

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). ▶ Complete all entries in accordance with the instructions to the Form 5500.	OMB Nos. 1210-0110 1210-0089
		2015
		This Form is Open to Public Inspection

Part I	Annual Report Identification Information
For calendar plan year 2015 or fiscal plan year beginning <u>12/01/2015</u> and ending <u>11/30/2016</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>DETROIT BALL BEARING COMPANY UNION EMPLOYEES' RETIREMENT PLAN</u>	1b Three-digit plan number (PN) ▶ <u>001</u> 1c Effective date of plan <u>12/28/1952</u>
2a Plan sponsor's name (employer, if for a single-employer plan) Mailing address (include room, apt., suite no. and street, or P.O. Box) City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions) <u>APPLIED INDUSTRIAL TECHNOLOGIES</u> <u>ONE APPLIED PLAZA</u> <u>3301 EUCLID AVENUE</u> <u>CLEVELAND, OH 44115-5011</u>	2b Employer Identification Number (EIN) <u>34-0117420</u> 2c Plan Sponsor's telephone number <u>216-426-4000</u> 2d Business code (see instructions) <u>423990</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	<u>Filed with authorized/valid electronic signature.</u>	<u>09/05/2017</u>	<u>BARBARA D. EMERY</u>
	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)			Preparer's telephone number

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	5 139
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) 22 6a(2) 23 6b 43 6c 42 6d 108 6e 9 6f 117 6g 6h 0
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	7
8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions: 1B b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristics Codes in the instructions:	

9a Plan funding arrangement (check all that apply) (1) ☐ 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) ☐ 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)
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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 2015 Form M-1 annual report. If the plan was not required to file the 2015 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 SB (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Single-Employer Defined Benefit 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 2015 This Form is Open to Public Inspection
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For calendar plan year 2015 or fiscal plan year beginning 12/01/2015 and ending 11/30/2016	
▶ 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 DETROIT BALL BEARING COMPANY UNION EMPLOYEES' RETIREMENT PLAN	B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF APPLIED INDUSTRIAL TECHNOLOGIES	D Employer Identification Number (EIN) 34-0117420
E Type of plan: ☒ Single ☐ Multiple-A ☐ Multiple-B	F Prior year plan size: ☐ 100 or fewer ☒ 101-500 ☐ More than 500

Part I	Basic Information			
1	Enter the valuation date: Month 12 Day 01 Year 2015			
2	Assets:			
	a Market value	2a	6942814	
	b Actuarial value	2b	7298525	
3	Funding target/participant count breakdown	(1) Number of participants	(2) Vested Funding Target	(3) Total Funding Target
	a For retired participants and beneficiaries receiving payment	38	2839839	2839839
	b For terminated vested participants	79	2592361	2592361
	c For active participants	22	1922200	1932301
	d Total	139	7354400	7364501
4	If the plan is in at-risk status, check the box and complete lines (a) and (b) ☐			
	a Funding target disregarding prescribed at-risk assumptions	4a		
	b Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been in at-risk status for fewer than five consecutive years and disregarding loading factor	4b		
5	Effective interest rate	5	6.29%	
6	Target normal cost	6	82918	

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	08/23/2017 Signature of actuary AMY L. GENTILE Type or print name of actuary FINDLEY DAVIES, INC. Firm name 1660 WEST 2ND STREET, SUITE 900 CLEVELAND, OH 44113-1461 Address of the firm	08/23/2017 Date 17-08186 Most recent enrollment number 216-875-1900 Telephone number (including area code)
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Part II	Beginning of Year Carryover and Prefunding Balances
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		(a) Carryover balance	(b) Prefunding balance
7	Balance at beginning of prior year after applicable adjustments (line 13 from prior year)	0	49128
8	Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	0	0
9	Amount remaining (line 7 minus line 8)	0	49128
10	Interest on line 9 using prior year's actual return of <u>-0.92</u> %	0	-452
11	Prior year's excess contributions to be added to prefunding balance:		
a	Present value of excess contributions (line 38a from prior year)		0
b(1)	Interest on the excess, if any, of line 38a over line 38b from prior year Schedule SB, using prior year's effective interest rate of <u>6.49</u> %		0
b(2)	Interest on line 38b from prior year Schedule SB, using prior year's actual return		0
c	Total available at beginning of current plan year to add to prefunding balance		0
d	Portion of (c) to be added to prefunding balance		0
12	Other reductions in balances due to elections or deemed elections	0	0
13	Balance at beginning of current year (line 9 + line 10 + line 11d – line 12)	0	48676

Part III | Funding Percentages

14	Funding target attainment percentage.....	14	98.44 %
15	Adjusted funding target attainment percentage	15	98.44 %
16	Prior year's funding percentage for purposes of determining whether carryover/prefunding balances may be used to reduce current year's funding requirement.....	16	102.50 %
17	If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage.....	17	%

Part IV Contributions and Liquidity Shortfalls

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

Contributions made to the plan for the plan year by employer(s) and employee(s)							
(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		
08/04/2017	500000	0					
			Totals ►	18(b)	500000	18(c) 0	

19 Discounted employer contributions – see instructions for small plan with a valuation date after the beginning of the year:

a Contributions allocated toward unpaid minimum required contributions from prior years.....	19a	0
b Contributions made to avoid restrictions adjusted to valuation date.....	19b	0
c Contributions allocated toward minimum required contribution for current year adjusted to valuation date.....	19c	451514

20 Quarterly contributions and liquidity shortfalls:

a Did the plan have a "funding shortfall" for the prior year? ☒ Yes ☐ No

b If line 20a is "Yes," were required quarterly installments for the current year made in a timely manner? ☒ Yes ☐ No

C If line 20a is "Yes," see instructions and complete the following table as applicable:

Liquidity shortfall as of end of quarter of this plan year			
(1) 1st	(2) 2nd	(3) 3rd	(4) 4th
0	0	0	0

Part V Assumptions Used to Determine Funding Target and Target Normal Cost

21 Discount rate:				
a Segment rates:	1st segment: 4.72 %	2nd segment: 6.11 %	3rd segment: 6.81 %	☐ N/A, full yield curve used
b Applicable month (enter code).....				21b 4
22 Weighted average retirement age				22 62
23 Mortality table(s) (see instructions) ☒ Prescribed - combined ☐ Prescribed - separate ☐ Substitute				

Part VI Miscellaneous Items

24 Has a change been made in the non-prescribed actuarial assumptions for the current plan year? If "Yes," see instructions regarding required attachment.	☐ Yes ☒ No
25 Has a method change been made for the current plan year? If "Yes," see instructions regarding required attachment.	☐ Yes ☒ No
26 Is the plan required to provide a Schedule of Active Participants? If "Yes," see instructions regarding required attachment.....	☒ Yes ☐ No
27 If the plan is subject to alternative funding rules, enter applicable code and see instructions regarding attachment.....	27

Part VII Reconciliation of Unpaid Minimum Required Contributions For Prior Years

28 Unpaid minimum required contributions for all prior years	28	0
29 Discounted employer contributions allocated toward unpaid minimum required contributions from prior years (line 19a).....	29	0
30 Remaining amount of unpaid minimum required contributions (line 28 minus line 29)	30	0

Part VIII Minimum Required Contribution For Current Year

31 Target normal cost and excess assets (see instructions):			
a Target normal cost (line 6)	31a	82918	
b Excess assets, if applicable, but not greater than line 31a	31b	0	
32 Amortization installments:	Outstanding Balance	Installment	
a Net shortfall amortization installment	114652	19067	
b Waiver amortization installment	0	0	
33 If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____) and the waived amount	33		
34 Total funding requirement before reflecting carryover/prefunding balances (lines 31a - 31b + 32a + 32b - 33)...	34	101985	
	Carryover balance	Prefunding balance	Total balance
35 Balances elected for use to offset funding requirement.....	0	0	0
36 Additional cash requirement (line 34 minus line 35)	36	101985	
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)	37	451514	
38 Present value of excess contributions for current year (see instructions)			
a Total (excess, if any, of line 37 over line 36)	38a	349529	
b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances	38b	0	
39 Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37)	39	0	
40 Unpaid minimum required contributions for all years.....	40	0	

Part IX Pension Funding Relief Under Pension Relief Act of 2010 (See Instructions)

41 If an election was made to use PRA 2010 funding relief for this plan:			
a Schedule elected	☐ 2 plus 7 years ☐ 15 years		
b Eligible plan year(s) for which the election in line 41a was made	☐ 2008 ☐ 2009 ☐ 2010 ☐ 2011		
42 Amount of acceleration adjustment	42	0	
43 Excess installment acceleration amount to be carried over to future plan years	43	0	

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
		2015
		This Form is Open to Public Inspection.

For calendar plan year 2015 or fiscal plan year beginning 12/01/2015 and ending 11/30/2016		
A Name of plan DETROIT BALL BEARING COMPANY UNION EMPLOYEES' RETIREMENT PLAN	B Three-digit plan number (PN) ▶	001
C Plan sponsor's name as shown on line 2a of Form 5500 APPLIED INDUSTRIAL TECHNOLOGIES	D Employer Identification Number (EIN) 34-0117420	

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

- a Check "Yes" or "No" to indicate whether you are excluding a person from the remainder of this Part because they received only eligible indirect compensation for which the plan received the required disclosures (see instructions for definitions and conditions)..... ☒ Yes ☐ No
- b If you answered line 1a "Yes," enter the name and EIN or address of each person providing the required disclosures for the service providers who received only eligible indirect compensation. Complete as many entries as needed (see instructions).

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation
MATRIX FINANCIAL SOLUTIONS
20-1591048

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

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

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

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

FINDLEY DAVIES, INC.

34-1213174

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "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 17 50	NONE	39104	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

OGLETREE DEAKINS NASH SMOAK

57-1044820

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
29 50	NONE	15512	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

PLANTE & MORAN

38-1357951

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
10 50	NONE	12500	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)

MG TRUST CO. D/B/A MATRIX TRUST

75-3182674

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
21 50 51 52 62 63 99	TRUSTEE	7376	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☒ No ☐

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

UBS

13-2638166

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "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 51 52 62 63 99	NONE	5720	Yes ☒ No ☐	Yes ☒ No ☐	0	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 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 2015 This Form is Open to Public Inspection
For calendar plan year 2015 or fiscal plan year beginning 12/01/2015 and ending 11/30/2016		
A Name of plan DETROIT BALL BEARING COMPANY UNION EMPLOYEES' RETIREMENT PLAN		B Three-digit plan number (PN) ► 001
C Plan sponsor's name as shown on line 2a of Form 5500 APPLIED INDUSTRIAL TECHNOLOGIES		D Employer Identification Number (EIN) 34-0117420

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		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	0	113144
(2) Participant contributions	1b(2)		
(3) Other.....	1b(3)		
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	215527	111081
(2) U.S. Government securities.....	1c(2)	1469680	1064052
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other.....	1c(3)(B)	0	238231
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)	3876126	3526681
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)		
(9) Value of interest in common/collective trusts.....	1c(9)		
(10) Value of interest in pooled separate accounts.....	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds).....	1c(13)	1385327	1267928
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)		
(15) Other	1c(15)		

1d Employer-related investments:

		(a) Beginning of Year	(b) End of Year
(1) Employer securities	1d(1)		
(2) Employer real property	1d(2)		
e Buildings and other property used in plan operation	1e		
f Total assets (add all amounts in lines 1a through 1e)	1f	6946660	6321117

Liabilities

g Benefit claims payable	1g		
h Operating payables	1h		
i Acquisition indebtedness	1i		
j Other liabilities	1j		
k Total liabilities (add all amounts in lines 1g through 1j)	1k	0	0

Net Assets

l Net assets (subtract line 1k from line 1f)	1l	6946660	6321117
---	-----------	---------	---------

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)	113144	
(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)		113144
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	205	
(B) U.S. Government securities	2b(1)(B)	29078	
(C) Corporate debt instruments	2b(1)(C)	7060	
(D) Loans (other than to participants)	2b(1)(D)		
(E) Participant loans	2b(1)(E)		
(F) Other	2b(1)(F)		
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		36343
(2) Dividends: (A) Preferred stock	2b(2)(A)	260	
(B) Common stock	2b(2)(B)	70343	
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	103996	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		174599
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)	5642034	
(B) Aggregate carrying amount (see instructions)	2b(4)(B)	5858468	
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)		-216434
(5) Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)	173125	
(B) Other	2b(5)(B)		
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		173125

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		-44060
c Other income	2c		415
d Total income. Add all income amounts in column (b) and enter total	2d		237132

Expenses**e** Benefit payment and payments to provide benefits:

(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	782464	
(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)		782464
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)	74491	
(2) Contract administrator fees	2i(2)	5720	
(3) Investment advisory and management fees	2i(3)		
(4) Other	2i(4)		
(5) Total administrative expenses. Add lines 2i(1) through (4)	2i(5)		80211
j Total expenses. Add all expense amounts in column (b) and enter total	2j		862675

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		-625543
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: PLANTE & MORAN

(2) EIN: 38-1357951

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:

	Yes	No	N/A	Amount
a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)		☒		
b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)		☒		

	Yes	No	N/A	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		
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)		X		
e Was this plan covered by a fidelity bond?	X			500000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		X		
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?		X		
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?		X		
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	X			
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked, and see instructions for format requirements.)		X		
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?		X		
l Has the plan failed to provide any benefit when due under the plan?		X		
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)				
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.				
o Did the plan trust incur unrelated business taxable income?				
p Were in-service distributions made during the plan year?				

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

6a Name of trust	6b Trust's EIN
6c Name of trustee or custodian	6d Trustee's or custodian's telephone number

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 2015 This Form is Open to Public Inspection.
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For calendar plan year 2015 or fiscal plan year beginning 12/01/2015 and ending 11/30/2016

A Name of plan <u>DETROIT BALL BEARING COMPANY UNION EMPLOYEES' RETIREMENT PLAN</u>	B Three-digit plan number (PN) ▶ <u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>APPLIED INDUSTRIAL TECHNOLOGIES</u>	D Employer Identification Number (EIN) <u>34-0117420</u>

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

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

1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions.....	1	<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): <u>75-3182674</u>		
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>24</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)
----------------	--

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.
----------------	---

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	
b	The plan year immediately preceding the current plan year	14b	
c	The second preceding plan year	14c	
15	Enter the ratio of the number of participants under the plan on whose behalf no employer had an obligation to make an employer contribution during the current plan year to:		
a	The corresponding number for the plan year immediately preceding the current plan year	15a	
b	The corresponding number for the second preceding plan year	15b	
16	Information with respect to any employers who withdrew from the plan during the preceding plan year:		
a	Enter the number of employers who withdrew during the preceding plan year	16a	
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	
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
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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: _____% Investment-Grade Debt: _____% High-Yield Debt: _____% Real Estate: _____% Other: _____%
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): _____

Part VII	IRS Compliance Questions
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20a Is the plan a 401(k) plan?	☐ Yes	☐ No
20b If "Yes," how does the 401(k) plan satisfy the nondiscrimination requirements for employee deferrals and employer matching contributions (as applicable) under sections 401(k)(3) and 401(m)(2)?	☐ Design-based safe harbor method	☐ ADP/ACP test
20c If the ADP/ACP test is used, did the 401(k) plan perform ADP/ACP testing for the plan year using the "current year testing method" for nonhighly compensated employees (Treas. Reg sections 1.401(k)-2(a)(2)(ii) and 1.401(m)-2(a)(2)(ii))?	☐ Yes	☐ No
21a Check the box to indicate the method used by the plan to satisfy the coverage requirements under section 410(b):	☐ Ratio percentage test	☐ Average benefit test
21b Does the plan satisfy the coverage and nondiscrimination tests of sections 410(b) and 401(a)(4) by combining this plan with any other plans under the permissive aggregation rules?	☐ Yes	☐ No
22a Has the plan been timely amended for all required tax law changes?	☐ Yes	☐ No ☐ N/A
22b Date the last plan amendment/restatement for the required tax law changes was adopted ____/____/____. Enter the applicable code _____. (See instructions for tax law changes and codes).		
22c If the plan sponsor is an adopter of a pre-approved master and prototype (M&P) or volume submitter plan that is subject to a favorable IRS opinion or advisory letter, enter the date of that favorable letter ____/____/____ and the letter's serial number _____.		
22d If the plan is an individually-designed plan and received a favorable determination letter from the IRS, enter the date of the plan's last favorable determination letter ____/____/____.		
23 Is the Plan maintained in a U.S. territory (i.e., Puerto Rico (if no election under ERISA section 1022(i)(2) has been made), American Samoa, Guam, the Commonwealth of the Northern Mariana Islands or the U.S. Virgin Islands)?	☐ Yes	☐ No

**Detroit Ball Bearing Company
Union Employees' Retirement Plan**

**Financial Report
November 30, 2016**

Detroit Ball Bearing Company Union Employees' Retirement Plan

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Schedule of Assets Held at End of Year	Schedule I

Independent Auditor's Report

To the Plan Administrator
Detroit Ball Bearing Company Union
Employees' Retirement Plan

Report on the Financial Statements

We were engaged to audit the accompanying financial statements of Detroit Ball Bearing Company Union Employees' Retirement Plan (the "Plan"), which comprise the statement of net assets available for benefits as of November 30, 2016 and 2015 and the related statement of changes in net assets available for benefits for the years then ended, and the statement of accumulated plan benefits as of November 30, 2015 and the related statement of changes in accumulated plan benefits for the year then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

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

Auditor's Responsibility

Our responsibility is to express an opinion on these financial statements based on conducting the audits in accordance with auditing standards generally accepted in the United States of America. Because of the matter described in the *Basis for Disclaimer of Opinion* paragraph, however, we were not able to obtain sufficient appropriate audit evidence to provide a basis for an audit opinion.

Basis for Disclaimer of Opinion

As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 (ERISA), the plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Note 3, which was certified by Matrix Trust Company (Matrix), except for comparing such information with the related information included in the financial statements. We have been informed by the plan administrator that Matrix holds the Plan's investment assets and executes related transactions. The plan administrator has obtained certifications from Matrix as of and for the years ended November 30, 2016 and 2015 that the information provided to the plan administrator by Matrix is complete and accurate.

To the Plan Administrator
Detroit Ball Bearing Company Union
Employees' Retirement Plan

Disclaimer of Opinion

Because of the significance of the matter described in the *Basis for Disclaimer of Opinion* paragraph, we have not been able to obtain sufficient appropriate audit evidence to provide a basis for an audit opinion. Accordingly, we do not express an opinion on these financial statements.

Other Matter

The supplemental schedule of assets held at end of year as of November 30, 2016 is required by the Department of Labor's (DOL) Rules and Regulations for Reporting and Disclosure under ERISA and is presented for the purpose of additional analysis and is not a required part of the financial statements. Because of the significance of the matter described in the *Basis for Disclaimer of Opinion* paragraph, we do not express an opinion on this supplemental schedule.

Report on Form and Content in Compliance with DOL Rules and Regulations

The form and content of the information included in the financial statements and supplemental schedule, other than that derived from the information certified by Matrix, have been audited by us in accordance with auditing standards generally accepted in the United States of America and, in our opinion, are presented in compliance with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.

Plant & Moran, PLLC

Cleveland, Ohio
July 14, 2017

Detroit Ball Bearing Company Union Employees' Retirement Plan

Statement of Net Assets Available for Benefits

	November 30, 2016	November 30, 2015
Assets		
Investments at fair value:		
Short-term investments	\$ 111,081	\$ 215,527
Corporate stocks	3,526,681	3,876,126
U.S. government, corporate, and foreign debt securities	1,302,283	1,469,680
Mutual funds	1,267,928	1,385,327
Total investments at fair value	6,207,973	6,946,660
Contributions receivable	113,144	-
Net Assets Available for Benefits	\$ 6,321,117	\$ 6,946,660

Detroit Ball Bearing Company

Union Employees' Retirement Plan

Statement of Changes in Net Assets Available for Benefits

	Year Ended	
	November 30, 2016	November 30, 2015
Additions to Net Assets		
Contributions	\$ 113,144	\$ -
Investment income (loss):		
Interest and dividends	210,942	230,081
Net realized and unrealized losses on investments	(87,369)	(235,815)
Total investment income (loss)	123,573	(5,734)
Other additions - Other income	415	-
Total additions	237,132	(5,734)
Deductions from Net Assets		
Benefits paid directly to participants or beneficiaries	782,464	268,761
Administrative expenses	80,211	94,820
Total deductions	862,675	363,581
Net Decrease	(625,543)	(369,315)
Net Assets Available for Benefits		
Beginning of year	6,946,660	7,315,975
End of year	<u><u>\$ 6,321,117</u></u>	<u><u>\$ 6,946,660</u></u>

Detroit Ball Bearing Company Union Employees' Retirement Plan

Statement of Accumulated Plan Benefits November 30, 2015

Actuarial Present Value of Accumulated Plan Benefits

Vested benefits:

Participants currently receiving benefit payments	\$ 2,658,503
Other vested participants	<u>4,087,938</u>

Total vested benefits	6,746,441
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Nonvested benefits	<u>10,716</u>
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Total actuarial present value of accumulated plan benefits	<u><u>\$ 6,757,157</u></u>
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Detroit Ball Bearing Company

Union Employees' Retirement Plan

Statement of Changes in Accumulated Plan Benefits

Year Ended November 30, 2015

Actuarial Present Value of Accumulated Plan Benefits - Beginning of year	\$ 6,513,531
Increase (decrease) during the year attributable to:	
Plan amendment	52,001
Change in actuarial assumptions	34,483
Increase for interest due to the decrease in the discount period	425,903
Benefits paid	<u>(268,761)</u>
Net increase	<u>243,626</u>
Actuarial Present Value of Accumulated Plan Benefits - End of year	<u>\$ 6,757,157</u>

Detroit Ball Bearing Company Union Employees' Retirement Plan

**Notes to Financial Statements
November 30, 2016 and 2015**

Note 1 - Plan Description

The following description of Detroit Ball Bearing Company Union Employees' Retirement Plan (the "Plan") provides only general information. Participants should refer to the plan agreement for a more complete description of the Plan's provisions.

General - The Plan is a defined benefit plan sponsored by Applied Industrial Technologies - DBB, Inc. (the "Company") and collectively bargained with the Truck Drivers Local Union No. 299 affiliated with the International Brotherhood of Teamsters, Chauffeurs, Warehousemen, and Helpers of America. The Plan was established on December 28, 1952 and is a noncontributory pension plan. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA).

Plan Operations - Under a trust agreement, Matrix Trust Company (the "Trustee") was appointed trustee of the Plan. In accordance with the powers and duties of the Trustee, as designated by the Company, the Trustee administers the Plan in accordance with the orders of the investment committee and invests the Plan's assets and income as directed by the Plan's investment manager (UBS Financial Services). Costs of administering the Plan are paid by the Plan or the Company, as determined by the Company, subject to limitations under ERISA.

Eligibility and Vesting - The Plan was frozen to new participants beginning on February 1, 2014. All employees who are covered under the terms of the collective bargaining agreement who have completed 480 hours of service as defined by the Plan and started with the Company prior to February 1, 2014 are eligible to participate in the Plan. The Plan provides for vesting of accrued benefits as follows:

<u>Vesting Service (Whole Years)</u>	<u>Vesting Percentage</u>
Less than 1	0 %
1	10
2	20
3	30
4	40
5	60
6	80
7 or more	100

Detroit Ball Bearing Company Union Employees' Retirement Plan

Notes to Financial Statements November 30, 2016 and 2015

Note 1 - Plan Description (Continued)

Pension Benefits - The Plan provides for payment upon normal retirement, early retirement, late retirement, termination, and death to its participants. Normal retirement benefits commence at age 62 and five years of plan participation. Participants who have completed 10 years of service may elect to retire early following the attainment of age 60. In such event, the participant's monthly benefit shall be reduced by a certain percentage for each month that the participant's early retirement date precedes his or her normal retirement date. Upon termination of employment prior to retirement following at least one year of vesting service, a participant is entitled to receive a full retirement benefit commencing at age 62 or in a reduced amount under the early retirement provisions. Death benefits commence at the time the participant would have been eligible for retirement. The monthly benefit is equal to 55 percent of the vested benefit on the date of death.

In addition, a participant may alternatively elect the options of a life annuity, as follows: 50, 66 $\frac{2}{3}$, or 100 percent joint and survivor benefit; 5-, 10-, or 15-year certain and continuous benefit; or Social Security level income benefit.

The normal retirement benefit is based on the participant's years of credited service. The number of years of credited service is multiplied by the benefit unit in effect on the participant's last day of employment. One year of credited service is earned for each plan year in which the participant has 2,080 or more hours of service. Partial service is credited for years in which the participant has less than 2,080 hours of service. Such partial service is determined by taking hours of service and dividing them by 2,080, rounding to the nearest 1/10th if at least 501 hours. Benefit rates per hour of credited service range from \$23 for individuals retired prior to February 1, 1998 to \$54 for retirements after February 2, 2016.

Funding Policy - Contributions are made by the Company in actuarially determined amounts. The Company's policy is to make contributions necessary to satisfy the minimum funding standards under ERISA. The minimum funding requirements have been met by the Company for the years ended November 30, 2016 and 2015.

Note 2 - Summary of Significant Accounting Policies

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

Investment Valuation and Income Recognition - Investments held by the Plan are stated at fair value except as noted below. Fair value is defined as the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. See Note 6 for further discussion of fair value measurements.

Detroit Ball Bearing Company Union Employees' Retirement Plan

**Notes to Financial Statements
November 30, 2016 and 2015**

Note 2 - Summary of Significant Accounting Policies (Continued)

The fully benefit-responsive unallocated contract is valued at contract value. Contract value is the amount participants normally would receive if they were to initiate permitted transactions under the terms of the Plan. Contract value represents deposits made to the contract, plus earnings at guaranteed crediting rates, less withdrawals and fees.

Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded as earned. Dividends are recorded on the ex-dividend date.

Actuarial Present Value of Accumulated Plan Benefits - Accumulated plan benefits are those future periodic payments that are attributable, under the Plan's provisions, to the service employees have rendered. These include benefits expected to be paid to the following:

- a. Retired or terminated employees or their beneficiaries
- b. Beneficiaries of employees who have died
- c. Present employees or their beneficiaries

Benefits payable under all circumstances - retirement, death, disability, and termination of employment - are included to the extent they are deemed attributable to employee service rendered to the valuation date. Benefits provided via annuity contracts are deducted from plan assets and from accumulated plan benefits.

Actuarial Assumptions - The actuarial present value of accumulated plan benefits is determined by an actuary from Findley Davies and is the amount that results from applying actuarial assumptions to adjust the accumulated plan benefits to reflect the time value of money and probability of payment between the valuation date and the expected date of payment.

The significant actuarial assumptions used in the valuation of the Plan at November 30, 2015 are summarized as follows:

Actuarial cost method	- Unit credit
Assumed rate of return	- 7 percent
Mortality basis	- RP-2014 Mortality Table projected to 2017 (male and female)
Assumed retirement age	- Age 62

In addition, 75 percent of participants were assumed to be married, with the wife assumed to be three years younger than the husband. Preretirement rates of turnover ranged from 13.02 percent at age 20, decreasing to 3.15 percent at age 50, and 0.0 percent at age 55.

Detroit Ball Bearing Company Union Employees' Retirement Plan

**Notes to Financial Statements
November 30, 2016 and 2015**

Note 2 - Summary of Significant Accounting Policies (Continued)

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.

Payment of Benefits - Benefits are recorded when paid.

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

Risks and Uncertainties - Contributions to the Plan and the actuarial present value of accumulated plan benefits are reported based on certain assumptions pertaining to interest rates, inflation rates, and demographics. Due to the changing nature of these assumptions, it is at least reasonably possible that changes in these assumptions will occur in the near term and, due to the uncertainties inherent in setting assumptions, that the effect of such changes could be material to the financial statements. Investment securities are exposed to various risks, such as interest rate, market, and credit risks. 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 financial statements.

Subsequent Events - The financial statements and related disclosures include evaluation of events up through and including July 14, 2017, which is the date the financial statements were available to be issued.

Note 3 - Unaudited Information

Matrix Trust Company (Matrix) holds the Plan's investments and executes all investment transactions. The investment balances and related investment income and losses included in the accompanying financial statements and supplemental schedule of assets held at end of year are based solely on information certified by Matrix.

Note 4 - Plan Termination

Should the Plan terminate at some future time, its net assets generally will not be available on a pro-rata basis to provide participants' benefits. Whether a particular participant's accumulated plan benefits will be paid depends on both the priority of those benefits and the level of benefits guaranteed by the Pension Benefit Guaranty Corporation (PBGC) at that time. Some benefits may be fully or partially provided for by the then-existing assets and the PBGC guarantee while other benefits may not be provided for at all.

Detroit Ball Bearing Company Union Employees' Retirement Plan

Notes to Financial Statements November 30, 2016 and 2015

Note 5 - Tax Status

The Plan has received a determination letter from the Internal Revenue Service indicating that the Plan, as designed, is qualified for tax-exempt treatment under the applicable section of the Internal Revenue Code. Accordingly, no provision for income taxes has been made in the accompanying financial statements.

Note 6 - Fair Value Measurements

Accounting standards require certain assets and liabilities be reported at fair value in the financial statements and provide a framework for establishing that fair value. The framework for determining fair value is based on a hierarchy that prioritizes the inputs and valuation techniques used to measure fair value.

The following tables present information about the Plan's assets measured at fair value on a recurring basis at November 30, 2016 and 2015.

Level 1 - Fair values determined by Level 1 inputs use quoted prices in active markets for identical assets that the Plan has the ability to access.

Level 2 - Fair values determined by Level 2 inputs use other inputs that are observable, either directly or indirectly. These Level 2 inputs include quoted prices for similar assets in active markets, quoted prices for identical or similar assets in markets that are not active, and inputs other than quoted prices that are observable for the asset.

Level 3 - Level 3 inputs are unobservable inputs, including inputs that are available in situations where there is little, if any, market activity for the related asset. These Level 3 fair value measurements are based primarily on management's own estimates using pricing models, discounted cash flow methodologies, or similar techniques taking into account the characteristics of the asset.

In instances whereby inputs used to measure fair value fall into different levels in the above fair value hierarchy, fair value measurements in their entirety are categorized based on the lowest level input that is significant to the valuation. The Plan's assessment of the significance of particular inputs to these fair value measurements requires judgment and considers factors specific to each asset.

The following valuation methodologies have been used to value the Plan's investments:

Mutual Funds - Mutual funds are valued at closing quoted prices reported in active markets.

Common Stock - Common stocks are valued at closing quoted prices reported in active markets.

Mortgages - These investments are valued based on the future principal and interest payments discounted at prevailing interest rates for similar investments.

Detroit Ball Bearing Company

Union Employees' Retirement Plan

Notes to Financial Statements November 30, 2016 and 2015

Note 6 - Fair Value Measurements (Continued)

Interest-bearing Cash, Certificates of Deposit, and Demand Notes - These investments are valued at fair value based on their outstanding balances.

U.S. Government, Corporate, and Foreign Debt Securities - The U.S. government, corporate, and foreign debt securities are valued using quoted market prices and/or other market data for the same or comparable instruments and transactions in establishing the prices, discounted cash flow models, and other pricing models. These models are primarily industry standard models that consider various assumptions, including time value and yield curve as well as other relevant economic measures.

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

Assets Measured at Fair Value on a Recurring Basis at November 30, 2016

	Balance at November 30, 2016	Level 1	Level 2	Level 3
Mutual funds	\$ 1,267,928	\$ 1,267,928	\$ -	\$ -
Equity securities	3,526,681	3,526,681	-	-
Short-term investments	111,081	111,081	-	-
U.S., corporate, and foreign debt securities	1,302,283	-	1,302,283	-
Total investments	<u>\$ 6,207,973</u>	<u>\$ 4,905,690</u>	<u>\$ 1,302,283</u>	<u>\$ -</u>

Assets Measured at Fair Value on a Recurring Basis at November 30, 2015

	Balance at November 30, 2015	Level 1	Level 2	Level 3
Mutual funds	\$ 1,385,327	\$ 1,385,327	\$ -	\$ -
Equity securities	3,876,126	3,876,126	-	-
Short-term investments	215,527	215,527	-	-
U.S. government securities	1,469,680	-	1,469,680	-
Total investments	<u>\$ 6,946,660</u>	<u>\$ 5,476,980</u>	<u>\$ 1,469,680</u>	<u>\$ -</u>

Detroit Ball Bearing Company Union Employees' Retirement Plan

**Notes to Financial Statements
November 30, 2016 and 2015**

Note 6 - Fair Value Measurements (Continued)

The Plan's policy is to recognize transfers between levels of the fair value hierarchy as of the actual date of the event of change in circumstances that caused the transfer. There were no transfers between levels of the fair value hierarchy during 2016 and 2015.

Detroit Ball Bearing Company

Union Employees' Retirement Plan

Schedule of Assets Held at End of Year

Form 5500, Schedule H, Line 4i

EIN 34-0117420, Plan No. 001

November 30, 2016

(a)(b) Identity of Issuer	(c) Description of Investment	(d) Cost	(e) Current Value
	Corporate stock shares:		
Adobe Systems Inc	591 shares	\$ 32,008	\$ 60,761
Alexion Pharmaceutical	93 shares	11,574	11,401
Alibaba Group Holding-Sp ADR	111 shares	9,286	10,436
Allergan plc	210 shares	56,471	40,803
Alphabet Inc CL A	96 shares	70,679	74,484
Alphabet Inc CL C	34 shares	24,466	25,773
Altria Group Inc.	947 shares	58,891	60,542
Amazon Com Inc	51 shares	28,071	38,279
Ambarella Inc	98 shares	5,595	6,029
American Tower REIT Inc	135 shares	12,851	13,806
Amn Healthcare Services	271 shares	7,860	9,024
Amplify Snack Brands Inc.	555 shares	7,811	5,273
Analogic Corp.	110 shares	8,243	10,137
Anixter International Inc	144 shares	6,513	11,254
Apple Inc	777 shares	71,498	85,874
Applied Material	305 shares	7,028	9,821
Automatic Data Processing	52 shares	5,012	4,993
Balchem Corp	120 shares	7,614	9,583
Barnes Group Inc	193 shares	6,703	8,917
Berkshire Hathaway Inc CL B	148 shares	20,224	23,301
Biogen Inc	160 shares	45,389	47,051
Blackrock 2001 Term Tr Inc	101 shares	32,866	37,450
Bojangles' Inc	404 shares	6,725	7,232
Boston Scientific	559 shares	10,169	11,437
Bristol-Myers Squibb Co	906 shares	61,018	51,135
Broadcom LTD	103 shares	14,401	17,560
CA Inc	1068 shares	32,574	34,133
Caci International	91 shares	8,839	11,775
Calamp Corp	451 shares	7,624	6,558
Callon Petroleum Co	487 shares	4,176	8,591
Cambrex Corp	37 shares	1,893	1,854
Cardinal Financial Corp	359 shares	7,222	11,484
Carnival Corp	849 shares	41,447	43,647
Carpenter Technologies Delaware	144 shares	4,485	5,151
Celgene Corp	704 shares	62,820	83,431
Centene Corp	163 shares	11,126	9,394
Charter Communications New CL A	40 shares	8,787	11,012
Chevron Corp	254 shares	25,557	28,336
Cincinnati Financial Corp	537 shares	35,558	41,209
Cisco Systems Inc	1061 shares	24,144	31,639

Detroit Ball Bearing Company Union Employees' Retirement Plan

Schedule of Assets Held at End of Year (Continued)

Form 5500, Schedule H, Line 4i

EIN 34-0117420, Plan No. 001

November 30, 2016

(a)(b) Identity of Issuer	(c) Description of Investment	(d) Cost	(e) Current Value
	Corporate stock shares (Cont.):		
Clarcor Inc	187 shares	\$ 7,129	\$ 13,174
Coca-Cola Company	866 shares	38,676	34,943
Coherent Inc	76 shares	4,969	9,918
Comcast Corp Cl A	1005 shares	56,484	69,858
Costar Group Inc	53 shares	9,534	10,129
Costco Wholesale Corp - New	94 shares	14,242	14,110
Ctrip.Com International - Adr	244 shares	11,097	11,036
Cullen Frost Bakers	65 shares	3,310	5,350
CVS Health Corp	552 shares	32,444	42,443
Danahar Corp Del	191 shares	13,195	14,930
Dave & Buster's Entertainment	160 shares	7,383	7,496
Diago Plc Cponsored Sdr New	289 shares	31,629	29,258
Diamondback Energy Inc	94 shares	8,537	10,138
Disney Walt Co	544 shares	30,720	53,921
Dollar Tree Inc	320 shares	26,238	28,211
Dominion Resources	201 shares	14,060	14,731
Dorman Products Inc	174 shares	9,643	12,570
Duke Energy Corp	264 shares	19,585	19,475
Easterly Government Properties	388 shares	7,469	7,527
Ecolab Inc	85 shares	8,939	9,922
Education Realty Trust Inc	200 shares	8,081	8,120
Edwards Lifesciences	125 shares	13,597	10,356
Eli Lilly & Company	524 shares	38,746	35,171
Estee Lauder Cosmetics Cl A	564 shares	36,031	43,823
Exlservice Holdings Inc	150 shares	5,817	7,134
Expedia Inc	86 shares	11,059	10,668
Facebook Inc - A	280 shares	28,823	33,158
Fidelity National Information	171 shares	12,418	13,199
Fiserv Inc	74 shares	7,801	7,742
Five Below	149 shares	5,436	5,865
Fleetcor Technologies Inc	100 shares	14,813	14,934
Fortive Corp	172 shares	8,006	9,458
Forward Air Corp	221 shares	9,142	10,692
Franklin Electric Inc	234 shares	7,191	9,138
General Dynamics Corp.	369 shares	53,186	64,704
General Electric Co.	1564 shares	46,410	48,109
General Mills	636 shares	40,220	38,758
Genomic Health Inc.	200 shares	5,068	6,086
Gilead Sciences Inc	632 shares	53,998	46,578
Granite Construction Inc.	228 shares	9,605	13,450

Detroit Ball Bearing Company Union Employees' Retirement Plan

Schedule of Assets Held at End of Year (Continued)

Form 5500, Schedule H, Line 4i

EIN 34-0117420, Plan No. 001

November 30, 2016

(a)(b) Identity of Issuer	(c) Description of Investment	(d) Cost	(e) Current Value
	Corporate stock shares (Cont.):		
H & R Block	870 shares	\$ 27,634	\$ 19,279
Hasbro Inc.	275 shares	21,355	23,482
Home Depot Incorporated	151 shares	18,081	19,539
Honeywell International	144 shares	15,840	16,407
Idacorp Inc.	136 shares	9,652	10,356
ILG Inc.	480 shares	7,876	8,674
Integra Life Sciences Holdings Corp	146 shares	9,264	11,797
Intel Corporation	855 shares	26,014	29,669
Inter Parfums Inc.	167 shares	4,349	5,753
Intuit	86 shares	9,933	9,776
Intuitive Surgical	19 shares	11,080	12,231
Irobot Corp	166 shares	5,985	9,462
JPMorgan Chase & Co.	186 shares	12,230	14,912
K Force Inc.	394 shares	7,610	8,707
Kansas City Southern	101 shares	9,410	8,960
Kinder Morgan Inc.	1102 shares	20,978	24,464
Kroger Co.	1668 shares	58,511	53,876
Lancaster Colony Corp.	43 shares	4,530	5,827
Littlefuse Inc.	89 shares	10,327	12,975
Lowes Co Inc.	300 shares	20,672	21,165
Ltc Properties Inc.	213 shares	10,005	9,683
Lululemon Athletica Inc.	134 shares	8,151	7,637
Masimo Corporation	152 shares	5,620	9,404
Mastercard Inc A	680 shares	63,821	69,496
Matador Resources Co.	315 shares	4,874	8,392
Mb Financial Inc.	300 shares	9,581	12,981
Medtronic PLC	577 shares	50,459	42,127
Merck & Company Inc.	606 shares	31,633	37,081
Methode Electronics Inc.	206 shares	6,099	7,612
Micron Tech Inc.	495 shares	8,590	9,667
Microsemi Corp	245 shares	8,669	13,414
Microsoft Corporation	1467 shares	72,563	88,401
Mobileye Nv	241 shares	8,286	8,972
Moody's Corp	87 shares	8,273	8,744
Mts Systems Corp	171 shares	9,137	9,208
Multi-Color Corp	169 shares	8,481	12,151
National Instruments Corp	234 shares	6,746	6,896
Navigant Consulting Com	560 shares	8,752	13,832
Netflix Inc.	93 shares	8,917	10,881
Newmarket Corp	61 shares	22,623	25,523
Nexstar Media Group Inc.	172 shares	8,091	10,260
Nike Inc.	496 shares	24,501	24,835
Norfolk Southern Co.	425 shares	33,402	45,246

Detroit Ball Bearing Company Union Employees' Retirement Plan

Schedule of Assets Held at End of Year (Continued)

Form 5500, Schedule H, Line 4i

EIN 34-0117420, Plan No. 001

November 30, 2016

(a)(b) Identity of Issuer	(c) Description of Investment	(d) Cost	(e) Current Value
	Corporate stock shares (Cont.):		
O Reilly Automotive Inc.	44 shares	\$ 11,352	\$ 12,078
Old National Bancorp/In	839 shares	9,781	14,305
Ollie'S Bargain Outlet Holdings	214 shares	5,546	6,431
Paychex Inc	477 shares	25,547	28,119
Paypal Holdings Inc	1702 shares	60,526	66,855
PDC Corp	110 shares	5,851	8,190
Pepsico Inc	102 shares	10,519	10,210
Pfizer Incorporated	973 shares	29,249	31,272
Pioneer Natural Resources Co	58 shares	7,868	11,080
Potbelly Corp	500 shares	6,990	6,825
Priceline Group Inc/The	12 shares	15,849	18,044
PTC Inc	141 shares	4,682	6,868
Raytheon Co	126 shares	16,673	18,842
Regeneron Pharma Inc	36 shares	14,233	13,653
Reynolds America Inc	399 shares	20,020	21,586
Salesforce.Com Inc	288 shares	21,102	20,736
Schulman Inc	309 shares	7,804	10,290
Selective Ins Group Inc	339 shares	11,611	13,933
Sensient Tech Corp	126 shares	7,434	9,839
Servicenow Inc	146 shares	8,773	12,140
Sherwin Williams	44 shares	10,470	11,821
Silicon Motion Technology - ADR	133 shares	4,630	6,117
Southside Bancshares Inc	327 shares	7,703	12,580
Splunk Inc.	210 shares	11,630	12,100
Starbucks Corp.	432 shares	20,875	25,043
Stifel Financial Corp	247 shares	7,602	12,313
Team Health Holdings Inc	125 shares	5,615	5,319
Tetra Tech Inc New	203 shares	5,646	8,699
The Kraft Heinz Co	559 shares	47,365	45,642
The Mosaic Co	660 shares	17,374	18,744
Thermo Fisher Scientific Inc	74 shares	11,362	10,368
Tjx Companies	667 shares	39,584	52,253
Umb Financial Corp	164 shares	7,433	12,467
Union Pacific Group	99 shares	9,856	10,032
United Bankshares Inc	206 shares	7,398	9,507
Unitedhealth Group Inc	544 shares	69,156	86,126
VCA Inc	73 shares	3,779	4,570
Verizon Communications	628 shares	33,142	31,337
Visa Inc Class A Shares	516 shares	28,909	39,897
Wells Fargo & Co New	1025 shares	39,682	54,243
Zoetis Inc	389 shares	17,613	19,598

Detroit Ball Bearing Company Union Employees' Retirement Plan

Schedule of Assets Held at End of Year (Continued)

Form 5500, Schedule H, Line 4i

EIN 34-0117420, Plan No. 001

November 30, 2016

(a)(b) Identity of Issuer	(c) Description of Investment	(d) Cost	(e) Current Value
	Mutual funds:		
PIMCO	Fixed Income Shs (Series C)	\$ 381,737	\$ 307,791
PIMCO	Fixed Income Shs (Series M)	318,284	301,572
Western Asset	SMASh Series C Fund	98,046	100,466
Western Asset	SMASh Series EC Fund	252,296	259,367
Western Asset	SMASh Series M Fund	291,326	298,733
	Corporate bonds:		
American Express Credit	2.250% Due 05-05-21	26,591	25,733
Bank Of America Corp	4.125% Due 01-22-24	18,783	18,745
Comcast Corp	6.400% Due 03-01-40	25,728	24,548
Enterprise Products Corp	5.700% Due 02-15-42	12,888	12,715
General Electrical Capital Corp	5.875% Due 01-14-38	19,355	18,731
Gilead Sciences Inc	4.750% Due 03-01-46	26,728	24,663
Goldman Sachs Group Inc	4.000% Due 03-03-24	20,743	20,705
JPMorgan Chase & Co	4.400% Due 07-22-20	26,056	25,361
Verizon Communications	5.150% Due 09-15-23	27,493	26,611
Wells Fargo & Company	3.500% Due 03-08-22	12,665	12,414
Accrued Interest		-	2,341
	Foreign bonds:		
United Mexican Sts Mtn Be Sr Gbl Nt	3.500% Due 01-21-21	25,888	25,350
Accrued Interest		*	314
	U.S. government securities:		
Fannie Mae	3.00% Due 10-01-46	19,570	18,827
Fannie Mae	3.00% Due 09-01-46	21,566	20,799
Fannie Mae	3.500% Due 03-01-46	81,351	79,190
Fannie Mae	3.500% Due 11-01-28	16,557	16,259
Fannie Mae	3.500% Due 08-01-45	82,412	81,546
Fannie Mae	4.000% Due 09-01-45	68,974	67,484
Fannie Mae	4.000% Due 08-01-45	70,509	69,627
Fannie Mae	4.000% Due 12-01-45	4,480	4,414
Fannie Mae	4.500% Due 05-01-46	53,480	52,506
Accrued interest		-	468
Fannie Mae	4.500% Due 04-01-44	16,873	16,861
Fannie Mae	5.500% Due 11-01-34	9,658	9,520
Fannie Mae	6.000% Due 11-01-38	6,990	7,950
Freddie Mac	3.500% Due 03-01-45	11,744	11,719
Freddie Mac	4.000% Due 02-01-45	16,122	15,824
Freddie Mac	4.500% Due 02-01-41	14,583	15,663
Freddie Mac	4.500% Due 02-01-41	2,680	2,880

Detroit Ball Bearing Company Union Employees' Retirement Plan

Schedule of Assets Held at End of Year (Continued)

Form 5500, Schedule H, Line 4i

EIN 34-0117420, Plan No. 001

November 30, 2016

(a)(b) Identity of Issuer	(c) Description of Investment	(d) Cost	(e) Current Value
	U.S. government securities		
	(Cont.):		
U.S. Treasury Inflation Indexed Bond	2.500% Due 01-15-29	\$ 51,822	\$ 50,556
U.S. Treasury Inflation Indexed Bond	2.125% Due 02-15-41	12,044	12,531
U.S. Treasury Inflation Indexed Bond	1.00% Due 02-15-46	13,496	13,552
U.S. Treasury Inflation Indexed Bond	0.375% Due 07-15-25	42,523	44,695
Accrued interest		-	553
FHLMC Note	3.750% Due 03-29-17	34,487	33,804
FHLMC Note	6.625% Due 11-15-30	13,234	12,682
FHLMC Note	1.875% Due 09-18-18	54,318	53,671
FHLMC Note	2.625% Due 09-06-24	22,417	22,279
U.S. Treasury Note/Bond	3.375% Due 05-15-44	38,500	36,264
U.S. Treasury Note/Bond	3.125% Due 08-15-44	38,010	37,672
U.S. Treasury Note/Bond	3.00% Due 05-15-45	25,356	23,877
U.S. Treasury Note/Bond	2.125% Due 09-30-21	39,146	38,418
U.S. Treasury Note/Bond	2.000% Due 11-15-21	119,267	118,590
U.S. Treasury Note/Bond	1.375% Due 09-30-23	19,705	18,984
U.S. Treasury Note/Bond	1.625% Due 10-31-23	53,236	53,050
Accrued interest		*	1,338
	Short-term investments:		
CASH	Cash	(466,155)	(466,155)
UBS	Cash Account	434,293	434,293
UBS Liquid Assets	Liquid Assets	142,943	142,943
	Total investments	<u>\$ 5,893,586</u>	<u>\$ 6,207,973</u>

* Cost information not required

Schedule SB, Line 26 - Schedule of Active Participant Data

December 1, 2015 Valuation
 Detroit Ball Bearing Company Union Employees' Retirement Plan
 (EIN: 34-0117420 PN: 001)

Attained Age	Years of Credited Service									
	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	-	-	-	-	-	-	-	-	-	-
25 to 29	-	-	-	-	-	-	-	-	-	-
30 to 34	-	-	-	-	-	-	-	-	-	-
35 to 39	-	-	-	-	-	-	-	-	-	-
40 to 44	-	-	-	-	-	-	-	-	-	-
45 to 49	-	-	-	-	-	-	1 (*)	-	-	-
50 to 54	-	-	-	1 (*)	1 (*)	2 (*)	-	-	-	-
55 to 59	-	1 (*)	2 (*)	1 (*)	2 (*)	1 (*)	1 (*)	5 (*)	1 (*)	-
60 to 64	-	-	1 (*)	1 (*)	-	-	-	-	1 (*)	-
65 to 69	-	-	-	-	-	-	-	-	-	-
70 & up	-	-	-	-	-	-	-	-	-	-

* Average compensation is not shown since there are fewer than 1,000 active participants in this plan

Appendix B

Statement of Actuarial Assumptions and Methods at Fiscal Year-End

Interest Rates

Funding: 24-month segment rates averaged through the end of July 2015 and published in August 2015:

	Before MAP-21/ <u>HATFA</u>	Reflecting MAP-21/ <u>HATFA</u>
a. First Rate, Years 1-5	1.32%	4.72%
b. Second Rate, Years 5-20	4.06%	6.11%
c. Third Rate, Years 20+	5.09%	6.81%
d. Effective Interest Rate using the above rates	4.37%	6.29%
e. Interest rate for developing expected value of assets, (before applying statutory cap)		7.00%
f. Intermediate Level Contribution		7.00%

Mortality

Funding: RP-2000 static, non-generational Mortality Table as described in Regulation 1.430(h)(3) projected by Scale AA, to between 7 and 15 years beyond the year of the obligation, male and female, with combined rates for annuitants and nonannuitants.

Rates of Retirement

100% at age 62.

Weighted Average Retirement Age is 62. This is the average retirement age for someone eligible to retire at all ages using the assumed retirement rates and no other decrements.

Rates of Disability

1987 Commissioner's Group Disability table, six month elimination period (males and female).

Assumptions Made In Valuing Spouse's Benefit

Seventy-five percent of the employees included in the valuation are assumed to be married. These percentages are used as the probabilities that survivor benefits will be payable due to preretirement deaths. The wife is assumed to be three years younger than the husband.

Spouse Benefit For Unknown Marital Status

All employees with an unknown marital status are assumed to not be married and their accrued benefit is not reduced for survivor benefit coverage.

Appendix B (Continued)

Rates of Turnover

Based on age as follows:

<u>Attained Age</u>	<u>Rate</u>
20	13.02%
25	9.52
30	7.07
35	5.53
40	4.55
45	3.85
50	3.15
55	0.00

Optional Form Election

All employees are assumed to elect the life annuity benefit.

Provision for Expenses

The expected administrative (i.e. non-investment) expenses that will be paid from plan assets, which were assumed to equal actual expenses during the prior year, were included in the Target Normal Cost for minimum contribution purposes.

Standing Elections

The client has not signed an election that provides for the automatic use of the Carryover and/or Prefunding Balance if necessary at the end of the plan year to meet the minimum funding requirement.

Asset Method

Funding: Market Value of Assets plus interest adjusted accrued but unpaid contributions as of the valuation date plus an adjustment to defer full recognition of investment losses and gains over a two-year period. The investment (gain)/loss for every year equals the market value at the beginning of the year projected to the end of the year using the interest rate above, but no greater than the third segment rate for the plan year, minus the end of the year actual market value. The actuarial value of assets will be no less than 90% and no more than 110% of the market value (including interest-adjusted accrued but unpaid contributions). Note that due to the regulatory constraint on the interest rate, a characteristic of this asset valuation method is that, over time, it may be more likely to produce an actuarial value of assets that is less than the market value of assets.

Employees Valued

Only participants as of the valuation date were valued.

Selection of Assumptions

Information used in the analysis of selecting assumptions includes: expected return on assets – review of historical and expected returns on various asset categories held by the plan.

Appendix B (Continued)

***Selection of
Assumptions
(Continued)***

The segment rates and mortality table used to determine minimum funding requirements and funding ratios were based on methodology mandated by the Internal Revenue Code and rates published by the Internal Revenue Service.

A complete review of non-economic assumptions has not been completed as the active population is not statistically significant. However, we do monitor the gains and losses annually to ensure the assumptions are reasonable

***Changes in
Assumptions and
Methods since the
Last Actuarial
Valuation***

The segmented interest rates used for determining the funding target were 4.99%, 6.32% and 6.99%. These rates were updated to the rates required for the current plan year and also reflect HATFA.

The mortality table for the funding target was changed as required under PPA '06.

***Justification for
Changes in Actuarial
Assumptions***

The only assumption changes were to prescribed actuarial assumptions or as a result of At-Risk status. Therefore, the plan did not need IRS approval to change assumptions and there is no need to disclose any "Change in Actuarial Assumptions."

SCHEDULE SB (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Single-Employer Defined Benefit 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 2015 This Form is Open to Public Inspection
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For calendar plan year 2015 or fiscal plan year beginning 12/01/2015 and ending 11/30/2016

► 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 DETROIT BALL BEARING COMPANY UNION EMPLOYEES' RETIREMENT PLAN	B Three-digit plan number (PN) ►	001
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF APPLIED INDUSTRIAL TECHNOLOGIES	D Employer Identification Number (EIN) 34-0117420	
E Type of plan: ☒ Single ☐ Multiple-A ☐ Multiple-B		
F Prior year plan size: ☐ 100 or fewer ☒ 101-500 ☐ More than 500		

Part I Basic Information			
1 Enter the valuation date: Month <u>12</u> Day <u>01</u> Year <u>2015</u>			
2 Assets:			
a Market value.....	2a	6,942,814	
b Actuarial value.....	2b	7,298,525	
3 Funding target/participant count breakdown	(1) Number of participants	(2) Vested Funding Target	(3) Total Funding Target
a For retired participants and beneficiaries receiving payment.....	38	2,839,839	2,839,839
b For terminated vested participants.....	79	2,592,361	2,592,361
c For active participants.....	22	1,922,200	1,932,301
d Total.....	139	7,354,400	7,364,501
4 If the plan is in at-risk status, check the box and complete lines (a) and (b) ☐			
a Funding target disregarding prescribed at-risk assumptions	4a		
b Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been in at-risk status for fewer than five consecutive years and disregarding loading factor	4b		
5 Effective interest rate.....	5	6.29%	
6 Target normal cost.....	6	82,918	

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	 Signature of actuary	<u>8/23/2017</u> Date 1708186
AMY L. GENTILE Type or print name of actuary FINDLEY DAVIES, INC. Firm name 1660 WEST 2ND STREET, SUITE 900 CLEVELAND OH 44113-1461 Address of the firm		Most recent enrollment number 216-875-1900 Telephone number (including area code)

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

c If line 20a is "Yes," see instructions and complete the following table as applicable:

Part V Assumptions Used to Determine Funding Target and Target Normal Cost

21 Discount rate:			
a Segment rates:	1st segment: 4.72%	2nd segment: 6.11%	3rd segment: 6.81%
			☐ N/A, full yield curve used
b Applicable month (enter code)			21b 4
22 Weighted average retirement age			22 62
23 Mortality table(s) (see instructions) ☒ Prescribed - combined ☐ Prescribed - separate ☐ Substitute			

Part VI Miscellaneous Items

24 Has a change been made in the non-prescribed actuarial assumptions for the current plan year? If "Yes," see instructions regarding required attachment.		☐ Yes ☒ No
25 Has a method change been made for the current plan year? If "Yes," see instructions regarding required attachment.		☐ Yes ☒ No
26 Is the plan required to provide a Schedule of Active Participants? If "Yes," see instructions regarding required attachment.		☒ Yes ☐ No
27 If the plan is subject to alternative funding rules, enter applicable code and see instructions regarding attachment	27	

Part VII Reconciliation of Unpaid Minimum Required Contributions For Prior Years

28 Unpaid minimum required contributions for all prior years	28	0
29 Discounted employer contributions allocated toward unpaid minimum required contributions from prior years (line 19a)	29	0
30 Remaining amount of unpaid minimum required contributions (line 28 minus line 29)	30	0

Part VIII Minimum Required Contribution For Current Year

31 Target normal cost and excess assets (see instructions):			
a Target normal cost (line 6)		31a	82,918
b Excess assets, if applicable, but not greater than line 31a		31b	0
32 Amortization installments:		Outstanding Balance	
a Net shortfall amortization installment		114,652	19,067
b Waiver amortization installment		0	0
33 If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____) and the waived amount		33	
34 Total funding requirement before reflecting carryover/prefunding balances (lines 31a - 31b + 32a + 32b - 33)		34	101,985
		Carryover balance	Prefunding balance
35 Balances elected for use to offset funding requirement		0	0
36 Additional cash requirement (line 34 minus line 35)		36	101,985
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)		37	451,514
38 Present value of excess contributions for current year (see instructions)			
a Total (excess, if any, of line 37 over line 36)		38a	349,529
b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances		38b	0
39 Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37)		39	0
40 Unpaid minimum required contributions for all years		40	0

Part IX Pension Funding Relief Under Pension Relief Act of 2010 (See Instructions)

41 If an election was made to use PRA 2010 funding relief for this plan:			
a Schedule elected		☐ 2 plus 7 years ☐ 15 years	
b Eligible plan year(s) for which the election in line 41a was made		☐ 2008 ☐ 2009 ☐ 2010 ☐ 2011	
42 Amount of acceleration adjustment		42	0
43 Excess installment acceleration amount to be carried over to future plan years		43	0

Schedule SB, line 22 – Description of Weighted Average Retirement Age
Detroit Ball Bearing Company Union Employees' Retirement Plan
December 1, 2015 Valuation
EIN/PN: 34-0117420 / 001

Rates of Retirement

100% at age 62.

Weighted Average Retirement Age is 62. This is the average retirement age for someone eligible to retire at all ages using the assumed retirement rates and no other decrements.

Appendix A

Summary of Principal Plan Provisions

Plan Sponsor	Applied Industrial Technologies, Inc.	
EIN/PN	34-0117420/001	
Effective Date	December 28, 1952; restated effective December 1, 2010 and last amended February 1, 2014.	
Plan Year	The 12-month period beginning each December 1.	
Hour of Service	An hour for which the employee is paid or entitled to payment.	
Participation	An employee becomes a participant on the first of the month following completion of 480 Hours of Service. Participation was closed to new entrants effective February 2, 2014.	
Vesting Service	One year of vesting service is credited for each Plan Year in which the participant has 1,000 or more Hours of Service. Partial service is not credited for years in which the participant has less than 1,000 Hours of Service.	
Credited Service	One year of credited service is credited for each Plan Year in which the participant has 2,080 or more Hours of Service. Partial service is credited for years in which the participant has less than 2,080 Hours of Service. Such partial service is determined by taking Hours of Service and dividing them by 2,080, rounding to the nearest 1/10 th if at least 501 hours.	
Benefit Rate	<u>Date of Termination</u>	<u>Benefit Rate</u>
	2/02/1997 – 2/01/1998	\$ 23.00
	2/02/1998 – 2/01/1999	24.00
	2/02/1999 – 2/01/2000	25.00
	2/02/2000 – 2/01/2001	26.00
	2/02/2001 – 2/01/2002	30.00
	2/02/2002 – 2/01/2003	33.00
	2/02/2003 – 6/30/2004	35.00
	7/01/2004 – 2/01/2005	38.00
	2/02/2005 – 2/01/2006	39.00
	2/02/2006 – 2/01/2007	40.00
	2/02/2007 – 2/01/2008	42.00
	2/02/2008 – 1/31/2010	44.00
	2/01/2010 – 2/01/2012	45.00
	2/02/2012 – 2/01/2013	47.00
	2/02/2013 – 2/01/2014	48.00
	2/02/2014 – 2/01/2015	50.00
	2/02/2015 – 2/01/2016	52.00
	2/02/2016 and After	54.00

Appendix A (Continued)

Accrued Benefit

A monthly life annuity equal to the participant's years of Credited Service times the applicable Benefit Rate reduced by .25% for each full or partial year in which the participant was eligible for survivor benefit coverage and did not waive said coverage.

Vested Benefit

The Accrued Benefit multiplied by the applicable vesting percentage as defined below:

<u>Years of Vesting Service</u>	<u>Percentage</u>
Less Than 1	0 %
1	10
2	20
3	30
4	40
5	60
6	80
7 or more	100

Normal Retirement Benefit

Eligibility:

Age 62 and 5 years of plan participation.

Monthly Benefit:

The Accrued Benefit.

Early Retirement Benefit

Eligibility:

Age 60 and 10 years of Vesting Service.

Monthly Benefit:

The Accrued Benefit at early retirement reduced by 5/9 of 1% for each month retirement precedes age 62.

Termination Benefit

Eligibility:

Upon termination of employment prior to retirement after completion of at least one year of Vesting Service.

Monthly Benefit:

The Vested Benefit commences in full at age 62, or in a reduced amount under the early retirement provisions if eligible.

Appendix A (Continued)

Late Retirement Benefit

Eligibility:

Retirement after age 62.

Monthly Benefit:

The greater of the Accrued Benefit at the participant's Late Retirement Date and the Accrued Benefit at the participant's Normal Retirement Date actuarially increased.

Death Benefit

Eligibility:

One Year of Vesting Service, married for at least one year, and coverage was not waived.

Monthly Benefit:

A benefit commencing at the time the participant would have been eligible for retirement. The benefit is equal to 55% of the Vested Benefit on the date of death, adjusted as appropriate for early commencement and the 55% Joint and Survivor Annuity form of payment.

Benefits Available as Lump Sums

This plan pays only small benefit amounts (lump sums less than \$1,000).

Optional Forms Of Payment

Life Annuity
 50% Joint and Survivor
 66 2/3% Joint and Survivor
 75% Joint and Survivor
 100% Joint and Survivor
 5 Year Certain and Continuous
 10 Year Certain and Continuous
 15 Year Certain and Continuous
 Social Security Level Income

Optional form conversion factors are based on 1994 GAR mortality table and 7.0% interest.

Maximum Benefit Limit

The Internal Revenue Code Section 415 Maximum Benefit payable as a life annuity at Social Security Normal Retirement Age.

Changes in Plan Provisions

The plan was amended to increase the benefit rate effective February 2, 2015.

Detroit Ball Bearing Company Union Employees' Retirement Plan

Schedule of Assets Held at End of Year Form 5500, Schedule H, Line 4i EIN 34-0117420, Plan No. 001 November 30, 2016

(a)(b) Identity of Issuer	(c) Description of Investment	(d) Cost	(e) Current Value
	Corporate stock shares:		
Adobe Systems Inc	591 shares	\$ 32,008	\$ 60,761
Alexion Pharmaceutical	93 shares	11,574	11,401
Alibaba Group Holding-Sp ADR	111 shares	9,286	10,436
Allergan plc	210 shares	56,471	40,803
Alphabet Inc CL A	96 shares	70,679	74,484
Alphabet Inc CL C	34 shares	24,466	25,773
Altria Group Inc.	947 shares	58,891	60,542
Amazon Com Inc	51 shares	28,071	38,279
Ambarella Inc	98 shares	5,595	6,029
American Tower REIT Inc	135 shares	12,851	13,806
Amn Healthcare Services	271 shares	7,860	9,024
Amplify Snack Brands Inc.	555 shares	7,811	5,273
Analogic Corp.	110 shares	8,243	10,137
Anixter International Inc	144 shares	6,513	11,254
Apple Inc	777 shares	71,498	85,874
Applied Material	305 shares	7,028	9,821
Automatic Data Processing	52 shares	5,012	4,993
Balchem Corp	120 shares	7,614	9,583
Barnes Group Inc	193 shares	6,703	8,917
Berkshire Hathaway Inc CL B	148 shares	20,224	23,301
Biogen Inc	160 shares	45,389	47,051
Blackrock 2001 Term Tr Inc	101 shares	32,866	37,450
Bojangles' Inc	404 shares	6,725	7,232
Boston Scientific	559 shares	10,169	11,437
Bristol-Myers Squibb Co	906 shares	61,018	51,135
Broadcom LTD	103 shares	14,401	17,560
CA Inc	1068 shares	32,574	34,133
Caci International	91 shares	8,839	11,775
Calamp Corp	451 shares	7,624	6,558
Callon Petroleum Co	487 shares	4,176	8,591
Cambrex Corp	37 shares	1,893	1,854
Cardinal Financial Corp	359 shares	7,222	11,484
Carnival Corp	849 shares	41,447	43,647
Carpenter Technologies Delaware	144 shares	4,485	5,151
Celgene Corp	704 shares	62,820	83,431
Centene Corp	163 shares	11,126	9,394
Charter Communications New CL A	40 shares	8,787	11,012
Chevron Corp	254 shares	25,557	28,336
Cincinnati Financial Corp	537 shares	35,558	41,209
Cisco Systems Inc	1061 shares	24,144	31,639

Detroit Ball Bearing Company Union Employees' Retirement Plan

Schedule of Assets Held at End of Year (Continued)

Form 5500, Schedule H, Line 4i

EIN 34-0117420, Plan No. 001

November 30, 2016

(a)(b) Identity of Issuer	(c) Description of Investment	(d) Cost	(e) Current Value
	Corporate stock shares (Cont.):		
Clarcor Inc	187 shares	\$ 7,129	\$ 13,174
Coca-Cola Company	866 shares	38,676	34,943
Coherent Inc	76 shares	4,969	9,918
Comcast Corp Cl A	1005 shares	56,484	69,858
Costar Group Inc	53 shares	9,534	10,129
Costco Wholesale Corp - New	94 shares	14,242	14,110
Ctrip.Com International - Adr	244 shares	11,097	11,036
Cullen Frost Bakers	65 shares	3,310	5,350
CVS Health Corp	552 shares	32,444	42,443
Danahar Corp Del	191 shares	13,195	14,930
Dave & Buster's Entertainment	160 shares	7,383	7,496
Diago Plc Cponsored Sdr New	289 shares	31,629	29,258
Diamondback Energy Inc	94 shares	8,537	10,138
Disney Walt Co	544 shares	30,720	53,921
Dollar Tree Inc	320 shares	26,238	28,211
Dominion Resources	201 shares	14,060	14,731
Dorman Products Inc	174 shares	9,643	12,570
Duke Energy Corp	264 shares	19,585	19,475
Easterly Government Properties	388 shares	7,469	7,527
Ecolab Inc	85 shares	8,939	9,922
Education Realty Trust Inc	200 shares	8,081	8,120
Edwards Lifesciences	125 shares	13,597	10,356
Eli Lilly & Company	524 shares	38,746	35,171
Estee Lauder Cosmetics Cl A	564 shares	36,031	43,823
Exlservice Holdings Inc	150 shares	5,817	7,134
Expedia Inc	86 shares	11,059	10,668
Facebook Inc - A	280 shares	28,823	33,158
Fidelity National Information	171 shares	12,418	13,199
Fiserv Inc	74 shares	7,801	7,742
Five Below	149 shares	5,436	5,865
Fleetcor Technologies Inc	100 shares	14,813	14,934
Fortive Corp	172 shares	8,006	9,458
Forward Air Corp	221 shares	9,142	10,692
Franklin Electric Inc	234 shares	7,191	9,138
General Dynamics Corp.	369 shares	53,186	64,704
General Electric Co.	1564 shares	46,410	48,109
General Mills	636 shares	40,220	38,758
Genomic Health Inc.	200 shares	5,068	6,086
Gilead Sciences Inc	632 shares	53,998	46,578
Granite Construction Inc.	228 shares	9,605	13,450

Detroit Ball Bearing Company Union Employees' Retirement Plan

Schedule of Assets Held at End of Year (Continued)

Form 5500, Schedule H, Line 4i

EIN 34-0117420, Plan No. 001

November 30, 2016

(a)(b) Identity of Issuer	(c) Description of Investment	(d) Cost	(e) Current Value
	Corporate stock shares (Cont.):		
H & R Block	870 shares	\$ 27,634	\$ 19,279
Hasbro Inc.	275 shares	21,355	23,482
Home Depot Incorporated	151 shares	18,081	19,539
Honeywell International	144 shares	15,840	16,407
Idacorp Inc.	136 shares	9,652	10,356
ILG Inc.	480 shares	7,876	8,674
Integra Life Sciences Holdings Corp	146 shares	9,264	11,797
Intel Corporation	855 shares	26,014	29,669
Inter Parfums Inc.	167 shares	4,349	5,753
Intuit	86 shares	9,933	9,776
Intuitive Surgical	19 shares	11,080	12,231
Irobot Corp	166 shares	5,985	9,462
JPMorgan Chase & Co.	186 shares	12,230	14,912
K Force Inc.	394 shares	7,610	8,707
Kansas City Southern	101 shares	9,410	8,960
Kinder Morgan Inc.	1102 shares	20,978	24,464
Kroger Co.	1668 shares	58,511	53,876
Lancaster Colony Corp.	43 shares	4,530	5,827
Littlefuse Inc.	89 shares	10,327	12,975
Lowes Co Inc.	300 shares	20,672	21,165
Ltc Properties Inc.	213 shares	10,005	9,683
Lululemon Athletica Inc.	134 shares	8,151	7,637
Masimo Corporation	152 shares	5,620	9,404
Mastercard Inc A	680 shares	63,821	69,496
Matador Resources Co.	315 shares	4,874	8,392
Mb Financial Inc.	300 shares	9,581	12,981
Medtronic PLC	577 shares	50,459	42,127
Merck & Company Inc.	606 shares	31,633	37,081
Methode Electronics Inc.	206 shares	6,099	7,612
Micron Tech Inc.	495 shares	8,590	9,667
Microsemi Corp	245 shares	8,669	13,414
Microsoft Corporation	1467 shares	72,563	88,401
Mobileye Nv	241 shares	8,286	8,972
Moody's Corp	87 shares	8,273	8,744
Mts Systems Corp	171 shares	9,137	9,208
Multi-Color Corp	169 shares	8,481	12,151
National Instruments Corp	234 shares	6,746	6,896
Navigant Consulting Com	560 shares	8,752	13,832
Netflix Inc.	93 shares	8,917	10,881
Newmarket Corp	61 shares	22,623	25,523
Nexstar Media Group Inc.	172 shares	8,091	10,260
Nike Inc.	496 shares	24,501	24,835
Norfolk Southern Co.	425 shares	33,402	45,246

Detroit Ball Bearing Company Union Employees' Retirement Plan

Schedule of Assets Held at End of Year (Continued)

Form 5500, Schedule H, Line 4i

EIN 34-0117420, Plan No. 001

November 30, 2016

(a)(b) Identity of Issuer	(c) Description of Investment	(d) Cost	(e) Current Value
Corporate stock shares (Cont.):			
O Reilly Automotive Inc.	44 shares	\$ 11,352	\$ 12,078
Old National Bancorp/In	839 shares	9,781	14,305
Ollie'S Bargain Outlet Holdings	214 shares	5,546	6,431
Paychex Inc	477 shares	25,547	28,119
Paypal Holdings Inc	1702 shares	60,526	66,855
PDC Corp	110 shares	5,851	8,190
Pepsico Inc	102 shares	10,519	10,210
Pfizer Incorporated	973 shares	29,249	31,272
Pioneer Natural Resources Co	58 shares	7,868	11,080
Potbelly Corp	500 shares	6,990	6,825
Priceline Group Inc/The	12 shares	15,849	18,044
PTC Inc	141 shares	4,682	6,868
Raytheon Co	126 shares	16,673	18,842
Regeneron Pharma Inc	36 shares	14,233	13,653
Reynolds America Inc	399 shares	20,020	21,586
Salesforce.Com Inc	288 shares	21,102	20,736
Schulman Inc	309 shares	7,804	10,290
Selective Ins Group Inc	339 shares	11,611	13,933
Sensient Tech Corp	126 shares	7,434	9,839
Servicenow Inc	146 shares	8,773	12,140
Sherwin Williams	44 shares	10,470	11,821
Silicon Motion Technology - ADR	133 shares	4,630	6,117
Southside Bancshares Inc	327 shares	7,703	12,580
Splunk Inc.	210 shares	11,630	12,100
Starbucks Corp.	432 shares	20,875	25,043
Stifel Financial Corp	247 shares	7,602	12,313
Team Health Holdings Inc	125 shares	5,615	5,319
Tetra Tech Inc New	203 shares	5,646	8,699
The Kraft Heinz Co	559 shares	47,365	45,642
The Mosaic Co	660 shares	17,374	18,744
Thermo Fisher Scientific Inc	74 shares	11,362	10,368
Tjx Companies	667 shares	39,584	52,253
Umb Financial Corp	164 shares	7,433	12,467
Union Pacific Group	99 shares	9,856	10,032
United Bankshares Inc	206 shares	7,398	9,507
Unitedhealth Group Inc	544 shares	69,156	86,126
VCA Inc	73 shares	3,779	4,570
Verizon Communications	628 shares	33,142	31,337
Visa Inc Class A Shares	516 shares	28,909	39,897
Wells Fargo & Co New	1025 shares	39,682	54,243
Zoetis Inc	389 shares	17,613	19,598

Detroit Ball Bearing Company Union Employees' Retirement Plan

Schedule of Assets Held at End of Year (Continued)

Form 5500, Schedule H, Line 4i

EIN 34-0117420, Plan No. 001

November 30, 2016

(a)(b) Identity of Issuer	(c) Description of Investment	(d) Cost	(e) Current Value
	Mutual funds:		
PIMCO	Fixed Income Shs (Series C)	\$ 381,737	\$ 307,791
PIMCO	Fixed Income Shs (Series M)	318,284	301,572
Western Asset	SMASh Series C Fund	98,046	100,466
Western Asset	SMASh Series EC Fund	252,296	259,367
Western Asset	SMASh Series M Fund	291,326	298,733
	Corporate bonds:		
American Express Credit	2.250% Due 05-05-21	26,591	25,733
Bank Of America Corp	4.125% Due 01-22-24	18,783	18,745
Comcast Corp	6.400% Due 03-01-40	25,728	24,548
Enterprise Products Corp	5.700% Due 02-15-42	12,888	12,715
General Electrical Capital Corp	5.875% Due 01-14-38	19,355	18,731
Gilead Sciences Inc	4.750% Due 03-01-46	26,728	24,663
Goldman Sachs Group Inc	4.000% Due 03-03-24	20,743	20,705
JPMorgan Chase & Co	4.400% Due 07-22-20	26,056	25,361
Verizon Communications	5.150% Due 09-15-23	27,493	26,611
Wells Fargo & Company	3.500% Due 03-08-22	12,665	12,414
Accrued Interest		-	2,341
	Foreign bonds:		
United Mexican Sts Mtn Be Sr Gbl Nt	3.500% Due 01-21-21	25,888	25,350
Accrued Interest		*	314
	U.S. government securities:		
Fannie Mae	3.00% Due 10-01-46	19,570	18,827
Fannie Mae	3.00% Due 09-01-46	21,566	20,799
Fannie Mae	3.500% Due 03-01-46	81,351	79,190
Fannie Mae	3.500% Due 11-01-28	16,557	16,259
Fannie Mae	3.500% Due 08-01-45	82,412	81,546
Fannie Mae	4.000% Due 09-01-45	68,974	67,484
Fannie Mae	4.000% Due 08-01-45	70,509	69,627
Fannie Mae	4.000% Due 12-01-45	4,480	4,414
Fannie Mae	4.500% Due 05-01-46	53,480	52,506
Accrued interest		-	468
Fannie Mae	4.500% Due 04-01-44	16,873	16,861
Fannie Mae	5.500% Due 11-01-34	9,658	9,520
Fannie Mae	6.000% Due 11-01-38	6,990	7,950
Freddie Mac	3.500% Due 03-01-45	11,744	11,719
Freddie Mac	4.000% Due 02-01-45	16,122	15,824
Freddie Mac	4.500% Due 02-01-41	14,583	15,663
Freddie Mac	4.500% Due 02-01-41	2,680	2,880

Detroit Ball Bearing Company Union Employees' Retirement Plan

Schedule of Assets Held at End of Year (Continued)

Form 5500, Schedule H, Line 4i

EIN 34-0117420, Plan No. 001

November 30, 2016

(a)(b) Identity of Issuer	(c) Description of Investment	(d) Cost	(e) Current Value
U.S. government securities			
(Cont.):			
U.S. Treasury Inflation Indexed Bond	2.500% Due 01-15-29	\$ 51,822	\$ 50,556
U.S. Treasury Inflation Indexed Bond	2.125% Due 02-15-41	12,044	12,531
U.S. Treasury Inflation Indexed Bond	1.00% Due 02-15-46	13,496	13,552
U.S. Treasury Inflation Indexed Bond	0.375% Due 07-15-25	42,523	44,695
Accrued interest		-	553
FHLMC Note	3.750% Due 03-29-17	34,487	33,804
FHLMC Note	6.625% Due 11-15-30	13,234	12,682
FHLMC Note	1.875% Due 09-18-18	54,318	53,671
FHLMC Note	2.625% Due 09-06-24	22,417	22,279
U.S. Treasury Note/Bond	3.375% Due 05-15-44	38,500	36,264
U.S. Treasury Note/Bond	3.125% Due 08-15-44	38,010	37,672
U.S. Treasury Note/Bond	3.00% Due 05-15-45	25,356	23,877
U.S. Treasury Note/Bond	2.125% Due 09-30-21	39,146	38,418
U.S. Treasury Note/Bond	2.000% Due 11-15-21	119,267	118,590
U.S. Treasury Note/Bond	1.375% Due 09-30-23	19,705	18,984
U.S. Treasury Note/Bond	1.625% Due 10-31-23	53,236	53,050
Accrued interest		*	1,338
Short-term investments:			
CASH	Cash	(466,155)	(466,155)
UBS	Cash Account	434,293	434,293
UBS Liquid Assets	Liquid Assets	142,943	142,943
Total investments		<u>\$ 5,893,586</u>	<u>\$ 6,207,973</u>

* Cost information not required

Schedule SB, Line 32 – Schedule of Amortization Bases
 Detroit Ball Bearing Company Union Employees' Retirement Plan
 December 1, 2015 Valuation
 EIN/PN: 34-0117420 / 001

Schedule of Amortization Bases

	Plan Year Beginning			12/01/2015
	Date Established	Present Value of Payments	Remaining Years	Amortization Installment
<i>Shortfall Amortization Bases</i>	12/01/2015	<u>\$ 114,652</u>	7	<u>\$ 19,067</u>
	Total	\$ 114,652		\$ 19,067
<i>Waiver Amortization Bases</i>	12/01/2015	\$ 0		\$ 0