

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
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Part I	Annual Report Identification Information		
For calendar plan year 2016 or fiscal plan year beginning <u>01/01/2016</u> and ending <u>12/31/2016</u>			
A	This return/report is for:	☐ a multiemployer plan ☐ a multiple-employer plan (Filers checking this box must attach a list of participating employer information in accordance with the form instructions.) ☒ a single-employer plan ☐ a DFE (specify) _____	
B	This return/report is:	☐ the first return/report ☐ the final return/report ☐ an amended return/report ☐ a short plan year return/report (less than 12 months)	
C	If the plan is a collectively-bargained plan, check here. ☒		
D	Check box if filing under:	☒ Form 5558 ☐ automatic extension ☐ the DFVC program ☐ special extension (enter description)	

Part II	Basic Plan Information —enter all requested information		
1a	Name of plan <u>WCI STEEL/PYRO/BARON RETIREMENT PLAN</u>	1b	Three-digit plan number (PN) ► <u>003</u>
		1c	Effective date of plan <u>09/01/1995</u>
2a	Plan sponsor's name (employer, if for a single-employer plan) Mailing address (include room, apt., suite no. and street, or P.O. Box) City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions) <u>THE RENCO GROUP, INC.</u> <u>ONE ROCKEFELLER PLAZA - 29TH FLOOR</u> <u>NEW YORK, NY 10020</u>	2b	Employer Identification Number (EIN) <u>13-3370264</u>
		2c	Plan Sponsor's telephone number <u>212-541-6000</u>
		2d	Business code (see instructions) <u>551112</u>

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

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

SIGN HERE	Filed with authorized/valid electronic signature.	10/16/2017	JOHN GRIMALDI, VP
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE
Preparer's name (including firm name, if applicable) and address (include room or suite number)			Preparer's telephone number

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

3a Plan administrator's name and address ☒ Same as Plan Sponsor	3b Administrator's EIN 3c Administrator's telephone number <div style="background-color: #cccccc; height: 40px; width: 100%;"></div>
4 If the name and/or EIN of the plan sponsor has changed since the last return/report filed for this plan, enter the name, EIN and the plan number from the last return/report: a Sponsor's name	4b EIN 4c PN
5 Total number of participants at the beginning of the plan year	5 2315
6 Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines 6a(1) , 6a(2) , 6b , 6c , and 6d). a(1) Total number of active participants at the beginning of the plan year..... a(2) Total number of active participants at the end of the plan year b Retired or separated participants receiving benefits..... c Other retired or separated participants entitled to future benefits d Subtotal. Add lines 6a(2) , 6b , and 6c e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits. f Total. Add lines 6d and 6e g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item) h Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested	<div style="background-color: #cccccc; height: 20px; width: 100%;"></div> 6a(1) 0 6a(2) 0 6b 1430 6c 758 6d 2188 6e 0 6f 2188 6g 6h 0
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item).....	7
8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions: 1I 3H b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristics Codes in the instructions:	

9a Plan funding arrangement (check all that apply) (1) ☒ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor	9b Plan benefit arrangement (check all that apply) (1) ☒ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor
10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)	
a Pension Schedules (1) ☒ R (Retirement Plan Information) (2) ☐ MB (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary (3) ☒ SB (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary	b General Schedules (1) ☒ H (Financial Information) (2) ☐ I (Financial Information – Small Plan) (3) ☒ <u>1</u> A (Insurance Information) (4) ☒ C (Service Provider Information) (5) ☒ D (DFE/Participating Plan Information) (6) ☐ G (Financial Transaction Schedules)

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

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

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

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

11c Enter the Receipt Confirmation Code for the 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 A (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <hr/> <small>Department of Labor Employee Benefits Security Administration</small> <hr/> <small>Pension Benefit Guaranty Corporation</small>	Insurance Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ► File as an attachment to Form 5500. ► Insurance companies are required to provide the information pursuant to ERISA section 103(a)(2).	OMB No. 1210-0110 <hr/> 2016 <hr/> This Form is Open to Public Inspection
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For calendar plan year 2016 or fiscal plan year beginning **01/01/2016** and ending **12/31/2016**

A Name of plan WCI STEEL/PYRO/BARON RETIREMENT PLAN	B Three-digit plan number (PN)	003
C Plan sponsor's name as shown on line 2a of Form 5500 THE RENCO GROUP, INC.	D Employer Identification Number (EIN) 13-3370264	

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

(a) Name of insurance carrier
PRINCIPAL LIFE INSURANCE COMPANY

(b) EIN	(c) NAIC code	(d) Contract or identification number	(e) Approximate number of persons covered at end of policy or contract year	Policy or contract year	
				(f) From	(g) To
42-0127290	61271	804735	2221	01/01/2016	12/31/2016

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

Part II Investment and Annuity Contract Information

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

4 Current value of plan's interest under this contract in the general account at year end	4	
5 Current value of plan's interest under this contract in separate accounts at year end.....	5	1610313

6 Contracts With Allocated Funds:**a** State the basis of premium rates ▶**b** Premiums paid to carrier**6b****c** Premiums due but unpaid at the end of the year**6c****d** If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, enter amount**6d**

Specify nature of costs ▶

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

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

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

b Balance at the end of the previous year **7b** 0**c** Additions: (1) Contributions deposited during the year**7c(1)**

(2) Dividends and credits.....

7c(2)

(3) Interest credited during the year.....

7c(3)

(4) Transferred from separate account

7c(4)

(5) Other (specify below)

7c(5)

▶

(6) Total additions **7c(6)**

0

d Total of balance and additions (add lines **7b** and **7c(6)**). **7d**

0

e Deductions:

(1) Disbursed from fund to pay benefits or purchase annuities during year

7e(1)

(2) Administration charge made by carrier.....

7e(2)

(3) Transferred to separate account

7e(3)

(4) Other (specify below)

7e(4)

▶

(5) Total deductions **7e(5)**

0

f Balance at the end of the current year (subtract line **7e(5)** from line **7d**)..... **7f**

0

Part III Welfare Benefit Contract Information

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

8 Benefit and contract type (check all applicable boxes)

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

9 Experience-rated contracts:

a Premiums: (1) Amount received	9a(1)		
(2) Increase (decrease) in amount due but unpaid	9a(2)		
(3) Increase (decrease) in unearned premium reserve	9a(3)		
(4) Earned ((1) + (2) - (3))		9a(4)	0
b Benefit charges (1) Claims paid	9b(1)		
(2) Increase (decrease) in claim reserves	9b(2)		
(3) Incurred claims (add (1) and (2))		9b(3)	0
(4) Claims charged		9b(4)	
c Remainder of premium: (1) Retention charges (on an accrual basis) --			
(A) Commissions	9c(1)(A)		
(B) Administrative service or other fees	9c(1)(B)		
(C) Other specific acquisition costs	9c(1)(C)		
(D) Other expenses	9c(1)(D)		
(E) Taxes	9c(1)(E)		
(F) Charges for risks or other contingencies	9c(1)(F)		
(G) Other retention charges	9c(1)(G)		
(H) Total retention		9c(1)(H)	0
(2) Dividends or retroactive rate refunds. (These amounts were ☐ paid in cash, or ☐ credited.)		9c(2)	
d Status of policyholder reserves at end of year: (1) Amount held to provide benefits after retirement		9d(1)	
(2) Claim reserves		9d(2)	
(3) Other reserves		9d(3)	
e Dividends or retroactive rate refunds due. (Do not include amount entered in line 9c(2).)		9e	

10 Nonexperience-rated contracts:

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

Part IV Provision of Information

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

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

SCHEDULE SB (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Single-Employer Defined Benefit Plan Actuarial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6059 of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500 or 5500-SF.	OMB No. 1210-0110 2016 This Form is Open to Public Inspection
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For calendar plan year 2016 or fiscal plan year beginning 01/01/2016 and ending 12/31/2016

▶ **Round off amounts to nearest dollar.**

▶ **Caution:** A penalty of \$1,000 will be assessed for late filing of this report unless reasonable cause is established.

A Name of plan <u>WCI STEEL/PYRO/BARON RETIREMENT PLAN</u>	B Three-digit plan number (PN) ▶ <u>003</u>
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF <u>THE RENCO GROUP, INC.</u>	D Employer Identification Number (EIN) <u>13-3370264</u>
E Type of plan: ☒ Single ☐ Multiple-A ☐ Multiple-B	F Prior year plan size: ☐ 100 or fewer ☐ 101-500 ☒ More than 500

Part I	Basic Information
1 Enter the valuation date: Month <u>01</u> Day <u>01</u> Year <u>2016</u>	
2 Assets:	
a Market value	2a <u>185892613</u>
b Actuarial value	2b <u>192354415</u>
3 Funding target/participant count breakdown	(1) Number of participants (2) Vested Funding Target (3) Total Funding Target
a For retired participants and beneficiaries receiving payment.....	<u>1462</u> <u>177047396</u> <u>177047396</u>
b For terminated vested participants.....	<u>853</u> <u>35595992</u> <u>35595992</u>
c For active participants.....	<u>0</u> <u>0</u> <u>0</u>
d Total.....	<u>2315</u> <u>212643388</u> <u>212643388</u>
4 If the plan is in at-risk status, check the box and complete lines (a) and (b)..... ☐	
a Funding target disregarding prescribed at-risk assumptions	4a
b Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been in at-risk status for fewer than five consecutive years and disregarding loading factor	4b
5 Effective interest rate	5 <u>5.95 %</u>
6 Target normal cost.....	6 <u>2400000</u>

Statement by Enrolled Actuary

To the best of my knowledge, the information supplied in this schedule and accompanying schedules, statements and attachments, if any, is complete and accurate. Each prescribed assumption was applied in accordance with applicable law and regulations. In my opinion, each other assumption is reasonable (taking into account the experience of the plan and reasonable expectations) and such other assumptions, in combination, offer my best estimate of anticipated experience under the plan.

SIGN HERE		<u>09/27/2017</u>
	Signature of actuary	Date
<u>DAVID A. STOCKLAS</u>	Type or print name of actuary	<u>17-05460</u>
<u>PRINCIPAL FINANCIAL GROUP</u>	Firm name	Most recent enrollment number
<u>PO BOX 9394</u> <u>DES MOINES, IA 50306-9394</u>	Address of the firm	<u>412-394-9380</u>
		Telephone number (including area code)

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

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

Schedule SB (Form 5500) 2016
v. 160205

Part II Beginning of Year Carryover and Prefunding Balances		(a) Carryover balance	(b) Prefunding balance
7	Balance at beginning of prior year after applicable adjustments (line 13 from prior year)	0	0
8	Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	0	0
9	Amount remaining (line 7 minus line 8)	0	0
10	Interest on line 9 using prior year's actual return of <u>2.61</u> %	0	0
11	Prior year's excess contributions to be added to prefunding balance:		
a	Present value of excess contributions (line 38a from prior year)		0
b(1)	Interest on the excess, if any, of line 38a over line 38b from prior year Schedule SB, using prior year's effective interest rate of <u>6.15</u> %		0
b(2)	Interest on line 38b from prior year Schedule SB, using prior year's actual return		0
c	Total available at beginning of current plan year to add to prefunding balance		0
d	Portion of (c) to be added to prefunding balance		0
12	Other reductions in balances due to elections or deemed elections		0
13	Balance at beginning of current year (line 9 + line 10 + line 11d – line 12)	0	0

Part III Funding Percentages			
14	Funding target attainment percentage	14	90.45%
15	Adjusted funding target attainment percentage	15	90.45%
16	Prior year's funding percentage for purposes of determining whether carryover/prefunding balances may be used to reduce current year's funding requirement	16	88.72%
17	If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage	17	%

Part IV Contributions and Liquidity Shortfalls					
18 Contributions made to the plan for the plan year by employer(s) and employees:					
(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees
04/15/2016	2605605	0			
07/15/2016	2605605	0			
10/14/2016	2605605	0			
01/13/2017	2605605	0			
09/15/2017	2414614	0			
			Totals ►	18(b)	12837034
				18(c)	0

19 Discounted employer contributions – see instructions for small plan with a valuation date after the beginning of the year:		
a	Contributions allocated toward unpaid minimum required contributions from prior years.	19a 0
b	Contributions made to avoid restrictions adjusted to valuation date	19b 0
c	Contributions allocated toward minimum required contribution for current year adjusted to valuation date	19c 12221839
20 Quarterly contributions and liquidity shortfalls:		
a Did the plan have a "funding shortfall" for the prior year?		☒ Yes ☐ No
b If line 20a is "Yes," were required quarterly installments for the current year made in a timely manner?		☒ Yes ☐ No
c If line 20a is "Yes," see instructions and complete the following table as applicable:		

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

Part V	Assumptions Used to Determine Funding Target and Target Normal Cost		
21	Discount rate:		
a	Segment rates:	<div style="display: flex; justify-content: space-around;"> <div>1st segment: 4.43%</div> <div>2nd segment: 5.91%</div> <div>3rd segment: 6.65%</div> </div>	☐ N/A, full yield curve used
b	Applicable month (enter code)	21b	4
22	Weighted average retirement age		22
23	Mortality table(s) (see instructions) ☐ Prescribed - combined ☒ Prescribed - separate ☐ Substitute		
Part VI	Miscellaneous Items		
24	Has a change been made in the non-prescribed actuarial assumptions for the current plan year? If "Yes," see instructions regarding required attachment. ☐ Yes ☒ No		
25	Has a method change been made for the current plan year? If "Yes," see instructions regarding required attachment. ☐ Yes ☒ No		
26	Is the plan required to provide a Schedule of Active Participants? If "Yes," see instructions regarding required attachment. ☐ Yes ☒ No		
27	If the plan is subject to alternative funding rules, enter applicable code and see instructions regarding attachment.	27	
Part VII	Reconciliation of Unpaid Minimum Required Contributions For Prior Years		
28	Unpaid minimum required contributions for all prior years	28	0
29	Discounted employer contributions allocated toward unpaid minimum required contributions from prior years (line 19a)	29	0
30	Remaining amount of unpaid minimum required contributions (line 28 minus line 29)	30	0
Part VIII	Minimum Required Contribution For Current Year		
31	Target normal cost and excess assets (see instructions):		
a	Target normal cost (line 6)	31a	2400000
b	Excess assets, if applicable, but not greater than line 31a	31b	0
32	Amortization installments:	Outstanding Balance	Installment
a	Net shortfall amortization installment	20288973	9821839
b	Waiver amortization installment	0	0
33	If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____) and the waived amount		33
34	Total funding requirement before reflecting carryover/prefunding balances (lines 31a - 31b + 32a + 32b - 33)		34
			12221839
	Carryover balance	Prefunding balance	Total balance
35	Balances elected for use to offset funding requirement	0	0
36	Additional cash requirement (line 34 minus line 35)		36
			12221839
37	Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)		37
			12221839
38	Present value of excess contributions for current year (see instructions)		
a	Total (excess, if any, of line 37 over line 36)	38a	0
b	Portion included in line 38a attributable to use of prefunding and funding standard carryover balances	38b	0
39	Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37)		39
			0
40	Unpaid minimum required contributions for all years		40
			0
Part IX	Pension Funding Relief Under Pension Relief Act of 2010 (See Instructions)		
41	If an election was made to use PRA 2010 funding relief for this plan:		
a	Schedule elected ☐ 2 plus 7 years ☐ 15 years		
b	Eligible plan year(s) for which the election in line 41a was made ☐ 2008 ☐ 2009 ☐ 2010 ☐ 2011		
42	Amount of acceleration adjustment		42
43	Excess installment acceleration amount to be carried over to future plan years		43

SCHEDULE C (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Service Provider Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110
		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 WCI STEEL/PYRO/BARON RETIREMENT PLAN	B Three-digit plan number (PN) ▶	003
C Plan sponsor's name as shown on line 2a of Form 5500 THE RENCO GROUP, INC.	D Employer Identification Number (EIN) 13-3370264	

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

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

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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)

JP MORGAN CHASE

13-4994650

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28	INVESTMENT MANAGER	466669	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

PRINCIPAL LIFE INSURANCE COMPANY

42-0127290

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
13 50 64	CONTRACT ADMINISTRATOR	341379	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☐ No ☒

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

EISNERAMPER LLP

13-1639826

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
16	CONSULTANT	23280	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)

WELLS FARGO BANK, N.A.

94-1347393

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
21 28 59 63	TRUSTEE	20937	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

CROWE HORWATH LLP

35-0921680

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
10	AUDITOR	18360	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

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

Part I Service Provider Information (continued)

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
(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) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small>	DFE/Participating Plan Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ► File as an attachment to Form 5500.	OMB No. 1210-0110 <div style="text-align: center; font-size: 1.2em; font-weight: bold;">2016</div> This Form is Open to Public Inspection.
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For calendar plan year 2016 or fiscal plan year beginning 01/01/2016 and ending 12/31/2016

A Name of plan <u>WCI STEEL/PYRO/BARON RETIREMENT PLAN</u>	B Three-digit plan number (PN) ► <u>003</u>
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 <u>THE RENCO GROUP, INC.</u>	D Employer Identification Number (EIN) <u>13-3370264</u>

Part I	Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs) (Complete as many entries as needed to report all interests in DFEs)
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a Name of MTIA, CCT, PSA, or 103-12 IE: <u>PRIN MONEY MARKET SEP ACCT-R6</u>		
b Name of sponsor of entity listed in (a): <u>PRINCIPAL LIFE INSURANCE COMPANY</u>		
c EIN-PN <u>42-0127290-024</u>	d Entity code <u>P</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>1610313</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>THE RENCO GROUP, INC. MASTER TRUST</u>		
b Name of sponsor of entity listed in (a): <u>THE RENCO GROUP, INC.</u>		
c EIN-PN <u>13-3370264-050</u>	d Entity code <u>M</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>183565545</u>
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**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN

SCHEDULE H (Form 5500) <small>Internal Revenue Service</small> <small>Department of Labor</small> <small>Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	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.	<small>OMB No. 1210-0110</small> 2016 This Form is Open to Public Inspection
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For calendar plan year 2016 or fiscal plan year beginning 01/01/2016 and ending 12/31/2016		
A Name of plan WCI STEEL/PYRO/BARON RETIREMENT PLAN	B Three-digit plan number (PN) ►	003
C Plan sponsor's name as shown on line 2a of Form 5500 THE RENCO GROUP, INC.	D Employer Identification Number (EIN) 13-3370264	

Part I	Asset and Liability Statement
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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)	2614623	5020219
(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)	28780	157052
(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)		
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property).....	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans.....	1c(8)		
(9) Value of interest in common/collective trusts	1c(9)		
(10) Value of interest in pooled separate accounts	1c(10)	1516882	1610313
(11) Value of interest in master trust investment accounts	1c(11)	184820798	183565545
(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)		
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)	0	0
(15) Other	1c(15)		

1d Employer-related investments:

		(a) Beginning of Year	(b) End of Year
(1) Employer securities	1d(1)		
(2) Employer real property	1d(2)		
e Buildings and other property used in plan operation	1e		
f Total assets (add all amounts in lines 1a through 1e)	1f	188981083	190353129

Liabilities

g Benefit claims payable	1g		
h Operating payables	1h		
i Acquisition indebtedness	1i		
j Other liabilities	1j	209599	249253
k Total liabilities (add all amounts in lines 1g through 1j)	1k	209599	249253

Net Assets

l Net assets (subtract line 1k from line 1f)	1l	188771484	190103876
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Part II Income and Expense Statement

2 Plan income, expenses, and changes in net assets for the year. Include all income and expenses of the plan, including any trust(s) or separately maintained fund(s) and any payments/receipts to/from insurance carriers. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 2a, 2b(1)(E), 2e, 2f, and 2g.

Income

		(a) Amount	(b) Total
a Contributions:			
(1) Received or receivable in cash from: (A) Employers	2a(1)(A)	12837034	
(B) Participants	2a(1)(B)		
(C) Others (including rollovers)	2a(1)(C)		
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		12837034
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	1394	
(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)		
(F) Other	2b(1)(F)		
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		1394
(2) Dividends: (A) Preferred stock	2b(2)(A)		
(B) Common stock	2b(2)(B)		
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)		
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		0
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)		
(B) Aggregate carrying amount (see instructions)	2b(4)(B)		
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)		0
(5) Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)		
(B) Other	2b(5)(B)		
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		0

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		-69
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		10670529
(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)		
c Other income.....	2c		
d Total income. Add all income amounts in column (b) and enter total.....	2d		23508888

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	20000211	
(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)		20000211
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions)	2g		
h Interest expense.....	2h		
i Administrative expenses: (1) Professional fees.....	2i(1)	18360	
(2) Contract administrator fees.....	2i(2)	231289	
(3) Investment advisory and management fees.....	2i(3)	466669	
(4) Other	2i(4)	1459967	
(5) Total administrative expenses. Add lines 2i(1) through (4).....	2i(5)		2176285
j Total expenses. Add all expense amounts in column (b) and enter total	2j		22176496

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		1332392
l Transfers of assets:			
(1) To this plan.....	2l(1)		
(2) From this plan.....	2l(2)		

Part III Accountant's Opinion

3 Complete lines 3a through 3c if the opinion of an independent qualified public accountant is attached to this Form 5500. Complete line 3d if an opinion is not attached.

a The attached opinion of an independent qualified public accountant for this plan is (see instructions):

(1) ☐ Unqualified (2) ☐ Qualified (3) ☒ Disclaimer (4) ☐ Adverse

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

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

(1) Name: CROWE HORWATH LLP

(2) EIN: 35-0921680

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

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

Part IV Compliance Questions

4 CCTs and PSAs do not complete Part IV. MTIAs, 103-12 IEs, and GIAs do not complete lines 4a, 4e, 4f, 4g, 4h, 4k, 4m, 4n, or 5. 103-12 IEs also do not complete lines 4j and 4l. MTIAs also do not complete line 4l.

During the plan year:

a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.).....

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

	Yes	No	Amount
4a		X	
4b		X	

		Yes	No	Amount
c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)	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		10000000
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 4004439. (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.
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For calendar plan year 2016 or fiscal plan year beginning 01/01/2016 and ending 12/31/2016

A Name of plan <u>WCI STEEL/PYRO/BARON RETIREMENT PLAN</u>	B Three-digit plan number (PN) ▶ <u>003</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>THE RENCO GROUP, INC.</u>	D Employer Identification Number (EIN) <u>13-3370264</u>

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

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

1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions	1	<u>0</u>
2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits): EIN(s): <u>42-0127290</u>		
Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.		
3 Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year	3	<u>93</u>

Part II	Funding Information (If the plan is not subject to the minimum funding requirements of section 412 of the Internal Revenue Code or ERISA section 302, skip this Part.)
----------------	---

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

Part III	Amendments
-----------------	-------------------

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

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

Schedule R (Form 5500) 2016
v. 160205

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: <u>63.0</u> % Investment-Grade Debt: <u>12.0</u> % High-Yield Debt: <u>1.0</u> % Real Estate: <u>0.0</u> % Other: <u>24.0</u> %	
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 / / .		

**WCI STEEL/PYRO/BARON
RETIREMENT PLAN**

FINANCIAL STATEMENTS
December 31, 2016 and 2015

WCI STEEL/PYRO/BARON RETIREMENT PLAN
New York, New York

FINANCIAL STATEMENTS
December 31, 2016 and 2015

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INDEPENDENT AUDITOR'S REPORT

Plan Administrator
WCI Steel/Pyro/Baron Retirement Plan
New York, New York

Report on the Financial Statements

We were engaged to audit the accompanying financial statements of WCI Steel/Pyro/Baron Retirement Plan (the "Plan"), which comprise the statements of net assets available for benefits 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 statement of accumulated plan benefits as of December 31, 2015, and the related statement of changes in accumulated plan benefits for the year then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

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

Auditor's Responsibility

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

Basis for Disclaimer of Opinion

As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Note 3, which was certified by Wells Fargo Bank, N.A. ("Wells Fargo") and Principal Life Insurance Company ("Principal") except for comparing such information with the related information included in the financial statements. We have been informed by the plan administrator that Wells Fargo and Principal hold the Plan's investment assets and execute investment transactions. The plan administrator has obtained certifications from Wells Fargo and Principal as of December 31, 2016 and 2015 and for the years then ended that the information provided to the plan administrator by Wells Fargo and Principal is complete and accurate.

(Continued)

Disclaimer of Opinion

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

Other Matter

The supplemental Schedule H, Line 4i – Schedule of Assets (Held At End of Year) and Schedule H, Line 4j – Schedule of Reportable Transactions as of and for the year ended December 31, 2016 are required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 and are presented for purposes of additional analysis and are not a required part of the financial statements. Because of the significance of the matter described in the Basis for Disclaimer of Opinion paragraph, we do not express an opinion on the supplemental schedules.

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

The form and content of the information included in the financial statements and supplemental schedules, other than that derived from the information certified by Wells Fargo and Principal, have been audited by us in accordance with auditing standards generally accepted in the United States of America and, in our opinion, are presented in compliance with the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974.

A handwritten signature in black ink that reads "Crowe Horwath LLP". The signature is written in a cursive, flowing style.

Crowe Horwath LLP

South Bend, Indiana
October 13, 2017

WCI STEEL/PYRO/BARON RETIREMENT PLAN
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
December 31, 2016 and 2015

	<u>2016</u>	<u>2015</u>
ASSETS		
Investments, at fair value		
Pooled separate accounts	\$ 1,610,313	\$ 1,516,882
Investment in Master Trust	183,565,545	184,820,798
Money market mutual fund	-	28,780
Money market deposit account	<u>157,052</u>	<u>-</u>
	185,332,910	186,366,460
 Receivables		
Employer contribution	<u>5,020,219</u>	<u>2,614,623</u>
 Total assets	190,353,129	188,981,083
 LIABILITIES		
Accrued expenses	<u>249,253</u>	<u>209,599</u>
 NET ASSETS AVAILABLE FOR BENEFITS	<u>\$ 190,103,876</u>	<u>\$ 188,771,484</u>

See accompanying notes to financial statements.

WCI STEEL/PYRO/BARON RETIREMENT PLAN
STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
For the years ended December 31, 2016 and 2015

	<u>2016</u>	<u>2015</u>
Net investment income		
Net gain from interest in Master Trust	\$ 10,670,529	\$ 4,729,983
Net depreciation in fair value of investments	(69)	(9,389)
Interest and dividend income	<u>1,394</u>	<u>132</u>
	10,671,854	4,720,726
Employer contributions	12,837,034	10,830,903
Benefits payments	(20,000,211)	(19,372,598)
Administrative expenses and other	<u>(2,176,285)</u>	<u>(2,207,544)</u>
Net increase (decrease)	<u>1,332,392</u>	<u>(6,028,513)</u>
Net assets available for benefits		
Beginning of year	<u>188,771,484</u>	<u>194,799,997</u>
End of year	<u>\$ 190,103,876</u>	<u>\$ 188,771,484</u>

See accompanying notes to financial statements.

WCI STEEL/PYRO/BARON RETIREMENT PLAN
STATEMENT OF ACCUMULATED PLAN BENEFITS
December 31, 2015

Actuarial present value of accumulated plan benefits	
Vested benefits	
Participants currently receiving payments	\$ 162,055,560
Other participants	<u>31,648,401</u>
Total actuarial present value of accumulated plan benefits	<u>\$ 193,703,961</u>

See accompanying notes to financial statements.

WCI STEEL/PYRO/BARON RETIREMENT PLAN
STATEMENT OF CHANGES IN ACCUMULATED PLAN BENEFITS
For the year ended December 31, 2015

Actuarial present value of accumulated plan benefits at beginning of year	\$ 200,624,355
Increase (decrease) during the year attributable to:	
Plan experience	(1,881,284)
Interest due to decrease in the discount period	14,333,488
Change in assumptions	-
Benefits paid	<u>(19,372,598)</u>
Net decrease	<u>(6,920,394)</u>
Actuarial present value of accumulated plan benefits at end of year	<u>\$ 193,703,961</u>

See accompanying notes to financial statements.

WCI STEEL/PYRO/BARON RETIREMENT PLAN
NOTES TO FINANCIAL STATEMENTS
December 31, 2016 and 2015

NOTE 1 - DESCRIPTION OF THE PLAN

The following description of the WCI Steel/Pyro/Baron Retirement Plan, formerly known as the WCI Steel Frozen Defined Benefit Plan (the "Plan"), is provided for general information purposes only. Participants should refer to the Plan agreement for more complete information.

General: The Plan was originally established effective September 1, 1995 and restated September 1, 1999, May 1, 2006, and December 31, 2011. The Plan is a defined benefit pension plan covering substantially all former employees of WCI Steel, Inc. ("WCI", "Company" and "Old WCI") who were covered by a collective bargaining agreement who became eligible after attainment of age 21 and completion of one year of service, whichever is later. It is subject to the provisions of the Employee Retirement Income Security Act of 1974 ("ERISA"), as amended. On May 1, 2006, The Renco Group, Inc. ("Renco") assumed the Plan in conjunction with WCI emerging from Chapter 11 under a consensual plan of reorganization that resulted in the transfer of all assets and liabilities, except the pension to a newly formed company owned by the creditors of Old WCI. The Plan was amended effective May 1, 2006, to reflect the change of sponsor, freeze credited service, eligibility and benefits, and change its name to the "WCI Steel Frozen Defined Benefit Plan." Effective November 9, 2007, the Plan year-end was changed from October 31 to December 31.

Effective December 31, 2011, the Pyro/Baron Retirement Plan ("Pyro/Baron Plan") merged into the Plan, and the Plan was restated and renamed the WCI Steel/Pyro/Baron Retirement Plan. Effective August 19, 2003 and September 30, 2003 the former Pyro Mining Company Employees' Pension Plan ("Pyro Plan") and the former Baron Drawn Steel Retirement Plan ("Baron"), which merged on December 31, 2009 to become the Pyro/Baron Plan, were amended to eliminate entry into the Pyro Plan and Baron Plan by non-participating employees and allowed for no additional accrual of benefits as of this date, respectfully.

Plan Administration: A portion of the investments of the Plan, along with certain other defined benefit plans sponsored by Renco and its subsidiaries, are invested under the directed trusteeship of Wells Fargo Bank, NA ("Wells Fargo") in the Renco Master Trust ("Master Trust"). The Master Trust was established effective July 14, 2006.

Contributions: The funding policy is for cash contributions to be made to the Plan in amounts not less than the amount necessary to prevent an accumulated funding deficiency, as defined in Section 412 of the Internal Revenue Code ("IRC"). The Plan has met the minimum funding requirements of ERISA for the years ended December 31, 2016 and 2015.

Pension Benefits – Former WCI Steel, Inc. Employees: Eligible former employees with 30 or more years of continuous service or who attained normal retirement age while employed by the Company are entitled to a minimum monthly pension benefit equal to:

Effective September 1, 2002: \$56.25 for each year of continuous service up to 30 years, plus \$70 for each year of continuous service in excess of 30 years.

(Continued)

WCI STEEL/PYRO/BARON RETIREMENT PLAN
NOTES TO FINANCIAL STATEMENTS
December 31, 2016 and 2015

NOTE 1 - DESCRIPTION OF THE PLAN (Continued)

Employees retiring with at least 30 years of continuous service receive the following minimum monthly benefits, based upon the employee's age at retirement:

<u>Attained age</u>	<u>Minimum Monthly Benefit</u>
Less than 55	\$ 1,050
55 – 60	1,250
61 – 62	1,350
63	1,450
64	1,550
65 and over	1,660

In addition, a monthly supplement ranging from \$150 - \$400 is payable to all former employees retiring with 30 years of continuous service until the later of age 62 or one year from date of retirement. If employees were terminated before rendering five years of credited service, they forfeited the right to receive a retirement benefit. The Plan also provides for early retirement benefits.

Employees retiring with less than 30 years of continuous service receive \$1,660 multiplied by the years of continuous services divided by 30.

As a result of the December 1999 collective bargaining agreement with the USWA, the assets related to the non-participant-directed Defined Contribution Plan ("DCP") were merged into the Plan. On termination of service a DCP participant may elect to receive a lump-sum distribution for the greater of 10% of the value of the participant's vested interest or \$10,000, or receive pension benefits as described above. Any remaining portion of the participant's vested interest, not received in a lump sum distribution, is transferred and then used in the calculation of the Plan's actuarial present value of accumulated plan benefits as described in Note 2. Effective May 1, 2006, all participants were terminated, and the remaining defined contribution benefits under the DCP were eliminated and the remaining DCP benefits became defined benefit obligations under the Plan.

Pension Benefits – Former Pyro Mining Employees: All participants are entitled to annual pension benefits beginning at normal retirement age (62) or attainment of age (70) in accordance with the schedule set forth in Section 4.01 of the Plan document. The Plan permits early retirement at ages 55-61 and completion of 5 years of vesting service. If participants retire before age 62, their accrued benefit is reduced by 3% for each year by which the early retirement date precedes the normal retirement date. Participants may elect to receive their pension benefits in the form of a joint and survivor annuity. Participants may elect to receive the value of their accumulated plan benefits as a lump-sum distribution upon retirement, or they may elect to receive their benefits as a life annuity payable monthly from retirement. The normal form of benefit is payable as a straight life annuity or, if married, the actuarial equivalent of such benefit payable as a qualified joint and survivor annuity.

Pension Benefits – Former Baron Employees: All participants are entitled to annual pension benefits beginning at normal retirement age (65) in accordance with the schedule set forth in Section 4.01 of the Plan document. The Plan permits early retirement at ages 55 – 64 and completion of 10 years of vesting service. If participants retire before age 65, their accrued benefit is reduced by 0.5% for each month by which the early retirement date precedes the normal retirement date. Participants may elect to receive their pension benefits in the form of a joint and survivor annuity. Participants may elect to receive the value of their accumulated plan benefits as a lump-sum distribution upon retirement, or they may elect to receive their benefits as a life annuity payable monthly from retirement. The normal form of benefit is payable as a 10-year certain annuity or, if married, the actuarial equivalent of such benefit payable as a qualified joint and survivor annuity.

(Continued)

WCI STEEL/PYRO/BARON RETIREMENT PLAN
NOTES TO FINANCIAL STATEMENTS
December 31, 2016 and 2015

NOTE 1 - DESCRIPTION OF THE PLAN (Continued)

Death and Disability Benefits – Former WCI Steel, Inc. Employees: If a fully vested active participant dies, a death benefit equal to the amount that would have been paid had the participant terminated employment on the date of death, survived to his/her early retirement age, retired with a 50% joint and survivor annuity in effect, then died the next day. Payments begin at the later of date of death or when the participant would have attained age 60.

Disability benefits are paid if the participant has 15 years of continuous service and is totally and permanently disabled. The participant is paid his/her accrued benefit without reduction until age 62. If the participant is not entitled to Social Security Disability Benefit, an additional \$400 may be paid.

Death and Disability Benefits – Former Pyro Mining Employees: If an active participant dies at age 55 or older, a death benefit equal to the value of the participant's accumulated pension benefits is paid to the participant's spouse. Active participants who become totally disabled receive annual disability benefits that are equal to the normal retirement benefits they have accumulated as of the time they become disabled reduced by 3% for each year his disability precedes his normal retirement date.

Annual disability benefits are further reduced by payment of any benefit by reason of the same disability to which the Employer has contributed all or part of the cost. This offset shall include, but not be limited to: workers compensation, traumatic, State O.D., and Federal O.D., and benefits awarded under Title II of the Federal Social Security Act. Disability benefits are paid until normal retirement age at which time disabled participants begin receiving normal retirement benefits computed under the provisions of Article IV of the Plan document as if they were an active participant.

Death and Disability Benefits – Former Baron Employees: If an active participant dies at age 55 or older, a death benefit equal to the value of the participant's accumulated pension benefits is paid to the participant's spouse. Active participants who become totally disabled will continue to accrue benefits under the Plan if they become totally and permanently disabled before their normal retirement date if they have completed 5 years of vested service.

Disability benefits are paid until the earlier of the date the participant begins to receive an early retirement benefit or the date the participant reaches normal retirement age at which time disabled participants begin receiving retirement benefits computed under the provisions of Article IV of the Plan document as if they were an active participant.

Vesting – Former WCI Steel, Inc. Employees: Employees are 100 percent vested once they have accumulated five years of credited service with the Company. Effective May 1, 2006, participants ceased to accrue vesting service.

Vesting – Former Pyro Mining Employees: Employees are 100 percent vested once they have accumulated five years of credited service with the Company. Effective August 19, 2003, participants ceased to accrue vesting service.

Vesting – Former Baron Employees: Employees are 100 percent vested once they have accumulated five years of credited service with the Company. Effective September 30, 2003, participants ceased to accrue vesting service.

Termination: The Plan can be terminated by Renco in certain limited situations. If the Plan is terminated, the net assets of the Plan will be distributed to the participants in an order of priority determined in accordance with ERISA and its applicable regulations, and with the Plan document.

(Continued)

WCI STEEL/PYRO/BARON RETIREMENT PLAN
NOTES TO FINANCIAL STATEMENTS
December 31, 2016 and 2015

NOTE 1 - DESCRIPTION OF THE PLAN (Continued)

Certain benefits under the Plan are insured by the Pension Benefit Guaranty Corporation ("PBGC") if the Plan terminates. Generally, the PBGC guarantees most vested, normal-age retirement benefits, early retirement benefits, and certain disability and survivor's pensions. However, the PBGC does not guarantee all types of benefits under the Plan, and the amount of benefit protection is subject to certain limitations. Vested benefits under the Plan are guaranteed at the level in effect on the date of the Plan's termination, subject to a statutory ceiling on the amount of an individual's monthly benefit.

Whether all participants receive benefits should the Plan be terminated at some future time will depend on the sufficiency, at that time, of the Plan's net assets to provide those benefits, the priority of those benefits to be paid, and the level and type of benefits guaranteed by the PBGC at that time. Some benefits may be fully or partially provided for by the existing assets and the PBGC guaranty, while other benefits may not be provided for at all.

Administrative and Investment Management Expenses: The Plan's trustee, custodian, investment management and actuarial fees are paid by the Plan and are reflected in the financial statements as administrative expenses of the Plan. Investment management fees are paid by the Plan and included in the investment income (loss) reported by the Plan. All other expenses of the Plan are paid by Renco.

NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of Accounting: The accompanying financial statements have been prepared on the accrual basis and in accordance with accounting principles generally accepted in the United States of America.

Investment Valuation and Income Recognition: The Plan's investments are reported at fair value. Purchases and sales of securities are reflected on a trade-date basis. Gain or loss on sales of securities is based on either the average cost or identified certificate method. Dividend income is recorded on the ex-dividend date. Income from other investments is recorded as earned on an accrual basis.

Fair value is the price that would be received by the Plan for an asset or paid by the Plan to transfer a liability (an exit price) in an orderly transaction between market participants on the measurement date in the Plan's principal or most advantageous market for the asset or liability. Fair value measurements are determined by maximizing the use of observable inputs and minimizing the use of unobservable inputs when measuring fair value. The hierarchy places the highest priority on unadjusted quoted market prices in active markets for identical assets or liabilities (Level 1 measurements) and gives the lowest priority to unobservable inputs (Level 3 measurements). The three levels of inputs within the fair value hierarchy are defined as follows:

Level 1: Quoted prices (unadjusted) for identical assets or liabilities in active markets that the Plan has the ability to access as of the measurement date.

Level 2: Significant other observable inputs other than Level 1 prices such as quoted prices for similar assets or liabilities; quoted prices in markets that are not active; or other inputs that are observable or can be corroborated by observable market data.

(Continued)

WCI STEEL/PYRO/BARON RETIREMENT PLAN
NOTES TO FINANCIAL STATEMENTS
December 31, 2016 and 2015

NOTE 2 - SUMMARY OF ACCOUNTING POLICIES (Continued)

Level 3: Significant unobservable inputs that reflect the Plan's own assumptions about the assumptions that market participants would use in pricing an asset or liability.

In some cases, a valuation technique used to measure fair value may include inputs from multiple levels of the fair value hierarchy. The lowest level of significant input determines the placement of the entire fair value measurement in the hierarchy.

The following descriptions of the valuation methods and assumptions used by the Plan to estimate the fair values of investments apply to investments held directly by the Plan and those held as underlying investments of the Master Trust.

Plan interest in Master Trust: The fair value of the Plan's interest in the Master Trust reflects the Plan's interest in the fair value of the underlying net assets of the Master Trust. The methodologies for determining the fair values of the underlying investments are described below.

Money Market Deposit Account: The fair value is estimated to approximate the cost basis of the deposit account balance, based upon liquidity of the account and the credit quality of the issuer (Level 1 inputs). The Plan's investments in the money market deposit account occasionally exceed the federally insured balance. Any amounts exceeding the federally insured balance is required to be collateralized.

Pooled Separate Account: The fair values of participation units held in the pooled separate account are based on its net asset value, as reported by the manager of the pooled separate account and as supported by the unit prices of actual purchase and sale transactions occurring as of or close to the financial statement date. The pooled separate account provides for daily redemptions by the Plan with no advance notice requirements, and has redemption prices that are determined by the fund's net asset value per unit.

Common Stock and Mutual Funds: The fair values of common stock and mutual fund investments are determined by obtaining quoted prices on nationally recognized securities exchanges (Level 1 inputs).

Collective Trusts: The fair values of participant units held in collective trusts are based on the net asset values per unit as a practical expedient as reported by the fund managers. The collective trusts provide for daily redemptions by the Plan at reported net asset values per share, with no advance notice requirement.

Hedge Funds: The hedge funds are measured at fair value using the net asset value per share (or its equivalent) practical expedient provided by the funds and their administrators.

Relative value: These funds attempt to capture pricing inefficiencies/differentials between related securities while trying to minimize the impact of general market movements. Different relative value strategies include convertible bond arbitrage, statistical arbitrage, pairs trading, yield curve arbitrage, volatility arbitrage, commodity relative value, and basis trading. Generally, these investments are redeemable on a monthly or quarterly basis, with a 30 to 75-day redemption notification requirement. Certain funds are exempt from redemption until the fund is liquidated. The Master Trust's interest in these locked funds was \$1,711,902 and \$1,380,868 as of December 31, 2016 and 2015.

(Continued)

NOTE 2 - SUMMARY OF ACCOUNTING POLICIES (Continued)

Opportunistic/Macro: These funds invest in a wide variety of instruments using a broad range of primarily directional strategies. It is common for Portfolio Managers in this strategy to assume an aggressive risk posture relying on a combination of macroeconomic models, fundamental research, and quantitative algorithms. Portfolio Managers invest across countries, markets, sectors and companies, and have the flexibility to invest in numerous financial instruments. Futures and options are often used for hedging and speculation in order to quickly position a portfolio to profit from changing markets. The use of leverage varies considerably. Generally, these investments are redeemable on a monthly or quarterly basis, with a 30 to 90-day redemption notification requirement.

Credit: Funds utilizing this strategy may take long or short positions in corporate bonds, loans, credit derivatives, convertible bonds, asset-backed securities, equities and equity derivatives. In most cases Portfolio Managers will take long or short positions in instruments that reflect credit exposure to the same entity. Credit Portfolio Managers may invest in both investment grade and non-investment grade credit issuers, while also very often holding positions where the underlying exposures are to debt and equity securities of companies in financial difficulty, reorganization or bankruptcy. Generally, these investments are redeemable on a monthly with a 30 to 60-day redemption notification requirement. Certain funds are exempt from redemption until the fund is liquidated. The Master Trust's interest in these locked funds was \$2,915,249 and \$2,943,817 as of December 31, 2016 and 2015.

Merger Arbitrage/Event driven: These funds invest in a variety of strategies, including investments in secured and senior secured debt, distressed securities and other credit -related strategies including credit markets across the globe, preferred and hybrid securities, high yield bonds, corporate loans, and convertible bond arbitrage. Generally, these investments are redeemable on a quarterly basis, with a 90-day redemption notification requirement. Certain funds are exempt from redemption until the fund is liquidated. The Master Trust's interest in these locked funds was \$ 83,817 and \$146,267 as of December 31, 2016 and 2015.

Long/short equity: These funds invest in long and short equities with focuses on the financial sector, energy and materials, bad balance sheet companies, large and small cap, catalyst driven investments, technology, and undervalued securities. Generally, these investments are redeemable on a monthly, quarterly, semi-annual or annual basis, with a 30 to 180-day redemption notification requirement. Certain funds are exempt from redemption until the fund is liquidated. The Master Trust's interest in these locked funds was \$1,212,715 and \$1,354,102 as of December 31, 2016 and 2015.

Multi-strategy: These funds and partnerships invest in multiple strategies, including equities, derivative investments, distressed securities, fixed income, long/short equity, direct capital activities, various arbitrage strategies, credit event driven, real estate, and global securities. Generally, these investments are redeemable on a quarterly basis with a 90-day redemption notification requirement. Certain funds are exempt from redemption until the fund is liquidated. The Master Trust's interest in these locked funds was \$1,360,619 and \$1,462,590 as of December 31, 2016 and 2015.

(Continued)

WCI STEEL/PYRO/BARON RETIREMENT PLAN
NOTES TO FINANCIAL STATEMENTS
December 31, 2016 and 2015

NOTE 2 - SUMMARY OF ACCOUNTING POLICIES (Continued)

Investments, other than the Plan's interest in the Master Trust, measured at fair value on a recurring basis are summarized below:

		Fair Value Measurements at December 31, 2016		
		Quoted Prices in Active Markets for Identical Assets (Level 1)	Significant Other Observable Inputs (Level 2)	Significant Unobservable Inputs (Level 3)
	<u>Total</u>			
Investments (other than Plan's interest in Master Trust):				
Money market deposit account	\$ 157,052	\$ 157,052	\$ -	\$ -
Pooled separate account – money market	(1) <u>1,610,313</u>	<u>-</u>	<u>-</u>	<u>-</u>
Total	<u>\$ 1,767,365</u>	<u>\$ 157,052</u>	<u>\$ -</u>	<u>\$ -</u>

		Fair Value Measurements at December 31, 2015		
		Quoted Prices in Active Markets for Identical Assets (Level 1)	Significant Other Observable Inputs (Level 2)	Significant Unobservable Inputs (Level 3)
	<u>Total</u>			
Investments (other than Plan's interest in Master Trust):				
Money market mutual fund	\$ 28,780	\$ 28,780	\$ -	\$ -
Pooled separate account – money market	(1) <u>1,516,882</u>	<u>-</u>	<u>-</u>	<u>-</u>
Total	<u>\$ 1,545,662</u>	<u>\$ 28,780</u>	<u>\$ -</u>	<u>\$ -</u>

(1) In accordance with Subtopic 820-10, certain investments that are measured at fair value using the net asset value per share (or its equivalent) practical expedient have not been classified in the fair value hierarchy. The fair value amounts presented in this table are intended to permit reconciliation of the fair value hierarchy to the amounts presented in the statement of net assets available for benefits.

Actuarial Present Value of Accumulated Plan Benefits: Accumulated plan benefits are those future periodic payments, including lump-sum distributions that are attributable under the Plan's provisions to the service employees have rendered. Accumulated plan benefits include benefits expected to be paid to (a) retired or terminated employees or their beneficiaries, and (b) beneficiaries of employees who have died. Benefits under the Plan are based on years of credited service. Accumulated plan benefits for participants are based on their service earned ending on the date as of which the benefit information is presented. Benefits payable under all circumstances, retirement, death, disability and termination of employment are included, to the extent they are deemed attributable to participant service rendered to the valuation date.

(Continued)

WCI STEEL/PYRO/BARON RETIREMENT PLAN
NOTES TO FINANCIAL STATEMENTS
December 31, 2016 and 2015

NOTE 2 - SUMMARY OF ACCOUNTING POLICIES (Continued)

The actuarial present value of accumulated plan benefits is that amount that results from applying actuarial assumptions to adjust the accumulated plan benefits to reflect probability of payment (by means of decrements such as for death, disability, withdrawal or retirement) and the time value of money (through discounts for interest) between the valuation date and the expected date of payment.

The actuarial present value of accumulated plan benefits at December 31, 2015 was calculated by consulting actuary Principal Financial Group.

The more significant assumptions underlying the actuarial computations are as follows:

Assumed rate of return on investments	7.5% - compounded annually
Mortality basis	RP-2014 Mortality Table with RPEC_2014 improvement scale
Retirement – former WCI employees	At normal retirement age (65)
Retirement – former Pyro Mining and Baron employees	Age 55

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

Use of Estimates in the Preparation of Financial Statements: The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of net assets available for benefits and disclosure of contingent assets and liabilities and the actuarial present value of accumulated plan benefits at the date of the financial statements and the reported amounts of additions to and deductions from net assets available for benefits during the reporting period.

Actual results could differ from those estimates. It is at least reasonably possible that a significant change may occur in the near term for the estimate of the actuarial present value of accumulated plan benefits and the fair values of certain investments.

Risks and Uncertainties: The Plan invests in a variety of investments either directly or through the Master Trust. The underlying investments are exposed to various risks, such as interest rates, market, liquidity, and credit risks. Due to the level of risk associated with certain investments, and the sensitivity of certain fair value estimates to changes in valuation assumptions, it is at least reasonably possible that changes in the values of investments will occur in the near term and that such changes could materially affect the amounts reported in the statement of net assets available for benefits.

Plan contributions are made and the actuarial present value of accumulated plan benefits are prepared based on certain assumptions pertaining to interest rates, mortality rates and employee demographics, all of which are subject to change. Due to uncertainties inherent in the estimation and assumption process, it is at least reasonably possible that changes in these estimates and assumptions in the near term could be material to the Plan's financial statements.

(Continued)

WCI STEEL/PYRO/BARON RETIREMENT PLAN
NOTES TO FINANCIAL STATEMENTS
December 31, 2016 and 2015

NOTE 2 - SUMMARY OF ACCOUNTING POLICIES (Continued)

Hedge Funds: The Plan invests in a variety of hedge funds through its interest in the Master Trust. The investment managers of these hedge funds might utilize derivatives, including calls and puts, currency hedges, options, and foreign exchange hedges. The use of derivative instruments could materially increase the credit or market risk of the Plan's assets and increase the level of the volatility of the market value of the Plan's assets. The use of such instruments also introduces a risk of potential loss relating to the ability of the counterparty to perform as of the derivative termination date since the realization of unrealized gains on derivative instruments is wholly dependent upon the ability of the counterparty to honor the derivative arrangement.

Payment of Benefits: Benefit payments to participants are recorded upon distribution.

NOTE 3 - INVESTMENTS - UNAUDITED INFORMATION

Principal Life Insurance Company ("Principal") and Wells Fargo, hold investment assets and execute transactions therein, and substantially all information pertaining to the Plan's investments and interest in the Master Trust included in the financial statements, including the associated investment income (loss), has been certified as complete and accurate by them. This information has not been audited by independent accountants.

NOTE 4 - MASTER TRUST (UNAUDITED)

Beginning on July 14, 2006, the majority of the Plan's assets, along with other defined benefit plans sponsored by Renco and its subsidiaries are invested in the Master Trust. The value of the Plan's interest in the Master Trust is based on the beginning of year value of the Plan's interest in the Master Trust plus actual contributions and allocated investment income less actual distributions and allocated administrative expenses. Each participating plan in the Master Trust has an undivided interest in the assets of the Master Trust, other than for the hedge fund investments for which two of the five participating plans do not invest. Investment income and losses and administrative expenses relating to the Master Trust are allocated to the individual plans monthly based on each plan's percentage interest in the net assets of the Master Trust.

The following table presents the net assets of the Master Trust, as of December 31, 2016 and 2015:

	<u>2016</u>	<u>2015</u>
Investments at fair value:		
Money market mutual fund	\$ -	\$ 2,300,408
Money market deposit account	13,677,645	-
Mutual equity funds	4,549,911	9,041,321
Collective trust equity funds	65,820,692	74,006,456
Hedge funds	<u>239,682,219</u>	<u>202,127,597</u>
	323,730,467	287,475,782
Other assets/liabilities:		
Cash committed to brokers	9,049,544	12,875,143
Due from brokers	3,425,000	-
Accrued income	<u>2,842</u>	<u>293</u>
Net assets	<u>\$ 336,207,853</u>	<u>\$ 300,351,218</u>

The Plan had approximately 55% and 62% interest in the net assets of the Master Trust as of December 31, 2016 and 2015.

(Continued)

WCI STEEL/PYRO/BARON RETIREMENT PLAN
NOTES TO FINANCIAL STATEMENTS
December 31, 2016 and 2015

NOTE 4 - MASTER TRUST (UNAUDITED) (Continued)

The following are the changes in the net assets of the Master Trust for the years ended December 31, 2016 and 2015:

	<u>2016</u>	<u>2015</u>
Investment income		
Interest and dividend income	\$ 395,064	\$ 688,581
Net appreciation in fair value of investments	<u>20,176,064</u>	<u>7,173,782</u>
Total investment income	20,571,128	7,862,363
Net receipts/ (transfers)	15,524,469	(5,102,874)
Administrative expenses	<u>(238,962)</u>	<u>(310,118)</u>
Increase in net assets	35,856,635	2,449,371
Net assets:		
Beginning of year	<u>300,351,218</u>	<u>297,901,847</u>
End of year	<u>\$ 336,207,853</u>	<u>\$ 300,351,218</u>

Investments of the Master Trust that are measured at fair value on a recurring basis are summarized below:

		Fair Value Measurements at December 31, 2016		
	<u>Total</u>	Quoted Prices in Active Markets for Identical Assets (Level 1)	Significant Other Observable Inputs (Level 2)	Significant Unobservable Inputs (Level 3)
Investments:				
Money market deposit acct.	\$ 13,677,645	\$ 13,677,645	\$	\$
Mutual equity funds	4,549,911	4,549,911		
Collective trust equity funds (1)	65,820,692	-		
Hedge funds (1)	<u>239,682,219</u>	<u>-</u>		
Total	<u>\$ 323,730,467</u>	<u>\$ 18,227,556</u>	<u>\$</u>	<u>\$</u>

(Continued)

WCI STEEL/PYRO/BARON RETIREMENT PLAN
NOTES TO FINANCIAL STATEMENTS
December 31, 2016 and 2015

NOTE 4 - MASTER TRUST (UNAUDITED) (Continued)

		Fair Value Measurements at December 31, 2015		
		Quoted Prices in Active Markets for Identical Assets (Level 1)	Significant Other Observable Inputs (Level 2)	Significant Unobservable Inputs (Level 3)
	Total			
Investments:				
Money market mutual fund	\$ 2,300,408	\$ 2,300,408	\$ -	\$ -
Mutual equity funds	9,041,321	9,041,321	-	-
Collective trust equity funds (1)	74,006,456	-	-	-
Hedge funds (1)	202,127,597	-	-	-
Total	<u>\$ 287,475,782</u>	<u>\$ 11,341,729</u>	<u>\$ -</u>	<u>\$ -</u>

(1) In accordance with Subtopic 820-10, certain investments that are measured at fair value using the net asset value per share (or its equivalent) practical expedient have not been classified in the fair value hierarchy. The fair value amounts presented in this table are intended to permit reconciliation of the fair value hierarchy to the amounts presented in the net assets of the Master Trust.

NOTE 5 - TAX STATUS

The Internal Revenue Service has determined and informed the Company by letter dated September 22, 2015, that the Plan and related trust are designed in accordance with applicable sections of the Internal Revenue Code ("IRC"). The Plan has been amended since receiving the determination letter. However, Plan management believes that the Plan is designed and is currently being operated in compliance with the applicable requirements of the IRC.

Accounting principles generally accepted in the United States of America require plan management to evaluate tax positions taken by the Plan. 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 authorities; however, there are currently no audits for any tax periods in progress. The Plan Administrator believes it is no longer subject to income tax examinations for years prior to 2013.

(Continued)

WCI STEEL/PYRO/BARON RETIREMENT PLAN
NOTES TO FINANCIAL STATEMENTS
December 31, 2016 and 2015

NOTE 6 - PARTY-IN-INTEREST TRANSACTIONS

Parties-in-interest are defined under DOL regulations as any fiduciary of the Plan, any party rendering service to the Plan, the employer and certain others.

Renco provides certain administrative services to the Plan for which it receives no compensation.

Certain Plan investments and Master Trust investments at December 31, 2016 and 2015, were in funds managed by Wells Fargo Advantage Funds, a division of Wells Fargo & Co., and Wells Fargo Bank, N.A. Wells Fargo Bank, N.A. is also a division of Wells Fargo & Co. and is the trustee of the Plan. Therefore, Plan assets invested in funds managed by Wells Fargo Advantage Funds and Wells Fargo Bank, N.A., as of December 31, 2016 and 2015, were party-in-interest investments.

Certain Plan investments at December 31, 2016 and 2015, were in funds managed by Principal Life Insurance Company which is a member of the Principal Financial Group. Principal Financial Group is a third party administrator and actuary for the Plan; therefore, these investments constitute party-in-interest investments.

The Plan paid the following party-in-interest expenses for the years ended December 31, 2016 and 2015:

		<u>2016</u>	<u>2015</u>
Wells Fargo Bank, NA	Trustee	\$ 19,192	\$ 27,832
Principal Financial Group	Third party administrator, Actuary	341,379	326,945
JP Morgan Chase Bank, N.A.	Investment manager	466,669	690,892
Crowe Horwath LLP	Auditor	18,360	18,250

NOTE 7 - SUBSEQUENT EVENTS

Plan management has evaluated subsequent events for recognition and disclosure through October 13, 2017, which is the date the financial statements were available to be issued.

NOTE 8 - DECEMBER 31, 2016 ACTUARIAL VALUATION (UNAUDITED)

The December 31, 2016 actuarial valuation was completed prior to the release of the financial statements. A summary of the actuarial valuation information provided by the plan's actuary, which has not been audited by independent accountants, is provided below for informational purposes.

The actuarial present value of accumulated plan benefits as of December 31, 2016 is as follows:

Actuarial present value of accumulated plan benefits:

Vested benefits:

Participants currently receiving payments	\$ 153,960,693
Other participants	<u>26,960,154</u>

Total actuarial present value of accumulated plan benefits \$ 180,920,847

(Continued)

WCI STEEL/PYRO/BARON RETIREMENT PLAN
NOTES TO FINANCIAL STATEMENTS
December 31, 2016 and 2015

NOTE 8 - DECEMBER 31, 2016 ACTUARIAL VALUATION (UNAUDITED) (Continued)

The change in actuarial present value of accumulated plan benefits for the year ended December 31, 2016 consists of the following:

Actuarial present value of accumulated plan benefits at beginning of year	\$ 193,703,961
Plan experience	(1,350,779)
Interest due to decrease in the discount period	13,791,349
Change in assumptions	(5,223,473)
Benefits paid	<u>(20,000,211)</u>
Actuarial present value of accumulated plan benefits at end of the year	<u>\$ 180,920,847</u>

The more significant assumptions underlying the actuarial computations are as follows:

Assumed rate of return on investments	7.5% - compounded annually
Mortality basis	RP-2014 Mortality Table with RPEC_2014 v2016 improvement scale
Retirement – former WCI employees	At normal retirement age (65)
Retirement – former Pyro Mining and Baron employees	Age 55

SUPPLEMENTAL SCHEDULES

WCI STEEL/PYRO/BARON RETIREMENT PLAN
SCHEDULE H, LINE 4i – SCHEDULE OF ASSETS (HELD AT END OF YEAR)
December 31, 2016

Plan Sponsor:	<u>The Renco Group, Inc.</u>
Employer Identification Number:	<u>13-3370264</u>
Plan Number:	<u>003</u>

(a)	(b) Identity of Issuer Borrower or Similar Party	(c) Description of Investment	(d) Cost	(e) Current Value
	Money Market Deposit Account			
*	Wells Fargo Bank N.A.	Wells Fargo Collateralized Inst. Money Market Deposit Account	\$ 157,031	\$ 157,052
	Pooled Separate Account			
*	Principal Life Insurance	Money Market Separate Account	1,610,313	<u>1,610,313</u>
				<u>\$ 1,767,365</u>

* Indicates party-in-interest

See Independent Auditor's Report

WCI STEEL/PYRO/BARON RETIREMENT PLAN
SCHEDULE H, LINE 4j – SCHEDULE OF REPORTABLE TRANSACTIONS
Year ended December 31, 2016

Name of plan sponsor:	The Renco Group, Inc.
Employer identification number:	13-3370264
Three-digit plan number:	003

(a) Identity of Issue or Borrower	(b) Description of Investment Including Maturity Date, Rate of Interest, Par or Maturity Value	(c) Purchase Price	(d) Selling Price	(e) Lease Rental	(f) Expense Incurred with Transaction	(g) Cost of Asset	(h) Current Value of Asset on Transaction Date	(i) Net Gain (Loss)
Category (i): A single transaction in excess of 5% of the current value of Plan assets:								
*Wells Fargo Funds Management, LLC	Wells Fargo Advantage Heritage Money Market Inst.	\$ 15,236,404	\$ -	\$ -	\$ -	\$ 15,236,404	\$ 15,236,404	\$ -
		-	15,056,993	-	-	15,056,993	15,056,993	-
Category (iii): A series of transactions with the same security in excess of 5% of the current value of Plan assets:								
*Principal Life Insurance	Money Market Separate Account	\$ 20,365,013	\$ -	\$ -	\$ -	\$ 20,365,013	\$ 20,365,013	\$ -
		-	20,271,513	-	-	20,271,737	20,271,513	(224)
*Wells Fargo Funds Management, LLC	Wells Fargo Advantage Heritage Money Market Inst.	19,389,028	-	-	-	19,389,028	19,389,028	-
		-	19,417,802	-	-	19,417,802	19,417,802	-
*Wells Fargo Funds Management, LLC	Wells Fargo Collateralized Inst. - Bank Deposit Account	8,873,841	-	-	-	8,873,841	8,873,841	-
		-	8,716,811	-	-	8,716,811	8,716,811	-

* Denotes party-in-interest transaction.

See Independent Auditor's Report

Schedule SB, Part V - Statement of Actuarial Assumptions/Methods
WCI STEEL/PYRO/BARON RETIREMENT PLAN
EIN 13-3370264 Plan No. 003

Assumptions Prescribed by Law	
Mortality	<p>During Benefit Payment Period IRS Prescribed Mortality - Generational Annuitant, male and female.</p> <p>Before Benefit Payment Period IRS Prescribed Mortality - Generational Non-annuitant, male and female.</p>
Assumptions Selected by Actuary	
Inflation	<p>0.00% increase per year.</p> <p>See Long-Term Capital Market Assumptions link.</p>
Asset Return	<p>7.50% for the current plan year.</p> <p>The Asset Return is developed as a weighted average rate based on the target asset allocation of the plan and the long-term capital market assumptions. The calculated return is on an arithmetic mean basis. For details, see the See Long-Term Capital Market Assumptions link.</p>
Expected Expense	<p>The expected expense included in Target Normal Cost is an estimate based on prior year expenses paid from plan assets, with an updated estimate of PBGC premiums. This is the best estimate available of upcoming year's expenses.</p>
Retirement	<p>Active and inactive participants are assumed to retire at Normal Retirement Age as defined in Plan Provisions.</p> <p>This assumption is based on the results of recent experience analysis and anticipated future experience.</p>
Disability	<p>None.</p>
Marriage	<p>75% married; husbands are 3 years older than wives.</p> <p>This assumption does not have material impact on the results of this report and has been selected based on our best estimate of active workforce.</p>
Withdrawal	<p>None.</p>
Form of Benefit and Basis	<p>WCI: 75% of participants are assumed to receive their benefits as a Life Annuity and 25% of participants are assumed to receive their benefits as a 50% Joint & Survivor Annuity at the assumed retirement age.</p> <p>This assumption is based on the results of recent experience analysis and anticipated future experience.</p> <p>PYRO/Baron: 100% of all non-retired participants will elect a benefit paid in a lump sum at the assumed retirement age based on the applicable mortality and the plan's funding target interest rates used in the Annual Cost calculation.</p>

Methods Prescribed by Law	
Liability Measure	Funding target is the present value of the benefits accrued on the valuation date. Target Normal Cost is based on benefits expected to accrue during the current plan year and includes an estimate of plan expenses for the year.
HCE Benefit Payment Restrictions	<p>A ratio of the plan assets and accrued liability is used to determine if restrictions apply. Assets and accrued liability are as of the valuation date and are reduced by:</p> <ul style="list-style-type: none"> • any retiree benefit index or floor • amounts for HCEs who were previously restricted • an amount for the retiring HCE <p>The estimated HCE ratio illustrated in this report is based on the market value of plan assets (excluding late deposits) and Funding Target as of the valuation date. The Funding Target uses the non-stabilized interest rates as defined in IRC §430(h)(2)(C)(iv). Other assumptions or methods could be used.</p>
Methods Selected by Plan Sponsor	
Asset Method	<p>The asset valuation method is prescribed by law for plans that elect to use a value other than market value.</p> <p>For each of the preceding two years, an expected value of assets at the end of the year is compared to the end of year market value. The resulting gain or loss is recognized evenly over three plan years.</p> <p>The expected value includes contributions, distributions, any deducted administrative expenses, and expected earnings (based on the lesser of the assumed interest rate or the Maximum Allowable Rate). The deferred gains and losses are added to the current market value and then restricted to no more than 110% and no less than 90% of that market value.</p> <p>When actual returns exceed the assumed return, the actuarial value of assets will lag below market value. The lag and the smoothing effect are limited since the value must be within 10% of market value.</p>
Segment Rates	24-month average with no weighting to prior law basis. Use rates where August is the last month included in the average.
PBGC Premium Basis	Variable Rate Premiums are calculated using census, market value of assets and interest rates in effect on the current valuation date. Interest rates are the 24-month average rates used for Annual Cost but without the interest rate corridor defined in IRC §430(h)(2)(C)(iv). You elected this Alternative interest method for the 01/01/2009 plan year and this method must be used for five years before a change can be made.

Methods Elected by Actuary																									
Retirees	Assets and liabilities for current and future retirees are included.																								
Vested Benefits	<p>A benefit is included in vested benefits if it meets the requirements under PBGC. The benefit is multiplied by the participant’s vesting percentage applicable to each benefit on the valuation date.</p> <p>The following ancillary benefits are always treated as nonvested: disability benefits payable to retirement age unless in pay status, pre-retirement death benefits in excess of the Survivor Annuity Death Benefit and post retirement death benefits for non-retired participants except as noted in the Plan Provisions.</p>																								
Assumptions and Methods Elected by Actuary Plan Accounting (ASC 960)																									
With the exceptions below, all assumptions and methods are the same as those used in determining your plan’s regular Funding Target and Target Normal Cost.																									
Mortality	<p>Rates: Total Mortality rates from RP-2006 (baseline table from SOA RP-2014 study based on experience data for private pension plans).</p> <p>Mortality Improvement (MI): RPEC_2014_v2011 model, reflecting historical U.S. mortality data to 2011 and with the last year of historical graduated data of 2009, with the following assumptions:</p> <ul style="list-style-type: none">• Convergence period of 10-years• Long-term mortality improvement is the sex-distinct and the age-based assumption calibrated to the annual improvement averages, for the period 2010-2088 published in the Social Security Administration (SSA) Trustees Report 2014. <table><tr><th colspan="3">Long-Term Mortality Improvement Rates (averages 2010-2088 in SSA Trustees 2014 Report)</th></tr><tr><th>Age Group</th><th>Male</th><th>Female</th></tr><tr><td>15-49</td><td>0.89%</td><td>0.91%</td></tr><tr><td>50-64</td><td>1.09%</td><td>1.11%</td></tr><tr><td>65-84</td><td>0.92%</td><td>0.83%</td></tr><tr><td>85+</td><td>0.59%</td><td>0.53%</td></tr><tr><td>65+</td><td>0.77%</td><td>0.68%</td></tr><tr><td>Total</td><td>0.84%</td><td>0.77%</td></tr></table> <p>During Benefit Payment Period Above table with generational MI, Annuitant, male and female.</p> <p>Before Benefit Payment Period Above table with generational MI, Non-annuitant, male and female.</p> <p>See Mortality rationale for additional information.</p>	Long-Term Mortality Improvement Rates (averages 2010-2088 in SSA Trustees 2014 Report)			Age Group	Male	Female	15-49	0.89%	0.91%	50-64	1.09%	1.11%	65-84	0.92%	0.83%	85+	0.59%	0.53%	65+	0.77%	0.68%	Total	0.84%	0.77%
Long-Term Mortality Improvement Rates (averages 2010-2088 in SSA Trustees 2014 Report)																									
Age Group	Male	Female																							
15-49	0.89%	0.91%																							
50-64	1.09%	1.11%																							
65-84	0.92%	0.83%																							
85+	0.59%	0.53%																							
65+	0.77%	0.68%																							
Total	0.84%	0.77%																							

Schedule SB, Part V - Statement of Actuarial Assumptions/Methods
WCI STEEL/PYRO/BARON RETIREMENT PLAN
EIN 13-3370264 Plan No. 003

Interest Rate Used to Value Liabilities	7.50%
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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). <p style="text-align: center;">▶ Complete all entries in accordance with the instructions to the Form 5500.</p>	OMB Nos. 1210-0110 1210-0089 <div style="text-align: center; font-size: 1.2em; font-weight: bold;">2016</div> This Form is Open to Public Inspection
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Part I	Annual Report Identification Information
For calendar plan year 2016 or fiscal plan year beginning <u>01/01/2016</u> and ending <u>12/31/2016</u>	
A This return/report is for:	☐ a multiemployer plan ☐ a multiple-employer plan (Filers checking this box must attach a list of participating employer information in accordance with the form instructions.) ☒ a single-employer plan ☐ a DFE (specify) _____
B This return/report is:	☐ the first return/report ☐ the final return/report ☐ an amended return/report ☐ a short plan year return/report (less than 12 months)
C If the plan is a collectively-bargained plan, check here. ☒	
D Check box if filing under: ☒ Form 5558 ☐ automatic extension ☐ the DFVC program ☐ special extension (enter description)	

Part II	Basic Plan Information —enter all requested information		
1a Name of plan WCI STEEL/PYRO/BARON RETIREMENT PLAN	1b Three-digit plan number (PN) ▶	003	
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) The Renco Group, Inc. One Rockefeller Plaza - 29th Floor New York NY 10020		1c Effective date of plan 09/01/1995	
		2b Employer Identification Number (EIN) 13-3370264	
		2c Plan Sponsor's telephone number 212-541-6000	
		2d Business code (see instructions) 551112	

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	 Signature of plan administrator	<u>10/16/17</u> Date	JOHN GRIMALDI, VP <i>The Renco Group, Inc.</i> Enter name of individual signing as plan administrator
SIGN HERE	 Signature of employer/plan sponsor	<u>10/16/17</u> Date	JOHN GRIMALDI, VP <i>The Renco Group, Inc.</i> Enter name of individual signing as employer or plan sponsor
SIGN HERE	Signature of DFE	Date	Enter name of individual signing as DFE
Preparer's name (including firm name, if applicable) and address (include room or suite number)			Preparer's telephone number

3a Plan administrator's name and address ☒ Same as Plan Sponsor	3b Administrator's EIN 3c Administrator's telephone number
4 If the name and/or EIN of the plan sponsor has changed since the last return/report filed for this plan, enter the name, EIN and the plan number from the last return/report: a Sponsor's name	4b EIN 4c PN
5 Total number of participants at the beginning of the plan year	5 2,315
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) 0
a(2) Total number of active participants at the end of the plan year	6a(2) 0
b Retired or separated participants receiving benefits.....	6b 1,430
c Other retired or separated participants entitled to future benefits	6c 758
d Subtotal. Add lines 6a(2), 6b, and 6c.....	6d 2,188
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	6e 0
f Total. Add lines 6d and 6e.....	6f 2,188
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	6g
h Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested	6h 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: 1I 3H	
b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristics Codes in the instructions:	

9a Plan funding arrangement (check all that apply)	9b Plan benefit arrangement (check all that apply)
(1) ☒ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor	(1) ☒ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor

10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)

a Pension Schedules

- (1) ☒ **R** (Retirement Plan Information)
- (2) ☐ **MB** (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary
- (3) ☒ **SB** (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary

b General Schedules

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

WCI STEEL/PYRO/BARON RETIREMENT PLAN
SCHEDULE H, LINE 4j – SCHEDULE OF REPORTABLE TRANSACTIONS
Year ended December 31, 2016

Name of plan sponsor:	The Renco Group, Inc.
Employer identification number:	13-3370264
Three-digit plan number:	003

(a) Identity of Issue or Borrower	(b) Description of Investment Including Maturity Date, Rate of Interest, Par or Maturity Value	(c) Purchase Price	(d) Selling Price	(e) Lease Rental	(f) Expense Incurred with Transaction	(g) Cost of Asset	(h) Current Value of Asset on Transaction Date	(i) Net Gain (Loss)
Category (i): A single transaction in excess of 5% of the current value of Plan assets:								
*Wells Fargo Funds Management, LLC	Wells Fargo Advantage Heritage Money Market Inst.	\$ 15,236,404	\$ -	\$ -	\$ -	\$ 15,236,404	\$ 15,236,404	\$ -
		-	15,056,993	-	-	15,056,993	15,056,993	-
Category (iii): A series of transactions with the same security in excess of 5% of the current value of Plan assets:								
*Principal Life Insurance	Money Market Separate Account	\$ 20,365,013	\$ -	\$ -	\$ -	\$ 20,365,013	\$ 20,365,013	\$ -
		-	20,271,513	-	-	20,271,737	20,271,513	(224)
*Wells Fargo Funds Management, LLC	Wells Fargo Advantage Heritage Money Market Inst.	19,389,028	-	-	-	19,389,028	19,389,028	-
		-	19,417,802	-	-	19,417,802	19,417,802	-
*Wells Fargo Funds Management, LLC	Wells Fargo Collateralized Inst. - Bank Deposit Account	8,873,841	-	-	-	8,873,841	8,873,841	-
		-	8,716,811	-	-	8,716,811	8,716,811	-

* Denotes party-in-interest transaction.

See Independent Auditor's Report

SCHEDULE SB (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Single-Employer Defined Benefit Plan Actuarial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6059 of the Internal Revenue Code (the Code). File as an attachment to Form 5500 or 5500-SF.	OMB No. 1210-0110 2016 This Form is Open to Public Inspection
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For calendar plan year 2016 or fiscal plan year beginning 01/01/2016 and ending 12/31/2016

▶ Round off amounts to nearest dollar.
 ▶ Caution: A penalty of \$1,000 will be assessed for late filing of this report unless reasonable cause is established.

A Name of plan WCI STEEL/PYRO/BARON RETIREMENT PLAN	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:70%;">B Three-digit plan number (PN) ▶</td> <td style="width:30%; text-align: center;">003</td> </tr> <tr> <td colspan="2" style="height: 20px;"></td> </tr> </table>	B Three-digit plan number (PN) ▶	003		
B Three-digit plan number (PN) ▶	003				
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF THE RENCO GROUP, INC.	D Employer Identification Number (EIN) 13-3370264				
E Type of plan: ☒ Single ☐ Multiple-A ☐ Multiple-B					
F Prior year plan size: ☐ 100 or fewer ☐ 101-500 ☒ More than 500					

Part I Basic Information			
1 Enter the valuation date: Month <u>01</u> Day <u>01</u> Year <u>2016</u>			
2 Assets:			
a Market value	2a	185892613	
b Actuarial value	2b	192354415	
3 Funding target/participant count breakdown	(1) Number of participants	(2) Vested Funding Target	(3) Total Funding Target
a For retired participants and beneficiaries receiving payment	1462	177047396	177047396
b For terminated vested participants	853	35595992	35595992
c For active participants	0	0	0
d Total	2315	212643388	212643388
4 If the plan is in at-risk status, check the box and complete lines (a) and (b). ☐			
a Funding target disregarding prescribed at-risk assumptions	4a		
b Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been in at-risk status for fewer than five consecutive years and disregarding loading factor	4b		
5 Effective interest rate	5	5.95 %	
6 Target normal cost	6	2400000	

Statement by Enrolled Actuary
 To the best of my knowledge, the information supplied in this schedule and accompanying schedules, statements and attachments, if any, is complete and accurate. Each prescribed assumption was applied in accordance with applicable law and regulations. In my opinion, each other assumption is reasonable (taking into account the experience of the plan and reasonable expectations) and such other assumptions, in combination, offer my best estimate of anticipated experience under the plan.

SIGN HERE	 Signature of actuary	<u>9-27-2017</u> Date
	David A. Stocklas Type or print name of actuary	1705460 Most recent enrollment number
	Principal Financial Group Firm name	412-394-9380 Telephone number (including area code)
	PO Box 9394 Des Moines, IA 50306-9394 Address of the firm	

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

Part II Beginning of Year Carryover and Prefunding Balances

	(a) Carryover balance	(b) Prefunding balance
7 Balance at beginning of prior year after applicable adjustments (line 13 from prior year)	0	0
8 Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	0	0
9 Amount remaining (line 7 minus line 8)	0	0
10 Interest on line 9 using prior year's actual return of <u>2.61 %</u>	0	0
11 Prior year's excess contributions to be added to prefunding balance:		
a Present value of excess contributions (line 38a from prior year)		0
b(1) Interest on the excess, if any, of line 38a over line 38b from prior year Schedule SB, using prior year's effective interest rate of <u>6.15 %</u>		0
b(2) Interest on line 38b from prior year Schedule SB, using prior year's actual return		0
c Total available at beginning of current plan year to add to prefunding balance		0
d Portion of (c) to be added to prefunding balance		0
12 Other reductions in balances due to elections or deemed elections	0	0
13 Balance at beginning of current year (line 9 + line 10 + line 11d - line 12)	0	0

Part III Funding Percentages

14 Funding target attainment percentage	14	90.45 %
15 Adjusted funding target attainment percentage	15	90.45 %
16 Prior year's funding percentage for purposes of determining whether carryover/prefunding balances may be used to reduce current year's funding requirement	16	88.72 %
17 If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage	17	%

Part IV Contributions and Liquidity Shortfalls**18** Contributions made to the plan for the plan year by employer(s) and employees:

(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees
04/15/2016	2605605	0			
07/15/2016	2605605	0			
10/14/2016	2605605	0			
01/13/2017	2605605	0			
09/15/2017	2414614	0			
Totals ▶			18(b)	12837034	18(c) 0

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

a Contributions allocated toward unpaid minimum required contributions from prior years	19a	0
b Contributions made to avoid restrictions adjusted to valuation date	19b	0
c Contributions allocated toward minimum required contribution for current year adjusted to valuation date	19c	12221839

20 Quarterly contributions and liquidity shortfalls:

a Did the plan have a "funding shortfall" for the prior year?	☒ Yes ☐ No
b If line 20a is "Yes," were required quarterly installments for the current year made in a timely manner?	☒ Yes ☐ No
c If line 20a is "Yes," see instructions and complete the following table as applicable:	

Liquidity shortfall as of end of quarter of this plan year

(1) 1st	(2) 2nd	(3) 3rd	(4) 4th
0	0	0	0

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

21 Discount rate:				
a Segment rates:	1st segment: 4.43 %	2nd segment: 5.91 %	3rd segment: 6.65 %	☐ N/A, full yield curve used
b Applicable month (enter code)				21b 4
22 Weighted average retirement age				22
23 Mortality table(s) (see instructions)	☐ Prescribed - combined ☒ Prescribed - separate ☐ Substitute			

Part VI Miscellaneous Items

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

Part VII Reconciliation of Unpaid Minimum Required Contributions For Prior Years

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

Part VIII Minimum Required Contribution For Current Year

31 Target normal cost and excess assets (see instructions):			
a Target normal cost (line 6)	31a	2400000	
b Excess assets, if applicable, but not greater than line 31a	31b	0	
32 Amortization installments:			
a Net shortfall amortization installment	Outstanding Balance	Installment	
	20288973	9821839	
b Waiver amortization installment	0	0	
33 If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____) and the waived amount	33		
34 Total funding requirement before reflecting carryover/prefunding balances (lines 31a - 31b + 32a + 32b - 33)	34	12221839	
	Carryover balance	Prefunding balance	Total balance
35 Balances elected for use to offset funding requirement	0	0	0
36 Additional cash requirement (line 34 minus line 35)	36	12221839	
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)	37	12221839	
38 Present value of excess contributions for current year (see instructions)			
a Total (excess, if any, of line 37 over line 36)	38a	0	
b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances	38b	0	
39 Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37)	39	0	
40 Unpaid minimum required contributions for all years	40	0	

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

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

Schedule SB, Line 2a - Explanation of Assets
WCI STEEL/PYRO/BARON RETIREMENT PLAN
EIN 13-3370264 Plan No. 003

The market value of assets on line 2a does not equal assets shown on Schedule H, Schedule I or Form 5500-SF. Schedule H, Schedule I and Form 5500-SF use the full value of contributions received after plan year end. Line 2a includes the value of \$2,614,623 contributions received after the plan year end with a discounted value of \$2,552,201. In addition the amounts are off due to the Defined Contribution Plan (DCP) balances that we take out of the assets plus most of the money is with Wells Fargo.

Schedule SB, Line 22 - Description Of Weighted Average Retirement Age
WCI STEEL/PYRO/BARON RETIREMENT PLAN
EIN 13-3370264 Plan No. 003

The plan has no active participants, therefore line 22 is blank.

Schedule SB, Line 32 - Schedule of Amortization Bases
WCI STEEL/PYRO/BARON RETIREMENT PLAN
EIN 13-3370264 Plan No. 003

Shortfall			
Date Created	Present Value	Remaining Years	Annual Charge
01/01/2016	\$2,343,639	7	\$387,224
01/01/2015	2,824,277	6	528,510
01/01/2014	4,644,506	5	1,011,124
01/01/2013	7,730,203	4	2,059,961
01/01/2012	(8,514,292)	3	(2,961,970)
01/01/2011	5,036,440	2	2,572,790
01/01/2010	6,224,200	1	6,224,200
Total	\$20,288,973		\$9,821,839

Last year's total shortfall annual charge was \$7,422,420.

The total annual charge used in calculating your Annual Cost cannot be less than zero.

Waiver charges represent your repayment to the plan for an Annual Charge that was not funded. A waiver only exists once the Internal Revenue Service has granted approval. See Waivers in Rules and Regulations.

Waiver			
Date Created	Present Value	Remaining Years	Annual Charge
N/A	N/A	N/A	N/A

There are no waiver bases for the current year.

Schedule SB, Part V - Statement of Actuarial Assumptions/Methods
WCI STEEL/PYRO/BARON RETIREMENT PLAN
EIN 13-3370264 Plan No. 003

Assumptions Prescribed by Law	
Mortality	<p>During Benefit Payment Period IRS Prescribed Mortality - Generational Annuitant, male and female.</p> <p>Before Benefit Payment Period IRS Prescribed Mortality - Generational Non-annuitant, male and female.</p>
Assumptions Selected by Actuary	
Inflation	<p>0.00% increase per year.</p> <p>See Long-Term Capital Market Assumptions link.</p>
Asset Return	<p>7.50% for the current plan year.</p> <p>The Asset Return is developed as a weighted average rate based on the target asset allocation of the plan and the long-term capital market assumptions. The calculated return is on an arithmetic mean basis. For details, see the See Long-Term Capital Market Assumptions link.</p>
Expected Expense	<p>The expected expense included in Target Normal Cost is an estimate based on prior year expenses paid from plan assets, with an updated estimate of PBGC premiums. This is the best estimate available of upcoming year's expenses.</p>
Retirement	<p>Active and inactive participants are assumed to retire at Normal Retirement Age as defined in <u>Plan Provisions</u>.</p> <p>This assumption is based on the results of recent experience analysis and anticipated future experience.</p>
Disability	<p>None.</p>
Marriage	<p>75% married; husbands are 3 years older than wives.</p> <p>This assumption does not have material impact on the results of this report and has been selected based on our best estimate of active workforce.</p>
Withdrawal	<p>None.</p>
Form of Benefit and Basis	<p>WCI: 75% of participants are assumed to receive their benefits as a Life Annuity and 25% of participants are assumed to receive their benefits as a 50% Joint & Survivor Annuity at the assumed retirement age.</p> <p>This assumption is based on the results of recent experience analysis and anticipated future experience.</p> <p>PYRO/Baron: 100% of all non-retired participants will elect a benefit paid in a lump sum at the assumed retirement age based on the applicable mortality and the plan's funding target interest rates used in the Annual Cost calculation.</p>

Schedule SB, Part V - Statement of Actuarial Assumptions/Methods
WCI STEEL/PYRO/BARON RETIREMENT PLAN
EIN 13-3370264 Plan No. 003

Methods Prescribed by Law	
Liability Measure	Funding target is the present value of the benefits accrued on the valuation date. Target Normal Cost is based on benefits expected to accrue during the current plan year and includes an estimate of plan expenses for the year.
HCE Benefit Payment Restrictions	<p>A ratio of the plan assets and accrued liability is used to determine if restrictions apply. Assets and accrued liability are as of the valuation date and are reduced by:</p> <ul style="list-style-type: none"> • any retiree benefit index or floor • amounts for HCEs who were previously restricted • an amount for the retiring HCE <p>The estimated HCE ratio illustrated in this report is based on the market value of plan assets (excluding late deposits) and Funding Target as of the valuation date. The Funding Target uses the non-stabilized interest rates as defined in IRC §430(h)(2)(C)(iv). Other assumptions or methods could be used.</p>
Methods Selected by Plan Sponsor	
Asset Method	<p>The asset valuation method is prescribed by law for plans that elect to use a value other than market value.</p> <p>For each of the preceding two years, an expected value of assets at the end of the year is compared to the end of year market value. The resulting gain or loss is recognized evenly over three plan years.</p> <p>The expected value includes contributions, distributions, any deducted administrative expenses, and expected earnings (based on the lesser of the assumed interest rate or the Maximum Allowable Rate). The deferred gains and losses are added to the current market value and then restricted to no more than 110% and no less than 90% of that market value.</p> <p>When actual returns exceed the assumed return, the actuarial value of assets will lag below market value. The lag and the smoothing effect are limited since the value must be within 10% of market value.</p>
Segment Rates	24-month average with no weighting to prior law basis. Use rates where August is the last month included in the average.
PBGC Premium Basis	Variable Rate Premiums are calculated using census, market value of assets and interest rates in effect on the current valuation date. Interest rates are the 24-month average rates used for Annual Cost but without the interest rate corridor defined in IRC §430(h)(2)(C)(iv). You elected this Alternative interest method for the 01/01/2009 plan year and this method must be used for five years before a change can be made.

Schedule SB, Part V - Statement of Actuarial Assumptions/Methods
WCI STEEL/PYRO/BARON RETIREMENT PLAN
EIN 13-3370264 Plan No. 003

Methods Elected by Actuary																									
Retirees	Assets and liabilities for current and future retirees are included.																								
Vested Benefits	<p>A benefit is included in vested benefits if it meets the requirements under PBGC. The benefit is multiplied by the participant's vesting percentage applicable to each benefit on the valuation date.</p> <p>The following ancillary benefits are always treated as nonvested: disability benefits payable to retirement age unless in pay status, pre-retirement death benefits in excess of the Survivor Annuity Death Benefit and post retirement death benefits for non-retired participants except as noted in the Plan Provisions.</p>																								
Assumptions and Methods Elected by Actuary Plan Accounting (ASC 960)																									
With the exceptions below, all assumptions and methods are the same as those used in determining your plan's regular Funding Target and Target Normal Cost.																									
Mortality	<p>Rates: Total Mortality rates from RP-2006 (baseline table from SOA RP-2014 study based on experience data for private pension plans).</p> <p>Mortality Improvement (MI): RPEC_2014_v2011 model, reflecting historical U.S. mortality data to 2011 and with the last year of historical graduated data of 2009, with the following assumptions:</p> <ul style="list-style-type: none">• Convergence period of 10-years• Long-term mortality improvement is the sex-distinct and the age-based assumption calibrated to the annual improvement averages, for the period 2010-2088 published in the Social Security Administration (SSA) Trustees Report 2014. <table><tr><th colspan="3">Long-Term Mortality Improvement Rates (averages 2010-2088 in SSA Trustees 2014 Report)</th></tr><tr><th>Age Group</th><th>Male</th><th>Female</th></tr><tr><td>15-49</td><td>0.89%</td><td>0.91%</td></tr><tr><td>50-64</td><td>1.09%</td><td>1.11%</td></tr><tr><td>65-84</td><td>0.92%</td><td>0.83%</td></tr><tr><td>85+</td><td>0.59%</td><td>0.53%</td></tr><tr><td>65+</td><td>0.77%</td><td>0.68%</td></tr><tr><td>Total</td><td>0.84%</td><td>0.77%</td></tr></table> <p>During Benefit Payment Period Above table with generational MI, Annuitant, male and female.</p> <p>Before Benefit Payment Period Above table with generational MI, Non-annuitant, male and female.</p> <p>See <u>Mortality</u> rationale for additional information.</p>	Long-Term Mortality Improvement Rates (averages 2010-2088 in SSA Trustees 2014 Report)			Age Group	Male	Female	15-49	0.89%	0.91%	50-64	1.09%	1.11%	65-84	0.92%	0.83%	85+	0.59%	0.53%	65+	0.77%	0.68%	Total	0.84%	0.77%
Long-Term Mortality Improvement Rates (averages 2010-2088 in SSA Trustees 2014 Report)																									
Age Group	Male	Female																							
15-49	0.89%	0.91%																							
50-64	1.09%	1.11%																							
65-84	0.92%	0.83%																							
85+	0.59%	0.53%																							
65+	0.77%	0.68%																							
Total	0.84%	0.77%																							

Schedule SB, Part V - Statement of Actuarial Assumptions/Methods
WCI STEEL/PYRO/BARON RETIREMENT PLAN
EIN 13-3370264 Plan No. 003

Interest Rate Used to Value Liabilities	7.50%
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Schedule SB, Part V - Summary of Plan Provisions
WCI STEEL/PYRO/BARON RETIREMENT PLAN
EIN 13-3370264 Plan No. 003

This report reflects the maximum benefit limits under Internal Revenue Code (IRC) Section 415 and maximum compensation limits under IRC Section 401 in effect on the first day of each plan year.

The following is a summary of plan provisions and does not alter the intent or meanings of the provisions contained in the contract or plan document. This report reflects the provisions of the plan effective 12/31/2015.

Plan Eligibility	
Age & Service	WCI: Attained Age 21 and completed one year of service
Service	PYRO: 1,000 hours of service. Baron: 1,000 hours of service.
Class	WCI: Covered under one of the following collective bargaining agreements: <ul style="list-style-type: none"> • United Steelworkers of America Local No. 1375 and No. 6824 • Bricklayers and Allied Craftsmen International Union A.F.L.-C.I.O Local 43 • The International Union, United Plant Guard Workers of America and its Amalgamated Local 64 Plan participation is frozen effective May 1, 2006. PYRO: Non-bargaining class. Baron: Salaried employees.

Normal Retirement Benefit	
Age and Service	WCI: The later of a participant's 65th birthday or the first day of the plan year in which a participant attains five years of continuous service. PYRO: Attained age 62 and five years of plan participation but not later than age 70. Baron: Attained age 65.
Form	WCI: Monthly annuity payable for life (optional forms may be elected prior to retirement). PYRO: Monthly annuity payable for life (optional forms may be elected in advance of retirement). Baron: Monthly annuity payable for life with 10 years certain (optional forms may be elected in advance of retirement).

Schedule SB, Part V - Summary of Plan Provisions
WCI STEEL/PYRO/BARON RETIREMENT PLAN
EIN 13-3370264 Plan No. 003

**Amount
(accrued benefit)**

WCI: Greater of a) or b) reduced by c) and d):

- a) Effective 9/1/2002, \$56.25 multiplied by years of continuous service (maximum of 30) plus \$70.00 multiplied by years of continuous service in excess of 30.
- b) Minimum benefit for participants with more than 30 years of continuous service:

Attained Age:	Monthly Benefit
Less than 55	\$1,050
55 through 60	\$1,250
61 through 62	\$1,350
63	\$1,450
64	\$1,550
65 or older	\$1,660

Participants with less than 30 years of continuous service and not totally and permanently disabled, the \$1,660 is multiplied by the years of continuous service divided by 30.

- c) LTV Steel Defined Benefit Plan accrued benefit payable at age 65 as a straight life benefit
- d) For retirements other than deferred vested: Annuity equivalent of the WSCI Steel DCP account balance (maximum of \$10,000) converted to a 5 year certain and life annuity using 8.5% interest and 1983 Group Annuity Mortality, blended 50% for male and 50% for female.

For vested deferred retirements, the account balance (maximum of \$10,000) is converted to a straight life benefit using the assumptions above.

Schedule SB, Part V - Summary of Plan Provisions
WCI STEEL/PYRO/BARON RETIREMENT PLAN
EIN 13-3370264 Plan No. 003

	<p>PYRO: Sum of (a), (b), (c), and (d) below:</p> <p>(a) An amount equal to \$17.08875 for each year of accrued service, but not more than 10 years.</p> <p>(b) An amount equal to \$17.64 for each year of accrual service in excess of 10 years, but not more than 20 years.</p> <p>(c) An amount equal to \$18.19125 for each year of accrual service in excess of 20 years, but not more than 30 years.</p> <p>(d) An amount equal to \$18.7425 for each year of accrual service in excess of 30 years, but not more than 40 years.</p> <p>--Benefits are frozen effective August 19, 2003.</p> <p>Baron: Sum of (a) multiplied by (b) plus (c) below:</p> <p>(a) 27.5% of average compensation not excess of integration level plus 37.5% of average compensation in excess of integration level</p> <p>(b) Number of expected month of service (maximum 180) divided by 180.</p> <p>(c) .5% of average compensation multiplied by years of accrual service in excess of 15.</p> <p>Accrued Benefits were frozen effective September 30, 2003.</p>
Minimum Accrued Benefit	<p>Baron:</p> <p>(1) \$10 multiplied by years of accrual service.</p> <p>(2) Accrued benefit as of 12/31/1999.</p>

Early Retirement Benefits	
62/15 Retirement	WCI: If attained age 62 with 15 years of continuous service, accrued benefit payable without reduction for early retirement.
60/15 Retirement	WCI: If attained age 60 with 15 years of continuous service, accrued benefit multiplied by 83.82% for age 60 or 91.45% for age 61.

Schedule SB, Part V - Summary of Plan Provisions
WCI STEEL/PYRO/BARON RETIREMENT PLAN
EIN 13-3370264 Plan No. 003

30 year Retirement	WCI: If active and 30 years of continuous service, accrued benefit payable without reduction for early retirement. Additional supplement is also payable until the later of age 62 or one year:														
	<table> <tr> <th data-bbox="662 432 862 464">Age at Retirement</th><th data-bbox="995 432 1224 464">Monthly Supplement</th></tr> <tr> <td data-bbox="688 485 836 516">60 and under</td><td data-bbox="1081 485 1138 516">\$150</td></tr> <tr> <td data-bbox="745 537 779 569">61</td><td data-bbox="1089 537 1130 569">200</td></tr> <tr> <td data-bbox="745 590 779 621">62</td><td data-bbox="1089 590 1130 621">250</td></tr> <tr> <td data-bbox="745 642 779 674">63</td><td data-bbox="1089 642 1130 674">300</td></tr> <tr> <td data-bbox="745 695 779 726">64</td><td data-bbox="1089 695 1130 726">350</td></tr> <tr> <td data-bbox="688 747 836 779">65 and over</td><td data-bbox="1081 747 1130 779">400</td></tr> </table>	Age at Retirement	Monthly Supplement	60 and under	\$150	61	200	62	250	63	300	64	350	65 and over	400
Age at Retirement	Monthly Supplement														
60 and under	\$150														
61	200														
62	250														
63	300														
64	350														
65 and over	400														
70/80 Retirement	WCI: If terminated due to layoff, shutdown, or disability with 15 years of continuous service and whose age plus continuous service equals at least 80, the accrued benefit is payable without reduction. An addition \$400 per month is payable until age 62 provided the participant is not entitled to Social Security benefits and/or part b) of the accrued benefit formula is the greater.														
Rule of 65 Retirement	WCI: If terminated due to layoff or disability with 20 years of continuous service and whose age plus continuous service equals at least 65, the accrued benefit is payable without reduction. An addition \$400 per month is payable until age 62 provided the participant is not entitled to Social Security benefits and/or part b) of the accrued benefit formula is the greater.														
Age	PYRO & Baron: Attained age 55.														
Service	PYRO: Five years of service with the employer. Baron: Ten years of accrual service.														
Form	PYRO & Baron: Same as normal retirement benefit.														
Amount	PYRO: Accrued benefit on early retirement date reduced by 3% for each year the early retirement date precedes normal retirement date (but not less than the early retirement benefit as provided on December 31, 1988). Baron: Accrued benefit on early retirement date reduced 6% for each year the early retirement date precedes normal retirement date.														

Schedule SB, Part V - Summary of Plan Provisions
WCI STEEL/PYRO/BARON RETIREMENT PLAN
EIN 13-3370264 Plan No. 003

Late Retirement Benefit	
Age	PYRO & Baron: No maximum age.
Form	PYRO & Baron: Same as normal retirement benefit.
Amount	PYRO: Greater of accrued benefit on normal retirement date actuarially increased to late retirement date or accrued benefit on late retirement date. Baron: Accrued benefit on late retirement date.

Termination Benefit			
Vesting Percentage	100% after 5 years of continuous (vesting) service		
Form	Same as normal retirement benefit with income deferred until normal retirement date.		
Amount	Accrued benefit on date of termination multiplied by the vesting percentage.		
	WCI: If a participant has attained age 40 with 15 years of continuous service, the accrued benefit is unreduced at age 62. Such participants can elect to receive a reduced benefit at age 60.		
	Age at Retirement	Not Age 40 with 15 years of continuous service at termination	Age 40 with 15 years of continuous service
	60	63.10%	83.82%
	61	68.85%	94.45%
	62	75.28%	100.00%
	63	82.53%	100.00%
64	90.72%	100.00%	

Schedule SB, Part V - Summary of Plan Provisions
WCI STEEL/PYRO/BARON RETIREMENT PLAN
EIN 13-3370264 Plan No. 003

Pre-Retirement Death Benefit	
Eligibility	Participant fully vested in an accrued benefit.
Form	Monthly annuity payable to beneficiary (spouse if continuously married for one year) deferred to participant's Earliest Retirement Date if later than the date of death.
Amount	<p>If death occurs, the amount paid to the beneficiary is equal to the amount that would have been paid had the participant terminated employment on the date of death, survived to his/her earliest retirement age, retired with a qualified 50% joint and survivor annuity in effect, then died the next day.</p> <p>WCI: Payments begin at the later of date of death or when the participant would have attained age 60.</p>

Single Sum Death Benefit	
Eligibility	<p>PYRO: Terminated participant who is entitled to receive, or is receiving a normal or early retirement benefit. Participant who terminated employment on or after the date he is eligible for an early or normal retirement benefit. This benefit is payable to those eligible participants who have not began receiving annuity payments as well as those eligible participants in pay status. This benefit is not payable to participants who are actively employed at the time of death or benefit commencement date.</p> <p>Baron: Death of a participant who is receiving normal or early retirement benefits</p>
Form	PYRO & Baron: Lump sum.
Amount	<p>PYRO: \$2,500.</p> <p>Baron: \$5,000.</p>

Disability Benefit	
Eligibility	<p>WCI: 15 years of continuous service and totally and permanently disabled</p> <p>PYRO: If disability occurs on the job or while off the job on and after the earlier of:</p> <ul style="list-style-type: none"> (i) attained age 62 or (ii) both attained age 55 and completed five years of vesting service <p>Baron: Five years of vesting service.</p>

Schedule SB, Part V - Summary of Plan Provisions
WCI STEEL/PYRO/BARON RETIREMENT PLAN
EIN 13-3370264 Plan No. 003

Form	<p>WCI: Monthly income payable until age 62.</p> <p>PYRO: Monthly income payable until normal retirement, death, or recovery and a deferred annuity payable at the normal retirement date.</p> <p>Baron: Monthly income deferred to normal retirement date.</p>
Amount	<p>WCI: Accrued benefit without reduction payable until age 62. If the participant is not entitled to Social Security Disability Benefit, an additional \$400 per month is paid unless part b) of the accrued benefit formula applies.</p> <p>PYRO: Accrued benefit on date of disability reduced 3% per year to reflect number of years preceding normal retirement date less payment of any other disability benefit to which employer has contributed.</p> <p>Baron: Accrued benefit using average compensation as of date of disability and expected accrual service at normal retirement date.</p>

Definition

Integration Level	<p>Baron: The monthly average of the Social Security taxable wage bases (in effect under Section 230 of the Social Security Act) for each year in the 35-year period ending with the year the employee attains Social Security retirement age.</p>
Optional Forms of Benefit Payments	<p>WCI: The optional forms of benefit payments with actuarial equivalent basis in brackets:</p> <ul style="list-style-type: none"> • Monthly annuity payable for life. • Automatic 50% spouse option without pop-up [87% + .4% multiplied by (beneficiary's age – participants age, up to 20)] • Automatic 50% spouse option with pop-up [88% + .4% multiplied by (beneficiary's age – participants age, up to 20)] • 75% spouse option [5% interest and UP-94 mortality table blended 50% for male and 50% for female, projected to 2002 using scale AA.] • 50% beneficiary option [87% + .4% multiplied by (beneficiary's age – participants age, up to 20)] • 100% beneficiary option [81% + .6% multiplied by (beneficiary's age – participants age, up to 20)]

Schedule SB, Part V - Summary of Plan Provisions
WCI STEEL/PYRO/BARON RETIREMENT PLAN
EIN 13-3370264 Plan No. 003

	<p>PYRO: The optional forms of benefit payments are:</p> <ul style="list-style-type: none"> • Monthly annuity payable for life, or 5, 10, or 15 years certain and life • Monthly annuity payable as a survivorship life annuity with survivorship percentages of 50, 66 2/3, 75, or 100 • Single sum payment equal to the present value of the retirement benefit <p>The optional form conversion basis is 7.5% interest and the mortality described in Revenue Ruling 95-6 for payments other than lump sums. The optional form conversion basis uses the applicable interest rate and applicable mortality as set forth in Code Section 417 for lump sum payments. The applicable interest rate uses the second calendar month preceding the payment month.</p>
	<p>Baron: The optional forms of benefit payments are:</p> <ul style="list-style-type: none"> • Monthly annuity payable for 10 years certain and life. • Monthly annuity payable for 10 years certain and then either a 50%, 75%, or 100% survivorship annuity payable afterwards. • Single sum payment equal to the present value of the retirement benefit and post-retirement death benefit. <p>The optional form conversion basis is 5.0% interest and UP 1984 Mortality Table for payments other than lump sums. The optional form conversion basis uses the applicable interest rate and applicable mortality as set forth in Code Section 417 for lump sum payments. The applicable interest rate uses the second calendar month preceding the first day of the stability period which is the plan year.</p>

Changes in Principal Eligibility or Benefit Provisions

There have been no changes in principal eligibility or benefit provisions since the last valuation.

Significant Event

The enrolled actuary has not been made aware that any significant events have occurred during the year.

Schedule SB, Line 2a - Explanation of Assets
WCI STEEL/PYRO/BARON RETIREMENT PLAN
EIN 13-3370264 Plan No. 003

The market value of assets on line 2a does not equal assets shown on Schedule H, Schedule I or Form 5500-SF. Schedule H, Schedule I and Form 5500-SF use the full value of contributions received after plan year end. Line 2a includes the value of \$2,614,623 contributions received after the plan year end with a discounted value of \$2,552,201. In addition the amounts are off due to the Defined Contribution Plan (DCP) balances that we take out of the assets plus most of the money is with Wells Fargo.

Schedule SB, Line 22 - Description Of Weighted Average Retirement Age
WCI STEEL/PYRO/BARON RETIREMENT PLAN
EIN 13-3370264 Plan No. 003

The plan has no active participants, therefore line 22 is blank.

Schedule SB, Part V - Summary of Plan Provisions
WCI STEEL/PYRO/BARON RETIREMENT PLAN
EIN 13-3370264 Plan No. 003

This report reflects the maximum benefit limits under Internal Revenue Code (IRC) Section 415 and maximum compensation limits under IRC Section 401 in effect on the first day of each plan year.

The following is a summary of plan provisions and does not alter the intent or meanings of the provisions contained in the contract or plan document. This report reflects the provisions of the plan effective 12/31/2015.

Plan Eligibility	
Age & Service	WCI: Attained Age 21 and completed one year of service
Service	PYRO: 1,000 hours of service. Baron: 1,000 hours of service.
Class	WCI: Covered under one of the following collective bargaining agreements: <ul style="list-style-type: none"> • United Steelworkers of America Local No. 1375 and No. 6824 • Bricklayers and Allied Craftsmen International Union A.F.L.-C.I.O Local 43 • The International Union, United Plant Guard Workers of America and its Amalgamated Local 64 Plan participation is frozen effective May 1, 2006. PYRO: Non-bargaining class. Baron: Salaried employees.

Normal Retirement Benefit	
Age and Service	WCI: The later of a participant's 65th birthday or the first day of the plan year in which a participant attains five years of continuous service. PYRO: Attained age 62 and five years of plan participation but not later than age 70. Baron: Attained age 65.
Form	WCI: Monthly annuity payable for life (optional forms may be elected prior to retirement). PYRO: Monthly annuity payable for life (optional forms may be elected in advance of retirement). Baron: Monthly annuity payable for life with 10 years certain (optional forms may be elected in advance of retirement).

Schedule SB, Part V - Summary of Plan Provisions
WCI STEEL/PYRO/BARON RETIREMENT PLAN
EIN 13-3370264 Plan No. 003

**Amount
(accrued benefit)**

WCI: Greater of a) or b) reduced by c) and d):

- a) Effective 9/1/2002, \$56.25 multiplied by years of continuous service (maximum of 30) plus \$70.00 multiplied by years of continuous service in excess of 30.
- b) Minimum benefit for participants with more than 30 years of continuous service:

Attained Age:	Monthly Benefit
Less than 55	\$1,050
55 through 60	\$1,250
61 through 62	\$1,350
63	\$1,450
64	\$1,550
65 or older	\$1,660

Participants with less than 30 years of continuous service and not totally and permanently disabled, the \$1,660 is multiplied by the years of continuous service divided by 30.

- c) LTV Steel Defined Benefit Plan accrued benefit payable at age 65 as a straight life benefit
- d) For retirements other than deferred vested: Annuity equivalent of the WSCI Steel DCP account balance (maximum of \$10,000) converted to a 5 year certain and life annuity using 8.5% interest and 1983 Group Annuity Mortality, blended 50% for male and 50% for female.

For vested deferred retirements, the account balance (maximum of \$10,000) is converted to a straight life benefit using the assumptions above.

Schedule SB, Part V - Summary of Plan Provisions
WCI STEEL/PYRO/BARON RETIREMENT PLAN
EIN 13-3370264 Plan No. 003

	<p>PYRO: Sum of (a), (b), (c), and (d) below:</p> <p>(a) An amount equal to \$17.08875 for each year of accrued service, but not more than 10 years.</p> <p>(b) An amount equal to \$17.64 for each year of accrual service in excess of 10 years, but not more than 20 years.</p> <p>(c) An amount equal to \$18.19125 for each year of accrual service in excess of 20 years, but not more than 30 years.</p> <p>(d) An amount equal to \$18.7425 for each year of accrual service in excess of 30 years, but not more than 40 years.</p> <p>--Benefits are frozen effective August 19, 2003.</p> <p>Baron: Sum of (a) multiplied by (b) plus (c) below:</p> <p>(a) 27.5% of average compensation not excess of integration level plus 37.5% of average compensation in excess of integration level</p> <p>(b) Number of expected month of service (maximum 180) divided by 180.</p> <p>(c) .5% of average compensation multiplied by years of accrual service in excess of 15.</p> <p>Accrued Benefits were frozen effective September 30, 2003.</p>
Minimum Accrued Benefit	<p>Baron:</p> <p>(1) \$10 multiplied by years of accrual service.</p> <p>(2) Accrued benefit as of 12/31/1999.</p>

Early Retirement Benefits	
62/15 Retirement	WCI: If attained age 62 with 15 years of continuous service, accrued benefit payable without reduction for early retirement.
60/15 Retirement	WCI: If attained age 60 with 15 years of continuous service, accrued benefit multiplied by 83.82% for age 60 or 91.45% for age 61.

Schedule SB, Part V - Summary of Plan Provisions
WCI STEEL/PYRO/BARON RETIREMENT PLAN
EIN 13-3370264 Plan No. 003

30 year Retirement	<p>WCI: If active and 30 years of continuous service, accrued benefit payable without reduction for early retirement. Additional supplement is also payable until the later of age 62 or one year:</p> <table border="1" data-bbox="570 373 1300 766"> <thead> <tr> <th data-bbox="570 373 935 432">Age at Retirement</th><th data-bbox="935 373 1300 432">Monthly Supplement</th></tr> </thead> <tbody> <tr> <td data-bbox="570 432 935 491">60 and under</td><td data-bbox="935 432 1300 491">\$150</td></tr> <tr> <td data-bbox="570 491 935 550">61</td><td data-bbox="935 491 1300 550">200</td></tr> <tr> <td data-bbox="570 550 935 609">62</td><td data-bbox="935 550 1300 609">250</td></tr> <tr> <td data-bbox="570 609 935 667">63</td><td data-bbox="935 609 1300 667">300</td></tr> <tr> <td data-bbox="570 667 935 726">64</td><td data-bbox="935 667 1300 726">350</td></tr> <tr> <td data-bbox="570 726 935 766">65 and over</td><td data-bbox="935 726 1300 766">400</td></tr> </tbody> </table>	Age at Retirement	Monthly Supplement	60 and under	\$150	61	200	62	250	63	300	64	350	65 and over	400
Age at Retirement	Monthly Supplement														
60 and under	\$150														
61	200														
62	250														
63	300														
64	350														
65 and over	400														
70/80 Retirement	<p>WCI: If terminated due to layoff, shutdown, or disability with 15 years of continuous service and whose age plus continuous service equals at least 80, the accrued benefit is payable without reduction. An addition \$400 per month is payable until age 62 provided the participant is not entitled to Social Security benefits and/or part b) of the accrued benefit formula is the greater.</p>														
Rule of 65 Retirement	<p>WCI: If terminated due to layoff or disability with 20 years of continuous service and whose age plus continuous service equals at least 65, the accrued benefit is payable without reduction. An addition \$400 per month is payable until age 62 provided the participant is not entitled to Social Security benefits and/or part b) of the accrued benefit formula is the greater.</p>														
Age	PYRO & Baron: Attained age 55.														
Service	<p>PYRO: Five years of service with the employer.</p> <p>Baron: Ten years of accrual service.</p>														
Form	PYRO & Baron: Same as normal retirement benefit.														
Amount	<p>PYRO: Accrued benefit on early retirement date reduced by 3% for each year the early retirement date precedes normal retirement date (but not less than the early retirement benefit as provided on December 31, 1988).</p> <p>Baron: Accrued benefit on early retirement date reduced 6% for each year the early retirement date precedes normal retirement date.</p>														

Schedule SB, Part V - Summary of Plan Provisions
WCI STEEL/PYRO/BARON RETIREMENT PLAN
EIN 13-3370264 Plan No. 003

Late Retirement Benefit	
Age	PYRO & Baron: No maximum age.
Form	PYRO & Baron: Same as normal retirement benefit.
Amount	<p>PYRO: Greater of accrued benefit on normal retirement date actuarially increased to late retirement date or accrued benefit on late retirement date.</p> <p>Baron: Accrued benefit on late retirement date.</p>

Termination Benefit			
Vesting Percentage	100% after 5 years of continuous (vesting) service		
Form	Same as normal retirement benefit with income deferred until normal retirement date.		
Amount	Accrued benefit on date of termination multiplied by the vesting percentage.		
	WCI: If a participant has attained age 40 with 15 years of continuous service, the accrued benefit is unreduced at age 62. Such participants can elect to receive a reduced benefit at age 60.		
	Age at Retirement	Not Age 40 with 15 years of continuous service at termination	Age 40 with 15 years of continuous service
	60	63.10%	83.82%
	61	68.85%	94.45%
	62	75.28%	100.00%
	63	82.53%	100.00%
64	90.72%	100.00%	

Pre-Retirement Death Benefit	
Eligibility	Participant fully vested in an accrued benefit.
Form	Monthly annuity payable to beneficiary (spouse if continuously married for one year) deferred to participant's Earliest Retirement Date if later than the date of death.
Amount	<p>If death occurs, the amount paid to the beneficiary is equal to the amount that would have been paid had the participant terminated employment on the date of death, survived to his/her earliest retirement age, retired with a qualified 50% joint and survivor annuity in effect, then died the next day.</p> <p>WCI: Payments begin at the later of date of death or when the participant would have attained age 60.</p>

Single Sum Death Benefit	
Eligibility	<p>PYRO: Terminated participant who is entitled to receive, or is receiving a normal or early retirement benefit. Participant who terminated employment on or after the date he is eligible for an early or normal retirement benefit. This benefit is payable to those eligible participants who have not began receiving annuity payments as well as those eligible participants in pay status. This benefit is not payable to participants who are actively employed at the time of death or benefit commencement date.</p> <p>Baron: Death of a participant who is receiving normal or early retirement benefits</p>
Form	PYRO & Baron: Lump sum.
Amount	<p>PYRO: \$2,500.</p> <p>Baron: \$5,000.</p>

Disability Benefit	
Eligibility	<p>WCI: 15 years of continuous service and totally and permanently disabled</p> <p>PYRO: If disability occurs on the job or while off the job on and after the earlier of:</p> <ul style="list-style-type: none"> (i) attained age 62 or (ii) both attained age 55 and completed five years of vesting service <p>Baron: Five years of vesting service.</p>

Schedule SB, Part V - Summary of Plan Provisions
WCI STEEL/PYRO/BARON RETIREMENT PLAN
EIN 13-3370264 Plan No. 003

Form	<p>WCI: Monthly income payable until age 62.</p> <p>PYRO: Monthly income payable until normal retirement, death, or recovery and a deferred annuity payable at the normal retirement date.</p> <p>Baron: Monthly income deferred to normal retirement date.</p>
Amount	<p>WCI: Accrued benefit without reduction payable until age 62. If the participant is not entitled to Social Security Disability Benefit, an additional \$400 per month is paid unless part b) of the accrued benefit formula applies.</p> <p>PYRO: Accrued benefit on date of disability reduced 3% per year to reflect number of years preceding normal retirement date less payment of any other disability benefit to which employer has contributed.</p> <p>Baron: Accrued benefit using average compensation as of date of disability and expected accrual service at normal retirement date.</p>

Definition

Integration Level	<p>Baron: The monthly average of the Social Security taxable wage bases (in effect under Section 230 of the Social Security Act) for each year in the 35-year period ending with the year the employee attains Social Security retirement age.</p>
Optional Forms of Benefit Payments	<p>WCI: The optional forms of benefit payments with actuarial equivalent basis in brackets:</p> <ul style="list-style-type: none"> • Monthly annuity payable for life. • Automatic 50% spouse option without pop-up [87% + .4% multiplied by (beneficiary's age – participants age, up to 20)] • Automatic 50% spouse option with pop-up [88% + .4% multiplied by (beneficiary's age – participants age, up to 20)] • 75% spouse option [5% interest and UP-94 mortality table blended 50% for male and 50% for female, projected to 2002 using scale AA.] • 50% beneficiary option [87% + .4% multiplied by (beneficiary's age – participants age, up to 20)] • 100% beneficiary option [81% + .6% multiplied by (beneficiary's age – participants age, up to 20)]

	<p>PYRO: The optional forms of benefit payments are:</p> <ul style="list-style-type: none"> • Monthly annuity payable for life, or 5, 10, or 15 years certain and life • Monthly annuity payable as a survivorship life annuity with survivorship percentages of 50, 66 2/3, 75, or 100 • Single sum payment equal to the present value of the retirement benefit <p>The optional form conversion basis is 7.5% interest and the mortality described in Revenue Ruling 95-6 for payments other than lump sums. The optional form conversion basis uses the applicable interest rate and applicable mortality as set forth in Code Section 417 for lump sum payments. The applicable interest rate uses the second calendar month preceding the payment month.</p>
	<p>Baron: The optional forms of benefit payments are:</p> <ul style="list-style-type: none"> • Monthly annuity payable for 10 years certain and life. • Monthly annuity payable for 10 years certain and then either a 50%, 75%, or 100% survivorship annuity payable afterwards. • Single sum payment equal to the present value of the retirement benefit and post-retirement death benefit. <p>The optional form conversion basis is 5.0% interest and UP 1984 Mortality Table for payments other than lump sums. The optional form conversion basis uses the applicable interest rate and applicable mortality as set forth in Code Section 417 for lump sum payments. The applicable interest rate uses the second calendar month preceding the first day of the stability period which is the plan year.</p>

Changes in Principal Eligibility or Benefit Provisions

There have been no changes in principal eligibility or benefit provisions since the last valuation.

Significant Event

The enrolled actuary has not been made aware that any significant events have occurred during the year.

WCI STEEL/PYRO/BARON RETIREMENT PLAN
SCHEDULE H, LINE 4i – SCHEDULE OF ASSETS (HELD AT END OF YEAR)
December 31, 2016

Plan Sponsor:	<u>The Renco Group, Inc.</u>
Employer Identification Number:	<u>13-3370264</u>
Plan Number:	<u>003</u>

(a)	(b) Identity of Issuer Borrower or Similar Party	(c) Description of Investment	(d) Cost	(e) Current Value
	Money Market Deposit Account			
*	Wells Fargo Bank N.A.	Wells Fargo Collateralized Inst. Money Market Deposit Account	\$ 157,031	\$ 157,052
	Pooled Separate Account			
*	Principal Life Insurance	Money Market Separate Account	1,610,313	<u>1,610,313</u>
				<u>\$ 1,767,365</u>

* Indicates party-in-interest

See Independent Auditor's Report

Schedule SB, Line 32 - Schedule of Amortization Bases
WCI STEEL/PYRO/BARON RETIREMENT PLAN
EIN 13-3370264 Plan No. 003

Shortfall			
Date Created	Present Value	Remaining Years	Annual Charge
01/01/2016	\$2,343,639	7	\$387,224
01/01/2015	2,824,277	6	528,510
01/01/2014	4,644,506	5	1,011,124
01/01/2013	7,730,203	4	2,059,961
01/01/2012	(8,514,292)	3	(2,961,970)
01/01/2011	5,036,440	2	2,572,790
01/01/2010	6,224,200	1	6,224,200
Total	\$20,288,973		\$9,821,839

Last year's total shortfall annual charge was \$7,422,420.

The total annual charge used in calculating your Annual Cost cannot be less than zero.

Waiver charges represent your repayment to the plan for an Annual Charge that was not funded. A waiver only exists once the Internal Revenue Service has granted approval. See [Waivers](#) in Rules and Regulations.

Waiver			
Date Created	Present Value	Remaining Years	Annual Charge
N/A	N/A	N/A	N/A

There are no waiver bases for the current year.