts LLC	Bonds	06/15/19	8.625%	185,000	194,019	192,863
Embarq Corporation	Notes	06/01/36	7.995%	672,000	753,430	745,046
EMD Finance LLC	Bonds	03/19/18	1.700%	265,000	264,955	264,992
EMD Finance LLC	Bonds	03/19/20	2.400%	305,000	304,985	303,292
EMD Finance LLC	Bonds	03/19/20	2.400%	1,240,000	1,239,938	1,233,056
Encana Corporation	Bonds	11/15/41	5.150%	335,000	332,618	308,997
Energizer Holdings, Incorporated	Notes	05/19/21	4.700%	345,000	350,738	349,278
Energizer Holdings, Incorporated	Notes	05/24/22	4.700%	105,000	106,038	105,292
Endo Finance LLC	Bonds	07/15/19	7.000%	405,000	423,149	419,985
Endo Finance LLC	Bonds	01/15/22	7.250%	185,000	196,862	196,562
Endo Finance LLC	Bonds	01/15/23	5.375%	1,125,000	1,125,212	1,110,938
Endo Finance LLC	Bonds	07/15/23	6.000%	470,000	470,000	480,575
Energy Transfer Partners	Bonds	10/01/20	4.150%	480,000	479,179	493,325
Energy Transfer Equity	Bonds	10/15/20	7.500%	530,000	569,050	597,575
Energy Transfer Equity	Bonds	01/15/24	5.875%	385,000	392,700	399,245
Ensco PLC	Notes	03/15/21	4.700%	325,000	343,138	331,045

PLUMBERS AND PIPEFITTERS NATIONAL PENSION FUND
ALEXANDRIA, VIRGINIA

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EIN: 52-6152779
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Identity of issuer, borrower, lessor or similar party	Description	Maturity Date	Rate of Interest		Cost	Current Value
<u>Corporate and Other Notes and Bonds (continued)</u>						
Ensco PLC	Notes	10/01/24	4.500%	276,000	\$ 271,913	\$ 263,679
Ensco PLC	Notes	10/01/44	5.750%	770,000	779,833	686,201
Ensco PLC	Notes	03/15/25	5.200%	180,000	179,320	178,213
Enterprise Products	Bonds	03/15/44	4.850%	371,000	382,182	348,918
Enterprise Products	Bonds	10/15/54	4.950%	130,000	127,863	121,022
Envision Healthcare Corporation	Bonds	07/01/22	5.125%	320,000	320,000	322,400
EP Enrgy/EP Finance, Incorporated	Bonds	05/01/20	9.375%	572,000	620,492	611,296
Erste Abwicklungsanstalt Emtn	Notes	6/7/2016	Var	800,000	801,464	800,960
ESC Energy Conversion	Notes	-	3.000%	7,408,000	799,176	74
Exco Resources Inc	Notes	09/15/18	7.500%	1,480,000	1,374,796	939,800
Exco Resources Inc	Notes	04/15/22	8.500%	595,000	597,894	304,938
Exelon Corporation	Notes	06/15/25	3.950%	235,000	234,518	236,387
Export-Import Bank Korea	Bonds	05/12/17	Var	2,230,000	2,233,841	2,229,041
Export-Import Bank Korea	Bonds	08/14/17	Var	2,085,000	2,089,764	2,084,249
Family Tree Escrow LLC	Bonds	03/01/23	5.750%	620,000	620,000	647,900
FCA US LLC	Term Loan	-	n/a	104,457	104,326	104,457
Ferrellgas LP	Bonds	01/15/22	6.750%	850,000	859,025	852,125
First Data Corporation	Notes	01/15/21	12.625%	2,503,000	2,821,245	2,890,965
First Data Corporation	Notes	06/15/19	7.375%	380,000	389,470	395,010
First Data Corporation	Notes	08/15/21	11.750%	269,000	269,000	302,625
First Data Corporation	Notes	01/15/21	11.250%	276,000	281,708	306,360
First Data Corporation	Notes	06/15/21	10.625%	520,000	520,000	575,900
Flagship Credit Auto Trust	Bonds	04/16/18	1.320%	131,689	131,674	131,801
Flextronics Intl LTD	Bonds	02/15/23	5.000%	425,000	419,939	433,309
Florida Power Corporation	Notes	11/15/42	3.850%	70,000	69,778	64,711
Florida State Hurricane Catastrophe	Bonds	07/01/20	2.995%	1,120,000	1,120,000	1,138,514
FMG Resources	Bonds	03/01/22	9.750%	190,000	193,597	196,175
Ford Credit Auto Owner Trust	Bonds	12/15/16	0.580%	28,091	28,120	28,090
Ford Credit Auto Owner Trust	Bonds	07/15/26	2.150%	360,000	359,872	360,184
Ford Credit Auto Owner Trust	Bonds	11/15/25	2.260%	535,000	534,867	541,618
Ford Credit Floorplan Master	Bonds	09/15/18	1.500%	215,000	214,954	216,539
Ford Credit Floorplan Master	Bonds	08/15/19	1.400%	455,000	454,870	455,901
Ford Motor Company	Notes	07/16/31	7.450%	130,000	165,750	166,115
Ford Motor Credit Company	Notes	05/15/18	5.000%	200,000	221,946	215,018
Ford Motor Credit Company	Notes	05/09/16	1.700%	325,000	324,688	325,422
Ford Motor Credit Company	Notes	11/04/19	2.597%	340,000	340,000	337,518
Ford Motor Credit Company	Notes	01/09/22	3.219%	210,000	210,000	207,646
Ford Motor Credit Company	Notes	01/09/18	Var	515,000	515,000	515,510
Ford Motor Credit Company	Notes	03/27/17	Var	600,000	600,000	598,230
Ford Motor Credit Company	Notes	06/15/18	Var	945,000	945,000	945,539
Freescale Semiconductor	Bonds	01/15/22	6.000%	445,000	447,165	471,700
Freescale Semiconductor	Term Loan	12/31/49	4.250%	255,592	256,634	255,592
Fresenius Med Care US	Notes	09/15/18	6.500%	750,000	798,452	825,000
Fresenius Med Care US	Notes	07/31/19	5.625%	585,000	607,976	633,263
Fresenius Med Care US	Notes	01/31/22	5.875%	300,000	323,650	318,000
Fresenius Med Care US	Notes	10/15/24	4.750%	310,000	313,987	306,900
Gannett Company, Incorporated	Notes	09/01/18	7.125%	705,000	734,923	722,625
Gannett Company, Incorporated	Bonds	07/15/20	5.125%	445,000	438,619	456,125
Gannett Company, Incorporated	Notes	10/15/19	5.125%	760,000	752,297	782,800
Gannett Company, Incorporated	Bonds	09/15/21	4.875%	85,000	83,751	84,363
Gannett Company, Incorporated	Bonds	09/15/24	5.500%	60,000	59,423	59,400
GCB 144A Cequel	Bonds	09/15/20	6.375%	600,000	-	617,250
GE Equipment Transportation LLC	Bonds	09/25/17	0.920%	330,000	329,984	329,944

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<u>Corporate and Other Notes and Bonds (continued)</u>						
General Elec Cap Corporation	Notes	03/11/44	4.500%	280,000	\$ 326,950	\$ 284,365
General Elec Cap Corporation	Notes	02/11/21	5.300%	345,000	365,517	387,928
General Motors Acceptance Corporation	Bonds	11/01/31	8.000%	268,000	346,388	341,700
George Washington Univer	Bonds	09/15/22	3.485%	230,000	230,000	233,708
Gilead Sciences, Incorporated	Bonds	04/01/24	3.700%	350,000	349,436	357,644
GLP Capital LP	Notes	11/01/18	4.375%	220,000	222,304	225,775
GLP Capital LP	Notes	11/01/20	4.875%	2,010,000	2,048,031	2,045,175
GLP Capital LP	Notes	11/01/23	5.375%	335,000	335,000	344,213
Goldman Sachs Group, Incorporated	Notes	11/15/18	Var	3,225,000	3,269,075	3,253,574
Goldman Sachs Group, Incorporated	Notes	11/29/23	Var	555,000	555,000	564,080
Goldman Sachs Group, Incorporated	Bonds	04/23/20	2.600%	429,000	430,240	426,851
Goldman Sachs Group, Incorporated	Notes	07/27/21	5.250%	860,000	861,746	955,047
Goldman Sachs Group, Incorporated	Notes	05/22/17	Var	590,000	590,000	589,988
Goodyear Tire TL	Bonds	03/01/21	6.500%	215,000	215,000	227,631
Graton Economic Development Auth	Bonds	09/01/19	9.625%	1,430,000	1,532,658	1,542,112
Halcon Resources Corporation	Bonds	02/01/20	8.625%	445,000	461,231	439,438
HCA, Incorporated	Notes	03/15/24	5.000%	665,000	667,282	676,638
HCA, Incorporated	Notes	10/15/19	4.250%	515,000	515,000	527,231
HCA, Incorporated	Notes	02/01/25	5.375%	265,000	265,000	269,320
HCA, Incorporated	Notes	02/15/20	6.500%	630,000	701,431	704,025
HCA, Incorporated	Notes	05/01/23	4.750%	105,000	105,491	106,313
HJ Heinz Company	Bonds	07/15/45	5.200%	235,000	234,074	240,833
HJ Heinz Company	Bonds	07/15/22	3.500%	220,000	219,481	220,517
HJ Heinz Company	Bonds	07/15/22	3.500%	505,000	503,808	506,187
Hologic Incorporated	Bonds	07/15/22	5.250%	275,000	275,000	280,844
Home Depot, Incorporated	Bonds	06/01/22	2.625%	250,000	249,080	245,878
Home Depot, Incorporated	Bonds	06/01/22	2.625%	650,000	647,608	639,282
Honda Auto Receivables Owner Trust	Bonds	09/21/16	0.410%	107,423	107,415	107,401
HSBC Holdings PLC	Notes	09/15/37	6.500%	610,000	490,837	736,099
HSBC Holdings PLC	Bonds	03/30/22	4.000%	325,000	322,881	340,265
HSBC Holdings PLC	Bonds	03/14/44	5.250%	290,000	286,845	300,808
Hughes Satelite Systems	Notes	06/15/19	6.500%	443,000	489,515	480,655
Humana Inc	Bonds	10/01/24	3.850%	350,000	349,535	348,600
Huntsman International	Bonds	11/15/22	5.125%	145,000	145,250	142,825
Huntsman International LLC	Bonds	03/15/21	8.625%	993,000	1,138,999	1,045,053
Huntsman International LLC	Bonds	11/15/20	4.875%	590,000	604,256	588,525
IAC/Interactive Corporation	Bonds	11/30/18	4.875%	310,000	310,000	319,688
Iasis Healthcare	Bonds	05/15/19	8.375%	1,530,000	1,609,628	1,583,550
Icahn Enterprises Financial	Bonds	03/15/17	3.500%	1,075,000	1,080,356	1,081,719
IHS, Incorporated	Bonds	11/01/22	5.000%	665,000	664,225	660,844
Infor US, Incorporated	Bonds	05/15/22	6.500%	890,000	900,013	905,575
Infor Software Parent	Bonds	05/01/21	7.125%	439,000	439,995	440,098
Inmarsat Finance PLC	Bonds	05/15/22	4.875%	555,000	550,510	535,575
Integra Telecom	Bonds	-	n/a	881	870	881
Intelsat Luxembourg SA	Notes	06/01/21	7.750%	665,000	671,663	555,275
Intelsat Luxembourg SA	Notes	06/01/23	8.125%	310,000	311,277	257,300
Intelsat Jackson Holdings	Bonds	8/1/2023	5.500%	215,000	215,000	190,383
International Lease Finance Corporation	Notes	05/15/19	6.250%	1,310,000	1,394,824	1,416,438
International Lease Finance Corporation	Notes	08/15/22	5.875%	85,000	93,606	91,800
International Lease Finance Corporation	Notes	09/01/17	8.875%	755,000	876,370	843,713
International Lease Finance Corporation	Notes	01/15/22	8.625%	710,000	852,338	866,200
International Lease Finance Corporation	Notes	04/15/18	3.875%	290,000	282,488	291,450
International Paper Company	Notes	09/15/35	5.000%	305,000	302,831	298,802

PLUMBERS AND PIPEFITTERS NATIONAL PENSION FUND
ALEXANDRIA, VIRGINIA

SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES
AS OF JUNE 30, 2015

Form 5500, Schedule H, Line 4i

EIN: 52-6152779
Plan No. 001

(c) Description of investment, including maturity date, rate of interest, collateral, par or maturity value		(d)		(e)	
(a)	(b)	(c)	(d)	(e)	(f)
Identity of issuer, borrower, lessor or similar party	Description	Maturity Date	Rate of Interest	Cost	Current Value
<u>Corporate and Other Notes and Bonds (continued)</u>					
Ipalco Enterprises, Incorporated	Notes	05/01/18	5.000%	255,000 \$	265,073 \$
Iron Mountain Inc	Notes	10/01/19	7.750%	650,000	679,250
Iron Mountain Inc	Notes	08/15/21	8.375%	211,000	234,017
Iron Mountain Inc	Notes	08/15/24	5.750%	1,230,000	1,204,863
Isle of Capri Casinos	Bonds	06/15/20	8.875%	390,000	415,883
Isle of Capri Casinos	Bonds	03/15/21	5.875%	540,000	553,600
Jaguar Holding Co/Merger	Bonds	12/01/19	9.500%	565,000	617,310
JP Morgan Chase & Company	Notes	01/15/18	6.000%	1,155,000	1,121,459
JP Morgan Chase & Company	Notes	09/10/24	3.875%	785,000	778,186
JP Morgan Chase & Company	Notes	01/23/20	2.250%	450,000	449,533
JP Morgan Chase Bank National	Bonds	10/01/17	6.000%	500,000	558,322
Kinder Morgan Energy Partners	Notes	09/01/24	4.250%	290,000	286,653
Kinder Morgan Energy Partners	Notes	06/01/25	4.300%	720,000	717,106
Kinder Morgan Energy Partners	Notes	06/01/25	4.300%	590,000	587,628
Kommunalbanken AS	Bonds	03/27/17	Var	1,096,000	1,107,224
Kommunalbanken AS	Bonds	02/20/18	Var	2,062,000	2,070,321
Kommunalbanken AS	Bonds	05/02/17	Var	734,000	734,741
Kraft Foods, Incorporated	Notes	02/09/40	6.500%	105,000	132,285
Kraft Foods, Incorporated	Notes	06/06/22	3.500%	115,000	113,965
Kratos Defense & Sec	Bonds	05/15/19	7.000%	305,000	301,846
Kroger Company	Notes	11/01/21	2.950%	165,000	164,947
Laredo Petroleum, Incorporated	Notes	05/01/22	7.375%	195,000	202,447
Laredo Petroleum, Incorporated	Notes	01/15/22	5.625%	120,000	112,650
Lennar Corporation	Notes	12/15/17	4.750%	400,000	418,389
Lennar Corporation	Notes	11/15/22	4.750%	625,000	601,231
Level 3 Communications TL B3 1L	Bonds	-	Var	908,218	908,980
Level 3 Financing, Incorporated	Bonds	07/15/20	8.625%	575,000	604,638
Liberty Interactive LLC	Notes	07/15/29	8.500%	305,000	342,363
Linn Energy LLC Financial Corporation	Notes	11/01/19	6.250%	2,550,000	2,489,898
Linn Energy LLC Linn Eney Financial	Notes	04/15/20	8.625%	1,400,000	1,455,020
Linn Energy LLC Linn Eney Financial	Notes	02/01/21	7.750%	1,212,000	1,258,470
Linn Energy LLC Linn Eney Financial	Notes	05/15/19	6.500%	90,000	73,125
Linn Energy LLC Linn Eney Financial	Notes	09/15/21	6.500%	585,000	530,164
Lockheed Martin Corporation	Notes	09/15/21	3.350%	460,000	458,758
Lstar Commercial Mortgage Trust	Bonds	01/20/41	4.205%	155,000	154,994
LYB International Finance BV	Bonds	03/15/44	4.875%	340,000	336,025
Lynx I Corporation	Notes	04/15/21	5.375%	337,500	337,500
Macquarie Group Limited	Bonds	01/31/17	Var	1,160,000	1,160,000
Macquarie Bank Limited	Notes	10/27/17	Var	850,000	850,000
Macys Retail Holdings, Incorporated	Bonds	01/15/42	5.125%	55,000	54,916
Mallinckrodt Fin/SB	Bonds	04/15/20	4.875%	275,000	275,813
Mallinckrodt Fin/SB	Bonds	04/15/25	5.500%	360,000	358,400
Manitowoc Companu Incorporated	Notes	11/01/20	8.500%	440,000	468,333
Marathon Petroleum Corporation	Notes	09/15/24	5.000%	480,000	481,373
Markwest Energy Partners	Bonds	07/15/23	4.500%	855,000	865,387
Markwest Energy Partners	Bonds	12/01/24	4.875%	410,000	416,663
Markwest Energy Partners	Bonds	06/01/25	4.875%	225,000	222,809
Masco Corporation	Notes	03/15/22	5.950%	290,000	320,450
Mass Mutual Life Insurance Company	Notes	06/01/39	8.875%	225,000	265,983
Master Resecuritization Trust	Bonds	06/27/36	6.000%	426,772	396,898
Medtronic, Incorporated	Notes	03/15/24	3.625%	405,000	404,214
Medtronic, Incorporated	Bonds	03/15/20	2.500%	370,000	369,626
Merck & Company, Incorporated	Notes	02/10/22	2.350%	380,000	379,487

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ALEXANDRIA, VIRGINIA

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Form 5500, Schedule H, Line 4i

EIN: 52-6152779
Plan No. 001

(a)		(c) Description of investment, including maturity date, rate of interest, collateral, par or maturity value			(e)		
(b)	(d)	(e)	(f)	(g)	(h)	(i)	(j)
Identity of issuer, borrower, lessor or similar party	Description	Maturity Date	Rate of Interest	Amount	Cost	Current Value	
<u>Corporate and Other Notes and Bonds (continued)</u>							
Metropcs Wireless, Incorporated	Notes	11/15/20	6.625%	195,000	\$ 204,038	\$ 202,800	
MGM Resorts International	Bonds	02/01/19	8.625%	630,000	747,256	711,900	
MGM Resorts International	Notes	03/15/23	6.000%	145,000	150,021	146,842	
Microsoft Corporation	Bonds	07/01/42	5.000%	395,000	390,458	361,109	
Midamerican Energy Company	Notes	10/15/36	5.800%	750,000	573,068	897,173	
Mohegan Tribal Gaming	Bonds	09/15/18	11.000%	335,000	274,983	335,419	
Mohegan Tribal Gaming	Bonds	09/01/21	9.750%	1,550,000	1,619,869	1,623,625	
Mohegan Tribal Gaming	Term Loan	11/19/19	n/a	809,063	809,063	809,063	
Momentive Performance	Bonds	10/24/21	3.880%	300,000	271,213	269,250	
Monsanto Company	Bonds	07/15/64	4.700%	355,000	351,745	307,320	
Morgan Stanley	Notes	01/09/17	5.450%	145,000	148,844	153,657	
Morgan Stanley	Notes	09/08/26	4.350%	400,000	400,784	391,952	
Morgan Stanley	Notes	02/25/23	3.750%	435,000	432,895	439,846	
Morgan Stanley	Notes	05/13/19	7.300%	100,000	114,477	117,648	
Morgan Stanley	Notes	01/27/45	4.300%	150,000	148,875	140,160	
Morgan Stanley	Notes	01/27/45	4.300%	280,000	277,900	261,632	
MPT Oper Partnership	Bonds	05/01/24	5.500%	880,000	915,346	906,400	
MSCI, Incorporated	Bonds	11/15/24	5.250%	505,000	519,950	511,313	
MTR Gaming Group, Incorporated	Bonds	08/01/19	11.500%	830,000	936,069	882,913	
Municipal Elec Authority GA	Bonds	04/01/57	6.637%	275,000	299,377	329,772	
Municipal Elec Authority GA	Bonds	04/01/57	6.637%	540,000	541,134	631,076	
Mylan, Incorporated	Notes	03/28/19	2.550%	285,000	284,299	282,521	
Navient Corporation	Notes	03/25/21	5.875%	485,000	481,988	484,694	
Navistar International Group	Term Loan	08/17/17	Var	308,213	310,612	311,680	
NCUA Guaranteed Notes	Notes	10/29/20	2.650%	386,630	385,864	390,825	
NCR Corporation	Notes	12/15/21	5.875%	115,000	120,556	118,450	
NCL Corporation	Bonds	11/15/19	5.250%	340,000	340,000	348,075	
New York Life Insurance	Notes	11/15/39	6.750%	165,000	214,460	216,536	
New York Life Global Funding	Bonds	01/02/19	2.100%	265,000	264,695	266,275	
Newfield Exploration Co	Notes	01/30/22	5.750%	1,247,000	1,327,162	1,265,705	
Nielsen Finance LLC	Bonds	04/15/22	5.000%	1,370,000	1,371,300	1,342,600	
Nissan Master Owner Trust	Bonds	02/15/18	0.501%	590,000	590,530	590,000	
Noble Energy Inc	Bonds	03/01/41	6.000%	185,000	183,772	195,850	
Noble Energy Inc	Bonds	12/15/21	4.150%	400,000	405,515	416,708	
Northrop Grumman Corporation	Notes	08/01/23	3.250%	1,090,000	1,084,136	1,067,851	
Northwestern Mutual Life	Notes	03/30/40	6.063%	365,000	420,695	436,463	
Nova Chemicals Corporation	Bonds	05/01/25	5.000%	185,000	187,241	185,694	
NRG Energy, Incorporated	Notes	09/01/20	8.250%	1,470,000	1,596,544	1,539,825	
NRG Energy, Incorporated	Notes	01/15/18	7.625%	445,000	484,364	487,831	
NRG Energy, Incorporated	Notes	05/15/21	7.875%	1,740,000	1,841,722	1,853,100	
NRG Energy, Incorporated	Notes	07/15/22	6.250%	865,000	865,000	877,975	
Nuance Communications	Bonds	08/15/20	5.375%	585,000	593,775	587,925	
Numericalbe Group SA	Bonds	05/15/19	4.875%	925,000	925,000	915,750	
Numericalbe Group SA	Bonds	05/15/22	6.000%	1,365,000	1,362,875	1,345,385	
Numericalbe Group SA	Bonds	05/15/24	6.250%	260,000	260,000	255,775	
Nuveen Investments	Bonds	-	Var	750,000	752,813	750,000	
Oasis Petroleum, Incorporated	Notes	03/15/22	6.875%	530,000	528,908	537,950	
Omega Healthcare Investors	Bonds	03/15/24	5.875%	545,000	583,150	579,744	
Oracle Corporation	Notes	05/15/35	3.900%	525,000	521,456	488,245	
Oracle Corporation	Notes	10/08/19	2.250%	160,000	159,821	160,926	
Owens Brockway	Bonds	01/15/22	5.000%	340,000	340,000	335,750	
Pacific Gas & Electric	Notes	11/30/17	5.625%	410,000	382,000	447,523	
Par Pharmaceutical	Notes	10/15/20	7.375%	110,000	116,950	117,425	

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Identity of issuer, borrower, lessor or similar party	Description	Maturity Date	Rate of Interest		Cost	Current Value
<u>Corporate and Other Notes and Bonds (continued)</u>						
Parker Hannifin Corporation	Bonds	11/21/24	3.300%	185,000 \$	184,593 \$	185,636
Party City Holdings, Incorporated	Bonds	08/01/20	8.875%	200,000	201,250	213,500
PCCW Limited	Bonds	-	0.000%	231,185	108,604	79,759
Peco Energy Company	Bonds	10/1/1944	4.150%	280,000	279,040	271,970
Pepsico, Incorporated	Notes	10/22/44	4.250%	85,000	84,885	83,341
Perrigo Finance PLC	Notes	12/15/21	3.500%	200,000	199,874	200,388
Petroleos Mexicanos	Notes	01/23/45	6.375%	340,000	337,457	348,925
Petsmart	Bonds	-	n/a	61,500	611,925	615,000
Philadelphia PA Authority	Bonds	04/15/26	3.964%	440,000	440,000	430,720
Phillips 66	Notes	04/01/22	4.300%	415,000	442,164	435,530
Phillips 66	Notes	05/01/42	5.875%	220,000	264,572	239,701
Phillips 66	Notes	11/15/34	4.650%	738,000	728,731	721,971
Phillips 66 Partners LP	Notes	02/15/25	3.605%	160,000	159,947	150,578
Pinnacle Entertainment	Notes	04/01/22	7.750%	395,000	433,513	416,403
Pinnacle Entertainment	Notes	08/01/21	6.375%	435,000	442,588	461,644
Playa Pacific Partners, LLC	Bonds	n/a	Second Lien Bd	23,910,000	23,910,000	-
PNC Bank NA	Bonds	07/02/19	2.250%	280,000	279,126	279,082
PNC Bank NA	Notes	10/18/19	2.400%	250,000	249,818	251,655
Post Holdings, Incorporated	Bonds	12/15/22	6.000%	1,320,000	1,287,206	1,270,500
PPL Energy Supply LLC	Notes	06/01/25	6.500%	270,000	270,000	270,000
PQ Corporation	Bonds	05/01/18	8.750%	1,200,000	1,238,696	1,212,000
Presifo	Term Loan	-	n/a	305,900	293,100	305,900
Project Homestake Merger	Bonds	03/01/23	8.875%	250,000	249,750	242,500
PSEG Power LLC	Notes	09/15/16	2.750%	160,000	159,594	163,210
Public Service New Hamp	Notes	11/01/23	3.500%	135,000	134,506	138,619
QVC, Incorporated	Bonds	08/15/34	5.450%	195,000	193,630	176,951
Rabobank Nederland Utrec	Notes	02/08/22	3.875%	145,000	143,872	150,845
Realty Corporation	Bonds	01/15/20	7.625%	350,000	379,381	370,650
Realty Corporation	Bonds	03/05/20	3.750%	454,930	447,595	454,930
Regal Entertainment Group	Notes	03/15/22	5.750%	573,000	551,105	579,418
Regency Energy Partners	Notes	07/15/21	6.500%	230,000	247,675	242,362
Regency Energy Partners	Notes	04/15/23	5.500%	375,000	385,750	381,675
Regency Energy Partners	Bonds	11/01/23	4.500%	140,000	135,250	135,100
Regency Energy Partners	Notes	03/01/22	5.875%	580,000	595,289	617,416
Reynolds American, Incorporated	Bonds	06/15/37	7.250%	85,000	106,525	101,936
Reynolds American, Incorporated	Notes	09/15/43	6.150%	115,000	131,714	123,502
Reynolds American, Incorporated	Notes	08/15/35	5.700%	212,000	211,063	219,816
Reynolds American, Incorporated	Notes	08/15/45	5.850%	293,000	291,465	307,325
Reynolds Group ISS	Bonds	02/15/21	6.875%	465,000	483,414	484,763
Reynolds Group ISS	Notes	02/15/21	8.250%	300,000	310,875	311,250
Reynolds Group ISS	Bonds	08/15/19	9.875%	546,000	577,398	573,300
Reynolds Group ISS	Bonds	10/15/20	5.750%	110,000	113,118	112,750
Rio Tinto Fin USA LTD	Bonds	03/22/22	3.500%	340,000	340,976	342,910
Rite Aid Corporation	Bonds	08/15/20	8.000%	1,073,000	1,224,683	1,118,603
Rite Aid Corporation	Notes	03/15/20	9.250%	405,000	452,781	438,919
Rite Aid Corporation	Notes	06/15/21	6.750%	295,000	310,738	309,750
Rite Aid Corporation	Bonds	04/01/23	6.125%	630,000	633,750	648,900
Riverbed Technology	Notes	-	0.000%	255,000	254,625	255,000
RJS Power Holdings LLC	Bonds	07/15/19	5.125%	975,000	968,888	955,500
Rockies Express Pipeline	Notes	07/15/18	6.850%	185,000	200,263	197,256
Rockies Express Pipeline	Bonds	07/15/38	7.500%	275,000	318,488	298,375
Rockies Express Pipeline	Notes	04/15/20	5.625%	200,000	211,325	204,500
Rockies Express Pipeline	Bonds	04/15/40	6.875%	350,000	389,563	366,625

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<u>Corporate and Other Notes and Bonds (continued)</u>						
Rose Rock Midstream	Bonds	11/15/23	5.625%	320,000 \$	315,407 \$	309,600
Royal Bank of Canada	Bonds	12/04/15	0.625%	1,155,000	1,156,723	1,155,578
Royal Bank of Canada	Bonds	10/01/19	2.000%	960,000	959,270	973,574
RR Donnelley & Sons Co	Notes	03/15/21	7.875%	525,000	524,204	592,594
RSB Bondco LLC	Bonds	04/01/17	5.820%	455,000	523,605	482,882
RSC Equipment Rent RSC Holdings	Notes	02/01/21	8.250%	364,000	403,594	389,025
Ryland Group Company	Notes	10/01/22	5.375%	285,000	274,156	287,850
Sabine Pass Liquefaction	Notes	04/15/23	5.625%	185,000	188,700	184,364
Sabine Pass Liquefaction	Notes	02/01/21	5.625%	320,000	324,113	326,400
Sabine Pass Liquefaction	Notes	05/15/24	5.750%	525,000	536,025	523,031
Sabine Pass Liquefaction	Bonds	03/01/25	5.625%	1,435,000	1,434,038	1,420,650
Sabra Healthcare Corporation	Notes	02/01/21	5.500%	395,000	412,394	408,825
Sandridge Energy Inc	Notes	03/15/21	7.500%	2,930,000	2,999,315	1,281,875
Sandridge Energy Inc	Notes	10/15/22	8.125%	330,000	301,725	141,075
Sandridge Energy Inc	Notes	02/15/23	7.500%	775,000	657,506	327,593
Sandridge Energy Inc	Bonds	06/01/20	8.750%	500,000	500,000	453,750
Santander Drive Auto Receivable	Bonds	06/17/19	2.250%	635,000	635,005	642,671
Santander Drive Auto Receivable	Bonds	04/15/19	1.810%	170,000	170,983	170,804
Santander Drive Auto Receivable	Bonds	01/15/20	3.250%	700,000	725,840	716,436
Santander Drive Auto Receivable	Bonds	04/15/20	2.360%	625,000	625,896	629,263
Santander Drive Auto Receivable	Bonds	11/15/19	2.330%	380,000	379,885	384,780
Santander Drive Auto Receivable	Bonds	08/17/20	2.130%	550,000	549,894	554,637
SBA Telecommunications	Notes	07/15/20	5.750%	165,000	165,000	171,188
Scientific Games International	Notes	09/01/20	6.250%	260,000	200,713	202,150
Scientific Games International	Notes	05/15/21	6.625%	495,000	373,162	383,625
Scientific Games International	Bonds	01/01/22	7.000%	270,000	278,438	278,775
Scientific Games International	Bonds	12/01/22	10.000%	1,965,000	1,800,707	1,881,487
Sealed Air Corporation	Bonds	09/15/25	5.500%	365,000	365,000	367,738
Service Corp International	Bonds	05/15/24	5.375%	345,000	345,000	360,525
Service Master Company	Notes	02/15/20	8.000%	384,000	387,460	405,600
SGMS Escrow Corporation	Notes	-	n/a	148,579	147,085	148,579
Shell International Finance	Bonds	08/12/23	3.400%	275,000	274,423	282,224
Shell International Finance	Bonds	05/11/35	4.125%	1,000,000	991,660	978,920
Siemens Finance	Notes	05/27/22	2.900%	690,000	690,000	680,996
Signet UK Finance PLC	Bonds	06/15/24	4.700%	180,000	179,278	181,777
Sirius XM Radio, Incorporated	Bonds	05/15/20	4.250%	85,000	83,663	84,575
Sirius XM Radio, Incorporated	Bonds	10/01/20	5.875%	175,000	181,313	179,375
SLM Corporation	Notes	01/25/16	6.250%	210,000	216,825	214,200
SLM Corporation	Notes	09/25/17	4.625%	120,000	123,038	121,950
SLM Corporation	Notes	01/25/23	5.500%	235,000	225,500	223,250
SLM Corporation	Notes	01/15/19	5.500%	660,000	654,050	672,949
SLM Corporation	Notes	06/17/19	4.875%	1,810,000	984,153	1,019,115
SLM Corporation	Notes	03/25/24	6.125%	413,000	410,047	395,448
Sophia LP/Fin Incorporated	Bonds	01/15/19	9.750%	960,000	826,503	1,020,000
Sophia LP/Fin Incorporated	Bonds	12/01/18	9.625%	585,000	586,425	592,313
Sophia LP/Fin Incorporated	Bonds	07/31/18	6.250%	194,417	193,054	194,417
Southern Cal Edison	Bonds	10/01/23	3.500%	150,000	149,736	153,878
Southern Company	Notes	09/01/19	2.150%	275,000	274,362	272,168
Spectrum Brands	Bonds	-	n/a	200,000	199,500	200,000
Sprint Cap Corporation	Notes	11/15/28	6.875%	890,000	821,622	765,400
Sprint Cap Corporation	Notes	03/15/32	8.750%	1,032,000	1,106,511	1,003,620
Sprint Corporation	Notes	09/15/21	7.250%	426,000	426,335	415,350
Sprint Corporation	Notes	09/15/23	7.875%	985,000	1,104,038	960,671

PLUMBERS AND PIPEFITTERS NATIONAL PENSION FUND
ALEXANDRIA, VIRGINIA

SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES
AS OF JUNE 30, 2015

Form 5500, Schedule H, Line 4i

EIN: 52-6152779
Plan No. 001

(a)		(c) Description of investment, including maturity date, rate of interest, collateral, par or maturity value			(d)		(e)
Identity of issuer, borrower, lessor or similar party	Description	Maturity Date	Rate of Interest		Cost	Current Value	
<u>Corporate and Other Notes and Bonds (continued)</u>							
Sprint Corporation	Notes	06/15/24	7.125%	825,000	\$ 825,000	\$ 765,270	
Sprint Nextel Corporation	Notes	08/15/17	8.375%	285,000	302,813	308,513	
Sprint Nextel Corporation	Bonds	11/15/18	9.000%	245,000	287,313	276,669	
Standard Chartered PLC	Bonds	01/26/24	5.700%	285,000	306,116	298,418	
Standard Chartered PLC	Bonds	04/17/18	1.700%	610,000	609,323	607,487	
Standard Pacific Corporation	Notes	01/15/21	8.375%	245,000	262,017	284,200	
Stations Casinos	Notes	-	5.000%	223,638	220,578	223,638	
Stations Casinos	Notes	03/01/21	7.500%	945,000	949,276	1,011,150	
Statoil ASA	Bonds	03/01/24	3.700%	160,000	167,429	165,370	
Store Master Funding LLC	Bonds	04/20/45	3.750%	309,742	309,675	309,742	
Suburban Propane Partners LP	Notes	08/01/21	7.375%	319,000	367,177	340,533	
Suburban Propane Partners LP	Notes	03/01/25	5.750%	60,000	60,000	59,850	
Suncor Energy, Incorporated	Bonds	12/01/24	3.600%	480,000	476,328	477,658	
Suncor Energy, Incorporated	Bonds	06/15/38	6.500%	245,000	307,991	298,510	
Sungard Data Systems, Incorporated	Notes	11/15/18	7.375%	72,000	72,146	74,556	
Sungard Data Systems, Incorporated	Notes	11/15/20	7.625%	640,000	691,907	668,800	
Syniverse Holdings Inc	Bonds	01/15/19	9.130%	625,000	629,548	550,000	
Synchrony Credit Card Master	Bonds	11/16/20	1.610%	750,000	749,792	752,543	
Sysco Corporation	Notes	10/02/19	2.350%	380,000	379,483	383,800	
Sysco Corporation	Notes	10/02/21	3.000%	270,000	269,409	272,700	
Targe Resources Partners	Notes	11/15/23	4.250%	160,000	160,400	148,000	
Targe Resources Partners	Bonds	11/15/19	4.125%	400,000	400,000	396,000	
Targe Resources Partners	Bonds	01/15/18	5.000%	345,000	358,056	352,763	
Taylor Morrison Comm	Bonds	04/15/21	5.250%	900,000	884,594	886,500	
Taylor Morrison Comm	Bonds	03/01/24	5.625%	164,000	152,903	157,850	
Telecom Italia Capital	Notes	09/30/34	6.000%	335,000	333,846	325,992	
Tenet Healthcare Corporation	Notes	11/01/18	6.250%	490,000	543,214	532,263	
Tenet Healthcare Corporation	Notes	02/01/20	6.750%	205,000	216,738	214,225	
Tenet Healthcare Corporation	Notes	04/01/22	8.125%	360,000	367,479	393,660	
Tenet Healthcare Corporation	Notes	11/15/31	6.875%	205,000	198,138	189,625	
Terex Corporation	Notes	04/01/20	6.500%	335,000	351,157	350,913	
Terex Corporation	Notes	05/15/21	6.000%	515,000	519,500	517,575	
Tesoro Logistics LP	Bonds	10/15/19	5.500%	155,000	155,000	160,813	
Tesoro Logistics LP	Bonds	10/15/22	6.250%	400,000	409,000	414,000	
Texas Instruments, Incorporated	Notes	03/12/21	2.750%	205,000	203,553	209,153	
THC Escrow Corporation	Notes	10/01/20	6.000%	335,000	335,000	357,194	
Thermo Fisher Scientific	Notes	03/01/16	3.200%	285,000	288,767	289,389	
Thornburg Mortgage Secs Trust	Bonds	04/25/45	4.759%	219,920	220,470	220,945	
Time Warner Cable, Incorporated	Bonds	11/15/40	5.875%	145,000	150,542	140,379	
Time Warner, Incorporated	Bonds	04/15/31	7.625%	100,000	115,394	130,033	
Time Warner, Incorporated	Notes	05/15/29	6.625%	250,000	188,745	298,263	
Time Warner, Incorporated	Notes	06/01/24	3.550%	240,000	239,779	234,053	
T-Mobile USA, Incorporated	Notes	04/28/21	6.633%	450,000	450,000	466,875	
T-Mobile USA, Incorporated	Notes	04/28/23	6.836%	250,000	245,000	262,813	
T-Mobile USA, Incorporated	Notes	04/28/20	6.542%	970,000	970,000	1,015,580	
T-Mobile USA, Incorporated	Notes	04/28/22	6.731%	310,000	306,900	323,175	
T-Mobile USA, Incorporated	Notes	01/15/22	6.125%	460,000	454,465	474,950	
T-Mobile USA, Incorporated	Notes	01/15/24	6.500%	240,000	240,000	247,800	
T-Mobile USA, Incorporated	Notes	03/01/23	6.000%	550,000	550,272	563,063	
T-Mobile USA, Incorporated	Notes	03/01/25	6.375%	300,000	300,000	306,750	
Total Capital Intl SA	Bonds	02/17/22	2.875%	375,000	378,487	374,625	
Toyota Auto Receivables	Bonds	08/15/16	0.410%	114,843	114,842	114,824	
Toyota Auto Receivables	Bonds	12/15/16	0.400%	156,713	156,700	156,682	

PLUMBERS AND PIPEFITTERS NATIONAL PENSION FUND
ALEXANDRIA, VIRGINIA

SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES
AS OF JUNE 30, 2015

Form 5500, Schedule H, Line 4i

EIN: 52-6152779
Plan No. 001

		(c) Description of investment, including maturity date, rate of interest, collateral, par or maturity value			Plan No.	001	
(a)	(b)				(e)		
Identity of issuer, borrower, lessor or similar party	Description	Maturity Date	Rate of Interest		(d) Cost	Current Value	
<u>Corporate and Other Notes and Bonds (continued)</u>							
Trans-Canada Pipelines	Bonds	03/01/34	4.625%	350,000	\$ 348,418	\$ 347,025	
Tranche D Term Loans	Term Loans	-	n/a	104,736	105,261	104,736	
Transdigm	Bonds	-	n/a	396,055	394,070	396,055	
Transocean, Incorporated	Notes	03/15/18	6.000%	250,000	246,469	252,500	
Transocean, Incorporated	Bonds	10/15/17	2.500%	610,000	574,006	591,700	
Tribune Media Company	Bonds	-	n/a	208,568	208,474	208,568	
Tribune Media Company	Bonds	07/15/22	5.875%	985,000	985,000	992,388	
TSMC Global LTD	Bonds	04/03/18	1.625%	235,000	234,843	232,312	
Twin River Management	Bonds	-	n/a	78,750	79,045	78,750	
UBS AG Stamford CT	Bonds	06/01/17	1.375%	380,000	379,643	379,111	
Union Pacific Corporation	Notes	06/15/44	4.850%	235,000	233,527	250,731	
Union Pacific Corporation	Notes	01/15/25	3.250%	195,000	194,355	193,083	
United Auto Credit	Bonds	06/17/19	2.250%	180,000	179,978	180,970	
United Rentals NA	Notes	09/15/20	8.375%	375,000	418,197	400,121	
United Surgical Partners	Bonds	04/01/20	9.000%	325,000	352,176	346,938	
Unitedhealth Group, Incorporated	Notes	12/15/21	2.875%	325,000	324,649	324,964	
Univision Communication	Bonds	05/15/23	5.125%	690,000	710,700	669,300	
Univision Communication	Bonds	-	0.000%	413,080	412,592	413,080	
Univision Communication	Bonds	-	0.000%	54,856	54,993	54,856	
US Bank NA Cincinnati	Bonds	10/28/19	2.125%	285,000	284,744	285,325	
US Coat Acquisitions	Bonds	05/01/21	7.375%	375,000	382,500	401,719	
USG Corporation	Notes	01/15/18	7.750%	1,020,000	1,119,813	1,160,250	
USG Corporation	Bonds	03/01/25	5.500%	175,000	175,000	174,344	
US West Communications	Bonds	09/15/33	6.875%	380,000	376,156	375,740	
Valeant Pharmaceuticals	Notes	-	n/a	214,463	216,144	214,463	
Verizon Communications	Notes	11/01/42	3.850%	170,000	169,760	140,299	
Verizon Communications	Notes	09/15/33	6.400%	33,000	32,967	37,816	
Verizon Communications	Notes	09/15/43	6.550%	63,000	62,926	73,694	
Verizon Communications	Notes	08/21/54	5.012%	512,000	402,532	469,806	
Verizon Communications	Notes	11/01/34	4.400%	525,000	521,199	486,024	
Verizon Communications	Bonds	09/15/48	4.522%	527,000	406,242	462,980	
Verizon Communications	Bonds	03/15/55	4.672%	610,000	452,355	530,670	
Virgin Media Finance PLC	Bonds	10/15/24	6.000%	465,000	465,000	471,975	
Virginia Electric & Power Company	Bonds	08/15/43	4.650%	170,000	169,918	176,375	
Vodafone Group PLC	Notes	02/19/23	2.950%	320,000	318,518	298,883	
Volkswagen Group America	Bonds	11/20/19	2.450%	215,000	214,518	215,737	
VPI Escrow Corporation	Bonds	10/15/20	6.375%	1,230,000	1,283,865	1,295,350	
VPI Escrow Corporation	Bonds	08/15/18	6.750%	27,736	27,735	27,736	
VPI Escrow Corporation	Bonds	08/15/18	6.750%	400,000	400,000	419,500	
VRX Escrow Corporation	Bonds	05/15/23	5.875%	1,010,000	1,010,000	1,035,250	
VRX Escrow Corporation	Bonds	04/15/25	6.125%	920,000	920,000	946,450	
Wal-Mart Stores, Incorporated	Notes	04/22/44	4.300%	460,000	457,005	461,219	
Walgreen Boots Alliance	Notes	11/18/21	3.300%	320,000	319,126	317,779	
Walter Investment Management	Bonds	-	n/a	405,474	366,772	405,474	
Walter Investment Management	Notes	12/15/21	7.875%	1,075,000	1,231,764	1,194,581	
Wellpoint, Incorporated	Notes	01/15/43	4.650%	380,000	377,800	348,369	
Wells Fargo & Company	Notes	01/22/21	3.000%	430,000	429,273	437,009	
Wells Fargo & Company	Notes	04/22/19	2.125%	195,000	194,587	195,766	
Wells Fargo & Company	Bonds	06/03/26	4.100%	310,000	309,681	311,305	
Whiting Petroleum Corporation	Notes	03/15/19	5.000%	585,000	570,837	573,300	
Whiting Petroleum Corporation	Bonds	04/01/23	6.250%	100,000	99,750	99,250	
Wideopenwest Financial	Notes	07/15/19	10.250%	295,000	307,837	314,912	
Williams Partners LP	Notes	03/04/44	5.400%	285,000	284,077	260,501	

PLUMBERS AND PIPEFITTERS NATIONAL PENSION FUND
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Identity of issuer, borrower, lessor or similar party	Description	Maturity Date	Rate of Interest				Cost		Current Value	
<u>Corporate and Other Notes and Bonds (continued)</u>										
Wind Acquisition Fin SA	Bonds	04/23/21	7.375%	290,000	\$		300,150	\$	293,263	
Wind Acquisition Fin SA	Bonds	07/15/20	4.750%	1,270,000			1,239,969		1,250,950	
Windstream Corporation	Bonds	06/01/22	7.500%	695,000			735,982		610,731	
World Financial Network Credit	Bonds	12/15/19	0.533%	595,000			595,465		594,923	
WPX Energy, Incorporated	Bonds	01/15/22	6.000%	530,000			530,975		523,375	
WPX Energy, Incorporated	Notes	09/15/24	5.250%	265,000			256,866		244,131	
Wynn Las Vegas LLC/Corp	Bonds	05/30/23	4.250%	95,000			91,288		87,400	
Wynn Las Vegas LLC/Corp	Bonds	03/01/25	5.500%	95,000			96,306		90,488	
ZF NA Capital	Bonds	04/29/20	4.000%	545,000			541,948		544,319	
Total Corporate and Other Notes and Bonds							\$ 366,689,579	\$	337,690,261	
<u>Common & Preferred Stocks</u>										
Aaron's, Incorporated Class A	Equity	N/A	N/A	17,581	\$		627,339	\$	636,608	
Abacus Property Group	Equity	N/A	N/A	27,366			65,494		61,654	
Abbott Laboratories, Incorporated	Equity	N/A	N/A	106,469			4,350,368		5,225,499	
Acadia Health Care Company, Incorporated	Equity	N/A	N/A	20,750			930,363		1,625,348	
Acadia Realty Trust	Equity	N/A	N/A	62,490			1,619,927		1,819,084	
Accor SA	Equity	N/A	N/A	23,839			1,159,751		1,188,613	
Achillion Pharmaceuticals	Equity	N/A	N/A	42,500			610,768		376,550	
ACS Actividades De Construccion	Equity	N/A	N/A	9,000			341,816		289,521	
Actua Corporation	Equity	N/A	N/A	72,429			952,862		1,032,838	
Adobe Systems, Incorporated	Equity	N/A	N/A	70,094			5,313,356		5,678,315	
Advanced Auto Parts	Equity	N/A	N/A	11,460			1,787,618		1,825,463	
Advanced Drainage Systems	Equity	N/A	N/A	46,955			1,317,818		1,377,190	
Advanced Emissions Solutions	Equity	N/A	N/A	9,800			206,850		127,400	
Advanced Energy Industries, Incorporated	Equity	N/A	N/A	15,863			407,106		436,074	
Aegon NV	Equity	N/A	N/A	124,808			1,541,373		916,287	
AES Corporation	Equity	N/A	N/A	207,700			2,608,220		2,754,102	
Aerie Pharmaceuticals, Incorporated	Equity	N/A	N/A	33,505			357,304		591,363	
Aetna, Incorporated	Equity	N/A	N/A	29,170			1,864,465		3,718,008	
Affiliated Managers Group, Incorporated	Equity	N/A	N/A	23,582			4,416,036		5,155,025	
Aflac, Incorporated	Equity	N/A	N/A	9,700			205,895		603,340	
African Barrick Gold PLC	Equity	N/A	N/A	43,000			283,842		203,974	
Agco Corporation	Equity	N/A	N/A	30,400			1,395,692		1,726,112	
Agios Pharmaceuticals, Incorporated	Equity	N/A	N/A	2,569			67,111		285,519	
AIA Group Limited	Equity	N/A	N/A	361,400			1,518,485		2,341,872	
AIN Pharmaciez	Equity	N/A	N/A	8,000			196,637		371,287	
Air New Zealand	Equity	N/A	N/A	104,447			179,888		180,484	
Aircastle Limited	Equity	N/A	N/A	34,800			419,584		788,916	
Aisin Seiki Company, Limited	Equity	N/A	N/A	41,900			1,535,449		1,783,707	
Akamai Technologies	Equity	N/A	N/A	170,900			8,998,577		11,932,238	
Akzo Nobel NV	Equity	N/A	N/A	18,339			1,393,544		1,342,415	
Alamo Group Incorporated	Equity	N/A	N/A	8,215			231,009		448,868	
Alapis Holding Industrial	Equity	N/A	N/A	357			6,786		15	
Alaska Air Group, Incorporated	Equity	N/A	N/A	40,900			2,083,618		2,635,187	
Albany International Corporation Class A	Equity	N/A	N/A	23,188			438,272		922,882	
Alcoa, Incorporated	Equity	N/A	N/A	23,270			382,241		259,461	
Alexander & Bladwin, Incorporated	Equity	N/A	N/A	29,255			1,055,255		1,152,647	
Alexion Pharmaceuticals, Incorporated	Equity	N/A	N/A	18,497			3,251,042		3,343,740	
Alfresa Holdings Corporation	Equity	N/A	N/A	15,900			244,131		247,623	
Alibaba Group Holding Limited	Equity	N/A	N/A	55,380			4,563,074		4,556,113	
Align Technology Incorporated	Equity	N/A	N/A	85,021			3,657,461		5,331,667	
Allergan PLC	Equity	N/A	N/A	20,738			5,854,849		6,293,153	

PLUMBERS AND PIPEFITTERS NATIONAL PENSION FUND
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Identity of issuer, borrower, lessor or similar party	Description	Maturity Date	Rate of Interest			Cost	Current Value
<u>Common & Preferred Stocks (continued)</u>							
Allete, Incorporated	Equity	N/A	N/A	50,250	\$	2,052,839	\$ 2,331,097
Alliance Data Systems Corporation	Equity	N/A	N/A	16,783		3,126,818	4,899,629
Allianz SE	Equity	N/A	N/A	18,390		3,004,014	2,884,472
Allscripts Healthcare Solutions Incorporated	Equity	N/A	N/A	57,928		714,685	792,455
Allstate Corporation	Equity	N/A	N/A	174,267		5,980,490	11,304,700
Ally Financial, Incorporated	Equity	N/A	N/A	121,000		2,560,202	2,714,030
Alon Usa Energy, Incorporated	Equity	N/A	N/A	28,400		489,100	536,760
Alstom	Equity	N/A	N/A	19,500		718,170	551,850
Alten Boulogne Billancourt	Equity	N/A	N/A	8,700		448,118	404,118
Altra Industrial Motion Corporation	Equity	N/A	N/A	59,569		1,183,584	1,619,085
Altria Group, Incorporated	Equity	N/A	N/A	88,720		4,687,614	4,339,295
Amadeus IT Holding SA	Equity	N/A	N/A	11,942		468,066	476,026
Amazon Com, Incorporated	Equity	N/A	N/A	37,581		11,839,123	16,313,536
Ambarella, Incorporated	Equity	N/A	N/A	10,210		217,465	1,048,465
Ambev SA	Equity	N/A	N/A	123,800		885,291	758,942
Amcort Limited	Equity	N/A	N/A	127,821		993,825	1,353,072
Amdocs Limited	Equity	N/A	N/A	40,190		1,336,627	2,193,972
Amerco	Equity	N/A	N/A	3,000		275,249	980,730
American Assets Trust, Incorporated	Equity	N/A	N/A	34,775		927,578	1,363,528
American Campus Communities, Inc.	Equity	N/A	N/A	24,888		725,913	938,029
American Capital Mortgage	Equity	N/A	N/A	53,360		1,078,809	853,226
American Electric Power, Incorporated	Equity	N/A	N/A	124,585		5,707,041	6,599,267
American Financial Group, Incorporated	Equity	N/A	N/A	16,400		474,284	1,066,656
American International Group, Incorporated	Equity	N/A	N/A	114,094		5,544,336	7,053,291
American Tower Corporation	Equity	N/A	N/A	28,653		2,561,827	2,673,038
American Woodmark Corporaiton	Equity	N/A	N/A	39,814		1,450,569	2,183,798
Ameriprise Financial, Incorporated	Equity	N/A	N/A	18,550		1,012,497	2,317,452
Ameris Bancorp	Equity	N/A	N/A	90,812		1,482,092	2,296,635
Amira Nature Foods Limited	Equity	N/A	N/A	58,458		818,063	671,682
Amkor Technology, Incorporated	Equity	N/A	N/A	122,500		568,113	732,550
AMP Limited	Equity	N/A	N/A	55,986		293,630	260,040
AMS AG	Equity	N/A	N/A	10,052		349,430	440,223
Amsurg Corporation	Equity	N/A	N/A	13,816		671,863	966,429
Anacor Pharmaceuticals, Incorporated	Equity	N/A	N/A	20,767		117,885	1,607,989
Anadarko Petroleum Corporation	Equity	N/A	N/A	78,271		7,343,110	6,109,834
Anglo American PLC	Equity	N/A	N/A	30,800		753,943	444,501
Anheuser Busch Inbev	Equity	N/A	N/A	8,960		-	1,073,825
Anthem, Incorporated	Equity	N/A	N/A	11,440		976,375	1,877,762
Aozara Bank Limited	Equity	N/A	N/A	163,000		516,053	615,320
AP Moller - Maersk A/S	Equity	N/A	N/A	200		465,731	362,229
Aperam	Equity	N/A	N/A	19,334		525,142	777,473
Apogee Enterprises, Incorporated	Equity	N/A	N/A	6,996		198,742	368,269
Apple, Incorporated	Equity	N/A	N/A	253,142		20,414,087	31,750,335
Applied Industrial Technologies, Incorporated	Equity	N/A	N/A	25,745		821,400	1,020,789
Applied Materials, Incorporated	Equity	N/A	N/A	105,857		2,492,696	2,034,572
Aratana Therapeutics, Incorporated	Equity	N/A	N/A	52,820		571,438	798,638
Arcelormittal	Equity	N/A	N/A	34,560		538,587	336,614
Archer Daniels Midland Company	Equity	N/A	N/A	29,500		776,719	1,422,490
Arctic Cat, Incorporated	Equity	N/A	N/A	32,560		1,295,232	1,081,318
Argo Group International	Equity	N/A	N/A	23,455		1,056,366	1,306,444
Arkema	Equity	N/A	N/A	810		1	58,363
Arm Holdings PLC	Equity	N/A	N/A	211,743		7,907,241	9,656,124
Armstrong World Industries	Equity	N/A	N/A	15,049		696,804	801,811

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EIN: 52-6152779
Plan No. 001

(c) Description of investment, including maturity date, rate of interest, collateral, par or maturity value		(d)		(e)	
(a)	(b)	(c)	(d)	(e)	(f)
Identity of issuer, borrower, lessor or similar party	Description	Maturity Date	Rate of Interest	Cost	Current Value
<u>Common & Preferred Stocks (continued)</u>					
Arrow Electronics, Incorporated	Equity	N/A	N/A	4,770 \$	252,291 \$
Arrium Limited	Equity	N/A	N/A	933,600	1,263,576
Asahi Glass Company Limited	Equity	N/A	N/A	37,000	238,402
Asahi Kasei Corporation	Equity	N/A	N/A	16,000	97,894
Asbury Automotive Group	Equity	N/A	N/A	9,976	528,067
Ashland, Incorporated	Equity	N/A	N/A	49,700	4,981,670
Ashtead Group PLC	Equity	N/A	N/A	40,867	698,283
Asian Pay Television	Equity	N/A	N/A	95,700	83,759
ASML Holding NV	Equity	N/A	N/A	5,350	507,783
Aspen Insurance Holdings Limited	Equity	N/A	N/A	15,400	420,343
Assa Abloy AB-B	Equity	N/A	N/A	60,084	1,189,397
Assurant, Incorporated	Equity	N/A	N/A	28,040	1,465,932
Assured Guaranty Limited	Equity	N/A	N/A	41,270	1,179,992
Astellas Pharma, Incorporated	Equity	N/A	N/A	75,100	681,662
Astrazeneca PLC	Equity	N/A	N/A	8,200	416,795
AT&T, Incorporated	Equity	N/A	N/A	115,740	3,870,019
Atmel Corporation	Equity	N/A	N/A	90,400	898,531
Atwood Oceanics, Incorporated	Equity	N/A	N/A	8,800	259,998
Aurubis AG	Equity	N/A	N/A	10,200	409,123
Ausdrill Limited	Equity	N/A	N/A	105,700	379,819
Aust & NZ Banking Group Limited	Equity	N/A	N/A	22,678	610,540
Autodesk, Incorporated	Equity	N/A	N/A	178,319	7,103,045
Autoliv, Incorporated	Equity	N/A	N/A	10,600	536,402
Avago Technologies	Equity	N/A	N/A	30,530	4,413,992
Avalonbay Communities, Incorporated	Equity	N/A	N/A	35,620	4,942,353
Avis Budget Group, Incorporated	Equity	N/A	N/A	19,989	756,607
Avista Corporation	Equity	N/A	N/A	27,800	768,493
AVX Corporation	Equity	N/A	N/A	28,200	374,036
AXA	Equity	N/A	N/A	64,872	1,143,249
Axalta Coating Systems Limited	Equity	N/A	N/A	101,600	3,381,659
Axis Capital Holdings LTD	Equity	N/A	N/A	24,980	1,099,877
AZZ, Incorporated	Equity	N/A	N/A	7,494	154,589
Babcock & Wilcox Company	Equity	N/A	N/A	41,573	1,325,240
Bae Systems PLC	Equity	N/A	N/A	198,000	1,185,414
Baloise Holding AG	Equity	N/A	N/A	7,500	426,029
Banca Monte Dei Paschi Siena	Equity	N/A	N/A	13,359	146,427
Banca Popolare Di Milano	Equity	N/A	N/A	584,587	560,646
Banco Bilbao Vizcaya Argentia	Equity	N/A	N/A	180,424	1,826,674
Banco Latinoamericano De Comercio	Equity	N/A	N/A	29,200	535,039
Banco Santander S.A.	Equity	N/A	N/A	87,100	783,798
Bancorpsouth, Incorporated	Equity	N/A	N/A	61,860	940,523
Bank Hapolum Limited	Equity	N/A	N/A	127,000	485,979
Bank of America Corporation	Equity	N/A	N/A	281,070	4,791,645
Bank of Queensland	Equity	N/A	N/A	36,250	286,414
BankUnited, Incorporated	Equity	N/A	N/A	13,635	490,763
Barclays PLC	Equity	N/A	N/A	667,578	3,623,102
Barnes & Noble, Incorporated	Equity	N/A	N/A	28,382	449,772
Barratt Developments PLC	Equity	N/A	N/A	125,353	744,851
BASF SE	Equity	N/A	N/A	21,105	1,668,044
Bayerische Motoren Werke AG	Equity	N/A	N/A	13,151	1,534,274
Beacon Roofing Supply, Incorporated	Equity	N/A	N/A	15,860	504,730
Belden, Incorporated	Equity	N/A	N/A	19,208	812,820
Bellway PLC	Equity	N/A	N/A	13,000	344,571

PLUMBERS AND PIPEFITTERS NATIONAL PENSION FUND
ALEXANDRIA, VIRGINIA

SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES
AS OF JUNE 30, 2015

Form 5500, Schedule H, Line 4i

EIN: 52-6152779
Plan No. 001

(c) Description of investment, including maturity date, rate of interest, collateral, par or maturity value						
(a)	(b)				(d)	(e)
Identity of issuer, borrower, lessor or similar party	Description	Maturity Date	Rate of Interest		Cost	Current Value
<u>Common & Preferred Stocks (continued)</u>						
Bendigo and Adelaide Bank	Equity	N/A	N/A	67,300 \$	560,143 \$	636,606
Benefit Focus, Incorporated	Equity	N/A	N/A	19,035	536,381	834,685
Berkeley Group Holding	Equity	N/A	N/A	19,372	703,976	1,018,457
Best Buy Company, Incorporated	Equity	N/A	N/A	4,730	163,807	154,245
BG Group PLC	Equity	N/A	N/A	54,429	1,022,164	895,901
BHP Billington Limited	Equity	N/A	N/A	25,330	749,911	521,798
BHP Billiton PLC	Equity	N/A	N/A	72,469	2,163,366	1,413,146
Bio Reference Labs, Incorporated	Equity	N/A	N/A	13,737	354,702	566,651
Biocryst Pharmaceuticals, Incorporated	Equity	N/A	N/A	65,450	451,633	977,169
Biomarin Pharmaceutical, Incorporated	Equity	N/A	N/A	31,979	2,012,174	4,374,088
Biogen Idec, Incorporated	Equity	N/A	N/A	26,614	7,817,363	10,750,459
Biomed Realty Trust, Incorporated	Equity	N/A	N/A	52,897	927,458	1,023,028
Bioscrip, Incorporated	Equity	N/A	N/A	44,042	321,573	159,872
Blackrock, Incorporated	Equity	N/A	N/A	8,395	2,235,904	2,904,502
Blueprint Medicines Corporation	Equity	N/A	N/A	2,200	39,600	58,278
BM & Fbovespa SA	Equity	N/A	N/A	131,900	517,079	497,631
BNC Bancorp	Equity	N/A	N/A	59,481	1,101,274	1,149,768
BNP Paribas	Equity	N/A	N/A	40,833	2,726,573	2,495,713
Boart Longyear Limited	Equity	N/A	N/A	117,800	285,967	11,348
Boc Hong Kong Holdings Limited	Equity	N/A	N/A	113,500	339,794	473,295
Boeing Company	Equity	N/A	N/A	37,077	5,053,470	5,143,321
Boise Cascade Company	Equity	N/A	N/A	41,505	1,147,421	1,522,403
Boliden AB	Equity	N/A	N/A	58,627	800,482	1,068,600
Bonanza Creek Energy, Incorporated	Equity	N/A	N/A	43,629	1,377,565	796,229
Booz Allen Hamilton Holding	Equity	N/A	N/A	20,717	529,475	522,897
Boral Limited	Equity	N/A	N/A	17,123	86,656	77,286
Boston Private Financial Holdings, Inc	Equity	N/A	N/A	4,705	59,788	63,094
Bovis Homes PLC	Equity	N/A	N/A	27,300	368,006	477,420
BP PLC	Equity	N/A	N/A	477,701	4,167,384	3,186,266
Bradken Limited	Equity	N/A	N/A	70,800	520,702	78,388
Brady Corporation Class A	Equity	N/A	N/A	60,700	1,908,149	1,501,718
Brambles Limited	Equity	N/A	N/A	127,382	1,127,110	1,041,786
Brandywine Reality	Equity	N/A	N/A	93,800	1,068,157	1,245,664
Bridge Capital Holdings	Equity	N/A	N/A	53,522	937,520	1,594,956
Bridgestone	Equity	N/A	N/A	38,200	1,183,662	1,411,841
Brilliance China Automotive	Equity	N/A	N/A	578,000	952,976	878,560
Brinker International, Incorporated	Equity	N/A	N/A	15,800	689,117	910,870
Brinks Company	Equity	N/A	N/A	21,100	632,339	620,973
Bristol Myers Squibb Company	Equity	N/A	N/A	142,696	7,643,191	9,494,992
Bristow Group, Incorporated	Equity	N/A	N/A	25,999	1,580,755	1,385,747
Britvic PLC	Equity	N/A	N/A	56,830	576,903	640,681
Broadcom Corporation	Equity	N/A	N/A	4,345	196,689	223,724
Broadsoft, Incorporated	Equity	N/A	N/A	12,534	458,232	433,300
Brocade Communications Systems	Equity	N/A	N/A	108,900	1,089,510	1,293,732
Brother Industris Limited	Equity	N/A	N/A	28,600	390,502	405,216
Brunswick Corporation	Equity	N/A	N/A	104,470	2,722,397	5,313,344
Bryn Mawr Bank Corporation	Equity	N/A	N/A	20,340	606,015	613,454
BT Group PLC	Equity	N/A	N/A	535,558	2,651,184	3,788,387
BT Investment Management Limited	Equity	N/A	N/A	7,602	12,215	49,562
Buffalo Wild Wings, Incorporated	Equity	N/A	N/A	6,000	726,715	940,140
Bunge Limited	Equity	N/A	N/A	26,500	2,220,535	2,326,700
Burberry Group PLC	Equity	N/A	N/A	41,069	1,101,882	1,013,755
Burlington Stores, Incorporated	Equity	N/A	N/A	14,335	597,728	733,952

PLUMBERS AND PIPEFITTERS NATIONAL PENSION FUND
ALEXANDRIA, VIRGINIA

SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES
AS OF JUNE 30, 2015

Form 5500, Schedule H, Line 4i

EIN: 52-6152779
Plan No. 001

(c) Description of investment, including maturity date, rate of interest, collateral, par or maturity value						
(a)	(b)				(d)	(e)
Identity of issuer, borrower, lessor or similar party	Description	Maturity Date	Rate of Interest		Cost	Current Value
<u>Common & Preferred Stocks (continued)</u>						
CA, Incorporated	Equity	N/A	N/A	16,600	\$ 424,421	\$ 486,214
Cabelas, Incorporated	Equity	N/A	N/A	112,200	7,547,844	5,607,756
Cabot Corporation	Equity	N/A	N/A	28,973	1,073,277	1,080,403
C&C Group PLC	Equity	N/A	N/A	93,300	435,143	365,719
Cache Logistics Trust	Equity	N/A	N/A	89,000	76,574	76,322
CACI International, Incorporated	Equity	N/A	N/A	10,906	858,829	882,186
Calix Networks, Incorporated	Equity	N/A	N/A	65,565	558,415	498,950
Callon Pete Company	Equity	N/A	N/A	225,836	1,514,413	1,878,956
Cameron Intl Corporation	Equity	N/A	N/A	53,050	3,344,858	2,778,229
Canadian Pacific Railway Limited	Equity	N/A	N/A	15,699	2,868,678	2,515,451
Canon, Incorporated	Equity	N/A	N/A	14,850	512,252	483,230
CAP Gemini	Equity	N/A	N/A	15,170	1,123,194	1,359,232
Capita Group PLC	Equity	N/A	N/A	92,987	1,328,791	1,808,778
Capital Acquisition Corporation	Equity	N/A	N/A	28,690	334,049	302,680
Capital One Financial Corporation	Equity	N/A	N/A	43,800	3,130,871	3,853,086
Capitol Federal Financial Incorporated	Equity	N/A	N/A	19,093	217,929	229,880
Cardinal Health, Incorporated	Equity	N/A	N/A	31,320	2,004,400	2,619,918
Cardtronics, Incorporated	Equity	N/A	N/A	57,555	1,603,832	2,132,413
Carillion PLC	Equity	N/A	N/A	90,200	348,615	484,561
Carlisle Companies, Incorporated	Equity	N/A	N/A	21,800	2,166,589	2,182,616
Carmike Cinemas, Incorporated	Equity	N/A	N/A	37,180	721,673	986,757
Carnival Corporation	Equity	N/A	N/A	36,130	1,715,754	1,784,461
Carnival PLC	Equity	N/A	N/A	18,566	705,247	951,466
Carrizo Oil & Gas, Incorporated	Equity	N/A	N/A	7,655	335,292	376,932
Carrols Restaurant Group, Incorporated	Equity	N/A	N/A	37,782	309,418	392,933
Cascade Bancorp	Equity	N/A	N/A	139,071	655,230	720,388
Catalent, Incorporated	Equity	N/A	N/A	26,051	773,019	764,076
Cathay General Bancorp	Equity	N/A	N/A	61,066	806,171	1,981,592
Cathay Pacific Airways Limited	Equity	N/A	N/A	61,000	155,909	149,990
CBL \$ Associates Properties Incorporated	Equity	N/A	N/A	247,400	4,887,063	4,007,880
CBOE Holdings	Equity	N/A	N/A	2,780	131,572	159,072
CBRE Group, Incorporated	Equity	N/A	N/A	111,830	3,828,081	4,137,710
CDL Hospitality Trusts	Equity	N/A	N/A	119,100	161,987	144,138
CEB, Incorporated	Equity	N/A	N/A	65,300	3,884,481	5,685,018
Celadon Group, Incorporated	Equity	N/A	N/A	21,060	489,695	435,521
Celanese Corporation	Equity	N/A	N/A	15,300	814,466	1,099,764
Celgene Corporation	Equity	N/A	N/A	60,230	5,549,732	6,970,719
Cempra, Incorporated	Equity	N/A	N/A	24,276	518,128	834,123
Cenovus Energy, Incorporated	Equity	N/A	N/A	38,729	666,285	620,051
Central Japan Railway Company	Equity	N/A	N/A	1,300	95,709	234,804
Centric A PLC	Equity	N/A	N/A	150,200	852,414	608,310
Century Tokyo Leasing Corporation	Equity	N/A	N/A	16,900	204,362	546,832
Cepheid, Incorporated	Equity	N/A	N/A	20,900	800,923	1,278,035
Centurylink, Incorporated	Equity	N/A	N/A	47,300	1,798,129	1,389,674
CF Industries Holdings, Incorporated	Equity	N/A	N/A	87,100	4,526,850	5,598,788
Challenger Financial Services, Incorporated	Equity	N/A	N/A	88,400	374,585	458,338
Charter Hall Group	Equity	N/A	N/A	32,439	119,200	113,128
Chatham Lodging Trust	Equity	N/A	N/A	48,045	1,400,946	1,271,751
Cheesecake Factory, Incorporated	Equity	N/A	N/A	71,065	2,864,520	3,875,530
Chemed Corporation	Equity	N/A	N/A	5,900	511,188	773,490
Cheniere Energy, Incorporated	Equity	N/A	N/A	24,900	1,740,649	1,724,574
Chevron Corporation	Equity	N/A	N/A	20,677	2,042,653	1,994,710
Chicos Fas, Incorporated	Equity	N/A	N/A	48,915	814,224	813,456

PLUMBERS AND PIPEFITTERS NATIONAL PENSION FUND
ALEXANDRIA, VIRGINIA

SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES
AS OF JUNE 30, 2015

Form 5500, Schedule H, Line 4i

EIN: 52-6152779
Plan No. 001

(c) Description of investment, including maturity date, rate of interest, collateral, par or maturity value				Plan No.	001	
(a)	(b)				(e)	
Identity of issuer, borrower, lessor or similar party	Description	Maturity Date	Rate of Interest	(d) Cost	Current Value	
<u>Common & Preferred Stocks (continued)</u>						
Chimera Investment Corporation	Equity	N/A	N/A	29,140 \$	459,786 \$	399,509
China Shineway Pharmaceuticals	Equity	N/A	N/A	178,000	261,855	265,912
Chipotle Mexican Grill Class A	Equity	N/A	N/A	3,626	2,192,137	2,193,694
Christopher & Banks Corporation	Equity	N/A	N/A	58,149	423,507	233,177
Chubb Corporation	Equity	N/A	N/A	3,700	317,640	352,018
Chugoku Electric Power	Equity	N/A	N/A	3,400	45,067	49,617
Churchill Downs, Incorporated	Equity	N/A	N/A	21,990	1,356,475	2,749,850
Ciena Corporation	Equity	N/A	N/A	56,900	1,172,183	1,347,392
Cigna Corporation	Equity	N/A	N/A	36,340	2,754,216	5,887,080
Cinemark Holdings Incorporated	Equity	N/A	N/A	21,609	405,982	868,034
Circor International, Incorporated	Equity	N/A	N/A	8,910	510,724	485,862
Cirrus Logic, Incorporated	Equity	N/A	N/A	22,038	786,913	749,953
Cisco Systems, Incorporated	Equity	N/A	N/A	8,280	235,181	227,369
Cit Group, Incorporated	Equity	N/A	N/A	99,500	4,322,359	4,625,755
Citigroup, Incorporated	Equity	N/A	N/A	197,369	9,854,755	10,902,664
Citrix Systems, Incorporated	Equity	N/A	N/A	19,260	1,367,460	1,351,282
City National Corporation	Equity	N/A	N/A	8,033	447,036	726,103
CK Hutchinson Holdings Limited	Equity	N/A	N/A	5,000	75,447	7,200
Clayton Williams Energy	Equity	N/A	N/A	18,605	1,487,858	1,223,279
Cliffs Natural Resources, Incorporated	Equity	N/A	N/A	13,900	1,357,373	60,187
Cloud Peak Energy, Incorporated	Equity	N/A	N/A	32,420	451,285	151,077
CLP Holdings Limited	Equity	N/A	N/A	25,000	216,067	212,538
CNO Financial Group, Incorporated	Equity	N/A	N/A	64,100	597,010	1,176,235
Coach, Incorporated	Equity	N/A	N/A	4,540	161,344	157,129
Cobiz Financial, Incorporated	Equity	N/A	N/A	97,948	1,118,221	1,280,180
Coca Cola Enterprises, Incorporated	Equity	N/A	N/A	11,200	226,972	486,528
Cognex Corporation	Equity	N/A	N/A	42,385	1,994,822	2,038,719
Cognizant Technology Solutions	Equity	N/A	N/A	26,600	1,699,216	1,624,994
Commercial Metals Company	Equity	N/A	N/A	42,725	646,814	687,018
Commerzbank AG	Equity	N/A	N/A	45,213	646,893	580,574
Common Wealth Bank Of Australia	Equity	N/A	N/A	11,231	723,548	729,341
Compag Nie De Saint Gobain	Equity	N/A	N/A	14,910	656,625	679,300
Computacenter PLC	Equity	N/A	N/A	46,500	-	566,966
Computer Sciences Corporation	Equity	N/A	N/A	88,493	3,473,562	5,808,681
Conagra Foods, Incorporated	Equity	N/A	N/A	32,300	999,300	1,412,156
Concho Resources, Incorporated	Equity	N/A	N/A	23,032	3,182,381	2,622,424
Conocophillips	Equity	N/A	N/A	47,291	3,693,932	2,904,140
Constellation Brands, Incorporated Class A	Equity	N/A	N/A	33,194	1,555,429	3,851,168
Continental AG	Equity	N/A	N/A	8,361	1,567,168	1,986,085
Convergys Corporation	Equity	N/A	N/A	159,430	1,840,249	4,063,871
Cooper Tire & Rubber Company	Equity	N/A	N/A	58,300	2,066,148	1,972,289
Core Laboratories N V	Equity	N/A	N/A	26,300	2,621,886	2,999,252
Core Mark Holding Company, Incorporated	Equity	N/A	N/A	15,894	265,624	941,720
Coresite Realty Corporation	Equity	N/A	N/A	30,685	1,120,392	1,394,326
Costco Wholesale Corporation	Equity	N/A	N/A	26,183	3,044,297	3,536,276
Cott Corporation	Equity	N/A	N/A	88,205	766,382	862,645
Cracker Barrel Old Country	Equity	N/A	N/A	3,161	149,263	471,495
Crane Company	Equity	N/A	N/A	11,300	619,973	663,649
Credit Acceptance Corporation	Equity	N/A	N/A	2,193	228,718	539,873
Credit Agricole SA	Equity	N/A	N/A	240,480	2,124,809	1,924,589
Credit Suisse Group	Equity	N/A	N/A	74,852	2,282,204	2,066,664
Cromwell Property Group	Equity	N/A	N/A	35,938	31,066	28,421
Cross Country Healthcare, Incorporated	Equity	N/A	N/A	19,000	233,885	240,920

PLUMBERS AND PIPEFITTERS NATIONAL PENSION FUND
ALEXANDRIA, VIRGINIA

SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES
AS OF JUNE 30, 2015

Form 5500, Schedule H, Line 4i

EIN: 52-6152779
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(a)	(b)				(e)		
Identity of issuer, borrower, lessor or similar party	Description	Maturity Date	Rate of Interest		(d) Cost	Current Value	
Common & Preferred Stocks (continued)							
CSG Systems International, Incorporated	Equity	N/A	N/A	34,734	\$ 884,503	\$ 1,099,678	
CSL Limited	Equity	N/A	N/A	958	67,905	63,914	
CSR Limited	Equity	N/A	N/A	43,666	138,897	120,082	
CSX Corporation	Equity	N/A	N/A	28,170	1,007,844	919,751	
CU Bancorp	Equity	N/A	N/A	51,227	966,388	1,135,190	
Cubsmart, Incorporated	Equity	N/A	N/A	120,759	2,040,145	2,796,778	
Curtiss Wright Corporation	Equity	N/A	N/A	14,750	840,763	1,068,490	
CVB Financial Corporation	Equity	N/A	N/A	70,178	731,983	1,235,835	
CVSL, Incorporated	Equity	N/A	N/A	47,885	110,316	57,462	
CVS Health Corporation	Equity	N/A	N/A	73,244	5,037,243	7,681,830	
Cynosure, Incorporated Class A	Equity	N/A	N/A	17,153	360,429	661,763	
Cypress Semiconductor Corporation	Equity	N/A	N/A	120,999	1,590,487	1,422,948	
Cytec Inds, Incorporated	Equity	N/A	N/A	23,930	1,354,812	1,448,483	
Dah Chong Hong Holdings Limited	Equity	N/A	N/A	703,000	420,731	365,483	
Dah Sing Banking Group	Equity	N/A	N/A	9,600	15,380	21,004	
Dah Sing Financial Holdings	Equity	N/A	N/A	18,400	114,721	120,703	
Dai-Chi Life Insurance	Equity	N/A	N/A	3,200	47,164	62,923	
Daiichi Sankyo Company Limited	Equity	N/A	N/A	14,400	237,801	266,385	
Daikin Industries Limited	Equity	N/A	N/A	20,000	1,336,510	1,439,555	
Dai Nippon Printing Company Limited	Equity	N/A	N/A	16,000	129,329	165,314	
Daimler AG	Equity	N/A	N/A	17,000	752,322	1,563,490	
Dairy Crest Group PLC	Equity	N/A	N/A	46,800	441,667	391,569	
Daito Trust Construction Company Limited	Equity	N/A	N/A	1,400	133,884	145,050	
Daiwa House Industries Company Limited	Equity	N/A	N/A	9,000	117,415	209,805	
Daiwa Securities Group, Incorporated	Equity	N/A	N/A	18,000	147,751	134,899	
Dana Holding Corporation	Equity	N/A	N/A	207,200	4,411,114	4,264,176	
Danaher Corporation	Equity	N/A	N/A	33,406	2,337,033	2,859,220	
Darden Restaurants, Incorporated	Equity	N/A	N/A	43,800	1,862,207	3,113,304	
DBS Group Holdings Limited	Equity	N/A	N/A	172,235	2,277,397	2,666,198	
DCM Holdings Company Limited	Equity	N/A	N/A	46,100	414,052	451,639	
Delhaize Group	Equity	N/A	N/A	21,537	1,494,141	1,778,223	
Delphi Automotive PLC	Equity	N/A	N/A	76,887	4,299,676	6,542,315	
Delta Air Lines, Incorporated	Equity	N/A	N/A	91,940	3,308,454	3,776,895	
Demandware	Equity	N/A	N/A	6,500	411,258	462,020	
Denki Kagaku Kogyo	Equity	N/A	N/A	20,000	81,693	88,900	
Densco Corporation	Equity	N/A	N/A	1,300	63,471	64,753	
Deutsche Bank AG	Equity	N/A	N/A	64,060	2,813,561	1,932,050	
Deutsche Telecom AG	Equity	N/A	N/A	75,636	1,249,090	1,311,896	
Dexcom, Incorporated	Equity	N/A	N/A	42,034	1,464,384	1,388,179	
Diageo PLC	Equity	N/A	N/A	60,872	1,243,889	1,750,679	
Dialog Semiconductor	Equity	N/A	N/A	3,132	124,084	168,345	
Diamond Resorts International	Equity	N/A	N/A	69,588	1,569,964	2,195,501	
Diamond Back Energy, Incorporated	Equity	N/A	N/A	24,500	1,011,842	1,846,810	
Dicerna Pharmaceuticals, Incorporated	Equity	N/A	N/A	30,900	573,118	431,055	
Dick's Sporting Goods, Incorporated	Equity	N/A	N/A	3,710	200,494	192,067	
Digi International, Incorporated	Equity	N/A	N/A	45,970	456,770	439,014	
Digital China Holdings Limited	Equity	N/A	N/A	121,000	134,987	163,277	
Digital Globe, Incorporated	Equity	N/A	N/A	38,176	1,158,719	1,060,911	
Dillards, Incorporated	Equity	N/A	N/A	11,200	253,844	1,178,128	
DineEquity, Incorporated	Equity	N/A	N/A	10,385	1,125,573	1,029,050	
Diodes, Incorporated	Equity	N/A	N/A	32,794	884,055	790,663	
Direct Line Insurance Group	Equity	N/A	N/A	94,600	381,561	503,275	
Disco Corporation	Equity	N/A	N/A	9,500	582,092	786,330	

PLUMBERS AND PIPEFITTERS NATIONAL PENSION FUND
ALEXANDRIA, VIRGINIA

SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES
AS OF JUNE 30, 2015

Form 5500, Schedule H, Line 4i

EIN: 52-6152779
Plan No. 001

(c) Description of investment, including maturity date, rate of interest, collateral, par or maturity value						
(a)	(b)				(d)	(e)
Identity of issuer, borrower, lessor or similar party	Description	Maturity Date	Rate of Interest		Cost	Current Value
<u>Common & Preferred Stocks (continued)</u>						
Disney Walt Company	Equity	N/A	N/A	103,114	\$ 9,258,001	\$ 11,769,432
Dish Network Corporation Class A	Equity	N/A	N/A	22,605	1,452,574	1,530,585
Discover Financial	Equity	N/A	N/A	55,910	1,495,610	3,221,534
DNB Nor ASA	Equity	N/A	N/A	161,398	2,229,434	2,692,556
Dolby Laboratories, Incorporated	Equity	N/A	N/A	56,200	1,944,342	2,230,016
Dollar General Corporation	Equity	N/A	N/A	23,498	1,823,719	1,826,735
Domtar Corporation	Equity	N/A	N/A	16,800	714,288	695,520
Donnelly R R & Sons Company	Equity	N/A	N/A	32,800	1,139,780	571,704
Dover Corporation	Equity	N/A	N/A	53,499	3,269,568	3,754,560
Downer Edi Limited	Equity	N/A	N/A	125,042	634,890	461,156
DR Horton, Incorporated	Equity	N/A	N/A	115,300	2,740,638	3,154,608
Dr Pepper Snapple Group, Incorporated	Equity	N/A	N/A	8,000	415,312	583,200
Dreamworks Animation Class A	Equity	N/A	N/A	77,005	1,779,906	2,031,392
Drill Quip, Incorporated	Equity	N/A	N/A	2,320	176,801	174,580
DS Smith PLC	Equity	N/A	N/A	50,800	272,680	308,101
DST Systems, Incorporated	Equity	N/A	N/A	13,307	1,165,521	1,676,416
DTE Energy Company	Equity	N/A	N/A	62,417	4,800,121	4,658,805
Duet Group	Equity	N/A	N/A	80,896	157,517	144,179
Duke Realty Corporation	Equity	N/A	N/A	163,358	2,444,866	3,033,558
Dupont Fabros Technology	Equity	N/A	N/A	30,600	851,121	901,170
DXP Enterprises, Incorporated	Equity	N/A	N/A	8,951	460,352	416,222
Dynegy, Incorporated	Equity	N/A	N/A	36,005	1,167,060	1,053,146
E.ON SE	Equity	N/A	N/A	21,700	621,358	292,733
Eads NV	Equity	N/A	N/A	14,333	823,328	929,988
East Asiatic Company Limited	Equity	N/A	N/A	8,900	658,884	74,478
East Japan Railway Company	Equity	N/A	N/A	3,500	249,242	314,867
East West Bancorp, Incorporated	Equity	N/A	N/A	34,870	1,462,880	1,562,873
Eastman Chemical Company	Equity	N/A	N/A	49,723	3,616,138	4,068,336
Easyjet PLC	Equity	N/A	N/A	26,566	700,045	645,324
Ebro Foods SA	Equity	N/A	N/A	12,700	245,358	245,794
Echo Entertainment Group Limited	Equity	N/A	N/A	84,576	252,575	284,510
Edison International	Equity	N/A	N/A	84,800	3,470,486	4,713,184
EDP Energias De Portugal SA	Equity	N/A	N/A	109,096	506,000	414,136
Edwards Lifesciences Corporation	Equity	N/A	N/A	85,300	5,624,228	12,149,279
8Ponts3 Energy Partners LP	Equity	N/A	N/A	4,300	90,300	80,066
Eizo Nanao Corporation	Equity	N/A	N/A	17,300	463,575	397,920
El Paso Electric Company	Equity	N/A	N/A	20,460	661,517	709,144
Electricite De France	Equity	N/A	N/A	31,786	751,533	708,734
Eletronic Art	Equity	N/A	N/A	3,120	210,683	207,480
El Pollo Loco Holdings, Incorporated	Equity	N/A	N/A	20,320	506,670	420,827
EMC Corporation	Equity	N/A	N/A	109,120	3,087,362	2,879,677
Empire State Realty Trust	Equity	N/A	N/A	167,855	2,912,123	2,863,606
Employers Holdings, Incorporated	Equity	N/A	N/A	59,291	1,081,591	1,350,649
Endo International PLC	Equity	N/A	N/A	42,300	3,560,113	3,369,195
Endurance Specialty Holdings	Equity	N/A	N/A	55,300	2,040,503	3,633,210
Enel SPA	Equity	N/A	N/A	454,079	2,686,626	2,052,437
Energen Corporation	Equity	N/A	N/A	14,200	657,153	969,860
Endologix, Incorporated	Equity	N/A	N/A	47,550	605,744	729,417
Endochoice Holdings, Incorporated	Equity	N/A	N/A	14,900	223,617	243,615
Enersys	Equity	N/A	N/A	17,500	718,393	1,230,075
Engility Holdings, Incorporated	Equity	N/A	N/A	1,100	21,131	27,676
Eni SPA	Equity	N/A	N/A	35,100	982,314	622,970
Ennis, Incorporated	Equity	N/A	N/A	22,300	505,692	414,557

PLUMBERS AND PIPEFITTERS NATIONAL PENSION FUND
ALEXANDRIA, VIRGINIA

SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES
AS OF JUNE 30, 2015

Form 5500, Schedule H, Line 4i

EIN: 52-6152779
Plan No. 001

(c) Description of investment, including maturity date, rate of interest, collateral, par or maturity value						
(a)	(b)				(d)	(e)
Identity of issuer, borrower, lessor or similar party	Description	Maturity Date	Rate of Interest		Cost	Current Value
<u>Common & Preferred Stocks (continued)</u>						
Ensco PLC Class A	Equity	N/A	N/A	120,610 \$	2,699,449 \$	2,685,985
Entergy Corporation	Equity	N/A	N/A	61,300	4,326,324	4,321,650
Entravision Communications	Equity	N/A	N/A	119,020	628,138	979,535
Envestnet, Incorporated	Equity	N/A	N/A	21,945	267,308	887,236
EOG Resources, Incorporated	Equity	N/A	N/A	22,522	2,445,424	1,971,801
Epam Systems, Incorporated	Equity	N/A	N/A	30,452	1,000,526	2,169,096
EPR Properties	Equity	N/A	N/A	52,788	2,264,221	2,891,727
Essilor International	Equity	N/A	N/A	10,576	771,141	1,261,602
Esperion Therapeutics, Incorporated	Equity	N/A	N/A	2,893	336,319	236,532
Esterline Technologies Corporation	Equity	N/A	N/A	7,210	692,941	687,401
E Trade Financial Corporation	Equity	N/A	N/A	169,400	1,957,352	5,073,530
Ethan Allen Interiors, Incorporated	Equity	N/A	N/A	156,338	4,829,255	4,117,943
Euronet Worldwide, Incorporated	Equity	N/A	N/A	27,802	493,978	1,715,383
Everest Re Group Limited	Equity	N/A	N/A	14,350	1,648,566	2,611,844
Evercore Partners, Incorporated Class A	Equity	N/A	N/A	9,675	529,076	522,063
Evertec, Incorporated	Equity	N/A	N/A	31,115	710,014	660,883
Evolution Mining Limited	Equity	N/A	N/A	54,510	53,548	48,366
EW Scripps Company Class A	Equity	N/A	N/A	47,137	753,824	1,077,080
Exar Corporation	Equity	N/A	N/A	29,965	298,802	293,058
Exedy Corporation	Equity	N/A	N/A	2,400	61,530	60,007
Exelon Corporation	Equity	N/A	N/A	83,390	3,014,366	2,620,114
Exlservice Holdings, Incorporated	Equity	N/A	N/A	52,397	1,207,150	1,811,888
Exxon Mobil Corporation	Equity	N/A	N/A	166,921	13,952,840	13,887,827
Facebook, Incorporated Class A	Equity	N/A	N/A	169,180	10,343,186	14,509,723
Factset Resh Systems, Incorporated	Equity	N/A	N/A	57,900	6,274,495	9,409,329
Fairfax Media Limited	Equity	N/A	N/A	138,838	117,929	87,303
Fanuc Limited	Equity	N/A	N/A	5,300	816,152	1,098,425
Fast Retailing Company Limited	Equity	N/A	N/A	100	35,691	45,355
FCB Financial Holdings, Incorporated	Equity	N/A	N/A	5,600	178,654	178,080
Federal Agriculture Mtg Corporation	Equity	N/A	N/A	15,066	507,907	437,818
Fedex Corporation	Equity	N/A	N/A	28,385	4,594,603	4,836,804
Fei Company	Equity	N/A	N/A	9,005	778,933	746,785
Ferro Corporation	Equity	N/A	N/A	123,555	1,131,967	2,073,253
FNF Group	Equity	N/A	N/A	92,800	2,831,465	3,432,672
FNFV Group	Equity	N/A	N/A	76,207	874,325	1,172,064
Fiesta Restaurant Group	Equity	N/A	N/A	6,394	392,276	319,700
Fifth Third Bancorp	Equity	N/A	N/A	243,800	4,073,499	5,075,916
Financial Engines, Incorporated	Equity	N/A	N/A	8,720	379,423	370,426
Financial Institutions Incorporated	Equity	N/A	N/A	40,332	693,416	1,001,847
Fireeye, Incorporated	Equity	N/A	N/A	43,235	1,573,893	2,114,624
First American Financial	Equity	N/A	N/A	17,705	644,999	658,803
FirstEnergy Corporation	Equity	N/A	N/A	34,900	1,226,486	1,135,995
First Financial Bankshares, Incorporated	Equity	N/A	N/A	37,266	802,741	1,290,894
First Financial Bancorp	Equity	N/A	N/A	71,305	1,080,134	1,279,212
First Group PLC	Equity	N/A	N/A	100,500	568,892	188,702
First Merchants Corporation	Equity	N/A	N/A	63,751	1,079,761	1,574,650
First Pacific Company	Equity	N/A	N/A	100,000	96,576	85,900
Fitbit, Incorporated	Equity	N/A	N/A	1,659	33,180	63,424
Five Below	Equity	N/A	N/A	23,825	869,443	941,802
Fiveprime Therapeutics, Incorporated	Equity	N/A	N/A	21,735	286,898	539,897
Flamel Technologies SA	Equity	N/A	N/A	38,686	709,645	819,756
Fleetcor Technologies, Incorporated	Equity	N/A	N/A	19,360	2,593,827	3,021,322
Fleetmatics Group PLC	Equity	N/A	N/A	19,600	722,193	917,868

PLUMBERS AND PIPEFITTERS NATIONAL PENSION FUND
ALEXANDRIA, VIRGINIA

SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES
AS OF JUNE 30, 2015

Form 5500, Schedule H, Line 4i

EIN: 52-6152779
Plan No. 001

(c) Description of investment, including maturity date, rate of interest, collateral, par or maturity value						
(a)	(b)				(d)	(e)
Identity of issuer, borrower, lessor or similar party	Description	Maturity Date	Rate of Interest		Cost	Current Value
<u>Common & Preferred Stocks (continued)</u>						
Flextronics International Limited	Equity	N/A	N/A	195,680 \$	1,858,489 \$	2,213,141
Footlocker, Incorporated	Equity	N/A	N/A	42,300	1,597,340	2,834,523
Ford Motor Company	Equity	N/A	N/A	172,252	2,446,183	2,585,503
Forest City Enterprises Class A	Equity	N/A	N/A	83,425	1,941,413	1,843,693
Forrester Resh, Incorporated	Equity	N/A	N/A	13,101	387,717	471,898
Fox Factory Holding Corporation	Equity	N/A	N/A	50,967	811,249	819,549
Franklin Street Properties	Equity	N/A	N/A	66,200	764,467	748,722
Frasers Commercial Trust	Equity	N/A	N/A	23,000	26,540	26,128
Freds, Incorporated Class A	Equity	N/A	N/A	35,780	612,764	690,196
Freenet AG	Equity	N/A	N/A	24,600	386,206	830,358
Fresenius Medical Care	Equity	N/A	N/A	17,996	1,515,818	1,499,067
Fresh Del Monte Produce, Incorporated	Equity	N/A	N/A	20,300	462,844	784,798
Freshpet, Incorporated	Equity	N/A	N/A	52,335	930,235	973,431
Fresh Market, Incorporated	Equity	N/A	N/A	5,956	232,656	191,426
FTI Consulting, Incorporated	Equity	N/A	N/A	34,314	1,245,654	1,415,109
Fuji Electric Holdings Company Limited	Equity	N/A	N/A	32,000	105,029	137,795
Fuji Heavy Industries Limited	Equity	N/A	N/A	1,900	54,493	69,986
Fujifilm Holdings Corporation	Equity	N/A	N/A	10,300	106,962	368,076
Fujitsu Limited	Equity	N/A	N/A	33,000	195,841	184,542
Gamestop Corporation Class A	Equity	N/A	N/A	14,400	379,011	618,624
Gannett, Incorporated	Equity	N/A	N/A	13,500	135,175	188,865
Garmin Limited	Equity	N/A	N/A	114,000	4,414,286	5,008,020
Gas Natural SDG SA	Equity	N/A	N/A	8,300	151,954	188,212
GEA Group AG	Equity	N/A	N/A	31,323	899,698	1,407,366
Generac Holdings, Incorporated	Equity	N/A	N/A	45,990	2,085,318	1,828,103
General Dynamics Corporation	Equity	N/A	N/A	22,111	2,871,376	3,132,908
General Electric Company	Equity	N/A	N/A	133,752	3,285,701	3,553,791
General Motors Company	Equity	N/A	N/A	49,500	1,724,796	1,649,835
Genesco, Incorporated	Equity	N/A	N/A	17,537	655,416	1,157,968
Genesee & Wyoming, Incorporated	Equity	N/A	N/A	6,439	217,582	490,523
Gentex Corporation	Equity	N/A	N/A	326,400	3,743,709	5,359,488
Genworth Financial, Incorporated	Equity	N/A	N/A	45,313	1,127,103	300,230
Georg Fischer Limited	Equity	N/A	N/A	1,705	964,169	1,171,680
G-III Apparel Group	Equity	N/A	N/A	11,385	211,325	800,935
Gilead Sciences, Incorporated	Equity	N/A	N/A	68,163	5,500,208	7,980,524
Glaukos Corporation	Equity	N/A	N/A	100	1,800	2,898
Glaxosmithkline PLC	Equity	N/A	N/A	29,800	747,938	634,442
Global Brass & Copper Holding	Equity	N/A	N/A	13,980	201,440	237,800
Globant SA	Equity	N/A	N/A	14,980	207,600	455,841
Globe Specialty Metals, Incorporated	Equity	N/A	N/A	82,820	1,437,409	1,465,914
Globus Medical, Incorporated Class A	Equity	N/A	N/A	51,369	802,731	1,318,642
Glycomimetics, Incorporated	Equity	N/A	N/A	36,200	299,067	287,790
Go Ahead Group PLC	Equity	N/A	N/A	14,700	307,129	608,381
Goldman Sachs Group, Incorporated	Equity	N/A	N/A	20,478	3,527,737	4,275,602
Goodyear Tire & Rubber Company	Equity	N/A	N/A	26,030	833,440	784,804
Google, Incorporated Class A	Equity	N/A	N/A	20,889	11,323,994	11,114,851
GPT Group	Equity	N/A	N/A	16,966	58,823	56,026
Graco, Incorporated	Equity	N/A	N/A	36,200	2,298,252	2,571,286
Great Eagle Holdings Limited	Equity	N/A	N/A	9,000	32,337	33,555
Great Plains Energy, Incorporated	Equity	N/A	N/A	123,200	2,656,079	2,976,512
Great Western Bancorp, Incorporated	Equity	N/A	N/A	29,700	643,743	716,067
Greenbriar Cos, Incorporated	Equity	N/A	N/A	11,917	666,873	558,311
Greggs PLC	Equity	N/A	N/A	21,200	1,269,664	394,061

PLUMBERS AND PIPEFITTERS NATIONAL PENSION FUND
ALEXANDRIA, VIRGINIA

SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES
AS OF JUNE 30, 2015

Form 5500, Schedule H, Line 4i

EIN: 52-6152779
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(a)	(b)	(c)	(d)	(e)	(f)
Identity of issuer, borrower, lessor or similar party	Description	Maturity Date	Rate of Interest	Cost	Current Value
<u>Common & Preferred Stocks (continued)</u>					
Group 1 Automotive	Equity	N/A	N/A	5,000 \$	432,768 \$
Grubhub, Incorporated	Equity	N/A	N/A	53,355	1,916,256
Grupo Financiero Banorte	Equity	N/A	N/A	90,762	583,932
Guidewire Software, Incorporated	Equity	N/A	N/A	14,416	512,584
H & E Equipment Services, Incorporated	Equity	N/A	N/A	23,621	371,461
H3 Contingent Value	Equity	N/A	N/A	247,800	-
Hain Celestial Group, Incorporated	Equity	N/A	N/A	12,940	250,100
Halyard Health, Incorporated	Equity	N/A	N/A	14,733	616,747
Hannon Armstrong	Equity	N/A	N/A	22,200	416,752
Hanover Insurance Group, Inc	Equity	N/A	N/A	26,705	1,011,817
Harman Int'l Industries	Equity	N/A	N/A	19,900	2,499,309
Harris Corporation	Equity	N/A	N/A	20,400	754,396
Hartford Financial Services Group, Inc.	Equity	N/A	N/A	144,014	4,939,174
Haynes International, Incorporated	Equity	N/A	N/A	20,740	862,925
HCC Insurance Holdings, Incorporated	Equity	N/A	N/A	48,619	1,260,951
Headwaters, Incorporated	Equity	N/A	N/A	169,902	2,025,936
Health Net, Incorporated	Equity	N/A	N/A	15,140	769,938
Heartland Payment Systems, Incorporated	Equity	N/A	N/A	59,220	2,069,728
Heartware International, Incorporated	Equity	N/A	N/A	14,835	1,118,465
Heico Corporation	Equity	N/A	N/A	15,191	616,890
Heidelbergcement AG	Equity	N/A	N/A	19,205	1,393,161
Heineken NV	Equity	N/A	N/A	4,545	325,370
Heiwa Corporation	Equity	N/A	N/A	21,500	367,960
Helix Energy Solutions Group	Equity	N/A	N/A	79,352	1,509,493
Helmerich & Payne, Incorporated	Equity	N/A	N/A	19,435	1,357,690
Helvetia Holding AG	Equity	N/A	N/A	2,100	375,047
Herbalife Limtied	Equity	N/A	N/A	2,740	144,081
Hercules Technology Growth	Equity	N/A	N/A	56,628	730,733
Heritage Crystal Clean, Incorporated	Equity	N/A	N/A	30,530	369,157
Hersha Hospitality Trust	Equity	N/A	N/A	35,563	808,771
Hess Corporation	Equity	N/A	N/A	13,220	706,136
Hewlett Packard Company	Equity	N/A	N/A	8,620	267,666
Hexagon AB	Equity	N/A	N/A	25,046	544,886
Hilltop Worldwide Holdings	Equity	N/A	N/A	5,600	1,288,917
Hilton Worldwide Holdings, Incorporated	Equity	N/A	N/A	131,800	3,664,813
Hino Motors Limited	Equity	N/A	N/A	5,700	78,100
Hitachi Construction Machine	Equity	N/A	N/A	5,500	98,382
Hitachi Limited	Equity	N/A	N/A	63,000	275,094
HKT Trust and HKT Limited	Equity	N/A	N/A	41,000	48,974
Hokuriku Electric Power Company	Equity	N/A	N/A	8,000	104,087
Home Bancshars, Incorporated	Equity	N/A	N/A	27,045	921,796
Home Depot, Incorporated	Equity	N/A	N/A	40,700	4,325,673
Home Properties Incorporated	Equity	N/A	N/A	24,572	1,493,338
Home Retail Group PLC	Equity	N/A	N/A	72,400	276,023
Honda Motor Company Limited	Equity	N/A	N/A	11,300	458,824
Honeywell International, Incorporated	Equity	N/A	N/A	30,238	2,122,838
Hong Kong Exchanges & Clear	Equity	N/A	N/A	5,300	182,828
Hong Kong Land Holdings Limited	Equity	N/A	N/A	124,000	928,120
Hong Leong Asia Limited	Equity	N/A	N/A	205,000	521,767
Horsehead Holdings Corporation	Equity	N/A	N/A	66,043	813,117
Hospitality Properties Trust	Equity	N/A	N/A	67,700	2,170,559
Howard Hughes Corporation	Equity	N/A	N/A	12,000	1,790,763
Hoya Corporation	Equity	N/A	N/A	1,000	33,845

PLUMBERS AND PIPEFITTERS NATIONAL PENSION FUND
ALEXANDRIA, VIRGINIA

SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES
AS OF JUNE 30, 2015

Form 5500, Schedule H, Line 4i

EIN: 52-6152779
Plan No. 001

(c) Description of investment, including maturity date, rate of interest, collateral, par or maturity value						
(a)	(b)				(d)	(e)
Identity of issuer, borrower, lessor or similar party	Description	Maturity Date	Rate of Interest		Cost	Current Value
<u>Common & Preferred Stocks (continued)</u>						
HSBC Holdings PLC	Equity	N/A	N/A	615,159 \$	5,907,185 \$	5,493,370
HSN, Incorporated	Equity	N/A	N/A	46,560	2,139,778	3,268,046
Huabao International Holdings	Equity	N/A	N/A	744,000	415,403	448,215
Hubsppot, Incorporated	Equity	N/A	N/A	4,700	1,054,095	1,054,095
Huntington Bancshares, Incorporated	Equity	N/A	N/A	208,750	1,422,528	2,154,894
Huntington Ingalls Industries, Incorporated	Equity	N/A	N/A	18,220	1,612,581	2,051,390
Huntsman Corporation	Equity	N/A	N/A	47,000	719,083	1,037,290
Huron Consulting Group, Incorporated	Equity	N/A	N/A	38,910	1,231,362	2,727,202
Hyster Yale Materials Class A	Equity	N/A	N/A	9,400	284,423	651,232
Hyundai Motor Company	Equity	N/A	N/A	2,923	604,518	356,384
Iberdrola SA	Equity	N/A	N/A	105,100	726,835	695,762
Iberibank Corporation	Equity	N/A	N/A	51,908	2,970,446	3,541,683
Idacorp, Incorporated	Equity	N/A	N/A	11,100	417,626	623,154
Idemitsu Kosan Company	Equity	N/A	N/A	4,600	111,823	90,320
IHS, Incorporated Class A	Equity	N/A	N/A	18,400	1,941,596	2,366,792
Illumina, Incorporated	Equity	N/A	N/A	18,299	3,129,312	3,995,770
Imax Corporation	Equity	N/A	N/A	80,015	2,146,380	3,222,204
Immoeast AG	Equity	N/A	N/A	8,127	8,127	8,127
Imperial Tobacco Group	Equity	N/A	N/A	51,283	2,176,059	2,486,713
Implenla AG	Equity	N/A	N/A	3,900	240,899	217,953
Incyte Corporation	Equity	N/A	N/A	7,821	439,618	815,026
Inditex De Diseno Textil SA	Equity	N/A	N/A	27,825	698,460	904,410
ING Groep NV	Equity	N/A	N/A	229,753	3,142,239	3,793,440
Independence Group NL	Equity	N/A	N/A	115,100	399,469	370,318
Industria De Diseno Textile Industries	Equity	N/A	N/A	183,441	2,802,626	2,977,247
Infineon Technologies AG	Equity	N/A	N/A	44,762	519,810	552,363
Infrareit, Incorporated	Equity	N/A	N/A	7,515	197,810	213,125
Ingersoll Rand PLC	Equity	N/A	N/A	65,962	4,060,378	4,447,158
Ingram Micro, Incorporated	Equity	N/A	N/A	20,200	412,451	505,606
Inland Real Estate	Equity	N/A	N/A	57,600	611,209	542,592
Inpex Corporation	Equity	N/A	N/A	13,500	198,461	153,493
Inphi Corporation	Equity	N/A	N/A	9,900	259,670	226,314
Insteel Industries, Incorporated	Equity	N/A	N/A	31,329	629,961	585,852
Integrated Device Technology, Incorporated	Equity	N/A	N/A	46,817	810,018	1,015,929
Intel Corporation	Equity	N/A	N/A	125,450	3,983,148	3,815,562
Intercontinental Exchange, Incorporated	Equity	N/A	N/A	8,232	1,528,430	1,840,758
Interface, Incorporated	Equity	N/A	N/A	15,155	269,486	379,633
International Consolidated Airline	Equity	N/A	N/A	43,472	380,868	338,090
International Paper Company	Equity	N/A	N/A	28,800	1,540,537	1,370,592
Intersect Ent, Incorporated	Equity	N/A	N/A	12,900	151,014	369,327
Intersil Corporation	Equity	N/A	N/A	20,705	308,252	259,020
Intesa San Paolo	Equity	N/A	N/A	620,867	1,770,811	2,241,330
Intuit Software	Equity	N/A	N/A	114,000	6,600,925	11,487,780
Intuitive Surgical, Incorporated	Equity	N/A	N/A	12,200	5,483,452	5,910,900
Invensense, Incorporated	Equity	N/A	N/A	13,095	205,481	197,735
Ironwood Pharmaceuticals, Incorporated	Equity	N/A	N/A	51,275	652,772	618,377
Israel Discount Bank	Equity	N/A	N/A	226,720	389,840	435,241
Isuzu Motors Limited	Equity	N/A	N/A	41,600	582,552	539,552
Italeменти SPA	Equity	N/A	N/A	36,990	276,144	244,131
Itochu Corporation	Equity	N/A	N/A	26,600	324,984	351,450
ITV PLC	Equity	N/A	N/A	360,061	1,037,073	1,472,649
J & J Snack Foods Corporation	Equity	N/A	N/A	3,083	85,499	341,196
Jabil Circuit	Equity	N/A	N/A	61,170	1,320,182	1,302,309

PLUMBERS AND PIPEFITTERS NATIONAL PENSION FUND
ALEXANDRIA, VIRGINIA

SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES
AS OF JUNE 30, 2015

Form 5500, Schedule H, Line 4i

EIN: 52-6152779
Plan No. 001

(c) Description of investment, including maturity date, rate of interest, collateral, par or maturity value						
(a)	(b)				(d)	(e)
Identity of issuer, borrower, lessor or similar party	Description	Maturity Date	Rate of Interest		Cost	Current Value
<u>Common & Preferred Stocks (continued)</u>						
James River Group Holdings Limited	Equity	N/A	N/A	58,305	\$ 1,331,037	\$ 1,508,350
Jamba, Incorporated	Equity	N/A	N/A	38,736	614,627	600,021
Janus Capital Group, Incorporated	Equity	N/A	N/A	183,075	1,817,031	3,134,244
Japan Airlines Company Limited	Equity	N/A	N/A	29,000	895,054	1,011,807
Japan Prime Realty Investment	Equity	N/A	N/A	22	73,859	68,399
Japan Tobacco, Incorporated	Equity	N/A	N/A	15,400	465,709	550,550
Jarden Corporation	Equity	N/A	N/A	92,749	4,011,324	4,799,761
Jardine Strategic Holdings Limited	Equity	N/A	N/A	41,577	542,747	1,254,378
JD.Com, Incorporated	Equity	N/A	N/A	23,247	780,845	792,723
Jenoptik AG	Equity	N/A	N/A	31,700	403,803	383,907
Jetblue Airways	Equity	N/A	N/A	364,420	2,470,044	7,565,359
J Front Retailing Company Limited	Equity	N/A	N/A	4,800	85,727	90,364
Jiangnan Group Limited	Equity	N/A	N/A	1,181,000	379,040	339,750
John Bean Technology	Equity	N/A	N/A	46,897	1,025,040	1,762,858
Johnson & Johnson	Equity	N/A	N/A	120,566	10,868,683	11,750,362
Jones Lang Lasalle, Incorporated	Equity	N/A	N/A	3,570	588,775	610,470
JPM CW17 Idea Cellular	Equity	N/A	N/A	451,373	896,907	857,609
JP Morgan Chase & Company	Equity	N/A	N/A	226,766	11,786,570	15,365,664
J2 Global, Incorporated	Equity	N/A	N/A	11,260	783,669	765,004
Juniper Networks, Incorporated	Equity	N/A	N/A	68,800	1,827,532	1,786,736
JX Holdings, Incorporated	Equity	N/A	N/A	109,376	747,307	472,054
Kaiser Aluminum Corporation	Equity	N/A	N/A	11,485	852,476	954,174
Kamigumi Company Limited	Equity	N/A	N/A	7,000	71,794	65,776
Kaneka Corporation	Equity	N/A	N/A	9,000	56,337	65,817
Kao Corporation	Equity	N/A	N/A	1,400	54,944	65,124
Kar Auction Services, Incorporated	Equity	N/A	N/A	40,517	660,698	1,515,336
Kasukornbank PCL	Equity	N/A	N/A	92,000	454,584	514,811
Kawasaki Kissen Kaisha Limited	Equity	N/A	N/A	32,000	68,333	75,565
KBC Groep NV	Equity	N/A	N/A	23,449	1,456,703	1,564,048
Koom Group PLC	Equity	N/A	N/A	321,000	255,570	471,581
Kddi Corporation	Equity	N/A	N/A	87,200	1,527,446	2,104,741
Kennedy Wilson Holdings, Incorporated	Equity	N/A	N/A	84,497	1,777,088	2,077,781
Kerry Group PLC	Equity	N/A	N/A	17,655	1,246,675	1,308,704
Kerry Properties Limited	Equity	N/A	N/A	17,500	69,295	68,631
Keiyo Bank Limited	Equity	N/A	N/A	74,000	395,796	389,394
Keycorp	Equity	N/A	N/A	288,210	4,048,559	4,328,914
Keyence Corporation	Equity	N/A	N/A	200	91,942	107,800
Keysight Technologies, Incorporated	Equity	N/A	N/A	81,700	2,811,205	2,548,223
K Force, Incorporated	Equity	N/A	N/A	72,137	1,392,620	1,649,773
Kilroy Realty Corporation	Equity	N/A	N/A	54,237	3,625,773	3,642,015
Kimball International, Incorporated Class B	Equity	N/A	N/A	46,315	416,903	563,190
Kingboard Chemicals Holding	Equity	N/A	N/A	105,600	425,168	182,821
Kirby Corporation	Equity	N/A	N/A	9,013	340,353	690,937
Kirin Holdings Company Limited	Equity	N/A	N/A	15,800	215,634	217,460
Kite Pharma, Incorporated	Equity	N/A	N/A	14,415	759,149	878,883
Kite Realty Group Trust	Equity	N/A	N/A	22,926	599,065	560,999
KLX, Incorporated	Equity	N/A	N/A	8,668	351,529	382,519
Knoll, Incorporated	Equity	N/A	N/A	31,260	541,913	782,438
Knight Transportation, Incorporated	Equity	N/A	N/A	16,430	406,895	439,338
Kobe Steel Limited	Equity	N/A	N/A	92,000	136,185	154,855
Kohls Corporation	Equity	N/A	N/A	41,510	2,255,727	2,598,941
Komatsu Limited	Equity	N/A	N/A	7,700	176,124	154,585
Konica Minolta Holdings, Incorporated	Equity	N/A	N/A	19,500	161,126	227,687

PLUMBERS AND PIPEFITTERS NATIONAL PENSION FUND
ALEXANDRIA, VIRGINIA

SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES
AS OF JUNE 30, 2015

Form 5500, Schedule H, Line 4i

EIN: 52-6152779
Plan No. 001

		(c) Description of investment, including maturity date, rate of interest, collateral, par or maturity value			Plan No.	001
(a)	(b)				(e)	
	Identity of issuer, borrower, lessor or similar party	Description	Maturity Date	Rate of Interest	(d) Cost	Current Value
	<u>Common & Preferred Stocks (continued)</u>					
	Koninklijke Ahold	Equity	N/A	N/A	52,100 \$	704,961 \$ 975,807
	Koninklijke Philips NV	Equity	N/A	N/A	19,209	650,586 488,695
	Kroger Company	Equity	N/A	N/A	60,500	1,432,021 4,386,855
	Kubota Corporation	Equity	N/A	N/A	74,000	1,110,947 1,161,060
	Kurita Water Industries	Equity	N/A	N/A	5,500	123,846 128,259
	Kyocera Corporation	Equity	N/A	N/A	4,600	210,081 239,162
	Kyorin Company Limited	Equity	N/A	N/A	32,000	495,527 652,890
	Kyowa Exeo Corporation	Equity	N/A	N/A	30,000	272,856 349,553
	L 3 Communications Holdings, Incorporated	Equity	N/A	N/A	8,500	1,001,297 963,730
	L Brands, Incorporated	Equity	N/A	N/A	128,500	6,680,021 11,016,305
	Lafarge SA	Equity	N/A	N/A	7,050	458,531 465,609
	La Z Boy Incorporated	Equity	N/A	N/A	12,526	175,349 329,935
	Laboratory Corporation of America Holdings	Equity	N/A	N/A	6,600	659,908 800,052
	Laclede Group, Incorporated	Equity	N/A	N/A	23,145	1,210,002 1,204,929
	Lakeland Bancorp, Incorporated	Equity	N/A	N/A	141,522	1,399,329 1,682,697
	Lam Research Corporation	Equity	N/A	N/A	57,020	4,699,837 4,638,577
	Lands End, Incorporated	Equity	N/A	N/A	38,505	1,466,272 956,079
	Landstar Systems, Incorporated	Equity	N/A	N/A	73,800	3,893,808 4,935,006
	Lannett, Incorporated	Equity	N/A	N/A	10,500	673,035 624,120
	Larson & Toubro	Equity	N/A	N/A	15,882	435,917 416,108
	Las Vegas Sands Corporation	Equity	N/A	N/A	27,690	2,054,875 1,455,663
	Lattice Semiconductor Corporation	Equity	N/A	N/A	50,400	213,454 296,856
	LDR Holding Corporation	Equity	N/A	N/A	21,371	452,079 924,296
	Lear Corporation	Equity	N/A	N/A	27,230	1,841,914 3,056,840
	Legacy Texas Financial Group	Equity	N/A	N/A	10,620	282,570 320,724
	Lend Lease Group	Equity	N/A	N/A	72,244	692,614 833,696
	Lending Club Corporation	Equity	N/A	N/A	20,567	397,004 303,363
	Leroy Seafood Group	Equity	N/A	N/A	4,801	174,432 156,758
	Level 3 Communications, Incorporated	Equity	N/A	N/A	68,200	3,714,683 3,592,024
	Levy Acquisition Corporation	Equity	N/A	N/A	26,310	389,475 400,438
	Lexmark International, Incorporated	Equity	N/A	N/A	48,000	2,750,705 2,121,600
	Lexington Realty Trust	Equity	N/A	N/A	93,500	668,744 792,880
	Liberbank SA	Equity	N/A	N/A	178,653	140,729 148,061
	Liberty Global PLC	Equity	N/A	N/A	82,330	3,324,027 4,168,368
	Libbey, Incorporated	Equity	N/A	N/A	30,617	851,252 1,265,401
	Liberty Ventures	Equity	N/A	N/A	14,799	333,547 581,157
	Lilly Eli & Company	Equity	N/A	N/A	23,300	1,508,596 1,945,317
	Lincoln National Corporation	Equity	N/A	N/A	145,072	3,893,856 8,591,164
	LinkedIn Corporation	Equity	N/A	N/A	26,241	5,039,023 5,422,178
	Link REIT	Equity	N/A	N/A	9,500	64,031 55,639
	Lithia Motors, Incorporated Class A	Equity	N/A	N/A	8,676	719,216 981,776
	Littelfuse, Incorporated	Equity	N/A	N/A	17,315	865,343 1,643,020
	Lloyds Banking Group PLC	Equity	N/A	N/A	1,624,434	- 2,187,089
	Lonza AG-Reg	Equity	N/A	N/A	9,446	668,772 1,261,891
	L'Oreal	Equity	N/A	N/A	5,291	659,542 966,137
	Louisiana Pacific Corporation	Equity	N/A	N/A	29,810	514,447 507,664
	Lululemon Athletica, Incorporated	Equity	N/A	N/A	46,700	3,201,813 3,049,510
	Luxfer Holdings PLC	Equity	N/A	N/A	41,265	473,276 536,445
	Luxoft Holding, Incorporated Class A	Equity	N/A	N/A	21,743	798,766 1,229,567
	Lyondellbasell Industries NV	Equity	N/A	N/A	7,800	613,938 807,456
	M&T Bank Corporation	Equity	N/A	N/A	29,300	2,782,258 3,660,449
	Macquarie Group Limited	Equity	N/A	N/A	25,989	974,105 1,215,331
	Macquarie Infrastructure Company LLC	Equity	N/A	N/A	13,110	767,783 1,083,279

PLUMBERS AND PIPEFITTERS NATIONAL PENSION FUND
ALEXANDRIA, VIRGINIA

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Identity of issuer, borrower, lessor or similar party	Description	Maturity Date	Rate of Interest		Cost	Current Value
<u>Common & Preferred Stocks (continued)</u>						
Macy's, Incorporated	Equity	N/A	N/A	66,063 \$	3,189,427 \$	4,457,271
Madden Steven Limited	Equity	N/A	N/A	21,975	553,127	940,091
Man Group PLC	Equity	N/A	N/A	567,280	1,626,149	1,398,498
Manhattan Assocs, Incorporated	Equity	N/A	N/A	20,862	767,511	1,244,418
Mapletree Commercial Trust	Equity	N/A	N/A	74,000	12,350	80,491
Mapletree Industrial Trust	Equity	N/A	N/A	96,200	110,655	111,424
Mapletree Logistics Trust	Equity	N/A	N/A	32,000	27,013	26,848
Marathon Oil Corporation	Equity	N/A	N/A	144,975	4,490,575	3,847,636
Marathon Petroleum Corporation	Equity	N/A	N/A	99,860	3,685,827	5,223,677
Marinemax, Incorporated	Equity	N/A	N/A	33,087	518,564	777,875
Marketaxess Holdings, Incorporated	Equity	N/A	N/A	14,021	737,910	1,300,728
Marketo, Incorporated	Equity	N/A	N/A	25,810	861,904	724,229
Marriott International, Incorporated	Equity	N/A	N/A	44,322	2,810,020	3,297,114
Marriott Vacations Worldwide Corporation	Equity	N/A	N/A	29,946	1,158,134	2,747,546
Marsh & McLennan Companies, Incorporated	Equity	N/A	N/A	59,334	2,761,721	3,364,238
Marubeni Corporation	Equity	N/A	N/A	171,800	873,853	985,864
Marvell Technology Group Limited	Equity	N/A	N/A	208,600	2,955,937	2,750,391
Masonite International Corporation	Equity	N/A	N/A	42,988	2,373,754	3,013,889
Mastercard, Incorporated Class A	Equity	N/A	N/A	83,614	6,359,720	7,816,237
Matsushita Electric Ind	Equity	N/A	N/A	12,400	143,007	170,369
Mcgrath Rentcorp	Equity	N/A	N/A	17,206	456,340	523,579
McGraw Hill Financial, Incorporated	Equity	N/A	N/A	93,796	7,956,749	9,421,808
Mckesson Corporation	Equity	N/A	N/A	31,262	4,197,925	7,028,010
Mediobanca SPA	Equity	N/A	N/A	48,578	442,201	476,313
Medipal Holdings Corporation	Equity	N/A	N/A	33,400	399,697	545,000
Medivation, Incorporated	Equity	N/A	N/A	14,400	1,851,247	1,644,480
Medtronic PLC	Equity	N/A	N/A	77,981	5,866,854	5,778,392
Merck KGAA	Equity	N/A	N/A	7,831	691,959	795,003
Meritor, Incorporated	Equity	N/A	N/A	59,800	612,043	784,576
Metaldyne Performance Group	Equity	N/A	N/A	41,819	775,362	759,015
Metcash Limited	Equity	N/A	N/A	132,600	503,406	112,975
Methode Electronics, Incorporated	Equity	N/A	N/A	25,105	432,708	689,132
Metlife, Incorporated	Equity	N/A	N/A	51,731	2,594,107	2,896,419
MFA Financial, Incorporated	Equity	N/A	N/A	416,100	3,248,250	3,074,979
MGIC Investment Corporation	Equity	N/A	N/A	272,935	2,258,056	3,106,000
Michelin	Equity	N/A	N/A	9,384	1,041,037	986,258
Micrel, Incorporated	Equity	N/A	N/A	9,825	153,506	136,568
Micron Technology, Incorporated	Equity	N/A	N/A	73,500	2,785,628	3,485,738
Microsemi Corporation	Equity	N/A	N/A	29,631	709,033	1,035,603
Microsoft Corporation	Equity	N/A	N/A	167,807	7,333,848	7,408,679
Mid Amer Apt Communities Incorporated	Equity	N/A	N/A	15,882	911,533	1,156,368
Middleby Corporation	Equity	N/A	N/A	125,243	6,924,874	14,056,022
Milacron Holdings Corporation	Equity	N/A	N/A	24,740	494,800	486,883
Mineral Resources Limited	Equity	N/A	N/A	43,800	407,435	223,040
Minerals Technologies, Incorporated	Equity	N/A	N/A	15,407	631,469	1,049,679
Miraca Holdings, Incorporated	Equity	N/A	N/A	6,500	195,969	324,735
Mitsubishi Chemical Holding	Equity	N/A	N/A	49,100	266,833	309,119
Mitsubishi Electric Corporation	Equity	N/A	N/A	72,900	1,174,472	1,311,709
Mitsubishi Estate Company Limited	Equity	N/A	N/A	7,000	211,101	150,799
Mitsubishi Heavy Industries Limited	Equity	N/A	N/A	30,000	124,188	183,900
Mitsubishi Materials Corporation	Equity	N/A	N/A	54,000	177,298	207,378
Mitsubishi Tanabe Pharma	Equity	N/A	N/A	11,500	156,683	172,427
Mitsubishi UFJ Financial Group	Equity	N/A	N/A	349,500	2,972,577	2,512,479

PLUMBERS AND PIPEFITTERS NATIONAL PENSION FUND
ALEXANDRIA, VIRGINIA

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EIN: 52-6152779
Plan No. 001

(c) Description of investment, including maturity date, rate of interest, collateral, par or maturity value					(e)	
(a)	(b)				(d)	(e)
Identity of issuer, borrower, lessor or similar party	Description	Maturity Date	Rate of Interest		Cost	Current Value
<u>Common & Preferred Stocks (continued)</u>						
Mitsubishi UFJ Lease & Finance	Equity	N/A	N/A	22,500 \$	118,211 \$	123,177
Mitsui Fudosan Company Limited	Equity	N/A	N/A	5,000	115,641	140,009
Mitsui Mining & Smelting Company	Equity	N/A	N/A	66,100	884,695	897,914
Mizuho Financial Group, Incorporated	Equity	N/A	N/A	841,000	1,961,200	1,821,009
MKS Instrs, Incorporated	Equity	N/A	N/A	45,205	1,463,111	1,715,078
Moelis & Company	Equity	N/A	N/A	4,100	130,175	117,711
Monarch Casino & Resort, Incorporated	Equity	N/A	N/A	21,562	368,485	443,315
Mondelez International	Equity	N/A	N/A	91,700	3,447,457	3,772,538
Mondi PLC	Equity	N/A	N/A	61,693	1,202,027	1,328,972
Monolithic Power Systems, Incorporated	Equity	N/A	N/A	8,165	389,131	414,047
Monotype Imaging Holdings, Incorporated	Equity	N/A	N/A	12,140	162,837	292,695
Monsanto Company	Equity	N/A	N/A	33,636	4,082,065	3,585,261
Moody's Corporation	Equity	N/A	N/A	26,300	2,494,141	2,839,348
Moog, Incorporated Class A	Equity	N/A	N/A	15,261	835,666	1,078,647
Morgan Stanley	Equity	N/A	N/A	205,364	6,849,363	7,966,070
Morrison Supermarkets	Equity	N/A	N/A	267,800	1,233,335	776,620
Mosaic Company	Equity	N/A	N/A	30,900	1,560,473	1,447,665
MS & AD Insurance	Equity	N/A	N/A	6,500	194,352	202,513
Muenchener Rueckver AG	Equity	N/A	N/A	6,300	1,194,390	1,125,180
Murata Manufacturing Company	Equity	N/A	N/A	1,000	110,939	174,990
Murphy Oil Corporation	Equity	N/A	N/A	65,300	3,240,320	2,714,521
Myer Holdings Limited	Equity	N/A	N/A	205,700	405,078	194,417
MYR Group, Incorporated	Equity	N/A	N/A	30,775	566,300	952,794
Myriad Genetics, Incorporated	Equity	N/A	N/A	113,300	3,360,798	3,851,067
Nabors Industries Limited	Equity	N/A	N/A	76,020	1,332,904	1,096,969
Nabtesco Corporation	Equity	N/A	N/A	34,100	770,033	855,391
NACCO Industries, Incorporated	Equity	N/A	N/A	4,700	138,829	285,572
National Australia Bank Limited	Equity	N/A	N/A	34,839	919,806	886,652
National Cinemedia, Incorporated	Equity	N/A	N/A	165,074	2,506,508	2,634,581
National General Holdings	Equity	N/A	N/A	32,810	644,244	683,432
National Oilwell Varco, Incorporated	Equity	N/A	N/A	9,440	463,551	455,763
National Retail Properties, Incorporated	Equity	N/A	N/A	19,182	408,061	671,562
Natural Gas Services Group, Incorporated	Equity	N/A	N/A	15,448	381,588	352,523
Natus Medical, Incorporated	Equity	N/A	N/A	22,301	568,210	949,131
Navient Corporation	Equity	N/A	N/A	35,100	252,697	639,171
NCI Building Systems, Incorporated	Equity	N/A	N/A	95,129	1,538,652	1,433,594
Nelnet, Incorporated	Equity	N/A	N/A	28,610	1,127,563	1,239,099
Nestle SA	Equity	N/A	N/A	63,567	3,750,556	4,584,452
Neopost SA	Equity	N/A	N/A	6,700	484,055	288,286
Netflix, Incorporated	Equity	N/A	N/A	8,433	3,666,663	5,539,975
New Media Investment Group	Equity	N/A	N/A	68,730	1,185,926	1,232,329
New Relic, Incorporated	Equity	N/A	N/A	11,460	393,316	403,277
New World Development	Equity	N/A	N/A	102,000	127,626	133,428
Next Group PLC	Equity	N/A	N/A	4,214	252,889	493,280
Nichi-Iko Pharmaceutical Company	Equity	N/A	N/A	15,200	243,636	412,959
Nichirei Corporation	Equity	N/A	N/A	76,000	341,963	524,737
Nidec Corporation	Equity	N/A	N/A	300	19,909	22,466
Nike, Incorporated Class B	Equity	N/A	N/A	90,038	7,069,551	9,725,905
Nimble Storage, Incorporated	Equity	N/A	N/A	58,630	1,455,180	1,645,158
Nippon Electric Gas Company	Equity	N/A	N/A	27,000	14,627	136,781
Nippon Konpo Unyu Soko Company	Equity	N/A	N/A	20,200	363,058	352,553
Nippon Steel & Sumitomo Metal Corporation	Equity	N/A	N/A	99,400	264,323	257,789
Nippon Telegraph & Telephone	Equity	N/A	N/A	24,500	1,141,120	834,960

PLUMBERS AND PIPEFITTERS NATIONAL PENSION FUND
ALEXANDRIA, VIRGINIA

SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES
AS OF JUNE 30, 2015

Form 5500, Schedule H, Line 4i

EIN: 52-6152779
Plan No. 001

(c) Description of investment, including maturity date, rate of interest, collateral, par or maturity value						
(a)	(b)				(d)	(e)
Identity of issuer, borrower, lessor or similar party	Description	Maturity Date	Rate of Interest		Cost	Current Value
<u>Common & Preferred Stocks (continued)</u>						
Nippon Yusen Kabushiki Kaish	Equity	N/A	N/A	58,000	\$ 170,755	\$ 161,604
Nipro Corporation	Equity	N/A	N/A	10,300	98,334	105,453
Nissan Motor Company Limited	Equity	N/A	N/A	110,000	1,024,773	1,145,973
Nisshin Seifun Group, Incorporated	Equity	N/A	N/A	5,800	72,937	77,153
Nitto Kogyo Corporation	Equity	N/A	N/A	20,300	336,173	457,138
Nivalis Therapeutics, Incorporated	Equity	N/A	N/A	6,200	89,206	93,930
NKSJ Holdings, Incorporated	Equity	N/A	N/A	1,200	30,935	44,040
Noble Corporation PLC	Equity	N/A	N/A	263,610	6,517,304	4,056,958
Nokia OYJ	Equity	N/A	N/A	147,038	1,044,137	1,007,210
Nomura Real Estate Holdings	Equity	N/A	N/A	5,900	104,824	123,896
Nomura Securities Company Limited	Equity	N/A	N/A	23,300	177,332	158,132
Nordstrom, Incorporated	Equity	N/A	N/A	70,600	4,057,961	5,259,700
Northrop Grumman Corporation	Equity	N/A	N/A	40,840	3,735,157	6,478,449
Northwestern Corporation	Equity	N/A	N/A	26,122	1,042,537	1,273,448
Novartis AG	Equity	N/A	N/A	55,181	3,861,928	5,424,292
Novavax, Incorporated	Equity	N/A	N/A	117,849	372,365	1,312,838
Novo Nordisk A/S	Equity	N/A	N/A	134,764	6,021,539	7,370,237
NRG Yield, Incorporated Class A	Equity	N/A	N/A	14,360	195,163	315,058
NTT Docomo, Incorporated	Equity	N/A	N/A	51,200	795,124	980,617
Nuplex Industries Limited	Equity	N/A	N/A	4,865	14,144	13,846
NVR, Incorporated	Equity	N/A	N/A	180	245,198	241,200
NXP Semiconductors	Equity	N/A	N/A	54,992	4,026,360	5,400,214
Occidental Petroleum Corporation	Equity	N/A	N/A	79,020	6,246,418	6,145,385
Oceaneering International, Incorporated	Equity	N/A	N/A	6,050	285,871	281,870
Ocular Therapeutix, Incorporated	Equity	N/A	N/A	22,500	291,851	473,175
Oil States International, Incorporated	Equity	N/A	N/A	48,000	2,662,390	1,787,040
Old Dominion Freight Lines, Incorporated	Equity	N/A	N/A	36,929	1,977,756	2,533,514
Omega Healthcare Investors, Incorporated	Equity	N/A	N/A	54,606	1,398,536	1,874,624
Omnova Solutions, Incorporated	Equity	N/A	N/A	110,670	823,764	828,918
Omnicare, Incorporated	Equity	N/A	N/A	740	41,367	69,745
On Assignment, Incorporated	Equity	N/A	N/A	15,567	605,819	611,472
Onebeacon Insurance Group Limited	Equity	N/A	N/A	53,575	759,949	777,373
Open Text Corporation	Equity	N/A	N/A	174,100	6,169,225	7,056,273
Oracle Corporation	Equity	N/A	N/A	34,790	1,426,884	1,404,800
Orexigen Therapeutics, Incorporated	Equity	N/A	N/A	72,266	504,341	357,717
Oriflame Cosmetics SA	Equity	N/A	N/A	9,100	315,303	139,213
Orix Corporation	Equity	N/A	N/A	97,100	1,382,256	1,444,777
Orora Limited	Equity	N/A	N/A	55,997	93,450	93,515
Osaka Gas Company Limited	Equity	N/A	N/A	40,000	148,273	157,960
Oshkosh Corporation Class B	Equity	N/A	N/A	12,500	455,480	529,750
Otonomy, Incorporated	Equity	N/A	N/A	24,765	641,207	569,347
Otsuka Holdings Company	Equity	N/A	N/A	17,100	555,898	542,925
Oversea Chinese Banking Corporation	Equity	N/A	N/A	12,500	97,913	93,000
Owens & Minor, Incorporated	Equity	N/A	N/A	21,700	728,290	737,800
Owens Ill, Incorporated	Equity	N/A	N/A	173,300	4,743,149	3,975,502
OZ Minerals Limited	Equity	N/A	N/A	16,710	64,538	51,313
Pacific Andes Resources	Equity	N/A	N/A	1,533,000	434,271	70,564
Pacific Textiles Holdings	Equity	N/A	N/A	28,000	35,692	47,666
Packging Corporation	Equity	N/A	N/A	44,200	2,991,907	2,762,058
Pact Group Holdings Limited	Equity	N/A	N/A	8,901	31,919	32,140
Pacwest Bancorp	Equity	N/A	N/A	41,809	1,256,716	1,954,989
Palo Alto Networks, Incorporated	Equity	N/A	N/A	21,430	1,775,057	3,743,821
Pandora A/S	Equity	N/A	N/A	13,660	1,080,748	1,467,676

PLUMBERS AND PIPEFITTERS NATIONAL PENSION FUND
ALEXANDRIA, VIRGINIA

SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES
AS OF JUNE 30, 2015

Form 5500, Schedule H, Line 4i

EIN: 52-6152779
Plan No. 001

(c) Description of investment, including maturity date, rate of interest, collateral, par or maturity value		(d)		(e)	
(a)	(b)	(c)	(d)	(e)	(f)
Identity of issuer, borrower, lessor or similar party	Description	Maturity Date	Rate of Interest	Cost	Current Value
<u>Common & Preferred Stocks (continued)</u>					
Panoramic Resources Limited	Equity	N/A	N/A	169,800 \$	583,982 \$ 56,034
Papa John's International, Incorporated	Equity	N/A	N/A	23,477	1,407,813 1,775,096
Paramount Bed Holdings Company Limited	Equity	N/A	N/A	7,800	256,879 230,396
Pargesa Holding SA	Equity	N/A	N/A	6,100	444,989 406,870
Parker Drilling Company	Equity	N/A	N/A	148,545	738,283 493,169
Paperlinx Limited	Equity	N/A	N/A	115,200	284,957 2,221
Partnerre Limited	Equity	N/A	N/A	9,200	714,557 1,182,200
Pattern Energy Group, Incorporated	Equity	N/A	N/A	21,940	557,461 622,657
Paychex, Incorporated	Equity	N/A	N/A	51,900	1,933,882 2,433,072
PDC Energy, Incorporated	Equity	N/A	N/A	37,564	1,576,946 2,019,761
PDF Solutions, Incorporated	Equity	N/A	N/A	37,370	716,494 597,920
Peapack Gladstone Financial Corporation	Equity	N/A	N/A	18,605	350,921 413,403
Pebblebrook Hotel Trust	Equity	N/A	N/A	57,666	1,939,403 2,472,718
Perficient, Incorporated	Equity	N/A	N/A	42,129	454,563 810,562
Petrofac Limited	Equity	N/A	N/A	21,200	435,534 309,701
Peugeot SA	Equity	N/A	N/A	41,721	610,619 857,927
Pfizer, Incorporated	Equity	N/A	N/A	438,560	12,910,143 14,704,917
PG&E Corporation	Equity	N/A	N/A	96,100	4,157,987 4,718,510
Philip Morris International	Equity	N/A	N/A	44,400	3,805,148 3,559,548
Physicians Realty Trust	Equity	N/A	N/A	82,840	1,412,866 1,272,422
Piedmont Office Realty Trust	Equity	N/A	N/A	32,800	566,559 576,952
Pilgrim's Pride Corporation	Equity	N/A	N/A	6,420	199,919 147,467
Pinnacle Financial	Equity	N/A	N/A	35,079	857,514 1,907,245
Pinnacle West Capital Corporation	Equity	N/A	N/A	79,600	3,347,586 4,528,444
Pitney Bowes, Incorporated	Equity	N/A	N/A	35,900	532,862 747,079
Plantronics, Incorporated	Equity	N/A	N/A	97,053	4,476,527 5,465,054
Platform Specialty Products	Equity	N/A	N/A	89,700	2,427,717 2,294,526
Plenus Company Limited	Equity	N/A	N/A	20,300	278,687 365,743
Plexus Corporation	Equity	N/A	N/A	202,230	5,965,608 8,873,852
Plus500 Limited	Equity	N/A	N/A	38,761	357,042 237,521
Ply Gem Holdings, Incorporated	Equity	N/A	N/A	12,900	179,273 152,091
PNM Res, Incorporated	Equity	N/A	N/A	32,510	898,716 799,746
Poly Property Group Company	Equity	N/A	N/A	275,000	163,955 133,037
Popeyes Louisiana Kitchen	Equity	N/A	N/A	10,525	175,336 631,395
Popular, Incorporated	Equity	N/A	N/A	36,690	1,258,692 1,058,873
Postnl NV	Equity	N/A	N/A	98,300	432,176 436,935
Portland General Electric Company	Equity	N/A	N/A	26,050	606,828 863,818
Portola Pharmaceuticals, Incorporated	Equity	N/A	N/A	28,420	678,409 1,294,531
Post Holdings, Incorporated	Equity	N/A	N/A	93,650	4,078,792 5,050,544
Power Assets Holdings Limited	Equity	N/A	N/A	10,700	96,480 97,592
Power Integrations, Incorporated	Equity	N/A	N/A	77,370	3,921,482 3,495,577
PRA Health Sciences, Incorporated	Equity	N/A	N/A	28,122	584,618 1,021,672
Premier Oil PLC	Equity	N/A	N/A	96,300	535,226 225,603
Press Ganey Holdings, Incorporated	Equity	N/A	N/A	18,880	518,846 541,290
Price T Rowe Group, Incorporated	Equity	N/A	N/A	12,100	999,736 940,533
Priceline Group, Incorporated	Equity	N/A	N/A	4,010	4,879,689 4,616,994
Primary Health Care Limited	Equity	N/A	N/A	104,400	450,499 405,971
Primerica Incorporated	Equity	N/A	N/A	14,663	368,346 669,952
Primoris Services Corporation	Equity	N/A	N/A	43,787	686,504 866,983
Principal Financial Group	Equity	N/A	N/A	17,500	478,811 897,575
Privatebancorp, Incorporated	Equity	N/A	N/A	44,580	1,659,158 1,775,176
Proassurance Corporation	Equity	N/A	N/A	19,475	542,686 899,940
Proctor & Gamble Company	Equity	N/A	N/A	35,953	2,727,437 2,812,963

PLUMBERS AND PIPEFITTERS NATIONAL PENSION FUND
ALEXANDRIA, VIRGINIA

SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES
AS OF JUNE 30, 2015

Form 5500, Schedule H, Line 4i

EIN: 52-6152779
Plan No. 001

		(c) Description of investment, including maturity date, rate of interest, collateral, par or maturity value				
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	Identity of issuer, borrower, lessor or similar party	Description	Maturity Date	Rate of Interest	Cost	Current Value
	<u>Common & Preferred Stocks (continued)</u>					
	Prosperity Bancshares, Incorporated	Equity	N/A	N/A	26,470 \$	1,094,878 \$
	Prosperity Real Estate Investment Trust	Equity	N/A	N/A	66,000	23,670
	Prudential Financial, Incorporated	Equity	N/A	N/A	2,320	196,008
	Prudential PLC	Equity	N/A	N/A	66,050	696,007
	PTC Therapeutics, Incorporated	Equity	N/A	N/A	16,485	274,315
	Public Service Enterprise Group, Incorporated	Equity	N/A	N/A	63,800	2,055,676
	Qantas Airways Limited	Equity	N/A	N/A	70,913	149,819
	QBE Insurance Group Limited	Equity	N/A	N/A	3,382	39,270
	QEP Resources Incorporated	Equity	N/A	N/A	123,849	3,545,673
	Qlik technologies, Incorporated	Equity	N/A	N/A	106,500	2,349,839
	Quest Diagnostics, Incorporated	Equity	N/A	N/A	28,200	2,053,078
	Quidel Corporation	Equity	N/A	N/A	63,290	1,616,060
	Rackspace Hosting, Incorporated	Equity	N/A	N/A	8,670	324,575
	Radware Limited	Equity	N/A	N/A	131,205	2,391,769
	Ralph Lauren Corporation	Equity	N/A	N/A	30,900	5,469,680
	Raven Industries, Incorporated	Equity	N/A	N/A	32,616	651,448
	Raymond James Financial, Incorporated	Equity	N/A	N/A	54,100	3,083,024
	Raytheon Company	Equity	N/A	N/A	11,700	615,653
	RBC Bearings, Incorporated	Equity	N/A	N/A	18,398	675,738
	Realpage, Incorporated	Equity	N/A	N/A	117,000	2,342,536
	Reckitt Benckiser Group PLC	Equity	N/A	N/A	19,693	1,681,007
	Red Electrica Corporation SA	Equity	N/A	N/A	16,690	1,359,543
	Red Hat, Incorporated	Equity	N/A	N/A	51,483	2,733,747
	Redrow PLC	Equity	N/A	N/A	83,953	563,897
	Regal Entertainment Group	Equity	N/A	N/A	47,152	650,780
	Regeneron Pharmaceuticals, Incorporated	Equity	N/A	N/A	14,039	5,758,136
	Regions Financial Corporation	Equity	N/A	N/A	55,400	1,059,118
	Regulus Therapeutics, Incorporated	Equity	N/A	N/A	29,395	410,176
	Reinsurance Group Of America	Equity	N/A	N/A	22,452	1,299,759
	Reliance Steel & Aluminum Company	Equity	N/A	N/A	7,900	433,204
	Religare Health Trust	Equity	N/A	N/A	50,500	36,947
	Relx NV	Equity	N/A	N/A	22,187	521,363
	Relypsa, Incorporated	Equity	N/A	N/A	18,700	205,700
	Remy International, Incorporated	Equity	N/A	N/A	49,185	977,254
	Renaissance Holdings Limited	Equity	N/A	N/A	7,960	830,834
	Renault SA	Equity	N/A	N/A	21,882	1,772,547
	Repsol SA	Equity	N/A	N/A	192,048	2,227,080
	Republic Services, Incorporated	Equity	N/A	N/A	33,800	1,173,448
	Resona Holdings, Incorporated	Equity	N/A	N/A	236,700	1,192,514
	Retail Opportunity Investment	Equity	N/A	N/A	87,329	1,292,845
	Revlon, Incorporated Class A	Equity	N/A	N/A	15,705	576,191
	Rexnord Corporation	Equity	N/A	N/A	22,955	597,435
	Rheinmetall AG	Equity	N/A	N/A	8,200	732,730
	RHI AG	Equity	N/A	N/A	14,343	385,319
	Ricoh Company Limited	Equity	N/A	N/A	12,800	121,898
	Rieter Holding AG	Equity	N/A	N/A	2,500	410,988
	RLJ Lodging Trust	Equity	N/A	N/A	18,100	439,216
	Rio Tinto PLC	Equity	N/A	N/A	53,965	2,737,997
	Roche Holding AG	Equity	N/A	N/A	10,872	2,053,002
	Rock-Tenn Company Class A	Equity	N/A	N/A	59,410	3,177,101
	Rogers Corporation	Equity	N/A	N/A	51,502	1,909,556
	Rollins, Incorporated	Equity	N/A	N/A	15,765	104,146
	Rowan Companies PLC	Equity	N/A	N/A	32,800	661,895

PLUMBERS AND PIPEFITTERS NATIONAL PENSION FUND
ALEXANDRIA, VIRGINIA

SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES
AS OF JUNE 30, 2015

Form 5500, Schedule H, Line 4i

EIN: 52-6152779
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Identity of issuer, borrower, lessor or similar party	Description	Maturity Date	Rate of Interest			Cost	Current Value
<u>Common & Preferred Stocks (continued)</u>							
Royal Caribbean Cruises Limited	Equity	N/A	N/A	116,500	\$	4,880,291	\$ 9,167,385
Royal Dutch Shell PLC	Equity	N/A	N/A	187,004		4,156,886	5,328,131
RPX Corporation	Equity	N/A	N/A	57,310		896,872	968,387
RSP Permian, Incorporated	Equity	N/A	N/A	58,310		1,409,102	1,639,094
Rush Enterprises Incorporated Class A	Equity	N/A	N/A	19,724		431,716	516,966
Ryder System, Incorporated	Equity	N/A	N/A	31,072		2,018,725	2,714,761
Saab Ab-B	Equity	N/A	N/A	19,600		168,594	479,251
Sabra Health Care Reit, Incorporated	Equity	N/A	N/A	13,160		332,462	338,738
Safeguard Scientifics, Incorporated	Equity	N/A	N/A	26,113		438,573	508,159
Safran SA	Equity	N/A	N/A	24,638		911,514	1,669,763
Saft Groupe SA	Equity	N/A	N/A	10,100		411,149	394,100
SAI Global Limited	Equity	N/A	N/A	9,913		30,894	31,894
Saia, Incorporated	Equity	N/A	N/A	8,949		374,142	351,606
Sainsbury J PLC	Equity	N/A	N/A	163,800		746,030	701,064
Salesforce.Com	Equity	N/A	N/A	112,956		6,513,434	7,865,126
Sally Beauty Company	Equity	N/A	N/A	22,645		424,933	715,129
Salmar ASA	Equity	N/A	N/A	30,603		544,372	448,870
Salzgitter AG	Equity	N/A	N/A	10,351		393,609	373,983
Sanchez Energy Corporation	Equity	N/A	N/A	15,085		192,020	147,833
Sands China Limited	Equity	N/A	N/A	136,000		795,069	469,200
Sankyo Company Limited	Equity	N/A	N/A	1,700		68,328	60,216
Sankyu, Incorporated	Equity	N/A	N/A	97,000		465,489	530,236
Sanofi	Equity	N/A	N/A	60,085		5,601,768	5,984,466
Sap SE	Equity	N/A	N/A	24,361		1,924,858	1,713,309
SBA Communications Corporation	Equity	N/A	N/A	23,256		2,071,297	2,673,742
Scana Corporation	Equity	N/A	N/A	21,100		990,885	1,068,715
Schneider Electric SA	Equity	N/A	N/A	12,920		831,480	901,816
Schwab Charles Corporation	Equity	N/A	N/A	50,300		1,676,087	1,642,295
Scor	Equity	N/A	N/A	18,300		476,559	666,120
Seaboard Corporation	Equity	N/A	N/A	94		326,297	338,306
Seacoast Banking Corporation of Florida	Equity	N/A	N/A	87,035		1,149,353	1,375,153
Seacor Holdings, Incorporated	Equity	N/A	N/A	34,300		2,661,832	2,433,242
Seagate Technology	Equity	N/A	N/A	210,300		8,734,352	9,989,250
Securitas AB-B	Equity	N/A	N/A	31,600		359,823	417,783
Sekisui Chemical Company Limited	Equity	N/A	N/A	134,000		1,119,402	1,645,642
Sekisui House Limited	Equity	N/A	N/A	99,500		1,340,973	1,580,488
Select Comfort Corporation	Equity	N/A	N/A	188,500		4,101,355	5,668,195
Select Harvests Limited	Equity	N/A	N/A	2,214		18,956	18,376
Sembcorp Industries Limited	Equity	N/A	N/A	93,000		360,940	268,604
Semigroup Corporation Class A	Equity	N/A	N/A	15,335		626,475	1,218,826
Semtech Corporation	Equity	N/A	N/A	29,142		774,081	578,469
Seven Group Holdings Limited	Equity	N/A	N/A	46,500		513,120	234,636
Seven & I Holdings Company Limited	Equity	N/A	N/A	30,000		932,930	1,289,374
Service Now, Incorporated	Equity	N/A	N/A	31,366		1,776,200	2,330,807
Sherwin Williams Company	Equity	N/A	N/A	5,700		1,639,307	1,567,614
Shimachu Company Limited	Equity	N/A	N/A	5,100		106,600	147,101
Shinetsu Chemical Company Limited	Equity	N/A	N/A	1,300		83,469	80,718
Shire PLC	Equity	N/A	N/A	31,143		6,041,994	6,733,047
Shougang Fushan Resources	Equity	N/A	N/A	976,000		264,472	227,896
Shun Tak Holdings Limited	Equity	N/A	N/A	74,000		44,315	40,954
Sias SPA	Equity	N/A	N/A	45,300		409,708	483,312
Siemens AG	Equity	N/A	N/A	3,135		392,326	318,516
Sigma Pharmaceuticals Limited	Equity	N/A	N/A	64,743		44,598	38,463

PLUMBERS AND PIPEFITTERS NATIONAL PENSION FUND
ALEXANDRIA, VIRGINIA

SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES
AS OF JUNE 30, 2015

Form 5500, Schedule H, Line 4i

EIN: 52-6152779
Plan No. 001

(c) Description of investment, including maturity date, rate of interest, collateral, par or maturity value				Plan No.	001		
(a)	(b)				(e)		
Identity of issuer, borrower, lessor or similar party	Description	Maturity Date	Rate of Interest		(d) Cost	Current Value	
<u>Common & Preferred Stocks (continued)</u>							
Signature Bank New York	Equity	N/A	N/A	13,521	\$ 390,285	\$ 1,979,339	
Signet Jewelers Limited	Equity	N/A	N/A	13,100	1,773,198	1,679,944	
Six Flags Entertainment Corporation	Equity	N/A	N/A	27,927	577,021	1,252,526	
Skechers USA, Incorporated Class A	Equity	N/A	N/A	5,680	389,299	623,607	
SKF AB-B	Equity	N/A	N/A	24,528	621,512	562,182	
Sky Networks Television Limited	Equity	N/A	N/A	97,200	489,151	395,864	
Skyworks Solutions, Incorporated	Equity	N/A	N/A	23,193	482,624	2,414,396	
SMC Corporation	Equity	N/A	N/A	4,300	768,424	1,298,643	
Smartone Telecommunications Holdings	Equity	N/A	N/A	18,000	34,123	31,395	
Smurfit Kappa Group PLC	Equity	N/A	N/A	27,400	452,671	754,815	
Societe Generale	Equity	N/A	N/A	19,308	820,357	901,275	
Softbank Corporation	Equity	N/A	N/A	6,300	291,043	371,448	
Solar Capital Limited	Equity	N/A	N/A	45,305	1,013,486	815,490	
Sonic Corporation	Equity	N/A	N/A	26,542	823,986	764,410	
Sonic Healthcare Limited	Equity	N/A	N/A	5,253	84,860	86,097	
Sonoco Products Company	Equity	N/A	N/A	29,498	980,602	1,264,284	
Sonus Networks, Incorporated	Equity	N/A	N/A	70,040	1,280,631	484,677	
Sony Corporation	Equity	N/A	N/A	6,300	166,891	180,243	
Sorin Spa Milano	Equity	N/A	N/A	24,800	69,783	69,397	
South Jersey Industries, Incorporated	Equity	N/A	N/A	32,810	887,266	811,391	
South State Corporation	Equity	N/A	N/A	25,440	1,489,093	1,933,186	
South 32 Limited	Equity	N/A	N/A	25,876	46,836	34,415	
Southwest Airlines Company	Equity	N/A	N/A	111,485	3,044,395	3,689,039	
Southwest Gas Corporation	Equity	N/A	N/A	24,830	975,706	1,321,204	
Sovran Self Storage, Incorporated	Equity	N/A	N/A	13,452	528,012	1,169,113	
Spartannash Company	Equity	N/A	N/A	40,597	728,257	1,321,026	
Spirit Aerosystems Holdings Class A	Equity	N/A	N/A	36,500	1,644,342	2,011,515	
Spirit Airlines, Incorporated	Equity	N/A	N/A	5,783	138,731	359,124	
Splunk, Incorporated	Equity	N/A	N/A	82,088	4,845,150	5,714,967	
Springleaf Holdings, Incorporated	Equity	N/A	N/A	40,920	2,064,678	1,878,637	
SS&C Technologies Holdings	Equity	N/A	N/A	13,020	816,471	813,750	
Stada Arzneimittel AG	Equity	N/A	N/A	11,500	550,897	389,009	
Standard Pacific Corporation	Equity	N/A	N/A	98,490	735,875	877,546	
Starbucks Corporation	Equity	N/A	N/A	115,385	4,560,402	6,686,367	
Starwood Property Trust, Incorporated	Equity	N/A	N/A	22,400	535,438	483,168	
Starz Series A	Equity	N/A	N/A	32,900	981,259	1,471,288	
State Street Corporation	Equity	N/A	N/A	16,300	624,141	1,255,100	
Statoil ASA	Equity	N/A	N/A	90,273	2,465,497	1,613,076	
Steelcase, Incorporated	Equity	N/A	N/A	120,600	1,145,048	2,280,546	
Sterling Construction, Incorporated	Equity	N/A	N/A	108,906	702,868	435,624	
Stewart Information Services Corporation	Equity	N/A	N/A	33,165	533,930	1,319,967	
Stifel Financial Corporation	Equity	N/A	N/A	28,126	696,907	1,623,995	
Sumitomo Chemical Company Limited	Equity	N/A	N/A	40,000	123,519	240,552	
Sumitomo Corporation	Equity	N/A	N/A	84,600	1,072,099	984,356	
Sumitomo Electric Industries	Equity	N/A	N/A	13,200	186,661	204,603	
Sumitomo Heavy Industries	Equity	N/A	N/A	43,000	210,319	250,864	
Sumitomo Metal Mining Company Limited	Equity	N/A	N/A	40,000	541,524	609,061	
Sumitomo Mitsui Financial GR	Equity	N/A	N/A	90,900	3,578,370	4,804,607	
Sumitomo Mitsui Trust Holding	Equity	N/A	N/A	23,000	85,156	107,180	
Sumitomo Rubber	Equity	N/A	N/A	14,800	238,786	229,404	
Summit Materials, Incorporated Class A	Equity	N/A	N/A	62,238	1,244,732	1,587,069	
Suncoke Energy, Incorporated	Equity	N/A	N/A	67,617	997,237	879,021	
Suncorp Group Limited	Equity	N/A	N/A	20,741	203,368	214,917	

PLUMBERS AND PIPEFITTERS NATIONAL PENSION FUND
ALEXANDRIA, VIRGINIA

SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES
AS OF JUNE 30, 2015

Form 5500, Schedule H, Line 4i

EIN: 52-6152779
Plan No. 001

(c) Description of investment, including maturity date, rate of interest, collateral, par or maturity value					
(a)	(b)			(d)	(e)
Identity of issuer, borrower, lessor or similar party	Description	Maturity Date	Rate of Interest	Cost	Current Value
<u>Common & Preferred Stocks (continued)</u>					
Sunedison, Incorporated	Equity	N/A	N/A	21,500 \$	328,245 \$
Sunopta, Incorporated	Equity	N/A	N/A	166,779	1,789,539
Sunstone Hotel Investments Incorporated	Equity	N/A	N/A	41,675	625,542
Suntory Beverage & Food Limited	Equity	N/A	N/A	24,200	963,966
Suntrust Banks, Incorporated	Equity	N/A	N/A	77,394	3,329,490
Super Micro Circuits, Incorporated	Equity	N/A	N/A	89,400	2,644,452
Supervalu, Incorporated	Equity	N/A	N/A	75,500	610,795
Surmodics, Incorporated	Equity	N/A	N/A	18,696	437,860
Suzuki Motor Corporation	Equity	N/A	N/A	26,300	888,593
Svenska Cellulo SA	Equity	N/A	N/A	23,058	586,335
Swedbank AB	Equity	N/A	N/A	28,700	669,217
Swift Transportation Company	Equity	N/A	N/A	37,511	850,374
Swire Pacific Limited	Equity	N/A	N/A	22,800	286,634
Swiss Life Holding AG	Equity	N/A	N/A	7,377	1,689,305
Swiss RE Limited	Equity	N/A	N/A	12,800	1,137,280
Symantec Corporation	Equity	N/A	N/A	161,990	3,766,268
Symetra Financial Corporation	Equity	N/A	N/A	20,430	493,793
Symrise AG	Equity	N/A	N/A	10,780	670,009
Synchronoss Technologies, Incorporated	Equity	N/A	N/A	20,486	936,825
Synaptics, Incorporated	Equity	N/A	N/A	43,900	3,807,667
Synergy Res Corporation	Equity	N/A	N/A	44,130	504,406
3I Group PLC	Equity	N/A	N/A	133,474	1,101,161
Tab Corp Holdings	Equity	N/A	N/A	24,591	86,328
Tableau Software, Incorporated Class A	Equity	N/A	N/A	12,900	1,487,370
Taiwan Semiconductor Mtg Company	Equity	N/A	N/A	68,233	1,549,571
Takashimaya Company	Equity	N/A	N/A	12,000	108,837
Takeda Chemical Industries	Equity	N/A	N/A	6,200	299,450
Tal International Group, Incorporated	Equity	N/A	N/A	14,800	467,680
Talmer Bancorp, Incorporated	Equity	N/A	N/A	64,666	1,083,156
Target Corporation	Equity	N/A	N/A	41,375	3,377,441
Taser International, Incorporated	Equity	N/A	N/A	44,018	1,466,240
Tate & Lyle PLC	Equity	N/A	N/A	43,200	347,328
Tatts Group Limited	Equity	N/A	N/A	54,350	155,994
TCF Financial Corporation	Equity	N/A	N/A	218,563	3,630,331
TDC A/S	Equity	N/A	N/A	96,600	700,350
TE Connectivity Limited	Equity	N/A	N/A	16,720	1,075,096
Team Health Holdings, Incorporated	Equity	N/A	N/A	44,061	2,878,505
Teco Energy, Incorporated	Equity	N/A	N/A	82,920	1,464,367
Technicolor	Equity	N/A	N/A	64,400	420,009
Tegna, Incorporated	Equity	N/A	N/A	27,000	865,890
Teladoc, Incorporated	Equity	N/A	N/A	1,700	52,411
Telecom Italia SPA	Equity	N/A	N/A	653,382	666,868
Teledyne Technologies, Incorporated	Equity	N/A	N/A	13,011	1,372,791
Teleflex, Incorporated	Equity	N/A	N/A	8,187	1,108,929
Telefonica SA	Equity	N/A	N/A	102,261	1,453,575
Teleperformance	Equity	N/A	N/A	14,324	1,011,964
Teliasonera AB	Equity	N/A	N/A	151,200	890,254
Telstra Corporation Limited	Equity	N/A	N/A	78,223	363,737
Tencent Holdings Limited	Equity	N/A	N/A	258,963	5,184,615
Tenneco, Incorporated	Equity	N/A	N/A	7,643	439,014
Teradata Corporation	Equity	N/A	N/A	52,500	1,942,500
Teradyne, Incorporated	Equity	N/A	N/A	46,788	902,541
Tesaro, Incorporated	Equity	N/A	N/A	22,409	1,317,425

PLUMBERS AND PIPEFITTERS NATIONAL PENSION FUND
ALEXANDRIA, VIRGINIA

SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES
AS OF JUNE 30, 2015

Form 5500, Schedule H, Line 4i

EIN: 52-6152779
Plan No. 001

		(c) Description of investment, including maturity date, rate of interest, collateral, par or maturity value			Plan No.	001
(a)	(b)				(e)	
Identity of issuer, borrower, lessor or similar party	Description	Maturity Date	Rate of Interest		(d) Cost	Current Value
<u>Common & Preferred Stocks (continued)</u>						
Tesla Motors, Incorporated	Equity	N/A	N/A	14,459 \$	3,096,172 \$	3,878,771
Tesoro Corporation	Equity	N/A	N/A	37,110	2,093,901	3,132,455
Tetraphase Pharmaceuticals	Equity	N/A	N/A	57,952	1,090,591	2,749,243
Texas Cap Bancshares, Incorporated	Equity	N/A	N/A	16,851	755,847	1,048,806
Texas Roadhouse, Incorporated	Equity	N/A	N/A	16,305	310,594	610,296
Texwinca Holdings Limited	Equity	N/A	N/A	12,000	12,783	12,741
Thales SA	Equity	N/A	N/A	14,871	690,605	897,916
Thorn Group Limited	Equity	N/A	N/A	5,592	12,201	11,347
The Travelers Companies, Incorporated	Equity	N/A	N/A	32,300	2,320,829	3,122,118
Tieto OYJ	Equity	N/A	N/A	26,300	610,121	613,974
Tiffany & Company	Equity	N/A	N/A	19,260	1,861,239	1,768,068
Time, Incorporated	Equity	N/A	N/A	43,714	1,017,505	1,005,859
Time Warner, Incorporated	Equity	N/A	N/A	66,692	5,212,621	6,579,548
Timken Company	Equity	N/A	N/A	9,300	186,777	340,101
TJX Companies, Incorporated	Equity	N/A	N/A	260,452	13,417,864	17,234,109
T-Mobile US, Incorporated	Equity	N/A	N/A	41,338	1,336,174	1,602,674
Toagosei Company Limited	Equity	N/A	N/A	101,000	428,883	842,595
Toho Holding Company Limited	Equity	N/A	N/A	20,200	364,676	465,284
Tokai Rika Company Limited	Equity	N/A	N/A	38,300	800,592	957,617
Tokai Tokyo Financial Holdings	Equity	N/A	N/A	11,200	81,237	81,539
Tokio Marine Holdings, Incorporated	Equity	N/A	N/A	7,000	218,406	291,359
Tokyo Gas Company Limited	Equity	N/A	N/A	32,000	169,510	168,000
Tokyu Fudosan Holdings Corporation	Equity	N/A	N/A	6,500	55,634	50,137
Tongda Group Holdings Limited	Equity	N/A	N/A	3,520,000	487,840	681,155
Toppan Forms Company Limited	Equity	N/A	N/A	40,500	502,397	558,267
Toppan Printing Company Limited	Equity	N/A	N/A	16,000	101,881	133,747
Toronto-Dominion Bank	Equity	N/A	N/A	37,920	1,435,147	1,611,979
Total SA	Equity	N/A	N/A	32,400	2,105,788	1,610,089
Toyo Ink SC Holdings Company	Equity	N/A	N/A	10,000	44,077	40,119
Toyo Tire & Rubber Company	Equity	N/A	N/A	40,500	229,525	856,428
Toyoda Gosei Company	Equity	N/A	N/A	5,000	110,426	120,644
Toyota Motor Corporation	Equity	N/A	N/A	23,700	1,078,235	1,588,520
Transdigm Group, Incorporated	Equity	N/A	N/A	21,520	1,934,257	4,834,898
Transocean Limited	Equity	N/A	N/A	11,082	226,403	179,218
Treehouse Foods, Incorporated	Equity	N/A	N/A	37,575	3,057,702	3,044,702
Trelleborg AB	Equity	N/A	N/A	27,943	514,145	516,736
Trex Company, Incorporated	Equity	N/A	N/A	9,652	310,710	477,098
Trevena, Incorporated	Equity	N/A	N/A	43,395	259,525	271,653
Trico Bancshares	Equity	N/A	N/A	27,630	638,952	664,502
Trimas Corporation	Equity	N/A	N/A	28,898	751,369	855,381
Trimble Navigation Limited	Equity	N/A	N/A	107,100	2,966,819	2,512,566
Trinet Group, Incorporated	Equity	N/A	N/A	19,080	352,644	483,678
Trinty Mirror PLC	Equity	N/A	N/A	76,300	731,141	179,828
Tripadvisor, Incorporated	Equity	N/A	N/A	23,016	2,410,822	2,005,614
Triumph Group, Incorporated	Equity	N/A	N/A	4,730	320,177	312,133
Trivascular Technologies, Incorporated	Equity	N/A	N/A	58,570	590,643	313,350
Tronox Limited	Equity	N/A	N/A	31,544	659,220	461,489
TS Tech Company Limited	Equity	N/A	N/A	11,100	267,293	297,034
Tsumura & Company	Equity	N/A	N/A	15,300	430,784	329,290
TUI AG	Equity	N/A	N/A	12,318	125,999	199,352
Tuesday Morning Corporation	Equity	N/A	N/A	130,295	1,849,374	1,467,773
Tumi Holdings, Incorporated	Equity	N/A	N/A	135,812	2,867,235	2,786,862
Tutor Perini Corporation	Equity	N/A	N/A	26,100	553,890	563,238

PLUMBERS AND PIPEFITTERS NATIONAL PENSION FUND
ALEXANDRIA, VIRGINIA

SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES
AS OF JUNE 30, 2015

Form 5500, Schedule H, Line 4i

ETN: 52-6152779
Plan No. 001

(c) Description of investment, including maturity date, rate of interest, collateral, par or maturity value		(d)		(e)	
(a)	(b)	(c)	(d)	(e)	(f)
Identity of issuer, borrower, lessor or similar party	Description	Maturity Date	Rate of Interest	Cost	Current Value
<u>Common & Preferred Stocks (continued)</u>					
Twitter, Incorporated	Equity	N/A	N/A	59,252 \$	2,495,897 \$
Two Harbors Investment Corporation	Equity	N/A	N/A	59,800	660,879
Tyson Foods, Incorporated	Equity	N/A	N/A	65,480	2,376,399
Ubi Banca	Equity	N/A	N/A	20,531	165,325
Ubiquiti Networks, Incorporated	Equity	N/A	N/A	95,200	2,846,456
Ublox Holding AG	Equity	N/A	N/A	840	116,112
UBS AG	Equity	N/A	N/A	800	17,331
UBS Group AG	Equity	N/A	N/A	28,125	495,434
UCB SA	Equity	N/A	N/A	13,838	93,232
UDG Healthcare PLC	Equity	N/A	N/A	28,253	232,579
UGI Holding Corporation	Equity	N/A	N/A	42,900	771,212
UIL Holdings Corporation	Equity	N/A	N/A	40,014	1,287,417
Ullico, Incorporated	Equity	N/A	N/A	2,012,767	35,004,712
Ultra Salon Cosmetics & Fragrances	Equity	N/A	N/A	7,200	1,131,005
Ultra Petroleum Corporation	Equity	N/A	N/A	178,900	4,785,412
Ultragenex Pharmaceutical, Incorporated	Equity	N/A	N/A	6,885	373,101
Ultratech, Incorporated	Equity	N/A	N/A	28,615	810,318
Unicharm Corporation	Equity	N/A	N/A	24,700	641,601
Unicredit SPA	Equity	N/A	N/A	48,412	-
Unilever PLC	Equity	N/A	N/A	31,017	1,057,839
Unipol Gruppo Finanzia	Equity	N/A	N/A	81,327	422,759
Under Armour, Incorporated Class A	Equity	N/A	N/A	79,897	4,914,295
Union Financial Corporation	Equity	N/A	N/A	28,332	558,707
Union Pacific Corporation	Equity	N/A	N/A	18,300	2,197,455
United Community Banks	Equity	N/A	N/A	101,665	1,934,719
United Continental Holdings, Incorporated	Equity	N/A	N/A	34,300	2,283,228
United Laboratories Intl Holdings	Equity	N/A	N/A	36,000	27,967
United Overseas Bank Limited	Equity	N/A	N/A	15,640	265,447
United Technologies Corporation	Equity	N/A	N/A	24,655	2,868,821
United Therapeutics Corporation	Equity	N/A	N/A	19,250	1,199,824
Unitedhealth Group, Incorporated	Equity	N/A	N/A	27,900	3,366,656
Universal Health Services, Incorporated	Equity	N/A	N/A	32,000	3,543,044
Unum Group	Equity	N/A	N/A	76,100	2,183,462
UPM Kymmene Corporation	Equity	N/A	N/A	43,966	858,037
Urban Outfitters, Incorporated	Equity	N/A	N/A	69,800	2,496,593
USANA Health Sciences, Incorporated	Equity	N/A	N/A	3,500	128,276
US Concrete, Incorporated	Equity	N/A	N/A	38,420	1,283,126
Valeo	Equity	N/A	N/A	5,500	574,858
Valero Energy Corporation	Equity	N/A	N/A	109,879	4,239,675
Validus Holdings Limited	Equity	N/A	N/A	24,700	745,396
Value Partners Group Limited	Equity	N/A	N/A	30,000	55,080
Varian Medical Systems, Incorporated	Equity	N/A	N/A	58,200	3,918,998
Venture Corporation Limited	Equity	N/A	N/A	11,000	66,827
Vectrus, Incorporated	Equity	N/A	N/A	23,128	619,854
Verint Systems, Incorporated	Equity	N/A	N/A	62,027	3,120,885
Verisign, Incorporated	Equity	N/A	N/A	32,900	2,070,814
Verizon Communications, Incorporated	Equity	N/A	N/A	26,950	1,325,325
Vertex Pharmaceuticals, Incorporated	Equity	N/A	N/A	35,924	3,169,085
Vesuvius PLC	Equity	N/A	N/A	45,400	247,255
Viad Corporation	Equity	N/A	N/A	25,205	625,750
Viasat, Incorporated	Equity	N/A	N/A	32,700	2,301,272
Voilin Memory, Incorporated	Equity	N/A	N/A	261,010	975,289
Visa, Incorporated	Equity	N/A	N/A	187,299	8,372,647

PLUMBERS AND PIPEFITTERS NATIONAL PENSION FUND
ALEXANDRIA, VIRGINIA

SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES
AS OF JUNE 30, 2015

Form 5500, Schedule H, Line 4i

EIN: 52-6152779
Plan No. 001

(c) Description of investment, including maturity date, rate of interest, collateral, par or maturity value						
(a)	(b)				(d)	(e)
Identity of issuer, borrower, lessor or similar party	Description	Maturity Date	Rate of Interest		Cost	Current Value
<u>Common & Preferred Stocks (continued)</u>						
Vishay Intertechnology, Incorporated	Equity	N/A	N/A	111,421	\$ 1,174,766	\$ 1,301,397
VMWare, Incorporated Class A	Equity	N/A	N/A	18,684	1,780,212	1,601,966
Vodafone Group PLC	Equity	N/A	N/A	759,821	3,441,687	2,744,086
Voestal Pine AG	Equity	N/A	N/A	11,200	274,089	466,115
Volkswagen AG	Equity	N/A	N/A	10,831	2,035,094	2,500,990
Volvo AB	Equity	N/A	N/A	27,043	362,423	335,679
Vontobel Holding AG	Equity	N/A	N/A	6,000	272,751	278,197
Voya Financial, Incorporated	Equity	N/A	N/A	102,570	4,294,194	4,766,428
Vulcan Materials Company	Equity	N/A	N/A	24,800	1,777,446	2,081,464
VWR Corporation	Equity	N/A	N/A	35,565	871,588	950,652
Wabtec Corporation	Equity	N/A	N/A	38,059	2,638,625	3,586,680
Wageworks, Incorporated	Equity	N/A	N/A	36,839	1,302,725	1,490,138
Wal-Mart Stores, Incorporated	Equity	N/A	N/A	11,000	858,858	780,230
Waste Connections, Incorporated	Equity	N/A	N/A	14,574	242,602	686,727
Watsco, Incorporated	Equity	N/A	N/A	12,740	930,989	1,576,448
Watts Water Technologies, Incorporated	Equity	N/A	N/A	27,190	982,574	1,409,802
Wayfair, Incorporated Class A	Equity	N/A	N/A	46,965	1,027,060	1,767,763
Web.Com Group, Incorporated	Equity	N/A	N/A	18,010	574,832	436,202
Weir Group PLC	Equity	N/A	N/A	25,822	924,044	688,516
Wellcare Health Plans, Incorporated	Equity	N/A	N/A	25,925	1,323,922	2,199,218
Wells Fargo & Company	Equity	N/A	N/A	134,290	4,802,582	7,547,914
Werner Enterprises, Incorporated	Equity	N/A	N/A	148,800	3,094,451	3,906,000
Wesfarmers Limited	Equity	N/A	N/A	10,317	351,959	311,594
West Japan Railway Company	Equity	N/A	N/A	4,400	183,690	281,685
West Corporation	Equity	N/A	N/A	48,035	1,301,859	1,445,854
Western Alliance Bancorp	Equity	N/A	N/A	7,440	259,434	251,174
Western Digital Corporation	Equity	N/A	N/A	59,509	3,461,316	4,666,696
Westpac Banking Corporation	Equity	N/A	N/A	19,502	429,473	468,633
Wex, Incorporated	Equity	N/A	N/A	40,578	1,243,775	4,624,675
WH Group Limited	Equity	N/A	N/A	83,000	59,337	56,535
WH Smith PLC	Equity	N/A	N/A	18,297	-	439,284
Wheelock & Company Limited	Equity	N/A	N/A	114,900	549,671	586,984
Whirlpool Corporation	Equity	N/A	N/A	14,540	3,546,553	4,700,102
Whole Foods Market, Incorporated	Equity	N/A	N/A	18,910	865,632	745,810
Wienberger AG	Equity	N/A	N/A	22,562	360,077	354,787
Wiley John A Sons, Incorporated	Equity	N/A	N/A	19,788	717,375	1,075,874
Wilmar International Limited	Equity	N/A	N/A	165,600	410,351	403,287
Wingstop, Incorporated	Equity	N/A	N/A	6,900	187,167	195,960
Wintrust Financial Corporation	Equity	N/A	N/A	27,714	910,597	1,479,373
Wisdomtree Investments Incorporated	Equity	N/A	N/A	40,098	307,814	880,753
Wolters Kluwer CVA	Equity	N/A	N/A	11,331	379,000	336,590
Wolverine World Wide, Incorporated	Equity	N/A	N/A	22,160	665,464	631,117
Woodside Petroleum Limited	Equity	N/A	N/A	10,815	312,679	285,626
Workday, Incorporated Class A	Equity	N/A	N/A	45,529	3,992,447	3,477,960
WPP PLC	Equity	N/A	N/A	41,399	501,021	927,581
Wuxi Pharmatech, Incorporated	Equity	N/A	N/A	64,975	1,283,315	2,745,844
Wyndham Worldwide Corporation	Equity	N/A	N/A	53,800	1,769,084	4,602,034
Xenoport, Incorporated	Equity	N/A	N/A	114,643	942,631	702,762
Xerox Corporation	Equity	N/A	N/A	121,300	1,616,255	1,290,632
XL Group PLC	Equity	N/A	N/A	37,350	1,543,861	1,389,420
XPO Logistics, Incorporated	Equity	N/A	N/A	33,185	1,154,440	1,499,298
Yahoo, Incorporated	Equity	N/A	N/A	180,900	4,780,771	7,107,561
Yangzijiang Shipbuilding	Equity	N/A	N/A	315,300	306,925	331,119

PLUMBERS AND PIPEFITTERS NATIONAL PENSION FUND
ALEXANDRIA, VIRGINIA

SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES
AS OF JUNE 30, 2015

Form 5500, Schedule H, Line 4i

EIN: 52-6152779
Plan No. 001

(c) Description of investment, including maturity date, rate of interest, collateral, par or maturity value						
(a)	(b)				(d)	(e)
Identity of issuer, borrower, lessor or similar party	Description	Maturity Date	Rate of Interest		Cost	Current Value
<u>Common & Preferred Stocks (continued)</u>						
Yara International ASA	Equity	N/A	N/A	14,500	\$ 695,301	\$ 755,288
Yokohama Rubber Company Limited	Equity	N/A	N/A	68,400	521,684	1,373,757
Yue Yuen Industrial Holdings	Equity	N/A	N/A	203,000	737,461	679,586
Z Energy Limited	Equity	N/A	N/A	5,251	18,806	20,816
Zeltec Aesthetics, Incorporated	Equity	N/A	N/A	21,922	553,686	646,041
Zoetis, Incorporated	Equity	N/A	N/A	78,300	3,529,871	3,775,626
Zulily, Incorporated Class A	Equity	N/A	N/A	36,945	519,328	481,763
Zurich Financial Services	Equity	N/A	N/A	7,821	1,490,178	2,377,584
Total Common & Preferred Stocks					\$ 1,858,245,375	\$ 2,219,807,440
<u>Mutual and Other Funds</u>						
Aetos Capital Distressed Inv Strategies Fund	Mutual Fund	N/A	N/A	373,337	\$ 44,987,950	\$ 49,630,131
Aetos Capital Multi Strategy Arbitrage Fund	Mutual Fund	N/A	N/A	124,090	14,987,922	15,050,143
AFL-CIO Equity Index Fund	Mutual Fund	N/A	N/A	19,809,373	313,785,444	335,614,366
AQR Global Risk Premium Offshore Fund	Mutual Fund	N/A	N/A	323	50,000,000	55,887,570
Bell Australia Trust	Mutual Fund	N/A	N/A	2,214,343	33,382,537	166,091,108
Bell Global Trust	Mutual Fund	N/A	N/A	946,286	9,460,301	17,302,361
Boston Company Emerging Markets Equity Fd	Mutual Fund	N/A	N/A	1,693,191	111,618,643	99,356,439
Frontier Mfg Core Infrastructure Fund	Mutual Fund	N/A	N/A	4,810,169	65,646,257	62,965,111
Ishares Tr Russell 2000 Index Fund	Mutual Fund	N/A	N/A	58,620	6,757,680	7,319,293
JP Morgan Emerging Markets Equity Fund	Mutual Fund	N/A	N/A	9,193,332	160,368,039	157,941,443
JP Morgan Infrastructure Investments Fund	Mutual Fund	N/A	N/A	81,371,018	70,000,000	73,029,132
Loomis Sayles Bond Nhit	Mutual Fund	N/A	N/A	7,187,284	84,716,566	92,212,851
Lord Abbett International Small Cap Trust	Mutual Fund	N/A	N/A	75,000	75,000,000	85,393,500
NIS Preferred Stock Fund II	Mutual Fund	N/A	N/A	10,424,207	40,000,000	43,891,629
Northern Trust Aggregate Bond Index Fund	Mutual Fund	N/A	N/A	1,181,036	152,386,570	155,306,225
Northern Trust Russell 2000 Growth Index	Mutual Fund	N/A	N/A	351,553	100,643,715	97,640,397
Vanguard REIT Index Fund	Mutual Fund	N/A	N/A	2,956,155	49,415,463	48,480,949
Voya Senior Loan Trust Fund	Mutual Fund	N/A	N/A	6,813,039	99,761,047	102,202,260
Total Mutual and Other Funds					\$ 1,482,918,134	\$ 1,665,314,908
<u>Real Estate Investment Funds</u>						
AFL-CIO Building Investment Trust	CCT	N/A	N/A	29,541	\$ 36,213,920	\$ 171,362,484
Multi Employer Property Trust	CCT	N/A	N/A	24,709	39,326,264	219,295,278
Ullico J for Jobs Mortgage Fund	PSA	N/A	N/A	7,110	86,016,966	94,655,114
Total Real Estate Funds					\$ 161,557,150	\$ 485,312,876
<u>Partnerships</u>						
Boyd Watterson GSA Fund, LP	LP	N/A	N/A	N/A	\$ 13,000,000	\$ 13,951,589
Clifton Commodities Fund, LP	LP	N/A	N/A	N/A	186,000,000	138,716,590
Diplomat Properties LP,						
A Delaware Limited Partnership	LP	N/A	N/A	N/A	11,690,531	11,690,531
Entrust Cap Div C Class Fund, LP	LP	N/A	N/A	N/A	22,000,000	21,622,398
Gerding Edlen Green Cities II, LP	LP	N/A	N/A	N/A	26,588,896	34,192,465
GESD Investors LP	LP	N/A	N/A	N/A	7,789,518	1,832,397
Harrison Street Real Estate Partners IV, LP	LP	N/A	N/A	N/A	20,613,599	20,670,580
Intercontinental Real Estate Investment Fund	LP	N/A	N/A	N/A	2,014,013	2,169,794
Mesirow Finl Real Estate Value Fund, LP	LP	N/A	N/A	N/A	30,030,783	43,642,222
Mesirow Finl Real Estate Value Fund II, LP	LP	N/A	N/A	N/A	9,089,385	8,975,050
Mesirow Finl Private Equity Partnership Fd VI	LP	N/A	N/A	N/A	13,774,608	12,579,089
Paladin Capital Partners Fund, LP	LP	N/A	N/A	N/A	29,207,831	10,747,228
Permal Fixed Income Holdings LTD	LP	N/A	N/A	N/A	25,000,000	27,352,900
Pinnacle Natural Resources Offshore ERISA	LP	N/A	N/A	N/A	50,000,000	55,165,941

PLUMBERS AND PIPEFITTERS NATIONAL PENSION FUND
ALEXANDRIA, VIRGINIA

SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES
AS OF JUNE 30, 2015

Form 5500, Schedule H, Line 4i

EIN: 52-6152779
Plan No. 001

		(c) Description of investment, including maturity date, rate of interest, collateral, par or maturity value					
(a)	(b)					(d)	(e)
Identity of issuer, borrower, lessor or similar party		Description	Maturity Date	Rate of Interest		Cost	Current Value
<u>Partnerships (continued)</u>							
Potomac Energy Fund, LP	LP		N/A	N/A	N/A	\$ 25,994,198	\$ 23,324,843
Potomac Energy Fund II, LP	LP		N/A	N/A	N/A	36,046,135	48,959,165
Realty Associate Fund VIII	LP		N/A	N/A	N/A	48,844,652	34,767,520
Total Partnerships						<u>\$ 557,684,149</u>	<u>\$ 510,360,302</u>
<u>Investment Contract with Insurance Company</u>							
Metlife Annuity Insurance Contract	GIC		N/A	N/A	N/A	\$ 1,682,789	\$ 1,682,789
						<u>\$ 1,682,789</u>	<u>\$ 1,682,789</u>
Total assets held for investment purposes						<u>\$ 4,711,356,016</u>	<u>\$ 5,495,861,748</u>

Exhibit 4

Schedule MB, Line 8 - Schedule of Active Participant Data

AGE/SERVICE DISTRIBUTION OF ACTIVE PARTICIPANTS											
PARTICIPANTS AS OF JULY 1, 2014											
AGE	COMPLETED YEARS OF CREDITED SERVICE										Total
	Under 1	1 to 4	5 to 9	10 to 14	15 to 19	20 to 24	25 to 29	30 to 34	35 to 39	40 & up	
Under 25	0	1,520	447	0	0	0	0	0	0	0	1,967
25 to 29	0	1,937	3,919	423	0	0	0	0	0	0	6,279
30 to 34	0	1,446	4,057	2,743	295	0	0	0	0	0	8,541
35 to 39	0	1,008	3,129	2,945	2,050	165	0	0	0	0	9,297
40 to 44	0	722	2,300	2,348	2,596	1,236	178	0	0	0	9,380
45 to 49	0	497	1,780	1,808	2,106	1,611	1,089	155	1	0	9,047
50 to 54	0	376	1,524	1,605	2,005	1,423	1,776	1,020	267	0	9,996
55 to 59	0	220	994	1,015	1,333	1,048	1,312	1,175	1,206	2	8,305
60 to 64	0	142	459	463	590	417	496	382	577	9	3,535
65 to 69	0	26	103	114	71	48	65	49	93	4	573
70 & up	0	6	13	13	4	3	3	2	2	0	46
Total	0	7,900	18,725	13,477	11,050	5,951	4,919	2,783	2,146	15	66,966
Average Age =				43.8	Average Service =				12.7		

FOR PLAN YEAR COMMENCING JULY 1, 2014

**ANNUAL CERTIFICATION OF PLAN STATUS UNDER SECTION 432(b) OF THE
INTERNAL REVENUE CODE, (SEC. 305(b) OF THE EMPLOYEE RETIREMENT
INCOME SECURITY ACT OF 1974)**

FOR

PLUMBERS & PIPEFITTERS NATIONAL PENSION FUND

EIN: 52-6152779

PN: 001

Plan Year 7/1/2014

Fund Contact

William T. Sweeney, Jr.

Administrator

(703) 739-9020

September 26, 2014



Classic Values, Innovative Advice

Board of Trustees
Plumbers & Pipefitters National Pension Fund
103 Oronoco Street
Alexandria, Virginia 22314

September 26, 2014
EIN: 52-6152779
PN: 001
Phone: 703.739.9020

***Re: Annual Certification of Plan Status under Internal Revenue Code §432(b) and
Employee Retirement Income Security Act of 1974 §305(b)***

Dear Board of Trustees:

CERTIFICATION

As required by Section 432(b)(3) of the Internal Revenue Code ("Code") and Section 305(b)(3) of the Employee Retirement Income Security Act of 1974 ("ERISA"), we certify for the plan year beginning July 1, 2014, that the Plan is classified as being in Endangered status defined in the above Sections.

The Plan was first certified to be Seriously Endangered for the plan year beginning July 1, 2009. Later that plan year, the Trustees adopted a Funding Improvement Plan which commenced on July 1, 2012. The Plan was 76.8% funded as July 1, 2012. Based on the Plan's reasonably anticipated experience and actuarial assumptions, the Plan's funded status at July 1, 2027 (the end of the Funding Improvement Period) is currently projected to be approximately 96.1%. Legislation requires that the funded status be at least 81.4% and the Plan not be projected to incur a minimum funding deficiency during this period. Based on these criteria, the current Funding Improvement Plan is meeting scheduled progress.

To the best of our knowledge, this report has been prepared in accordance with the requirements of Section 432 of the Code, Section 305 of ERISA, and generally recognized and accepted actuarial principles and practices which are consistent with the Code of Professional Conduct, applicable Actuarial Standards of Practice, and that as Members of the American Academy of Actuaries, we meet the Qualification Standards to render the opinions contained herein.

This report only certifies the condition of the Plan under Code Section 432 and ERISA Section 305 and should be used only for that purpose. In preparing this report, we have relied without audit, on information supplied by the Fund Office. This information includes, but is not limited to, Plan provisions, employee data, financial information, and expectations of future industry activity.

This report was prepared exclusively for the Board of Trustees of the Plumbers and Pipefitters National Pension Fund for a specific and limited purpose. It is not for the use or benefit of any third party for any purpose. Any third party recipient of Cheiron's work product who desires professional guidance should not rely upon Cheiron's work product, but should engage qualified professionals for advice appropriate to its own specific needs.



Board of Trustees
Plumbers and Pipefitters National Pension Fund
September 26, 2014
Page 2

The attached appendices show the results for the statutory tests used in determining our funded status certification and describe the methodologies and assumptions used to perform the tests. Please contact the undersigned with any questions.

Thank you.

Sincerely,

Two handwritten signatures in black ink. The first signature is on the left, and the second is on the right.

Kenneth A. Kent, FSA, FCA, EA (14-3776) *Kevin J. Woodrich, FSA, EA (14-7086)*

cc: Secretary of the Treasury

Attachments

- Appendix I: Tests of Plan Status
- Appendix II: Detail for Actuarial Certification
- Appendix III: Methodology and Assumptions

APPENDIX I
TESTS of PLAN STATUS

The Pension Protection Act of 2006 ("PPA") added special rules and requirements for plans that are certified to be Endangered, Seriously Endangered, or Critical.

Critical Status – The Plan will be certified as Critical if it meets any one of the five following tests; **Condition Met?**

- | | | |
|---|---|----|
| 1 | The Plan has a funded ratio of less than 65%, and the value of Plan assets plus projected contributions is less than the value of projected Plan benefits and expenses to be paid for the current and six succeeding plan years. | NO |
| 2 | The Plan has a funded ratio of less than 65% and is projected to have an accumulated funding deficiency for the current year or in any of the four succeeding plan years. | NO |
| 3 | The Plan is projected to have an accumulated funding deficiency for the current plan year or in any of the three succeeding plan years. | NO |
| 4 | Normal cost plus interest on the unfunded liabilities exceeds contributions, the present value of the vested benefits of inactive employees exceeds the present value of vested benefits of active employees, and the Plan is projected to have an accumulated funded deficiency for the current plan year or in any of the four succeeding plan years. | NO |
| 5 | The value of Plan assets plus projected contributions is less than the value of projected benefits and expenses to be paid for the current and four succeeding plan years. | NO |

Endangered Status – The Plan will be certified as Endangered if it is not in Critical status and it meets either test 6 or test 7 below;

- | | | |
|---|---|-----|
| 6 | The ratio of assets to liabilities is less than 80% on the first day of the Plan year. | YES |
| 7 | The Plan is projected to have an accumulated funding deficiency for the current plan year or in any of the six succeeding plan years. | NO |

Seriously Endangered Status – The Plan will be certified as Seriously Endangered if it is not in Critical status and meets both test 6 and test 7 above.

The Plan is certified to be in Endangered status for the Plan year beginning July 1, 2014.

APPENDIX II - DETAIL FOR ACTUARIAL CERTIFICATION

A. DETERMINATION OF FUNDED PERCENTAGE as of July 1, 2014 (used in Tests 1, 2, and 6)

Assets at Market Value as of June 30, 2014:

1. Most recent reported Market Value of Plan Assets ¹	\$	5,523,044,838
--	----	---------------

Development of Actuarial Value of Assets:

1. Most recent reported Market Value of Plan Assets	\$	5,523,044,838
2. 75% of 2013-14 Preliminary (Gain)/Loss		(271,648,827)
3. 50% of 2012-13 (Gain)/Loss		(46,568,841)
4. 25% of 2011-12 (Gain)/Loss		94,784,165
5. 40% of 2008-9 (Gain)/Loss ²		595,734,818
6. Preliminary Actuarial Value of Assets (1+2+3+4+5)	\$	5,895,346,153
7. Corridor for Actuarial Value of Assets		
a. 80% of Market Value of Plan Assets	\$	4,418,435,870
b. 120% of Market Value of Plan Assets	\$	6,627,653,806
8. Actuarial Value of Assets (Greater of 6 and 7a, but not greater than 7b)	\$	5,895,346,153

Development of Unit Credit Liabilities:

1. Unit Credit Liabilities from Actuarial Valuation as of July 1, 2013	\$	
a. Active liability		2,461,558,929
b. Inactive liability		4,926,871,035
2. Adjustments ³		
a. To active liability		43,273,832
b. To inactive liability		86,613,644
3. Unit Credit Liabilities as of June 30, 2014 [1a. + 1b. + 2a. + 2b.]	\$	7,518,317,440

**FUNDED PERCENTAGE = Actuarial Value of Assets / Unit
Credit Liabilities**

78.41%

¹ The Market Value of Plan Assets is based on the estimated value of Plan assets at time of certification based on reports provided by the Fund Office.

² Reflects the Trustees election of the 10-year smoothing of the 2008-9 net investment loss as provided by PRA 2010.

³ The Unit Credit Liabilities have been adjusted for the following:

- Accrual of benefits
- Accrual of interest
- Benefit payments

B. PROJECTIONS

1a. Funding Standard Account Credit Balance without Extension (Used in Tests 2, 3 and 4)

<u>Date</u>	<u>Credit</u>	adjusted with interest to end of year		
	<u>Balance</u>	<u>Charges</u>	<u>Credits</u>	<u>Contributions</u>
7/1/2014	\$ 614,729,726	\$ 852,859,806	\$ 160,710,089	\$ 372,603,288
7/1/2015	341,288,026	550,678,119	160,710,089	377,147,483
7/1/2016	354,064,080	535,452,552	160,710,089	378,004,253
7/1/2017	383,880,677	480,986,143	160,710,089	379,042,187
7/1/2018	471,437,860	455,740,472	160,710,089	380,917,418
7/1/2019	592,682,735	429,013,878	95,094,474	382,803,513
7/1/2020	686,018,050	423,931,282	25,727,569	384,688,011
7/1/2021	723,953,701			

1b. Funding Standard Account Credit Balance with Extension (Used in Test 7)

<u>Date</u>	<u>Credit</u>	adjusted with interest to end of year		
	<u>Balance</u>	<u>Charges</u>	<u>Credits</u>	<u>Contributions</u>
7/1/2014	\$ 1,574,069,312	\$ 687,695,378	\$ 160,710,089	\$ 372,603,288
7/1/2015	1,537,742,509	708,663,252	160,710,089	377,147,483
7/1/2016	1,482,267,517	715,710,356	160,710,089	378,004,253
7/1/2017	1,416,441,566	724,833,281	160,710,089	379,042,187
7/1/2018	1,337,593,679	744,557,643	160,710,089	380,917,418
7/1/2019	1,234,983,069	746,443,896	95,094,474	382,803,513
7/1/2020	1,059,060,890	541,245,004	25,727,569	384,688,011
7/1/2021	1,007,661,032			

The projected funding standard account is based on the methods and assumptions set out in Appendix III. In addition, the projection of future contributions is based on the Trustees' estimate of future industry activity multiplied by the contribution rates contained in the collective bargaining agreements under which the Plan is maintained.

2. *Assets (used in Tests 1 and 5)*

<u>Date</u>	Market Value Assets	Projected Contributions	Projected Benefits and Expenses	Projected Investment Earnings
7/1/2014	\$ 5,523,044,838	\$ 359,370,523	\$ 563,485,101	\$ 406,712,442
7/1/2015	5,725,642,702	363,753,333	588,004,699	421,165,804
7/1/2016	5,922,557,140	364,579,675	612,518,725	435,062,157
7/1/2017	6,109,680,247	365,580,748	634,757,460	448,314,375
7/1/2018	6,288,817,911	367,389,382	642,138,500	461,544,513
7/1/2019	6,475,613,305	369,208,493	657,403,719	475,059,054
7/1/2020	6,662,477,132	371,026,064	673,761,776	488,538,430
7/1/2021	6,848,279,850			

Projected benefit payments reflect both projected changes in industry activity provided by the Trustees. Expenses include a 3.5% growth for inflation. Contribution projections include the assumption that total hours worked will improve by 1.5% for the Plan year beginning July 1, 2014 and an estimated annual contribution rate growth assumption of 0.5%. The projections use the balance of assumptions set out in Appendix III.

**C. UNIT CREDIT NORMAL COST, INTEREST, ASSETS AND CONTRIBUTIONS
(used in Test 4)**

	<u>July 1, 2014</u>
1. Normal Cost (Unit Credit Method) plus Expenses	\$ 135,590,931
2. Interest on Unfunded Benefit Liabilities	\$ 121,722,846
3. Present Value of Anticipated Contributions for 2014-15	\$ 346,607,710
4. Present Value of Vested Benefits	
a. Active Members ⁴	\$ 2,375,949,252
b. Inactive Members ⁵	\$ 5,013,484,679

⁴ Developed as the ratio of vested active liability to total active liability as of 7/1/2013 multiplied by the sum of line items 1.a. and 2.a. under the Development of Unit Credit Liabilities section on page 2 of this exhibit.

⁵ Equal to the sum of line items 1.b. and 2.b. under the Development of Unit Credit Liabilities section on page 2 of this exhibit.

EXTRACT FROM 7/1/2013 VALUATION

APPENDIX III – METHODOLOGY AND ASSUMPTIONS

A. Actuarial Assumptions

1. Rate of Investment Return

Funding and disclosure purposes: 7.50% compounded annually
All investment returns are net of investment expenses.

2. Rate of Mortality

Healthy Lives – RP-2000 Combined Mortality (Blue Collar)

Disabled Lives – RP-2000 Disabled Mortality

Past experience has shown mortality assumptions to be slightly more conservative than actual experience in five of the last six years. This assumption is being closely monitored.

3. Rate of Retirement

Annual retirements for eligible members (male and female) are based on the following table:

Age	Retirement Probability	Age	Retirement Probability
55	10.0%	63	25.0%
56	10.0	64	25.0
57	10.0	65	35.0
58	10.0	66	35.0
59	15.0	67	35.0
60	20.0	68	35.0
61	25.0	69	35.0
62	40.0	70	100.0

4. Rate of Turnover

Illustrative rates of terminations are shown below:

Age	Rate (%)
25	9.38
30	8.75
35	8.13
40	7.60
45	7.10
50	6.60
55	6.10
60	5.60
63	0.00

5. Disability

Disability incidence rates are assumed to be 60.45% of the rates used under the Old Age Survivors and Disability Insurance Program. Illustrative rates are shown below:

Age	Rate (%)
25	0.05
30	0.07
35	0.09
40	0.13
45	0.22
50	0.37
55	0.61
60	0.98
62	1.18
65	0.00

6. Percent Married

Social Security awards during 1972. Sample rates as follows:

Age	Percent Married	
	Males	Females
40-44	71.4%	63.1%
45-49	73.3	61.0
50-54	75.7	64.0
55-59	77.0	57.6
60-64	74.0	49.5
65-69	69.6	22.7

7. Spouse's Age

It was assumed that husbands are three years older than their spouses.

8. Administrative Expenses

\$19,500,000 for the year added to the normal cost.

9. Average Annual Service Credits

It was assumed actives will earn 1.00 years of service per year based on the average annual hours of service.

10. Future Benefit Accruals

The benefit accrual rate is calculated based on the contribution rate and benefit accrual schedule in effect as of January 1, 2013. We were provided information on those employers adopting the higher contribution rate for their members to be eligible for an accrual under Schedule D of the Plan. Employers who did not adopt the higher contribution rate for their members would be eligible for accrual under Schedule G of the Plan, which is a 75% reduction of the accruals under Schedule D. We assumed that this rate remained the same for benefit accruals on future service.

B. Actuarial Methods

1. Asset Valuation Method

Actuarial Value of Assets is based on the Market Value of Plan Assets less a portion of the actual market value returns that are more or less than expected returns. The gain or loss for the year equals the actual market value net investment income less the expected return on an actuarial value based on the net investment return assumption. 25% of the gain or loss is recognized each year for four years. However, the 2009 investment loss is recognized at a rate of 10% per plan year due to funding relief. The actuarial value is further adjusted to be within 20% of market value. If such a further adjustment is necessary, the gain or loss in the following year is adjusted by an amount equal to the adjustment, but of the opposite sign.

2. Funding Method for Funding:

The cost method for valuation of liabilities used for this valuation is the Unit Credit method. This is one of a family of valuation methods known as accrued benefit methods. The chief characteristic of accrued benefit methods is that the funding pattern follows the pattern of benefit accrual. The normal cost is determined as that portion of each participant's benefit attributable to service expected to be earned in the upcoming plan year. The actuarial liability, which is determined for each participant as of each valuation date, represents the actuarial present value of the portion of each participant's benefit attributable to service earned prior to the valuation date.

3. Funding Method for Accrued Benefits:

Same as for funding.

4. PRA 2010 Funding Relief

The Fund's Board of Trustees elected funding relief under § 431(b)(8) of the Code and § 304(b)(8) of ERISA, specifically:

- The "special amortization rule," which allows the Plan's investment losses for the plan year ended June 30, 2009 to be separately amortized over 29 years, whereas they were previously required to be amortized over 15 years.
- The "special asset valuation rule" in determining the actuarial value of plan assets which allows the Plan to recognize the 2009 loss over 10 years, at 10% per year. Prior to the relief, this investment loss would be recognized over four years, or 25% per year.

Exhibit 5

Schedule MB, Line 9c and 9h - Schedule of Funding Standard Account Basis

Table IV-5 Schedule of Amortizations Required for Minimum Required Contribution as of July 1, 2014				
Type of Base	Date Established	7/1/2014 Outstanding Balance	Remaining Amortization Years	Beginning of Year Amortization Amount
CHARGES				
1. Change Assumptions	7/1/2001	\$ 7,248,274	22	\$ 635,062
2. Experience Loss	7/1/2001	80,777,600	7	14,186,825
3. Plan Amendment	7/1/2001	224,819,405	22	19,697,708
4. Combined Base	7/1/2001	973,244,164	6	192,878,789
5. Plan Amendment	7/1/2002	113,722,654	23	9,789,169
6. Experience Loss	7/1/2002	268,479,700	8	42,638,827
7. Plan Amendment	7/1/2003	116,278,848	24	9,848,557
8. Experience Loss	7/1/2003	215,550,302	9	31,433,683
9. Benefit Level Increase	7/1/2004	93,901,259	25	7,836,228
10. Experience Loss	7/1/2004	152,723,848	10	20,697,409
11. Experience Loss	7/1/2005	42,315,889	11	5,380,907
12. Benefit Change	7/1/2006	27,419,518	27	2,229,322
13. Plan Amendment	7/1/2007	17,095,901	28	1,374,116
14. Change Assumptions	7/1/2007	68,838,523	28	5,533,029
15. Plan Merger	7/1/2008	5,156,416	14	565,034
16. Experience Loss	7/1/2008	19,049,502	14	2,087,425
17. Plan Merger	7/1/2009	17,208,496	15	1,813,491
18. Recognized Eligible Net Investment Loss	7/1/2009	839,822,004	24	71,131,032
19. Bifurcation Base	7/1/2009	40,368,990	15	4,254,225
20. Recognized Eligible Net Investment Loss	7/1/2010	51,720,140	24	4,380,579
21. Recognized Eligible Net Investment Loss	7/1/2012	73,828,274	24	6,253,088
22. Bifurcation Base	7/1/2012	52,805,711	13	6,045,109
23. Recognized Eligible Net Investment Loss	7/1/2013	249,623,712	24	21,142,566
24. Change Assumptions	7/1/2014	11,210,400	15	1,181,391
25. Recognized Eligible Net Investment Loss	7/1/2014	263,212,628	24	22,293,517
TOTAL CHARGES		\$4,026,422,158		\$ 505,307,088

Exhibit 5

Schedule MB, Line 9c and 9h - Schedule of Funding Standard Account Basis

Table IV-6 Schedule of Amortizations Required for Minimum Required Contribution as of July 1, 2014				
Type of Base	Date Established	7/1/2014 Outstanding Balance	Remaining Amortization Years	Beginning of Year Amortization Amount
CREDITS				
1. Combined Credit	7/1/2013	591,070,822	5.50	125,565,136
2. Bifurcation Base	7/1/2014	247,398,927	15	26,071,759
TOTAL CREDITS		<u>\$ 838,469,749</u>		<u>\$ 151,636,895</u>
NET CHARGE		\$3,187,952,409		\$ 353,670,193

Exhibit 7

Schedule MB, Line 11 - Justification for Changes in Actuarial Assumptions

The interest assumption for the measurement of the current liabilities for minimum funding was decreased from 3.61% to 3.59%.

The mortality for healthy and disabled lives was updated to reflect an explicit assumption for mortality improvement.

Expected future service was changed from 1.00 year of service credit per year to 1.02 years of service credit per year.

Exhibit 3
Schedule MB, Line 6 – Statement of Actuarial Assumptions / Methods

A. Actuarial Assumptions

1. Rate of Investment Return

Funding and disclosure purposes: 7.50% compounded annually

Current Liability under RPA 1994: Minimum funding 3.59%

All investment returns are net of investment expenses.

2. Rate of Mortality

(a) Funding:

Healthy Lives – RP-2000 Combined Mortality (Blue Collar) with ages set forward two years and 75% of the liability increase reflecting generational improvements using Scale AA.

Disabled Lives – RP-2000 Disabled Mortality with ages set forward two years and 75% of the liability increase reflecting generational improvements using Scale AA.

(b) RPA '94 Current Liability:

2014 Current Liability Mortality Table pursuant to Internal Revenue Service

3. Rate of Retirement

Annual retirements for eligible members (male and female) are based on the following table:

Age	Retirement Probability	Age	Retirement Probability
55	10.0%	63	25.0%
56	10.0	64	25.0
57	10.0	65	35.0
58	10.0	66	35.0
59	15.0	67	35.0
60	20.0	68	35.0
61	25.0	69	35.0
62	40.0	70	100.0

4. Rate of Turnover

Illustrative rates of terminations are shown below:

Age	Rate (%)
25	9.38
30	8.75
35	8.13
40	7.60
45	7.10
50	6.60
55	6.10
60	5.60
63	0.00

Exhibit 3
Schedule MB, Line 6 – Statement of Actuarial Assumptions / Methods

5. Disability

Disability incidence rates are assumed to be 60.45% of the rates used under the Old Age Survivors and Disability Insurance Program. Illustrative rates are shown below:

Age	Rate (%)
25	0.05
30	0.07
35	0.09
40	0.13
45	0.22
50	0.37
55	0.61
60	0.98
62	1.18
65	0.00

6. Percent Married

Social Security awards during 1972. Sample rates as follows:

Age	Percent Married	
	Males	Females
40-44	71.4 %	63.1 %
45-49	73.3	61.0
50-54	75.7	64.0
55-59	77.0	57.6
60-64	74.0	49.5
65-69	69.6	22.7

7. Spouse's Age

It is assumed that husbands are three years older than their spouses.

8. Administrative Expenses

\$19,500,000 as of the beginning of the Plan year is added to the normal cost.

9. Average Annual Service Credits

It was assumed actives will earn 1.02 years of service per year based on the average annual hours of service.

10. Future Benefit Accruals

The benefit accrual rate is calculated based on the contribution rate and benefit accrual schedule in effect as of January 1, 2014. We were provided information on those employers adopting the higher contribution rate for their members to be eligible for accrual under Schedule D of the Plan. Employers who did not adopt the higher contribution rate for their members would be eligible for accrual under Schedule G of the Plan, which is a 75% reduction of the accrual under Schedule D. We assumed that this rate remained the same for benefit accrual on future service.

Exhibit 3

Schedule MB, Line 6 – Statement of Actuarial Assumptions / Methods

11. Changes in Assumptions Since Last Valuation

The interest assumption for the measurement of the current liabilities for minimum funding was decreased from 3.61% to 3.59%. Pursuant to regulation, the mortality table for RPA '94 current liability calculations was also changed.

The mortality for healthy and disabled lives has been updated to reflect an explicit assumption for mortality improvement.

Actives are now assumed to earn 1.02 years of service credit per year instead of 1.00.

Exhibit 3

Schedule MB, Line 6 – Statement of Actuarial Assumptions / Methods

B. Actuarial Methods

1. Asset Valuation Method

Actuarial asset value is based on the market value of assets less a portion of the actual market value returns that are more or less than expected returns. The gain or loss for the year equals the actual market value net investment income less the expected return on an actuarial value based on the net investment return assumption. 25% of the gain or loss is recognized each year for four years. However, the 2009 investment loss is recognized at a rate of 10% per Plan year due to funding relief. The actuarial value is further adjusted to be within 20% of market value. If such a further adjustment is necessary, the gain or loss in the following year is adjusted by an amount equal to the adjustment, but of the opposite sign.

2. Funding Method: Unit Credit Cost Method

The cost method for valuation of liabilities used for this valuation is the Unit Credit method. This is one of a family of valuation methods known as accrued benefit methods. The chief characteristic of accrued benefit methods is that the funding pattern follows the pattern of benefit accrual. The normal cost is determined as that portion of each participant's benefit attributable to service expected to be earned in the upcoming plan year. The actuarial liability, which is determined for each participant as of each valuation date, represents the actuarial present value of the portion of each participant's benefit attributable to service earned prior to the valuation date.

One of the significant effects of this funding method is that, depending on the demographics of the population, the Unit Credit method tends to produce lower costs in the early years. There is a possibility that as the population ages, the annual cost would increase over time.

3. Active Participants

- (a) Active Data Collection Date: January 1, 2014
- (b) Active participants include all employees who had at least one year of earned future service credit as of the data collection date.
- (c) For purposes of the valuation, the active data was rolled forward by six months to the valuation date.

4. PRA 2010 Funding Relief

The Fund's Board of Trustees elected funding relief under § 431(b)(8) of the Code and § 304(b)(8) of ERISA, specifically:

- The "special amortization rule," which allows the Plan's investment losses for the plan year ended June 30, 2009 to be separately amortized over 29 years, whereas they were previously required to be amortized over 15 years.
- The "special asset valuation rule" in determining the actuarial value of plan assets which allows the Plan to recognize the 2009 loss over 10 years, at 10% per year. Prior to the relief, this investment

Exhibit 3

Schedule MB, Line 6 – Statement of Actuarial Assumptions / Methods

loss would be recognized over four years, or 25%
per year.

5. Changes in Methods Since Last Valuation

None.

Exhibit 1

Schedule MB, Line 4a – Illustration Supporting Actuarial Certification of Status

The ratio of assets to liabilities was less than 80% on the first day of the Plan year. Further support can be found on the attached actuarial certification.

Schedule MB, Line 4c – Documentation Regarding Progress under Funding Improvement Plan or Rehabilitation Plan

The Plan's Funding Improvement Plan (FIP) began on July 1, 2012. The funded ratio was 76.8% as of this date. In the year in which the FIP was adopted, the Plan was certified as Seriously Endangered. Based on the Plan's reasonably anticipated experience and actuarial assumptions, the Plan is projected to have a funded ratio greater than 81.4% by June 30, 2027 and no funding deficiency is expected. Therefore, the Funding Improvement Plan is making the scheduled progress as required by the Pension Protection Act.

Form 5500Department of the Treasury
Internal Revenue ServiceDepartment 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 6047(e), 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. 1510 - 0110
1510 - 0089**2014****This Form is Open to
Public Inspection****Part I Annual Report Identification Information**For calendar plan year 2014 or fiscal plan year beginning • **07/01/2014** and ending **06/30/2015**

- A** This return/report is for: ☒ a multiemployer plan; ☐ a multiple-employer plan (Filers checking this box must attach a list of participating employer information in accordance with the forms instr.); or ☐ 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) _____

Part II Basic Plan Information - enter all requested information

1a Name of plan PLUMBERS AND PIPEFITTERS NATIONAL PENSION FD	1b Three-digit plan number (PN) ► 001
	1c Effective date of plan 07/23/1968
2a Plan sponsor's name and address; include room or suite number (employer, if for a single-employer plan) B/O/T PLUMBERS & PIPEFITTERS NATIONAL PENSION FUND 103 ORONOCO STREET ALEXANDRIA VA 22314-2015 103 ORONOCO STREET ALEXANDRIA VA 22314	2b Employer Identification Number (EIN) 52-6152779 2c Plan Sponsor's telephone number 703-739-9020 2d Business code (see instructions) 525100

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

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

SIGN HERE <i>William P. Hite</i> Signature of plan administrator	2/2/16 Date	<i>William Hite</i> Trustee Enter name of individual signing as plan administrator
SIGN HERE <i>Sammy Belcher</i> Signature of employer/plan sponsor	2/2/16 Date	<i>Sammy Belcher</i> Trustee Enter name of individual signing as employer or plan sponsor
SIGN HERE Signature of DFE	 Date	 Enter name of individual signing as DFE
Preparer's name (including firm name, if applicable) and address (include room or suite number) (optional) JEROME J. ROBERTSON, CPA SALTER & COMPANY, LLC 4600 EAST-WEST HIGHWAY, SUITE 300 BETHESDA MD 20814-3415		Preparer's telephone number (optional) 3018307400

For Paperwork Reduction Act Notice and OMB Control Numbers, see the instructions for Form 5500.

**Form 5500 (2014)
v. 140124**

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 has changed since the last return/report filed for this plan, enter the name, EIN and the plan number from the last return/report:	
a Sponsor's name	4b EIN 4c PN
5 Total number of participants at the beginning of the plan year	5 151,703
6 Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines 6a(1), 6a(2), 6b, 6c, and 6d).	
a(1) Total number of active participants at the beginning of the plan year	6a(1) 71,066
a(2) Total number of active participants at the end of the plan year	6a(2) 70,875
b Retired or separated participants receiving benefits	6b 41,117
c Other retired or separated participants entitled to future benefits	6c 35,927
d Subtotal. Add lines 6a(2), 6b, and 6c	6d 147,919
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits	6e 6,488
f Total. Add lines 6d and 6e	6f 154,407
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	6g
h Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested	6h 2,145
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	7 4,606
8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions:	
1A	

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

9a Plan funding arrangement (check all that apply)	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	(1) ☒ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor
10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)	
a Pension Schedules	b General Schedules
(1) ☒ R (Retirement Plan Information)	(1) ☒ H (Financial Information)
(2) ☒ MB (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary	(2) ☐ I (Financial Information - Small Plan)
(3) ☐ SB (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary	(3) ☒ 2 A (Insurance Information)
	(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 2014 Form M-1 annual report. If the plan was not required to file the 2014 Form M-1 annual report, enter the Receipt Confirmation Code for the most recent Form M-1 that was required to be filed under the Form M-1 filing requirements. (Failure to enter a valid Receipt Confirmation Code will subject the Form 5500 filing to rejection as incomplete.)

Receipt Confirmation Code _____

SCHEDULE MB (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation</small>	Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6059 of the Internal Revenue Code (the Code). File as an attachment to Form 5500 or 5500-SF.	OMB No. 1210-0110 <div style="text-align: center; font-size: 1.2em;">2014</div> This Form is Open to Public Inspection
For calendar plan year 2014 or fiscal plan year beginning <u>07/01/2014</u> and ending <u>06/30/2015</u>		

▶ Round off amounts to nearest dollar.

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

A Name of plan <u>Plumbers and Pipefitters National Pension Plan</u>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 70%;">B Three-digit plan number (PN) ▶</td> <td style="width: 30%; text-align: center;">001</td> </tr> </table>	B Three-digit plan number (PN) ▶	001
B Three-digit plan number (PN) ▶	001		
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF <u>B/O/T Plumbers & Pipefitters National Pension Plan</u>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>D Employer Identification Number (EIN) 52-6152779</td> </tr> </table>	D Employer Identification Number (EIN) 52-6152779	
D Employer Identification Number (EIN) 52-6152779			
E Type of plan: (1) ☒ Multiemployer Defined Benefit (2) ☐ Money Purchase (see instructions)			

1a Enter the valuation date: Month <u>7</u> Day <u>1</u> Year <u>2014</u>																									
b Assets (1) Current value of assets (2) Actuarial value of assets for funding standard account c (1) Accrued liability for plan using immediate gain methods (2) Information for plans using spread gain methods: (a) Unfunded liability for methods with bases (b) Accrued liability under entry age normal method (c) Normal cost under entry age normal method (3) Accrued liability under unit credit cost method d Information on current liabilities of the plan: (1) Amount excluded from current liability attributable to pre-participation service (see instructions) (2) "RPA '94" information: (a) Current liability (b) Expected increase in current liability due to benefits accruing during the plan year (c) Expected release from "RPA '94" current liability for the plan year (3) Expected plan disbursements for the plan year	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td>1b(1)</td><td style="text-align: right;">5,603,649,138</td></tr> <tr><td>1b(2)</td><td style="text-align: right;">5,966,360,151</td></tr> <tr><td>1c(1)</td><td style="text-align: right;">7,565,578,516</td></tr> <tr><td>1c(2)(a)</td><td></td></tr> <tr><td>1c(2)(b)</td><td></td></tr> <tr><td>1c(2)(c)</td><td></td></tr> <tr><td>1c(3)</td><td style="text-align: right;">7,565,578,516</td></tr> <tr><td>1d(1)</td><td></td></tr> <tr><td>1d(2)(a)</td><td style="text-align: right;">13,177,832,546</td></tr> <tr><td>1d(2)(b)</td><td style="text-align: right;">282,669,467</td></tr> <tr><td>1d(2)(c)</td><td style="text-align: right;">532,830,160</td></tr> <tr><td>1d(3)</td><td style="text-align: right;">542,550,334</td></tr> </table>	1b(1)	5,603,649,138	1b(2)	5,966,360,151	1c(1)	7,565,578,516	1c(2)(a)		1c(2)(b)		1c(2)(c)		1c(3)	7,565,578,516	1d(1)		1d(2)(a)	13,177,832,546	1d(2)(b)	282,669,467	1d(2)(c)	532,830,160	1d(3)	542,550,334
1b(1)	5,603,649,138																								
1b(2)	5,966,360,151																								
1c(1)	7,565,578,516																								
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1d(2)(c)	532,830,160																								
1d(3)	542,550,334																								

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

SIGN HERE		<div style="text-align: right; font-size: 1.5em;">3/25/16</div>
	Signature of actuary <u>Kenneth A. Kent, FSA, FCA</u> Type or print name of actuary	Date <u>14-03776</u> Most recent enrollment number
	Firm name <u>Cheiron, Inc.</u> <u>1750 Tysons Boulevard, Suite 100</u> <u>McLean VA 22102</u> Address of the firm	Telephone number (including area code) <u>(703) 893-1456</u>

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

For Paperwork Reduction Act Notice and OMB Control Numbers, see the instructions for Form 5500 or Form 5500-SF.

Schedule MB (Form 5500) 2014
v. 140124

2 Operational information as of beginning of this plan year:

a Current value of assets (see instructions).....	2a	5,603,649,138
b "RPA '94" current liability/participant count breakdown:		
(1) For retired participants and beneficiaries receiving payment.....	(1) Number of participants	(2) Current liability
	45,959	6,306,063,260
(2) For terminated vested participants.....	26,086	1,787,627,415
(3) For active participants:		
(a) Non-vested benefits.....		259,455,907
(b) Vested benefits.....		4,824,685,964
(c) Total active.....	66,966	5,084,141,871
(4) Total.....	139,011	13,177,832,546
c If the percentage resulting from dividing line 2a by line 2b(4), column (2), is less than 70%, enter such percentage.....	2c	42.52%

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

(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees
01/01/2015	367,645,132				
Totals ▶			3(b)	367,645,132	3(c) 0

4 Information on plan status:

a Enter code to indicate plan's status (see instructions for attachment of supporting evidence of plan's status). If code is "N," go to line 5.	4a	E
b Funded percentage for monitoring plan's status (line 1b(2) divided by line 1c(3)).....	4b	78.8 %
c Is the plan making the scheduled progress under any applicable funding improvement or rehabilitation plan?.....		☒ Yes ☐ No
d If the plan is in critical status, were any adjustable benefits reduced?.....		☐ Yes ☐ No
e If line d is "Yes," enter the reduction in liability resulting from the reduction in adjustable benefits, measured as of the valuation date.....	4e	
f If the rehabilitation plan projects emergence from critical status, enter the plan year in which it is projected to emerge. If the rehabilitation plan is based on forestalling possible insolvency, enter the plan year in which insolvency is expected and check here ☐	4f	

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

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

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

6 Checklist of certain actuarial assumptions:

a Interest rate for "RPA '94" current liability.....	6a	3.59%
b Rates specified in insurance or annuity contracts.....		
	Pre-retirement	Post-retirement
	☐ Yes ☐ No ☒ N/A	☐ Yes ☐ No ☒ N/A
c Mortality table code for valuation purposes:		

(1) Males	6c(1)	A	A
(2) Females	6c(2)	A	A
d Valuation liability interest rate	6d	7.50 %	7.50 %
e Expense loading	6e	16.5 %	☐ N/A % ☒ N/A
f Salary scale	6f	%	☒ N/A
g Estimated investment return on actuarial value of assets for year ending on the valuation date	6g	7.9 %	
h Estimated investment return on current value of assets for year ending on the valuation date	6h	16.2 %	

7 New amortization bases established in the current plan year:

(1) Type of base	(2) Initial balance	(3) Amortization Charge/Credit
8	263,212,628	22,293,517
4	11,210,400	1,181,391
1	-247,398,927	-26,071,759

8 Miscellaneous information:

a If a waiver of a funding deficiency has been approved for this plan year, enter the date (MM-DD-YYYY) of the ruling letter granting the approval	8a	
b Is the plan required to provide a Schedule of Active Participant Data? (See the instructions.) If "Yes," attach schedule.	☒ Yes ☐ No	
c Are any of the plan's amortization bases operating under an extension of time under section 412(e) (as in effect prior to 2008) or section 431(d) of the Code?	☒ Yes ☐ No	
d If line c is "Yes," provide the following additional information:		
(1) Was an extension granted automatic approval under section 431(d)(1) of the Code?	☒ Yes ☐ No	
(2) If line 8d(1) is "Yes," enter the number of years by which the amortization period was extended	8d(2)	5
(3) Was an extension approved by the Internal Revenue Service under section 412(e) (as in effect prior to 2008) or 431(d)(2) of the Code?	☐ Yes ☒ No	
(4) If line 8d(3) is "Yes," enter number of years by which the amortization period was extended (not including the number of years in line (2))	8d(4)	
(5) If line 8d(3) is "Yes," enter the date of the ruling letter approving the extension	8d(5)	
(6) If line 8d(3) is "Yes," is the amortization base eligible for amortization using interest rates applicable under section 6621(b) of the Code for years beginning after 2007?	☐ Yes ☐ No	
e If box 5h is checked or line 8c is "Yes," enter the difference between the minimum required contribution for the year and the minimum that would have been required without using the shortfall method or extending the amortization base(s)	8e	165,164,428

9 Funding standard account statement for this plan year:**Charges to funding standard account:**

a Prior year funding deficiency, if any	9a	0
b Employer's normal cost for plan year as of valuation date	9b	137,795,990
c Amortization charges as of valuation date:	Outstanding balance	
(1) All bases except funding waivers and certain bases for which the amortization period has been extended	9c(1)	4,026,422,158
(2) Funding waivers	9c(2)	0
(3) Certain bases for which the amortization period has been extended	9c(3)	0

d Interest as applicable on lines 9a, 9b, and 9c	9d	48,232,731
e Total charges. Add lines 9a through 9d	9e	691,335,809

Credits to funding standard account:

f Prior year credit balance, if any	9f	1,588,734,044
g Employer contributions. Total from column (b) of line 3	9g	367,645,132

h Amortization credits as of valuation date	9h	838,469,749
i Interest as applicable to end of plan year on lines 9f, 9g, and 9h	9i	144,065,274

j Full funding limitation (FFL) and credits:

(1) ERISA FFL (accrued liability FFL)	9j(1)	3,965,093,868
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(2) "RPA '94" override (90% current liability FFL).....	9j(2)	6,222,002,192
(3) FFL credit.....	9j(3)	0
k (1) Waived funding deficiency.....	9k(1)	0
(2) Other credits.....	9k(2)	0
l Total credits. Add lines 9f through 9i, 9j(3), 9k(1), and 9k(2).....	9l	2,252,081,345
m Credit balance: If line 9l is greater than line 9e, enter the difference.....	9m	1,560,745,536
n Funding deficiency: If line 9e is greater than line 9l, enter the difference.....	9n	

9o Current year's accumulated reconciliation account:	
(1) Due to waived funding deficiency accumulated prior to the 2014 plan year.....	9o(1) 0
(2) Due to amortization bases extended and amortized using the interest rate under section 6621(b) of the Code:	
(a) Reconciliation outstanding balance as of valuation date.....	9o(2)(a) 0
(b) Reconciliation amount (line 9c(3) balance minus line 9o(2)(a)).....	9o(2)(b) 0
(3) Total as of valuation date.....	9o(3) 0
10 Contribution necessary to avoid an accumulated funding deficiency. (See instructions.).....	10
11 Has a change been made in the actuarial assumptions for the current plan year? If "Yes," see instructions.....	☒ Yes ☐ No