Form 5500

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Annual Return/Report of Employee Benefit Plan

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

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

OMB Nos. 1210-0110
1210-0089

2016

This Form is Open to Public Inspection

Part I Annual Report Identification Information

For calendar plan year 2016 or fiscal plan year beginning 01/01/2016 and ending 12/31/2016

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.)
- [X] 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:
- [X] Form 5558
- [ ] automatic extension
- [ ] the DFVC program
- [ ] special extension (enter description)

Part II Basic Plan Information—enter all requested information

1a Name of plan
ALBANY INTERNATIONAL CORP. PROSPERITY PLUS SAVINGS

1b Three-digit plan number (PN) ▶ 025

1c Effective date of plan 07/01/1998

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)
ALBANY INTERNATIONAL CORP.

216 AIRPORT DRIVE
ROCHESTER, NH 03867

2b Employer Identification Number (EIN)
14-0462060

2c Plan Sponsor's telephone number
518-445-2200

2d Business code (see instructions)
314000

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

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

SIGN HERE	Filed with authorized/valid electronic signature.	10/13/2017	PHILOMENA PITTS
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	Filed with authorized/valid electronic signature.	10/13/2017	CAROL LASCALA
	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

ALBANY INTERNATIONAL CORP. EMPLOYEE BENEFITS COMMITTEE

216 AIRPORT DRIVE
ROCHESTER, NH 03867

3b Administrator's EIN: 14-1593624

3c Administrator's telephone number: 518-445-2200

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**	2057
6	Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines **6a(1), 6a(2), 6b, 6c,** and **6d**).		
a(1)	Total number of active participants at the beginning of the plan year	**6a(1)**	1389
a(2)	Total number of active participants at the end of the plan year	**6a(2)**	1823
b	Retired or separated participants receiving benefits	**6b**	66
c	Other retired or separated participants entitled to future benefits	**6c**	698
d	Subtotal. Add lines **6a(2)**, **6b**, and **6c**.	**6d**	2587
e	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	**6e**	9
f	Total. Add lines **6d** and **6e**.	**6f**	2596
g	Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**	2542
h	Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested	**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:

2E 2F 2G 2J 2K 2O 2R 2S 2T

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

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

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

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

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

11c Enter the Receipt Confirmation Code for the 2016 Form M-1 annual report. If the plan was not required to file the 2016 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 C (Form 5500)	Service Provider Information	OMB No. 1210-0110
Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	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.**	**2016** **This Form is Open to Public Inspection.**

For calendar plan year 2016 or fiscal plan year beginning 01/01/2016 and ending 12/31/2016

A Name of plan
ALBANY INTERNATIONAL CORP. PROSPERITY PLUS SAVINGS

B Three-digit plan number (PN) ▶ 025

C Plan sponsor's name as shown on line 2a of Form 5500
ALBANY INTERNATIONAL CORP.

D Employer Identification Number (EIN)
14-0462060

Part I Service Provider Information (see instructions)

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

THE VANGUARD GROUP, INC

23-1945930

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

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

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

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

THE VANGUARD GROUP,INC

23-1945930

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
15 25 26 33 37 52	NONE	270034	Yes [X] No [ ]	Yes [X] No [ ]	0	Yes [X] No [ ]

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

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

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

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

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)

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

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

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

(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
THE VANGUARD GROUP, INC.	64	0

(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.
DODGE & COX 94-1441976	10 BPS

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

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

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

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

Part III Termination Information on Accountants and Enrolled Actuaries (see instructions)

(complete as many entries as needed)

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE D (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

DFE/Participating Plan Information

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

▶ **File as an attachment to Form 5500.**

OMB No. 1210-0110

2016

This Form is Open to Public Inspection.

For calendar plan year 2016 or fiscal plan year beginning 01/01/2016 and ending 12/31/2016

A Name of plan
ALBANY INTERNATIONAL CORP. PROSPERITY PLUS SAVINGS

B Three-digit plan number (PN) ▶ 025

C Plan or DFE sponsor's name as shown on line 2a of Form 5500
ALBANY INTERNATIONAL CORP.

D Employer Identification Number (EIN)
14-0462060

Part I **Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs)**
(Complete as many entries as needed to report all interests in DFEs)

a Name of MTIA, CCT, PSA, or 103-12 IE: VANGUARD RETIREMENT SVGS TRUST III

b Name of sponsor of entity listed in (a): VANGUARD FIDUCIARY TRUST COMPANY

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
23-2186884-024	C	39317394

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

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

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

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

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

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

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

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

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

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

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

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

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

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

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

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

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

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

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

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

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

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

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

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

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

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

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

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

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

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

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

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

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

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

Part II Information on Participating Plans (to be completed by DFEs)

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

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

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a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

SCHEDULE H (Form 5500)

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

2016

This Form is Open to Public Inspection

For calendar plan year 2016 or fiscal plan year beginning 01/01/2016 and ending 12/31/2016

A Name of plan
ALBANY INTERNATIONAL CORP. PROSPERITY PLUS SAVINGS

B Three-digit plan number (PN) ▶ 025

C Plan sponsor's name as shown on line 2a of Form 5500
ALBANY INTERNATIONAL CORP.

D Employer Identification Number (EIN)
14-0462060

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)	2202538	2642259
(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)		
(2) U.S. Government securities	1c(2)		
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)	1169612	402175
(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)	5330994	5241036
(9) Value of interest in common/collective trusts	1c(9)	43196741	39317394
(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)	201309496	217763130
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other	1c(15)	162648	49971

			(a) Beginning of Year	(b) End of Year
1d	Employer-related investments:			
	(1) Employer securities	1d(1)	25243739	27490144
	(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	278615768	292906109
	Liabilities			
g	Benefit claims payable	1g		
h	Operating payables	1h		
i	Acquisition indebtedness	1i		
j	Other liabilities	1j	9955	0
k	Total liabilities (add all amounts in lines 1g through1j)	1k	9955	0
	Net Assets			
l	Net assets (subtract line 1k from line 1f)	1l	278605813	292906109

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)	8161252	
	(B) Participants	2a(1)(B)	11441528	
	(C) Others (including rollovers)	2a(1)(C)	1993534	
	(2) Noncash contributions	2a(2)		
	(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		21596314
b	**Earnings on investments:**			
	(1) Interest:			
	(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)		
	(B) U.S. Government securities	2b(1)(B)		
	(C) Corporate debt instruments	2b(1)(C)		
	(D) Loans (other than to participants)	2b(1)(D)		
	(E) Participant loans	2b(1)(E)	224580	
	(F) Other	2b(1)(F)		
	(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		224580
	(2) Dividends: **(A)** Preferred stock	2b(2)(A)		
	(B) Common stock	2b(2)(B)	497561	
	(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	6053208	
	(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		6550769
	(3) Rents	2b(3)		
	(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	2b(4)(A)	5821909	
	(B) Aggregate carrying amount (see instructions)	2b(4)(B)	5268697	
	(C) Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result	2b(4)(C)		553212
	(5) Unrealized appreciation (depreciation) of assets: **(A)** Real estate	2b(5)(A)		
	(B) Other	2b(5)(B)	5924904	
	(C) Total unrealized appreciation of assets. Add lines **2b(5)(A)** and **(B)**	2b(5)(C)		5924904

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		98383
(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)		12679132
c Other income	2c		52386
d Total income. Add all **income** amounts in column (b) and enter total	2d		47679680
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	33126776	
(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)		33126776
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions)	2g		-2856
h Interest expense	2h		
i Administrative expenses: (1) Professional fees	2i(1)		
(2) Contract administrator fees	2i(2)		
(3) Investment advisory and management fees	2i(3)		
(4) Other	2i(4)	255464	
(5) Total administrative expenses. Add lines **2i(1)** through **(4)**	2i(5)		255464
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		33379384
Net Income and Reconciliation			
k Net income (loss). Subtract line **2j** from line **2d**	2k		14300296
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) [X] 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 [X] No

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

(1) Name: KPMG LLP **(2)** EIN: 13-5565207

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	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.)	4a		X	
b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)	4b		X	

			Yes	No	Amount
c	Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)	4c		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.)	4d		X	
e	Was this plan covered by a fidelity bond?	4e	X		5000000
f	Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?	4f		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?	4g		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?	4h		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.)	4i	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.)	4j		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?	4k		X	
l	Has the plan failed to provide any benefit when due under the plan?	4l		X	
m	If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	4m		X	
n	If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3	4n			
o	Defined Benefit Plan or Money Purchase Pension Plan Only: Were any distributions made during the plan year to an employee who attained age 62 and had not separated from service?	4o			

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
If "Yes" is checked, enter the My PAA confirmation number from the PBGC premium filing for this plan year_____. (See instructions.)

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 sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code).

▶ **File as an attachment to Form 5500.**

OMB No. 1210-0110

2016

This Form is Open to Public Inspection.

For calendar plan year 2016 or fiscal plan year beginning 01/01/2016 and ending 12/31/2016

A Name of plan
ALBANY INTERNATIONAL CORP. PROSPERITY PLUS SAVINGS

B Three-digit plan number (PN) ▶ 025

C Plan sponsor's name as shown on line 2a of Form 5500
ALBANY INTERNATIONAL CORP.

D Employer Identification Number (EIN)
14-0462060

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**

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): 23-2186884

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**

Part II Funding Information (If the plan is not subject to the minimum funding requirements of section of 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

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

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

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

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

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

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

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

13 Enter the following information for each employer that 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

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

20a Is the plan a 401(k) plan? If "No," skip b	☐ Yes ☐ No
20b How did the plan satisfy the nondiscrimination requirements for employee deferrals under section 401(k)(3) for the plan year? Check all that apply:	☐ Design-based safe harbor ☐ "Prior year" ADP test ☐ "Current year" ADP test ☐ N/A
21a What testing method was used to satisfy the coverage requirements under section 410(b) for the plan year? Check all that apply:	☐ Ratio percentage test ☐ Average benefit test ☐ N/A
21b Did the plan satisfy the coverage and nondiscrimination requirements of sections 410(b) and 401(a)(4) for the plan year by combining this plan with any other plan under the permissive aggregation rules?	☐ Yes ☐ No

22a If the plan is a master and prototype plan (M&P) or volume submitter plan that received a favorable IRS opinion letter or advisory letter, enter the date of the letter _____/_____/_____ and the serial number _____.

22b If the plan is an individually-designed plan that received a favorable determination letter from the IRS, enter the date of the most recent determination letter _____/_____/_____.

KPMG LLP
515 Broadway
Albany, NY 12207-2974

Independent Auditors' Report

The Participants, Administrator and Compensation Committee of
Albany International Corp. Prosperity Plus Savings Plan:

Report on the Financial Statements

We have audited the accompanying statements of net assets available for benefits of the Albany International Corp. Prosperity Plus Savings Plan (the Plan) as of December 31, 2016 and 2015, and the related statements of changes in net assets available for benefits for the years then ended, and the related notes to the financial statements.

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.

Auditors' Responsibility

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

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

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

Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the net assets available for benefits of the Plan as of December 31, 2016 and 2015, and the changes in net assets available for benefits for the years then ended, in conformity with U.S. generally accepted accounting principles.

KPMG LLP is a Delaware limited liability partnership and the U.S. member firm of the KPMG network of independent member firms affiliated with KPMG International Cooperative ("KPMG International"), a Swiss entity.

KPMG

Report on Supplementary Information

Our audits were conducted for the purpose of forming an opinion on the financial statements as a whole. The supplemental schedule H, line 4i – schedule of assets (held at end of year) as of December 31, 2016 is presented for the purpose of additional analysis and are not a required part of the financial statements but is supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974. Such information is the responsibility of the Plan's management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audits of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the information is fairly stated in all material respects in relation to the 2016 financial statements as a whole.

KPMG LLP

June 27, 2017, except as to note 6,
which is as of October 6, 2017

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

Vanguard®

P.O. Box 2900

Valley Forge, PA 19482-2900

www.vanguard.com

Reasonable Cause Letter:

Form 5500 IRS Notification – “Form 5558 denied”:

The Form 5558 was mailed prior to the 7/31 deadline as stated under the filing requirements. The delivery took place on July 27, 2017 via FedEx however during delivery the package was damaged while in route from Philadelphia into the Memphis hub. Once in Memphis the package was held in their “Package Research Area” until delivery information could be confirmed at which time the delivery was finalized on August 16th, 2017.

Please see the attached FedEx Tracking confirmation.

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IMPORTANT!
FedEx is closely monitoring Tropical Storm Irma. Learn More

FedEx ® Tracking

779747407197

Ship date:		Actual delivery:
Thu 7/27/2017	**Delivered**	**Pending**
Wayne, PA US	*Signed for by: B.IZATT*	OGDEN, UT US

2 Piece shipment

Travel History

Date/Time	Activity	Location
8/16/2017 - Wednesday		
10:04 am	Delivered	OGDEN, UT
8:35 am	On FedEx vehicle for delivery	OGDEN, UT
7:43 am	At local FedEx facility	OGDEN, UT
5:15 am	At destination sort facility	SALT LAKE CITY, UT
3:23 am	Departed FedEx location	MEMPHIS, TN
7/27/2017 - Thursday		
11:03 pm	Arrived at FedEx location	MEMPHIS, TN
8:10 pm	Left FedEx origin facility	WEST CHESTER, PA
3:59 pm	Picked up	WEST CHESTER, PA
9:52 am	Shipment information sent to FedEx	

Shipment Facts

Tracking number	779747407197	**Service**	FedEx Standard Overnight
Master tracking number	779747407749	**Weight**	8 lbs / 3.63 kgs
Total pieces	2	**Total shipment weight**	8 lbs / 3.63 kgs
Terms	Shipper	**Packaging**	FedEx Box
Special handling section	Deliver Weekday	**Standard transit**	7/28/2017 by 3:00 pm

FedEx Search or tracking number Subm

Customer Focus
New Customer Center
Small Business Center
Service Guide
Customer Support

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FedEx HealthCare Solutions
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Packaging Services
Ancillary Clearance Services

Other Resources
FedEx Compatible
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Albany International Corp.
Prosperity Plus Savings Plan

Financial Statements and Supplemental Schedule
December 31, 2016 and 2015

Albany International Corp.
Prosperity Plus Savings Plan
December 31, 2016 and 2015
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Statements of Changes in Net Assets Available for Benefits for the years ended December 31, 2016 and 2015 3

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Supplemental Schedule*

Schedule H, Line 4i - Schedule of Assets (Held at End of Year) December 31, 2016 13–14

KPMG LLP
515 Broadway
Albany, NY 12207-2974

Independent Auditors' Report

The Participants, Administrator and Compensation Committee of
Albany International Corp. Prosperity Plus Savings Plan:

Report on the Financial Statements

We have audited the accompanying statements of net assets available for benefits of the Albany International Corp. Prosperity Plus Savings Plan (the Plan) as of December 31, 2016 and 2015, and the related statements of changes in net assets available for benefits for the years then ended, and the related notes to the financial statements.

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.

Auditors' Responsibility

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

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

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

Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the net assets available for benefits of the Plan as of December 31, 2016 and 2015, and the changes in net assets available for benefits for the years then ended, in conformity with U.S. generally accepted accounting principles.

KPMG LLP is a Delaware limited liability partnership and the U.S. member firm of the KPMG network of independent member firms affiliated with KPMG International Cooperative ("KPMG International"), a Swiss entity.

KPMG

Report on Supplementary Information

Our audits were conducted for the purpose of forming an opinion on the financial statements as a whole. The supplemental schedule H, line 4i – schedule of assets (held at end of year) as of December 31, 2016 is presented for the purpose of additional analysis and are not a required part of the financial statements but is supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974. Such information is the responsibility of the Plan's management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audits of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the information is fairly stated in all material respects in relation to the 2016 financial statements as a whole.

KPMG LLP

June 27, 2017, except as to note 6,
which is as of October 6, 2017

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

Albany International Corp.
Prosperity Plus Savings Plan
Statements of Net Assets Available for Benefits
December 31, 2016 and 2015

	2016	2015
Assets		
Investments, at fair value:		
Registered investment companies	$ 217,763,130	$ 201,309,496
Common stock and other investments	402,175	1,169,612
Common collective trust funds	39,317,394	42,478,897
Albany International Corp. common stock	27,490,144	25,243,739
Total investments	284,972,843	270,201,744
Receivables:		
Employer contribution receivable	2,642,259	2,202,538
Notes receivable from participants	5,262,701	5,355,515
Other assets	49,971	162,648
Total assets	292,927,774	277,922,445
Liabilities		
Other liabilities	-	9,955
Total liabilities	-	9,955
Net assets available for benefits	$ 292,927,774	$ 277,912,490

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

Albany International Corp.
Prosperity Plus Savings Plan
Statements of Changes in Net Assets Available for Benefits
For the Years Ended December 31, 2016 and 2015

	2016	2015
Investment income:		
Interest and dividends	$ 7,366,996	$ 6,223,187
Net appreciation/(depreciation) in fair value of investments	19,157,248	(9,123,953)
Net investment income/(loss)	26,524,244	(2,900,766)
Contributions:		
Employer	8,161,252	6,918,238
Participants	11,441,528	10,025,896
Rollovers due to acquisition	1,993,534	-
Interest income notes receivable from participants	224,580	231,017
Total contributions	21,820,894	17,175,151
Total additions	48,345,138	14,274,385
Deductions:		
Benefits paid to participants	(33,126,776)	(18,914,620)
Administrative expenses and other deductions	(203,078)	(162,011)
Total deductions	(33,329,854)	(19,076,631)
Net increase/(decrease)	15,015,284	(4,802,246)
Net assets available for benefits:		
Beginning of year	277,912,490	282,714,736
End of year	$ 292,927,774	$ 277,912,490

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

1. Description of Plan

The following description of the Albany International Corp. (the "Company") Prosperity Plus Savings Plan (the "Plan") provides only general information. Participants should refer to the Plan document for a more complete description of the Plan's provisions.

General

The Plan is a defined contribution plan and is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA). The Plan covers all full time domestic employees of the Company and its subsidiaries, except those covered by a collective bargaining agreement that does not provide for participation in the Plan, temporary employees, leased employees, contractors, interns and co-op students. Eligible employees hired on or after January 1, 2009, automatically become participants in the Plan for purposes of making Pre-Tax Participant Contributions, unless otherwise elected by the participant.

On April 8, 2016, the Company and Plan Sponsor acquired the outstanding shares of Harris Corporation's composite aerostructures business. During 2016, participants contributed amounts representing distributions from other qualified defined benefit or defined contribution plans of $1,993,534 of assets, which are included in Rollovers due to acquisition within the Statements of Changes in Net Assets Available for Benefits.

Contributions

Participants may make voluntary contributions to the Plan, that do not exceed the greater of 100% of the Participant's Compensation, or $18,000, subject to certain limitations, on a before-tax and/or after-tax basis as defined in the Plan. Participants may also contribute amounts representing distributions from other qualified defined benefit or defined contribution plans. Participants direct the investment of their contributions, as well as the employer contributions, into various investment options offered by the Plan. The Plan currently offers various investment options including registered investment companies, common stock, common collective trusts, a participant directed brokerage option and Albany International Class A common stock. The Company makes a matching contribution to the Plan up to 5% of the participant's eligible compensation of which 100% is of the first 4%, and 50% is of the next 2% deferred by the participant.

Profit-Sharing Contribution

The Plan provides for a discretionary annual profit-sharing contribution. Profit-sharing contributions are based upon a minimum 1% employee participation in the Plan and are in addition to, and separate from, Company non-discretionary matching contributions. In order to receive a profit-sharing contribution, an employee must be an active contributing participant in the Plan on the last day of the year for which the profit-sharing contribution is made. If an employee is eligible, yet chooses to participate for less than a full year, the profit-sharing contribution will be pro-rated. The amount of the profit sharing contribution is based on a formula stated at the beginning of the year. The Company's contribution for profit-sharing is in the form of cash and was $2,642,259 and $2,202,538 for the years ended December 31, 2016 and 2015, respectively.

Participant Accounts

Each participant's account is credited with the participant's contribution and allocations of (a) the Company's contributions and (b) Plan earnings. Allocations are based on participant earnings or account balances, as defined in the Plan. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

Notes Receivable from Participants
Participants may borrow from their fund accounts a minimum of $1,000 up to a maximum equal to the lesser of $50,000, minus the participant's highest outstanding note balance over the last 12 months, or 50% of their account balance. Interest rates on notes are determined by the Compensation Committee from time to time with the rate remaining constant throughout the life of the note (rates range between 4.25% and 10.25% at December 31, 2016 and 2015). Notes are to be repaid through payroll deductions, although they may be repaid in a lump sum amount, generally over a period from 1 to 5 years except for notes for the purchase of a primary residence, which range from 5 to 20 years.

Vesting
Participants are vested immediately in their and the Company's contributions plus actual earnings thereon.

Payment of Benefits
Upon termination of service, total disability, death or retirement, participants have the option to receive an amount equal to the value of their accounts in a lump sum payment or, in the case of total disability or retirement, monthly installments over a period not to exceed 15 years. Participants may also elect prior to retirement to withdraw up to 100% of their after-tax contributions and up to 100% of before-tax contributions if the Internal Revenue Service's criteria for "financial hardship" are met.

Plan Termination
The Company intends to continue the Plan indefinitely but reserves the right to modify, amend, suspend or terminate the Plan. In the event of plan termination, distributions would be allocated based on the value of the participant accounts.

Administrative Costs
Certain direct costs incurred in administering the Plan are borne by the Company. The Company paid Plan administrative expenses of $143,577 and $135,856 during 2016 and 2015, respectively, which principally consisted of plan fiduciary services. Expenses paid by the Plan included investment advisory fees, and securities brokerage fees.

2. Summary of Significant Accounting Policies

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

Use of Estimates
The preparation of the financial statements in conformity with accounting principles generally accepted in the United States of America requires Plan management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the Statement of Net Assets Available for Benefits date of the financial statements and the reported amounts of changes in net assets during the reporting period. Actual results could differ from those estimates.

Risks and Uncertainties
The Plan provides for various investment options in any combination of stocks, common collective trusts, registered investment companies and other investment securities. Investment securities are exposed to various risks, such as interest rate, market and credit risks. Due to the level of risk associated with certain investment securities and the level of uncertainty related to changes in the value of investment securities, it is at least reasonably possible that changes in risks in the near term would materially affect participants' account balances and the amounts reported in the statements of net assets available for benefits and the statement of changes in net assets available for benefits.

Investment Valuation and Income Recognition
Plan investments are reported at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. The Plan's Investment Committee determines the Plan's valuation policies utilizing information provided by the investment advisers and custodians. See Note 3 for discussion of fair value measurements.

Security transactions are recorded on a trade-date basis. Gains or losses on sales of securities are based on average cost.

Dividend income is recorded on the ex-dividend date. Dividends declared by the Board of Directors of the Company on Albany International Corp. Class A common stock may be reinvested in the Plan or received as a cash distribution as elected by the participant. Total cash dividends received by participants were $358,664 and $389,113 for the years ended December 31, 2016 and 2015, respectively. Interest income is recorded as earned.

The Plan presents in the Statement of Changes in Net Assets Available for Benefits the net appreciation/depreciation in the fair value of its investments, which consists of realized gains and losses and unrealized appreciation/depreciation on those investments.

Payment of Benefits
Benefit payments are recorded when paid.

Notes Receivable from Participants
Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest. Interest income is recorded on the accrual basis. Fees related to participant loans are paid by the participants. No allowance for credit losses has been recorded as of December 31, 2016 or 2015. Delinquent participant loans are recorded as deemed distributions on the basis of the terms of the Plan agreement.

Expenses
Certain expenses of maintaining the Plan are paid directly by the Company and are excluded from these financial statements. Investment related expenses are included in net appreciation/depreciation of fair value of investments.

Recent Accounting Pronouncements

The Company has not adopted any recent accounting pronouncements which had a significant effect on these financial statements, nor are there any accounting pronouncements that were recently issued which have not yet been adopted.

Subsequent Events
Management has evaluated the events and transactions that have occurred through the date the financial statements were available for issuance and noted no items requiring adjustment of the financial statements or additional disclosures.

3. Fair Value Measurements

The *Fair Value Measurement topic* of the FASB *Accounting Standards Codification* provides the framework for measuring fair value. That framework provides for a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (level 1) and the lowest priority to unobservable inputs (level 3). The three levels of the fair value hierarchy are described as follows:

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

Level 2 Inputs include:
- quoted prices for similar assets or liabilities in active markets;
- quoted prices for identical assets or similar assets or liabilities in inactive markets;
- inputs other than quoted prices that are observable for the asset and liability;
- inputs that are derived principally from or corroborated by observable market data by correlation or other means.

Level 3 Inputs are unobservable and significant to the fair value measurement. Level 3 inputs are unobservable inputs for the asset or liability, and include situations in which there is little, if any, market activity for the asset or liability. The unobservable inputs reflect the Plan's own assumptions about the assumptions that market participants would use in pricing an asset or liability.

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

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

Investments in registered investment companies are valued using the quoted sales price on the last business day of the year, which represents the net asset value of shares held by the Plan at year end.

The common stock of Albany International Corp. and exchange traded funds, which are classified as registered investment companies, are valued using active markets at the latest quoted sales price on the last business day of the year on its principal exchange.

Investments in common collective trust funds are valued at the net asset values (NAV) per share using available inputs to measure the fair value of such funds held by the Plan at year end. The NAV is based on the fair value of the underlying investments held by the fund less its liabilities. This practical expedient is not used when it is determined to be probable that the fund will sell the investments for an amount different that the reported NAV. Participant transactions (purchases and sales) may occur daily. Were the Plan to initiate a full redemption of the collective trust, the investment adviser reserves the right to temporarily delay withdrawal from the trust in order to ensure that securities liquidations will be carried out in an orderly business manner. There are no penalties or restrictions for withdrawing assets from the common collective trust funds at any time.

The following table sets forth by level, within the fair value hierarchy, the Plan's assets at fair value as of December 31, 2016 and 2015.

	Assets at Fair Value as of December 31, 2016			
	Quoted prices in active market Level 1	Significant other observable inputs Level 2	Significant unobservable inputs Level 3	Total
Registered investment companies				
Balanced funds	$ 85,699,955	$ -	$ -	$ 85,699,955
Bond funds	18,611,508	-	-	18,611,508
Domestic stock funds	96,679,336	-	-	96,679,336
International stock funds	14,669,294	-	-	14,669,294
Money market funds	2,094,751	-	-	2,094,751
Commodities	8,286	-	-	8,286
Common stock and other investments	402,175	-	-	402,175
Common collective trust funds	-	39,317,394	-	39,317,394
Albany International Class A common stock	27,490,144	-	-	27,490,144
Total investments in the fair value hierarchy	$ 245,655,449	$ 39,317,394	$ -	$ 284,972,843

	Assets at Fair Value as of December 31, 2015			
	Quoted prices in active market Level 1	Significant other observable inputs Level 2	Significant unobservable inputs Level 3	Total
Registered investment companies				
Balanced funds	$ 77,127,728	$ -	$ -	$ 77,127,728
Bond funds	19,113,937	-	-	19,113,937
Domestic stock funds	89,517,491	-	-	89,517,491
International stock funds	14,591,527	-	-	14,591,527
Money market funds	859,974	-	-	859,974
Commodities	98,839	-	-	98,839
Common stock and other investments	1,169,612	-	-	1,169,612
Common collective trust funds	-	42,478,897	-	42,478,897
Albany International Class A common stock	25,243,739	-	-	25,243,739
Total investments in the fair value hierarchy	$ 227,722,847	$ 42,478,897	$ -	$ 270,201,744

There were no transfers between Level 1, Level 2, and Level 3 for the years ended December 31, 2016 and 2015.

During 2016 and 2015, the Plan's investments earned interest and dividend income as follows:

	2016	2015
Registered investment companies	$ 6,502,025	$ 5,331,922
Common stock and other investments	48,744	62,192
Common collective trust	816,227	829,073
	$ 7,366,996	$ 6,223,187

4. Related Party and Party in Interest Transactions

The Plan invests in shares of mutual funds (including the Vanguard brokerage option) managed by an affiliate of Vanguard Fiduciary Trust Company ("VFTC"). VFTC acts as trustee for the investments held by the Plan. The Plan also invests in shares of the Plan Sponsor's Albany International Class A common stock. The Plan purchased $1,402,029 and $1,990,400 and sold $5,409,118 and $5,467,785 of Albany International Class A common stock during the years ended December 31, 2016 and 2015, respectively. Transactions in such investments qualify as party-in-interest transactions which are exempt from the prohibited transaction rules. Participant loans also qualify as party-in-interest transactions.

5. Tax Status

The Internal Revenue Service has determined and informed the Company by a letter dated November 21, 2016, that the Plan is qualified and the trust established under the Plan is tax-exempt, under the appropriate sections of the Internal Revenue Code. The Plan has been amended since receiving the determination letter. However, management believes that the Plan is currently designed and being operated in compliance with the applicable requirements of the Code. Therefore, the Plan administrator believes that the Plan was qualified and the related trust was tax-exempt as of the financial statement date.

Accounting principles generally accepted in the United States of America require plan management to evaluate tax positions taken by the Plan and recognize a tax liability if the organization has taken an uncertain position that more likely than not would not be sustained upon examination by the Internal Revenue Service. The Plan administrator has analyzed the tax positions taken by the Plan, and has concluded that as of December 31, 2016 and 2015 there are no uncertain positions taken or expected to be taken that would require recognition of a liability (or asset) or disclosure in the financial statements. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress.

6. Reconciliation of Financial Statements to Form 5500

Notes receivable from participants that are in default continue to be treated on the financial statements as notes receivable, but are treated on Form 5500 as deemed distributions, which are considered taxable distributions from the Plan.

A reconciliation of total investments per the financial statements at December 31, 2016 and 2015 to the annual report filed on Form 5500, Schedule H as required by the Department of Labor follows.

	2016	2015
Total investments per financial statements	$ 284,972,843	$ 270,201,744
Notes receivable from participants	5,262,701	5,355,515
Adjustment to contract value for fully benefit-responsive investment contract for prior year	-	717,844
Deemed distributions	21,665	24,521
Total notes receivable per Form 5500	5,241,036	6,048,838
Total investments per Form 5500	$ 290,213,879	$ 276,250,582

A reconciliation of deductions per the financial statements for the years ended December 31, 2016 and 2015 to the annual report filed on Form 5500, Schedule H as required by the Department of Labor follows.

	2016	2015
Total deductions from net assets per financial statements	$ 33,329,854	$ 19,076,631
Other income included in Administrative expenses and other deductions	52,386	5,085
Changes in deemed distributions	(2,856)	8,866
Total expenses per Form 5500	$ 33,379,384	$ 19,090,582

The following is a reconciliation of net assets available for benefits per the financial statements Form 5500 at December 31, 2016 and 2015:

	2016	2015
Net assets available for benefits per the financial statements	$ 292,927,774	$ 277,912,490
Adjustment to contract value for fully benefit-responsive investment contracts held by a common collective trust	-	717,844
Deemed distributions	(21,665)	(24,521)
Net assets available for benefits per Form 5500	$ 292,906,109	$ 278,605,813

The following is a reconciliation of the changes in net assets available for benefits per the financial statements to Form 5500 for the years ended December 31, 2016 and 2015:

	2016	2015
Net increase/(decrease) in available for benefits per the financial statements	$ 15,015,284	$ (4,802,246)
Adjustment to contract value for fully benefit-responsive investment contract for current year	-	717,844
Adjustment to contract value for fully benefit-responsive investment contract for prior year	(717,844)	(1,279,024)
Changes in deemed distributions	2,856	(8,866)
Net increase/(decrease) in assets available for benefits per Form 5500	$ 14,300,296	$ (5,372,292)

Supplemental Schedule

Albany International Corp.
Prosperity Plus Savings Plan
Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
December 31, 2016

(a)	(b)	(c)	(d)	(e)
	Identity of Issue/Borrower, Lessor or Similar Party	Description of Investments Including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value	Cost **	Current Value
*	Alps Alerian Mlp Etf	Registered Investment Company	-	10,710
*	Cambria Dhandho Junoon Etf	Registered Investment Company	-	1,988
*	Dodge & Cox International Stock Fund	Registered Investment Company	-	14,657,854
*	Doubleline Total Return Bond Cl N	Registered Investment Company	-	9,332
*	Duff & Phelps Global Utility Income	Registered Investment Company	-	4,650
*	Fidelity Advisor Emerging Markets Income Cl I	Registered Investment Company	-	11,743
*	Fidelity Floating Rate High Income	Registered Investment Company	-	4,391
*	Gamco Global Gold Natural Res & Income Trust Com Sh Ben Int	Registered Investment Company		1,723
*	Global X Superdividend Etf	Registered Investment Company	-	3,122
*	Goldman Sachs Small Cap value Fund; Institutional Shares	Registered Investment Company	-	5,500,973
*	JPMorgan Core Bond Fund; Class R6 Shares	Registered Investment Company	-	18,267,965
*	Merger Fund Investor Cl	Registered Investment Company	-	9,874
*	Metropolitan West Intermediate Bond Cl M	Registered Investment Company	-	5,853
*	Nuveen Build America Bond Fund	Registered Investment Company	-	6,189
*	Nuveen Floating Rate Income Opportunity Fund	Registered Investment Company	-	10,057
*	Powershares Build America Bond Etf	Registered Investment Company	-	9,658
*	Powershares Cef Income Composite Etf	Registered Investment Company	-	16,808
*	Principal Diversified Real Asset Fund; Institutional Class	Registered Investment Company	-	310,426
*	Sprott Physical Gold Trust Unit	Registered Investment Company	-	1,944
*	T. Rowe Price Equity Income Fund; Retail Class	Registered Investment Company	-	18,116,079
*	Vanguard Energy Etf	Registered Investment Company	-	2,274
*	Vanguard Federal Money Market Fund	Registered Investment Company	-	1,697,846
*	Vanguard Federal Money Market Investor Cl	Registered Investment Company	-	130,091
*	Vanguard Healthcare Investor Cl	Registered Investment Company	-	20,155
*	Vanguard High Yield Corp Investor Cl	Registered Investment Company	-	5,009
*	Vanguard Institutional Index Fund	Registered Investment Company	-	46,591,963
*	Vanguard Institutional Target Retirement 2010 Fund	Registered Investment Company	-	1,918,600
*	Vanguard Institutional Target Retirement 2015 Fund	Registered Investment Company	-	8,898,480
*	Vanguard Institutional Target Retirement 2020 Fund	Registered Investment Company	-	9,331,535
*	Vanguard Institutional Target Retirement 2025 Fund	Registered Investment Company	-	24,726,530
*	Vanguard Institutional Target Retirement 2030 Fund	Registered Investment Company	-	4,965,718
*	Vanguard Institutional Target Retirement 2035 Fund	Registered Investment Company	-	14,002,415
*	Vanguard Institutional Target Retirement 2040 Fund	Registered Investment Company	-	3,355,918
*	Vanguard Institutional Target Retirement 2045 Fund	Registered Investment Company	-	9,641,512
*	Vanguard Institutional Target Retirement 2050 Fund	Registered Investment Company	-	3,206,910
*	Vanguard Institutional Target Retirement 2055 Fund	Registered Investment Company	-	1,561,315
*	Vanguard Institutional Target Retirement 2060 Fund	Registered Investment Company	-	515,701
*	Vanguard Institutional Target Retirement Income Fund	Registered Investment Company	-	3,375,164
*	Vanguard Intermediate Term Treasury Investor Cl	Registered Investment Company	-	21,327
*	Vanguard Mid-Cap Index Fund Institutional Shares	Registered Investment Company	-	18,466,369
*	Vanguard Morgan Growth Fund Admiral Shares	Registered Investment Company	-	7,954,914
*	Vanguard Precious Metals & Mining Investor Cl	Registered Investment Company	-	6,012
*	Vanguard Prime Money Market Fund	Registered Investment Company	-	58,559
*	Vanguard Prime Money Market Investor Cl	Registered Investment Company	-	208,255
*	Vanguard Reit Index Admiral Cl	Registered Investment Company		60,831
*	Vanguard Total Stock Market Index Admiral Cl	Registered Investment Company	-	65,517
*	Vanguard Wellington Investor Cl	Registered Investment Company	-	12,871
				217,763,130
*	Albany International Class A	Company Stock Fund	-	27,490,144

Albany International Corp.
Prosperity Plus Savings Plan
Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
December 31, 2016

(a)	(b)	(c)	(d)	(e)
	Identity of Issue/Borrower, Lessor or Similar Party	**Description of Investments Including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value**	**Cost ****	**Current Value**
*	Aberdeen Asia Pacific Income Fund Inc	Mutual Funds	-	5,093
*	American Airlines Group Inc	Common Stock	-	17,349
*	Annaly Capital Management Inc	Common Stock	-	3,689
*	Apple Inc	Common Stock	-	18,781
*	Arconic Inc	Common Stock	-	158,170
*	Ares Capital Corp	Common Stock	-	2,968
*	At&T Inc	Common Stock	-	15,651
*	Avalon Advanced Materials Inc	Common Stock	-	344
*	Banco Santander S A Sponsored Adr	Common Stock	-	5,299
*	Blackrock Energy & Resources Trust	Mutual Funds	-	4,332
*	Blackrock Utility & Infras Tr	Mutual Funds	-	5,523
*	Cliffs Natural Res Inc	Common Stock	-	8,424
*	Fidelity Select American Gold	Mutual Funds	-	2,067
*	Geckosystems International Corp	Common Stock	-	1,901
*	Ishares Gold Trust	Common Stock	-	1,385
*	Itonis Inc	Common Stock	-	1,162
*	Kinder Morgan Inc De	Common Stock		10,885
*	Lynas Corp Ltd	Common Stock	-	56
*	Mgt Capital Invts Inc New	Common Stock	-	438
*	Mistral Ventures Inc Com Par $0.001	Common Stock		70
*	New Residential Invt Corp New	Common Stock		2,672
*	Omega Healthcare Investors Inc	Common Stock		5,314
*	Peoples Utah Bancorp	Common Stock	-	8,055
*	Pharmagen Inc	Common Stock	-	3
*	Potash Corp Of Saskatchewan Inc	Common Stock	-	2,612
*	Protagenic Therapeutics Inc	Common Stock	-	5
*	Rare Element Resources Ltd	Common Stock	-	15
*	Royal Dutch Shell Plc Sponsored Adr Repstg B Shares	Common Stock	-	5,797
*	Seadrill Ltd	Common Stock	-	1,083
*	Solo International Inc New	Common Stock	-	7
*	Starbucks Corp	Common Stock	-	11,583
*	Union Pacific Corp	Common Stock	-	16,308
*	United Parcel Service Inc Cl B	Common Stock	-	21,094
*	Valeant Pharm Intl Inc Cda	Common Stock	-	3,630
*	Vantage Drilling Company	Common Stock	-	16
*	Verizon Communications Inc	Common Stock	-	34,413
*	Vodafone Group Plc New Sponsored Adr No Par	Common Stock	-	12,215
*	Xg Technology Inc Par $.00001	Common Stock	-	13,765
*	Zoom Technologies Inc Par $0.01	Common Stock	-	1
				402,175
*	Vanguard Retirement Savings Master Trust	Common Collective Trust	-	39,317,394
*	Participant Notes Receivable	Participant loans (for a term not exceeding 20 years at interest rates ranging from 4.25% to 10.25%), maturities from 5/24/2018 through 5/24/2037	-	5,262,701
				$ 290,235,544

* Party-in-interest

** Cost information is not required for participant-directed investments and therefore, is not included

Albany International Corp.
Prosperity Plus Savings Plan
Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
December 31, 2016

(a)	(b) Identity of Issue/Borrower, Lessor or Similar Party	(c) Description of Investments Including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value	(d) Cost **	(e) Current Value
*	Alps Alerian Mlp Etf	Registered Investment Company	-	10,710
*	Cambria Dhandho Junoon Etf	Registered Investment Company	-	1,988
*	Dodge & Cox International Stock Fund	Registered Investment Company	-	14,657,854
*	Doubleline Total Return Bond Cl N	Registered Investment Company	-	9,332
*	Duff & Phelps Global Utility Income	Registered Investment Company	-	4,650
*	Fidelity Advisor Emerging Markets Income Cl I	Registered Investment Company	-	11,743
*	Fidelity Floating Rate High Income	Registered Investment Company	-	4,391
*	Gamco Global Gold Natural Res & Income Trust Com Sh Ben Int	Registered Investment Company		1,723
*	Global X Superdividend Etf	Registered Investment Company	-	3,122
*	Goldman Sachs Small Cap value Fund; Institutional Shares	Registered Investment Company	-	5,500,973
*	JPMorgan Core Bond Fund; Class R6 Shares	Registered Investment Company	-	18,267,965
*	Merger Fund Investor Cl	Registered Investment Company	-	9,874
*	Metropolitan West Intermediate Bond Cl M	Registered Investment Company	-	5,853
*	Nuveen Build America Bond Fund	Registered Investment Company	-	6,189
*	Nuveen Floating Rate Income Opportunity Fund	Registered Investment Company	-	10,057
*	Powershares Build America Bond Etf	Registered Investment Company	-	9,658
*	Powershares Cef Income Composite Etf	Registered Investment Company	-	16,808
*	Principal Diversified Real Asset Fund; Institutional Class	Registered Investment Company	-	310,426
*	Sprott Physical Gold Trust Unit	Registered Investment Company	-	1,944
*	T. Rowe Price Equity Income Fund; Retail Class	Registered Investment Company	-	18,116,079
*	Vanguard Energy Etf	Registered Investment Company	-	2,274
*	Vanguard Federal Money Market Fund	Registered Investment Company	-	1,697,846
*	Vanguard Federal Money Market Investor Cl	Registered Investment Company	-	130,091
*	Vanguard Healthcare Investor Cl	Registered Investment Company	-	20,155
*	Vanguard High Yield Corp Investor Cl	Registered Investment Company	-	5,009
*	Vanguard Institutional Index Fund	Registered Investment Company	-	46,591,963
*	Vanguard Institutional Target Retirement 2010 Fund	Registered Investment Company	-	1,918,600
*	Vanguard Institutional Target Retirement 2015 Fund	Registered Investment Company	-	8,898,480
*	Vanguard Institutional Target Retirement 2020 Fund	Registered Investment Company	-	9,331,535
*	Vanguard Institutional Target Retirement 2025 Fund	Registered Investment Company	-	24,726,530
*	Vanguard Institutional Target Retirement 2030 Fund	Registered Investment Company	-	4,965,718
*	Vanguard Institutional Target Retirement 2035 Fund	Registered Investment Company	-	14,002,415
*	Vanguard Institutional Target Retirement 2040 Fund	Registered Investment Company	-	3,355,918
*	Vanguard Institutional Target Retirement 2045 Fund	Registered Investment Company	-	9,641,512
*	Vanguard Institutional Target Retirement 2050 Fund	Registered Investment Company	-	3,206,910
*	Vanguard Institutional Target Retirement 2055 Fund	Registered Investment Company	-	1,561,315
*	Vanguard Institutional Target Retirement 2060 Fund	Registered Investment Company	-	515,701
*	Vanguard Institutional Target Retirement Income Fund	Registered Investment Company	-	3,375,164
*	Vanguard Intermediate Term Treasury Investor Cl	Registered Investment Company	-	21,327
*	Vanguard Mid-Cap Index Fund Institutional Shares	Registered Investment Company	-	18,466,369
*	Vanguard Morgan Growth Fund Admiral Shares	Registered Investment Company	-	7,954,914
*	Vanguard Precious Metals & Mining Investor Cl	Registered Investment Company	-	6,012
*	Vanguard Prime Money Market Fund	Registered Investment Company	-	58,559
*	Vanguard Prime Money Market Investor Cl	Registered Investment Company	-	208,255
*	Vanguard Reit Index Admiral Cl	Registered Investment Company		60,831
*	Vanguard Total Stock Market Index Admiral Cl	Registered Investment Company	-	65,517
*	Vanguard Wellington Investor Cl	Registered Investment Company	-	12,871
				217,763,130
*	Albany International Class A	Company Stock Fund	-	27,490,144

Albany International Corp.
Prosperity Plus Savings Plan
Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
December 31, 2016

(a)	(b)	(c)	(d)	(e)
	Identity of Issue/Borrower, Lessor or Similar Party	Description of Investments Including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value	Cost **	Current Value
*	Aberdeen Asia Pacific Income Fund Inc	Mutual Funds	-	5,093
*	American Airlines Group Inc	Common Stock	-	17,349
*	Annaly Capital Management Inc	Common Stock	-	3,689
*	Apple Inc	Common Stock	-	18,781
*	Arconic Inc	Common Stock	-	158,170
*	Ares Capital Corp	Common Stock	-	2,968
*	At&T Inc	Common Stock	-	15,651
*	Avalon Advanced Materials Inc	Common Stock	-	344
*	Banco Santander S A Sponsored Adr	Common Stock	-	5,299
*	Blackrock Energy & Resources Trust	Mutual Funds	-	4,332
*	Blackrock Utility & Infras Tr	Mutual Funds	-	5,523
*	Cliffs Natural Res Inc	Common Stock	-	8,424
*	Fidelity Select American Gold	Mutual Funds	-	2,067
*	Geckosystems International Corp	Common Stock	-	1,901
*	Ishares Gold Trust	Common Stock	-	1,385
*	Itonis Inc	Common Stock	-	1,162
*	Kinder Morgan Inc De	Common Stock		10,885
*	Lynas Corp Ltd	Common Stock	-	56
*	Mgt Capital Invts Inc New	Common Stock	-	438
*	Mistral Ventures Inc Com Par $0.001	Common Stock		70
*	New Residential Invt Corp New	Common Stock		2,672
*	Omega Healthcare Investors Inc	Common Stock		5,314
*	Peoples Utah Bancorp	Common Stock	-	8,055
*	Pharmagen Inc	Common Stock	-	3
*	Potash Corp Of Saskatchewan Inc	Common Stock	-	2,612
*	Protagenic Therapeutics Inc	Common Stock	-	5
*	Rare Element Resources Ltd	Common Stock	-	15
*	Royal Dutch Shell Plc Sponsored Adr Repstg B Shares	Common Stock	-	5,797
*	Seadrill Ltd	Common Stock	-	1,083
*	Solo International Inc New	Common Stock	-	7
*	Starbucks Corp	Common Stock	-	11,583
*	Union Pacific Corp	Common Stock	-	16,308
*	United Parcel Service Inc Cl B	Common Stock	-	21,094
*	Valeant Pharm Intl Inc Cda	Common Stock	-	3,630
*	Vantage Drilling Company	Common Stock	-	16
*	Verizon Communications Inc	Common Stock	-	34,413
*	Vodafone Group Plc New Sponsored Adr No Par	Common Stock	-	12,215
*	Xg Technology Inc Par $.00001	Common Stock	-	13,765
*	Zoom Technologies Inc Par $0.01	Common Stock	-	1
				402,175
*	Vanguard Retirement Savings Master Trust	Common Collective Trust	-	39,317,394
*	Participant Notes Receivable	Participant loans (for a term not exceeding 20 years at interest rates ranging from 4.25% to 10.25%), maturities from 5/24/2018 through 5/24/2037	-	5,262,701
				$ 290,235,544

* Party-in-interest

** Cost information is not required for participant-directed investments and therefore, is not included