

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: 1.5em; font-weight: bold;">2017</div> This Form is Open to Public Inspection
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Part I	Annual Report Identification Information
For calendar plan year 2017 or fiscal plan year beginning <u>02/01/2017</u> and ending <u>01/31/2018</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>IRON WORKERS DISTRICT COUNCIL OF SO OH & VICINITY PENSION TRUST</u>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%;">1b Three-digit plan number (PN) ▶</td> <td style="width: 20%; text-align: center;"><u>001</u></td> </tr> <tr> <td colspan="2">1c Effective date of plan <u>12/01/1962</u></td> </tr> </table>	1b Three-digit plan number (PN) ▶	<u>001</u>	1c Effective date of plan <u>12/01/1962</u>	
1b Three-digit plan number (PN) ▶	<u>001</u>				
1c Effective date of plan <u>12/01/1962</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>IRON WORKERS DISTRICT COUNCIL OF SOUTHERN OHIO & VICINITY</u> <u>1470 WORLDWIDE PL</u> <u>VANDALIA, OH 45377-1156</u>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>2b Employer Identification Number (EIN) <u>31-6038516</u></td> </tr> <tr> <td>2c Plan Sponsor's telephone number <u>937-454-1744</u></td> </tr> <tr> <td>2d Business code (see instructions) <u>238900</u></td> </tr> </table>	2b Employer Identification Number (EIN) <u>31-6038516</u>	2c Plan Sponsor's telephone number <u>937-454-1744</u>	2d Business code (see instructions) <u>238900</u>	
2b Employer Identification Number (EIN) <u>31-6038516</u>					
2c Plan Sponsor's telephone number <u>937-454-1744</u>					
2d Business code (see instructions) <u>238900</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.	11/01/2018	BRADLEY WINANS
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	Filed with authorized/valid electronic signature.	11/01/2018	CLINTON SUGGS
	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

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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 or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report: a Sponsor's name c Plan Name	4b EIN 4d PN
5 Total number of participants at the beginning of the plan year	5 8242
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) 3192
a(2) Total number of active participants at the end of the plan year	6a(2) 3179
b Retired or separated participants receiving benefits	6b 3275
c Other retired or separated participants entitled to future benefits	6c 1300
d Subtotal. Add lines 6a(2) , 6b , and 6c	6d 7754
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	6e 512
f Total. Add lines 6d and 6e	6f 8266
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 who terminated employment during the plan year with accrued benefits that were less than 100% vested	6h
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item).....	7 359

8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions:

1B

b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristics Codes in the instructions:

9a Plan funding arrangement (check all that apply) (1) ☐ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor	9b Plan benefit arrangement (check all that apply) (1) ☒ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor
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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)** ☒ 1 **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 2017 Form M-1 annual report. If the plan was not required to file the 2017 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) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Insurance Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500. ▶ Insurance companies are required to provide the information pursuant to ERISA section 103(a)(2).	OMB No. 1210-0110 2017 This Form is Open to Public Inspection
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For calendar plan year 2017 or fiscal plan year beginning 02/01/2017 and ending 01/31/2018	
A Name of plan IRON WORKERS DISTRICT COUNCIL OF SO OH & VICINITY PENSION TRUST	B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 IRON WORKERS DISTRICT COUNCIL OF SOUTHERN OHIO & VICINITY	D Employer Identification Number (EIN) 31-6038516

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 METROPOLITAN LIFE INSURANCE COMPANY

(b) EIN	(c) NAIC code	(d) Contract or identification number	(e) Approximate number of persons covered at end of policy or contract year	Policy or contract year	
				(f) From	(g) To
13-5581829	65978	1187096	6594	06/01/2016	05/31/2017

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 0	(b) Total amount of fees paid 0
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3 Persons receiving commissions and fees. (Complete as many entries as needed to report all persons).
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(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

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

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

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

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

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

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

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

Part II Investment and Annuity Contract Information

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

4 Current value of plan's interest under this contract in the general account at year end **4****5** Current value of plan's interest under this contract in separate accounts at year end **5****6** Contracts With Allocated Funds:**a** State the basis of premium rates ▶**b** Premiums paid to carrier **6b****c** Premiums due but unpaid at the end of the year **6c****d** If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, enter amount. **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****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)****d** Total of balance and additions (add lines **7b** and **7c(6)**). **7d****e** Deductions:(1) Disbursed from fund to pay benefits or purchase annuities during year **7e(1)**(2) Administration charge made by carrier **7e(2)**(3) Transferred to separate account **7e(3)**(4) Other (specify below) **7e(4)**▶
(5) Total deductions **7e(5)****f** Balance at the end of the current year (subtract line **7e(5)** from line **7d**). **7f**

Part III Welfare Benefit Contract Information

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

8 Benefit and contract type (check all applicable boxes)

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

9 Experience-rated contracts:

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

10 Nonexperience-rated contracts:

a Total premiums or subscription charges paid to carrier	10a	851903
b If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, other than reported in Part I, line 2 above, report amount.	10b	

Specify nature of costs.

Part IV Provision of Information

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

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

SCHEDULE MB (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6059 of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500 or 5500-SF.	OMB No. 1210-0110 2017 This Form is Open to Public Inspection
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For calendar plan year 2017 or fiscal plan year beginning 02/01/2017 and ending 01/31/2018

▶ **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 IRON WORKERS DISTRICT COUNCIL OF SO OH & VICINITY PENSION TRUST	B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF IRON WORKERS DISTRICT COUNCIL OF SOUTHERN OHIO & VICINITY	D Employer Identification Number (EIN) 31-6038516

E Type of plan: (1) ☒ Multiemployer Defined Benefit (2) ☐ Money Purchase (see instructions)

1a Enter the valuation date: Month 02 Day 01 Year 2017

b Assets

(1) Current value of assets	1b(1)	739862942
(2) Actuarial value of assets for funding standard account.....	1b(2)	772038621
c (1) Accrued liability for plan using immediate gain methods	1c(1)	1078556891
(2) Information for plans using spread gain methods:		
(a) Unfunded liability for methods with bases.....	1c(2)(a)	
(b) Accrued liability under entry age normal method.....	1c(2)(b)	
(c) Normal cost under entry age normal method.....	1c(2)(c)	
(3) Accrued liability under unit credit cost method.....	1c(3)	1078556891
d Information on current liabilities of the plan:		
(1) Amount excluded from current liability attributable to pre-participation service (see instructions).....	1d(1)	
(2) "RPA '94" information:		
(a) Current liability	1d(2)(a)	2011444121
(b) Expected increase in current liability due to benefits accruing during the plan year	1d(2)(b)	42027180
(c) Expected release from "RPA '94" current liability for the plan year	1d(2)(c)	82347755
(3) Expected plan disbursements for the plan year	1d(3)	83487755

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		10/18/2018
Signature of actuary		Date
DANIEL V. CINER, MAAA		17-05773
Type or print name of actuary		Most recent enrollment number
SEGAL CONSULTING		312-984-8500
Firm name		Telephone number (including area code)
101 NORTH WACKER DRIVE, CHICAGO, IL 60606-1724		
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 ☐

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2 Operational information as of beginning of this plan year:

a Current value of assets (see instructions)	2a	739862942
b "RPA '94" current liability/participant count breakdown:	(1) Number of participants	(2) Current liability
(1) For retired participants and beneficiaries receiving payment	3798	1092507994
(2) For terminated vested participants	1253	185933511
(3) For active participants:		
(a) Non-vested benefits		111911730
(b) Vested benefits		621090886
(c) Total active	3192	733002616
(4) Total	8243	2011444121
c If the percentage resulting from dividing line 2a by line 2b(4), column (2), is less than 70%, enter such percentage	2c	36.78%

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

(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees
08/01/2018	56564889	0			
Totals ▶			3(b)	56564889	3(c) 0

4 Information on plan status:

a Funded percentage for monitoring plan's status (line 1b(2) divided by line 1c(3))	4a	71.6%
b Enter code to indicate plan's status (see instructions for attachment of supporting evidence of plan's status). If code is "N," go to line 5	4b	E
c Is the plan making the scheduled progress under any applicable funding improvement or rehabilitation plan?		☒ Yes ☐ No
d If the plan is in critical status or critical and declining status, were any benefits reduced (see instructions)?		☐ Yes ☐ No
e If line d is "Yes," enter the reduction in liability resulting from the reduction in benefits (see instructions), measured as of the valuation date	4e	
f If the rehabilitation plan projects emergence from critical status or critical and declining status, enter the plan year in which it is projected to emerge. If the rehabilitation plan is based on forestalling possible insolvency, enter the plan year in which insolvency is expected and check here	4f	☐

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

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

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

6 Checklist of certain actuarial assumptions:

a Interest rate for "RPA '94" current liability.....	6a		3.05%
	Pre-retirement		Post-retirement
b Rates specified in insurance or annuity contracts	☐ Yes ☐ No ☒ N/A		☐ Yes ☐ No ☒ N/A
c Mortality table code for valuation purposes:			
(1) Males.....	6c(1)	A	A
(2) Females	6c(2)	A	A
d Valuation liability interest rate.....	6d	7.50%	7.50%
e Expense loading	6e	7.0% ☐ N/A	% ☒ N/A
f Salary scale	6f	% ☒ N/A	
g Estimated investment return on actuarial value of assets for year ending on the valuation date.....	6g	4.7%	
h Estimated investment return on current value of assets for year ending on the valuation date	6h	13.2%	

7 New amortization bases established in the current plan year:

(1) Type of base	(2) Initial balance	(3) Amortization Charge/Credit
1	28533157	3006923
4	19827776	2089520

8 Miscellaneous information:

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

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

a Prior year funding deficiency, if any.....	9a	0
b Employer's normal cost for plan year as of valuation date.....	9b	16694117
c Amortization charges as of valuation date:	Outstanding balance	
(1) All bases except funding waivers and certain bases for which the amortization period has been extended.....	9c(1)	504367204 69184375
(2) Funding waivers.....	9c(2)	
(3) Certain bases for which the amortization period has been extended	9c(3)	
d Interest as applicable on lines 9a, 9b, and 9c	9d	6440887
e Total charges. Add lines 9a through 9d.....	9e	92319379

Credits to funding standard account:

f Prior year credit balance, if any	9f	55332159
g Employer contributions. Total from column (b) of line 3	9g	56564889
	Outstanding balance	
h Amortization credits as of valuation date.....	9h	142516775
i Interest as applicable to end of plan year on lines 9f, 9g, and 9h	9i	8409187
j Full funding limitation (FFL) and credits:		
(1) ERISA FFL (accrued liability FFL)	9j(1)	441524242
(2) "RPA '94" override (90% current liability FFL)	9j(2)	1086084862
(3) FFL credit	9j(3)	0
k (1) Waived funding deficiency	9k(1)	0
(2) Other credits	9k(2)	0
l Total credits. Add lines 9f through 9i, 9j(3), 9k(1), and 9k(2).....	9l	148814125
m Credit balance: If line 9l is greater than line 9e, enter the difference	9m	56494746
n Funding deficiency: If line 9e is greater than line 9l, enter the difference.....	9n	
9o Current year's accumulated reconciliation account:		
(1) Due to waived funding deficiency accumulated prior to the 2017 plan year	9o(1)	0
(2) Due to amortization bases extended and amortized using the interest rate under section 6621(b) of the Code:		
(a) Reconciliation outstanding balance as of valuation date	9o(2)(a)	0
(b) Reconciliation amount (line 9c(3) balance minus line 9o(2)(a)).....	9o(2)(b)	0
(3) Total as of valuation date	9o(3)	0
10 Contribution necessary to avoid an accumulated funding deficiency. (See instructions.)	10	
11 Has a change been made in the actuarial assumptions for the current plan year? If "Yes," see instructions.	☒ Yes ☐ No	

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
		2017
		This Form is Open to Public Inspection.

For calendar plan year 2017 or fiscal plan year beginning 02/01/2017 and ending 01/31/2018		
A Name of plan IRON WORKERS DISTRICT COUNCIL OF SO OH & VICINITY PENSION TRUST	B Three-digit plan number (PN) ▶	001
C Plan sponsor's name as shown on line 2a of Form 5500 IRON WORKERS DISTRICT COUNCIL OF SOUTHERN OHIO & VICINITY	D Employer Identification Number (EIN) 31-6038516	

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	
ENTRUST- SPECIAL OPPORTUNITY FD III	375 PARK AVE., 24TH FLOOR NEW YORK, NY 10152

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation	
ROBERT W. BAIRD - BAIRD CORE PLUS	777 E. WISCONSIN AVE. MILWAUKEE, WI 53202

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation	
ENTRUST- SPECIAL OPPORTUNITY FD II	375 PARK AVE., 24TH FLOOR NEW YORK, NY 10152

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation	
MESIROW FINANCIAL CAPITAL PARTNERS	
26-4042914	

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

D.E. SHAW U.S. BROAD MARKET CORE

20-8581682

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

CORNERSTONE REAL ESTATE FUND VIII

27-0547156

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

ANGELO GORDON REALTY FUND IX, LP

245 PARK STREET, 26TH FLOOR
NEW YORK, NY 10167

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

NEW TOWER TRUST COMPANY - MEPT

52-6218800

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

GLOBAL INFRASTRUCTURE PARTNERS II-B

98-0672668

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

STATE STREET- RUSSELL 2000(R) INDEX

04-0025081

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

TRUST COMPANY OF TOLEDO

REAL ESTATE EQUITY TRUST
1630 TIMBERWOLF DRIVE
HOLLAND, OH 43528

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

SEI-THORNBURG GLOBAL EQUITY FUND

06-1271230

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

CHEVY CHASE - AFL-CIO EQUITY INDEX

815 CONNECTICUT AVENUE, NW, STE 320
WASHINGTON, DC 20006**(b)** Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

HIGHSTAR CAPITAL LP- IV LP & SUBSID

277 PARK AVENUE, 45TH FLOOR
NEW YORK, NY 10172**(b)** Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

STARWOOD CAP DISTRESSED OPPORTUNITY

591 WEST PUTNAM AVENUE
GREENWICH, CT 06830**(b)** Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

WARBURG PINCUS XI, LP

45-3414550

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

EXETER - M&N NON US EQUITY CIT

02-0476209

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

BOYD WATTERSON GSA FUND, LP

500 WEST MONROE STREET
SUITE 3850
CHICAGO, IL 60661**(b)** Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

STARWOOD INTERNATIONAL OPP FUND

591 WEST PUTNAM AVENUE
GREENWICH, CT 06830**(b)** Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

HIGHBRIDGE IRISH SPECIALTY LOAN FD

40 WEST 57TH STREET, FLOOR 32
NEW YORK, NY 10019

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

FIRST RESERVE GP XIII

ONE LAFAYETTE PLANCE
GREENWICH, CT 06830

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

ANGELO GORDON CAPITAL RECOVERY VIII

245 PARK STREET, 26TH FLOOR
NEW YORK, NY 10167

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

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

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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)

EXETER TRUST

02-0476209

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 51	NONE	403071	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

MANNING & NAPIER

16-0995736

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 51	NONE	357473	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

IWDC OF SW OH BENEFIT TRUST

31-6170926

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
14 50	RELATED FUND	332155	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)

SEGAL MARCO ADVISORS

13-2646110

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
27 50	NONE	285000	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

COOKE & BIELER, INC,

23-1392932

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 51	NONE	266880	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

AMALGATRUST

36-0721895

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 51	NONE	215884	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)

SEGAL COMPANY MIDWEST

13-1975125

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
11 16 50	NONE	154260	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

TRIBUTARY CAPITAL

20-1736988

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 51	NONE	154186	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

FIDELITY INVESTMENT ASSET MGMT

20-4659714

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 51	NONE	151216	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)

SOUTHERNSUN ASSET MANAGEMENT

27-2990431

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 51	NONE	147833	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

OVERMYER HALL ASSOCIATES

27-2481536

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
22 23 50	NONE	123232	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

CLARK, SCHAEFER, HACKETT & CO.

31-0800053

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
10 50	NONE	61306	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)

FAULKNER, HOFFMAN & PHILLIPS, LLP

34-1909706

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
29 50	NONE	47578	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

KEYBANK NA

31-0466650

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "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 19 50 59 99	NONE	30596	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

SUPERIOR PRINTING

714 FOUNTAIN CIR
URBANA, OH 43078

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
50 99	NONE	13434	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)

JP MORGAN INVESTMENT MANAGEMENT

320 PARK AVENUE, 15TH FLOOR
NEW YORK, NY 10022-6815

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 51	NONE	9990	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

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

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

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

Part I Service Provider Information (continued)

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
(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="border: 1px solid black; padding: 5px; font-size: 1.2em; font-weight: bold;">2017</div> This Form is Open to Public Inspection.
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For calendar plan year 2017 or fiscal plan year beginning 02/01/2017 and ending 01/31/2018

A Name of plan <u>IRON WORKERS DISTRICT COUNCIL OF SO OH & VICINITY PENSION TRUST</u>	B Three-digit plan number (PN) ►	<u>001</u>
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 <u>IRON WORKERS DISTRICT COUNCIL OF SOUTHERN OHIO & VICINITY</u>	D Employer Identification Number (EIN) <u>31-6038516</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>MULTIPLE-EMPLOYER PROPERTY TRUST</u>		
b Name of sponsor of entity listed in (a): <u>NEW TOWER TRUST COMPANY</u>		
c EIN-PN <u>52-6218800-001</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>51225436</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>AFL-CIO EQUITY INDEX FUND</u>		
b Name of sponsor of entity listed in (a): <u>CHEVY CHASE TRUST COMPANY</u>		
c EIN-PN <u>27-3350609-010</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>176340723</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>THORNBURG GLOBAL EQUITY FUND</u>		
b Name of sponsor of entity listed in (a): <u>SEI TRUST COMPANY</u>		
c EIN-PN <u>26-3668265-002</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>50201143</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>MANNING & NAPIER NON US EQUITY CIT</u>		
b Name of sponsor of entity listed in (a): <u>EXETER TRUST COMPANY</u>		
c EIN-PN <u>02-0476209-034</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>62423694</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>FIAM CORE PLUS CL A</u>		
b Name of sponsor of entity listed in (a): <u>FIDELITY INSTITUTIONAL ASSET MANAGEMENT</u>		
c EIN-PN <u>20-4659714-052</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>71278871</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>RUSSELL 2000 (R) IND NON-LENDING FD</u>		
b Name of sponsor of entity listed in (a): <u>STATE STREET BANK AND TRUST COMPANY</u>		
c EIN-PN <u>04-0025081-013</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>26368436</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)

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>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor 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.	OMB No. 1210-0110 2017 This Form is Open to Public Inspection
For calendar plan year 2017 or fiscal plan year beginning <u>02/01/2017</u> and ending <u>01/31/2018</u>		
A Name of plan <u>IRON WORKERS DISTRICT COUNCIL OF SO OH & VICINITY PENSION TRUST</u>	B Three-digit plan number (PN) ►	<u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>IRON WORKERS DISTRICT COUNCIL OF SOUTHERN OHIO & VICINITY</u>	D Employer Identification Number (EIN) <u>31-6038516</u>	

Part I	Asset and Liability Statement		(a) Beginning of Year	(b) End of Year
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	Total noninterest-bearing cash	1a		
b	Receivables (less allowance for doubtful accounts):			
	(1) Employer contributions	1b(1)	5254335	4694771
	(2) Participant contributions	1b(2)		
	(3) Other.....	1b(3)	3557778	1907654
c	General investments:			
	(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	95763301	55186466
	(2) U.S. Government securities.....	1c(2)	24708891	0
	(3) Corporate debt instruments (other than employer securities):			
	(A) Preferred	1c(3)(A)		
	(B) All other.....	1c(3)(B)	45833040	9680431
	(4) Corporate stocks (other than employer securities):			
	(A) Preferred	1c(4)(A)		
	(B) Common	1c(4)(B)	172780142	191037834
	(5) Partnership/joint venture interests	1c(5)	93391781	112934001
	(6) Real estate (other than employer real property)	1c(6)		
	(7) Loans (other than to participants)	1c(7)	0	
	(8) Participant loans	1c(8)		
	(9) Value of interest in common/collective trusts.....	1c(9)	344421908	437838303
	(10) Value of interest in pooled separate accounts.....	1c(10)		
	(11) Value of interest in master trust investment accounts	1c(11)		
	(12) Value of interest in 103-12 investment entities	1c(12)		
	(13) Value of interest in registered investment companies (e.g., mutual funds).....	1c(13)	28114241	69190630
	(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)		
	(15) Other	1c(15)		

1d Employer-related investments:		(a) Beginning of Year	(b) End of Year
(1) Employer securities	1d(1)		
(2) Employer real property	1d(2)		
e Buildings and other property used in plan operation	1e	676390	640913
f Total assets (add all amounts in lines 1a through 1e)	1f	814501807	883111003

Liabilities

g Benefit claims payable	1g		
h Operating payables	1h	115103	200179
i Acquisition indebtedness	1i		
j Other liabilities	1j	74523762	42751383
k Total liabilities (add all amounts in lines 1g through 1j)	1k	74638865	42951562

Net Assets

l Net assets (subtract line 1k from line 1f)	1l	739862942	840159441
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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)	56564889	
(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)		56564889
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	206611	
(B) U.S. Government securities	2b(1)(B)	526163	
(C) Corporate debt instruments	2b(1)(C)	650107	
(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)		1382881
(2) Dividends: (A) Preferred stock	2b(2)(A)		
(B) Common stock	2b(2)(B)	2482918	
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	1094811	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		3577729
(3) Rents	2b(3)		91439
(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)	307857273	
(B) Aggregate carrying amount (see instructions)	2b(4)(B)	285561011	
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)		22296262
(5) Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)		
(B) Other	2b(5)(B)	19285075	
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		19285075

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		67204653
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds).....	2b(10)		-178422
c Other income	2c		15432325
d Total income. Add all income amounts in column (b) and enter total.....	2d		185656831

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers.....	2e(1)	82304434	
(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)		82304434
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)	264081	
(2) Contract administrator fees	2i(2)		
(3) Investment advisory and management fees	2i(3)	2022674	
(4) Other	2i(4)	769143	
(5) Total administrative expenses. Add lines 2i(1) through (4).....	2i(5)		3055898
j Total expenses. Add all expense amounts in column (b) and enter total.....	2j		85360332

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		100296499
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: CLARK, SCHAEFER, HACKETT & CO.

(2) EIN: 31-0800053

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

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

Part IV Compliance Questions

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

During the plan year:

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

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

	Yes	No	Amount
4a		X	
4b		X	

	Yes	No	Amount
c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)		X	
4c		X	
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)		X	
4d		X	
e Was this plan covered by a fidelity bond?	X		500000
4e	X		500000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		X	
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?		X	
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?		X	
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.)	X		
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.)	X		
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?		X	
4k		X	
l Has the plan failed to provide any benefit when due under the plan?		X	
4l		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)			
4m			
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.			
4n			

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

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 4106635. (See instructions.)

<div>SCHEDULE R (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation</div>	<div>Retirement Plan Information</div> <div>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).</div> <div>▶ File as an attachment to Form 5500.</div>	<div>OMB No. 1210-0110</div> <div>2017</div> <div>This Form is Open to Public Inspection.</div>
For calendar plan year 2017 or fiscal plan year beginning 02/01/2017 and ending 01/31/2018		
A Name of plan IRON WORKERS DISTRICT COUNCIL OF SO OH & VICINITY PENSION TRUST		B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 IRON WORKERS DISTRICT COUNCIL OF SOUTHERN OHIO & VICINITY		D Employer Identification Number (EIN) 31-6038516
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 0
2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits): EIN(s): Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.		
3 Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year		3 0
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) 2017 v. 170203		

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: 60% Investment-Grade Debt: 18% High-Yield Debt: 8% Real Estate: 9% Other: 5%

- 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):

INDEPENDENT AUDITORS' REPORT

Board of Trustees
Iron Workers District Council of Southern Ohio & Vicinity Pension Trust
Dayton, Ohio

Report on the Financial Statements

We have audited the accompanying financial statements of Iron Workers District Council of Southern Ohio & Vicinity Pension Trust, which comprise the statements of net assets available for benefits as of January 31, 2018 and 2017, the related statements of changes in net assets available for benefits for the years then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

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

Auditors' Responsibility

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

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

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

Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial status of the Iron Workers District Council of Southern Ohio & Vicinity Pension Trust as of January 31, 2018 and 2017, and the changes in its financial status for the years then ended in accordance with accounting principles generally accepted in the United States of America.

Report on Supplemental Information

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

Clark, Schaefer, Hackett & Co.

Dayton, Ohio
September 26, 2018

Iron Workers District Council of Southern Ohio & Vicinity Pension Trust

Financial Statements and Supplemental Schedules

January 31, 2018 and 2017

with Independent Auditors' Report

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INDEPENDENT AUDITORS' REPORT

Board of Trustees
Iron Workers District Council of Southern Ohio & Vicinity Pension Trust
Dayton, Ohio

Report on the Financial Statements

We have audited the accompanying financial statements of Iron Workers District Council of Southern Ohio & Vicinity Pension Trust, which comprise the statements of net assets available for benefits as of January 31, 2018 and 2017, the related statements of changes in net assets available for benefits for the years then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

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

Auditors' Responsibility

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

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

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

Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial status of the Iron Workers District Council of Southern Ohio & Vicinity Pension Trust as of January 31, 2018 and 2017, and the changes in its financial status for the years then ended in accordance with accounting principles generally accepted in the United States of America.

Report on Supplemental Information

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

Clark, Schaefer, Hackett & Co.

Dayton, Ohio
September 26, 2018

Iron Workers District Council of Southern Ohio and Vicinity Pension Trust
Statements of Net Assets Available for Benefits
January 31, 2018 and 2017

	<u>2018</u>	<u>2017</u>
Assets		
Investments at fair value:		
Money market funds	\$ 14,590,149	37,824,544
Repurchase agreements	29,500,000	48,000,000
Corporate obligations	9,680,431	42,828,442
U.S. Government securities	-	8,586,525
Equity securities	150,881,814	121,803,386
Common/collective trusts	437,838,303	342,995,012
Partnership/joint venture interests	112,934,001	94,818,677
Registered investment companies	69,190,630	28,114,241
Securities pledged to creditors:		
Corporate obligations	-	3,004,598
U.S. Government securities	-	16,122,366
Equity securities	40,156,020	50,976,756
Total investments	864,771,348	795,074,547
Cash	11,096,317	9,938,757
Accrued interest receivable	51,720	553,566
Employer contributions receivable	4,694,771	5,254,335
Accounts receivable from related funds:		
Benefit Trust	-	58,247
Annuity Trust	-	92,954
Due from broker for securities sold	420,172	1,440,982
Prepaid retiree insurance and tax withholdings	1,435,762	1,412,029
Property:		
Land	225,000	225,000
Building, at cost less accumulated depreciation of \$954,070 and \$918,593	415,913	451,390
Total assets	883,111,003	814,501,807
Liabilities		
Accounts payable	200,179	115,103
Accounts payable to related funds:		
Benefit Trust	540,886	-
Annuity Trust	275,459	-
IMPACT Fund	122,824	142,662
Fringe fund escrow	37,939	10,358
Obligation to return securities lending collateral	41,472,848	71,910,832
Due to broker for securities purchased	301,427	2,459,910
Total liabilities	42,951,562	74,638,865
Net assets available for benefits	\$ 840,159,441	739,862,942

See accompanying notes to financial statements.

Iron Workers District Council of Southern Ohio and Vicinity Pension Trust
Statements of Changes in Net Assets Available for Benefits
Years Ended January 31, 2018 and 2017

	<u>2018</u>	<u>2017</u>
Investment income:		
Net investment earnings	129,000,503	89,917,715
Rental income from related plans	<u>91,439</u>	<u>93,977</u>
	129,091,942	90,011,692
Investment expenses	<u>(2,022,674)</u>	<u>(1,897,819)</u>
Net investment income	127,069,268	88,113,873
Employer contributions, net of reciprocity	<u>56,564,889</u>	<u>54,920,381</u>
	<u>183,634,157</u>	<u>143,034,254</u>
Benefits paid	82,304,434	81,244,143
Administrative expenses	701,069	666,029
Administrative expenses allocated from related plans	<u>332,155</u>	<u>465,297</u>
	<u>83,337,658</u>	<u>82,375,469</u>
Net increase	100,296,499	60,658,785
Net assets available for benefits:		
Beginning of year	<u>739,862,942</u>	<u>679,204,157</u>
End of year	<u><u>\$ 840,159,441</u></u>	<u><u>739,862,942</u></u>

See accompanying notes to financial statements.

1. DESCRIPTION OF THE PLAN:

The following brief description of the Iron Workers District Council of Southern Ohio & Vicinity Pension Trust (the "Plan") is provided for general information purposes only. Participants should refer to the plan document for a more complete description of the plan's provisions:

General

The Plan is a defined benefit pension plan covering employees of those employers who have agreed to make the required employer contributions to the Plan per collective bargaining agreements with various local Iron Workers unions. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA).

Contributions

In accordance with the collective bargaining agreements, employers are required to make monthly contributions at a fixed dollar amount for each hour worked by participants. No participant contributions to the Plan are permitted.

Pension benefits

Pension benefits are determined based on the number of pension credits earned multiplied by fixed dollar amounts per specific year of service. Participants with five or more pension credits are entitled to full pension benefits beginning at a normal retirement age of 62. The Plan permits early retirement beginning at age 55 for employees with at least 15 pension credits. However, the pension benefit is reduced based upon the number of years the retirement date precedes the participant's normal retirement date. The Plan also provides a total and permanent disability pension for participants with five or more pension credits. Participants generally receive their pension benefits with a reduction reflecting a joint and survivor annuity. If joint and survivor benefits are rejected by the participant and spouse, or if not married, a higher monthly benefit is payable for the life of the employee. In the event a spouse predeceases the pensioner, the monthly benefit shall be adjusted to the life annuity as through the husband-and-wife pension had not been in effect.

A participant earns one one-hundredth of one pension credit for each 15 hours in covered employment, up to one pension credit in any year, plus the pension credit earned, if any, from the hour bank. Hours worked in excess of 2,000 hours per calendar year are added to the hour bank.

Death

Prior to January 1, 2018, the Plan provided pre-retirement death benefits. The death benefit was either paid as a lump sum equal to 100% of the contributions received on behalf of the employee or, if sufficient pension credits existed, over a 60-month period at an amount the employee would have been entitled to if they retired the day before death.

Vesting

Participants earn one year of vesting service for each calendar year in which the participant works 1,000 in covered employment. Participants are fully vested for benefits after completing five years of vesting service.

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

The following are the significant accounting policies of the Plan:

Basis of accounting

The financial statements of the Plan are prepared using the accrual basis of accounting.

Investment valuation and income recognition

The Plan's investments are stated at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. See Note 5 for discussion of fair value measurements.

Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded on the accrual basis. Dividends are recorded on the ex-dividend date. Net investment earnings include interest, dividends and the Plan's gains and losses on investments bought and sold, as well as held during the year.

Benefit payments

Benefits are recorded when paid.

Property

Property is recorded at cost. Depreciation is provided using the straight-line method over the estimated useful life of the building.

Related organizations

The Plan operates jointly with the Benefit Trust and Annuity Trust sponsored by the Iron Workers District Council of Southern Ohio & Vicinity. Transactions between the Plans are as follows:

The Benefit Trust and Annuity Trust lease office space from the Plan. Rent is determined annually based on an allocation of square footage. Lease income received from the related Plans was \$91,439 and \$93,977 for the years ended January 31, 2018 and 2017, respectively.

Certain administrative expenses benefiting all three related plans are paid by the Benefit Trust. Such joint costs are allocated to each plan based on factors, including personnel time, contribution levels, etc. The total expenses allocated to the Plan related to these joint administrative costs were \$384,155 and \$465,297 for the years ended January 31, 2018 and 2017, respectively. In addition, during 2018, the Plan received reimbursements totaling \$52,000 from the related Benefit and Annuity Trusts for investment management fees that were previously paid by the Plan in error.

On a monthly basis, employers remit one contribution report and payment to the Plan and related Plans rather than remitting separate contribution reports to the three Plans. These contributions are initially deposited into the Pension Trust and subsequently transferred to the appropriate Plan after processing. Amounts held by the Pension Trust related to the Benefit Trust and Annuity Trust are classified as part of amounts due to related plans until the balances are transferred.

At January 31, 2018, \$540,866 and \$275,459 was due to the Benefit and Annuity Trusts, respectively. At January 31, 2017, \$58,247 and \$92,954 was due from the related Benefit and Annuity Trusts, respectively. These balances are the result of contributions pending transfer, rent charges, fiduciary insurance expenses allocated between the three related plans and the true-up of joint costs allocated from the Benefit Trust.

The Plan collects contributions for the national IMPACT Fund. These contributions are accumulated as received from contractors and remitted to the IMPACT Fund monthly. As the Plan is serving as a collection agent, the receipts and disbursements are not reflected in the statements of changes in net assets available for benefits. At January 31, 2018 and 2017, the Plan had \$122,824 and \$142,662, respectively, of contributions pending transfer to the national IMPACT fund.

Estimates

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

Subsequent events

The Plan has evaluated subsequent events through the report date, the date on which the financial statements were available to be issued.

3. TAX STATUS:

The Plan has received a favorable letter of determination from the Internal Revenue Service dated January 15, 2016 indicating that on the basis of the facts supplied, the Plan as then designed, was in compliance with the applicable requirements of the Internal Revenue Code. The Plan has been amended since receiving the determination letter. However, the plan administrator and the Plan's tax counsel believe that the Plan is currently designed and being operated in compliance with Section 401(a) of the Internal Revenue Code. Therefore, they believe that the Plan was qualified and the related trust was tax-exempt as of the financial statement date.

4. INVESTMENTS:

The Plan's net investment earnings were as follows:

	<u>2018</u>	<u>2017</u>
Interest from cash, money market, and debt investments	\$ 1,382,881	2,058,773
Dividends:		
Equity investments	2,482,918	2,329,062
Registered investment companies	1,094,811	835,278
	<u>3,577,729</u>	<u>3,164,340</u>
Unrealized appreciation (depreciation) from debt and equity investments held at year end:		
U.S. Government securities	386,885	(427,801)
Corporate obligations	(431,959)	(304,766)
Securities lending transactions	215,733	(56,505)
Equity securities	19,114,416	18,325,150
	<u>19,285,075</u>	<u>17,536,078</u>
Realized appreciation from debt and equity investments sold during the year	22,296,262	11,323,068
Interest from mortgage investments	-	17
Net earnings (losses) from common/collective trust funds	67,204,653	38,708,691
Net appreciation (depreciation) from registered investment companies	(178,422)	288,065
Net earnings from partnerships/joint ventures	15,432,325	16,838,683
Net investment earnings (losses)	<u>\$ 129,000,503</u>	<u>89,917,715</u>

The Plan conducts securities lending activities, which are classified as secured borrowings. The Plan typically requires collateral equal to 102% of the fair value of the securities on loan, which is invested by Key Bank in money market funds, certain debt instruments and repurchase agreements. Collateral received from borrowers is recognized as a liability equal to the fair value on the date of receipt until the securities lending arrangement is settled and the collateral is returned to the borrower. The fair value and cost of collateral investments at January 31, 2018 was \$39,476,684 and \$41,472,848, respectively. The fair value and cost of collateral investments at January 31, 2017 was \$69,698,934 and \$71,910,831, respectively. The Plan recorded total gains (losses) of \$215,733 and \$(56,505) for the years ended January 31, 2018 and 2017, respectively, related to collateral received from borrowers. The fair value of securities on loan at January 31, 2018 and 2017 was as follows:

	<u>2018</u>	<u>2017</u>
Corporate obligations	\$ -	3,004,598
U.S. Government securities	-	16,122,366
Equity securities	<u>40,156,020</u>	<u>50,976,756</u>
Total securities loaned	<u><u>\$ 40,156,020</u></u>	<u><u>70,103,720</u></u>

5. FAIR VALUE MEASUREMENTS:

The framework for measuring fair value provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1) and the lowest priority to unobservable inputs (Level 3). The three levels of the fair value hierarchy are described as follows:

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

Level 2: Inputs to the valuation methodology include:

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

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

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

Following is a description of the valuation methodologies used for assets measured at fair value:

Money market funds: Valued at cost, which approximates fair value.

Repurchase agreements: Valued at cost which approximates fair value.

Corporate obligations and other fixed income obligations: Valued using pricing models maximizing the use of observable inputs for similar securities. This includes basing value on yields currently available on comparable securities of issuers with similar credit ratings.

U.S. Government securities: Valued using pricing models maximizing the use of observable inputs for similar securities.

Equity securities: Valued at the closing price reported on the active market on which the individual securities are traded.

Common/collective trusts: Valued at the net asset value (NAV) of units of the collective trusts. The NAV, as provided by the custodian, is used as a practical expedient to estimate fair value. The NAV is based on the fair value of the underlying investments held by the fund less its liabilities. This practical expedient would not be used if it is determined to be probable that the fund will sell the investment for an amount different from the reported NAV.

Partnership/joint venture interests: Valued at the net asset value per share or unit. The NAV, as provided by the investment manager, is used as a practical expedient to estimate fair value. The NAV is based on the fair value of the underlying investments held by the fund less its liabilities. This practical expedient would not be used if it is determined to be probable that the partnership will sell the investment for an amount different from the reported NAV.

Registered investment companies: Valued at the daily closing prices as reported by the funds. The funds held by the Plan are registered with the Securities and Exchange Commission. The funds are required to publish their daily net asset value and to transact at that price. The funds held by the Plan are deemed to be actively traded.

The carrying amounts of financial instruments including cash, contributions receivable, and accounts payable approximated fair value as of January 31, 2018 and 2017, because of the relatively short maturity of these instruments.

There have been no changes in the methodologies used at January 31, 2018 and 2017.

The methods described above may produce a fair value calculation that may not be indicative of net realizable value or reflective of future fair values. Furthermore, while the Plan's Trustees believe that the valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair value of certain financial instruments could result in a different fair value measurement at the reporting date. Investment securities, in general, are exposed to various risks, such as interest rate, credit, and overall market volatility. Due to the level of risk associated with certain investment securities, it is reasonably possible that changes in the fair values of investment securities will occur in the near term and, that such changes could materially affect the amounts reported in the statements of net assets available for benefits.

Iron Workers District Council of Southern Ohio and Vicinity Pension Trust
Notes to Financial Statements
Years Ended January 31, 2018 and 2017

The following table sets forth by level, within the fair value hierarchy, the Plan's assets at fair value as of January 31, 2018:

Description	Level 1	Level 2	Level 3	Assets at NAV	Total
Money market funds	\$ 14,590,149	-	-	-	14,590,149
Repurchase agreements	29,500,000	-	-	-	29,500,000
Corporate obligations	-	7,798,687	1,881,744	-	9,680,431
Equity securities	191,037,834	-	-	-	191,037,834
Common/collective trusts	-	-	-	437,838,303	437,838,303
Partnership/ joint venture interests	-	-	-	112,934,001	112,934,001
Registered investment companies	69,190,630	-	-	-	69,190,630
	<u>\$ 304,318,613</u>	<u>7,798,687</u>	<u>1,881,744</u>	<u>550,772,304</u>	<u>864,771,348</u>

The following table sets forth by level, within the fair value hierarchy, the Plan's assets at fair value as of January 31, 2017:

Description	Level 1	Level 2	Level 3	Assets at NAV	Total
Money market funds	\$ 37,824,544	-	-	-	37,824,544
Repurchase agreements	48,000,000	-	-	-	48,000,000
Corporate obligations	-	43,651,736	2,181,304	-	45,833,040
U.S. Government obligations	-	24,708,891	-	-	24,708,891
Equity securities	172,780,142	-	-	-	172,780,142
Common/collective trusts	-	-	-	342,995,012	342,995,012
Partnership/ joint venture interests	-	-	-	94,818,677	94,818,677
Registered investment companies	28,114,241	-	-	-	28,114,241
	<u>\$ 286,718,927</u>	<u>68,360,627</u>	<u>2,181,304</u>	<u>437,813,689</u>	<u>795,074,547</u>

Iron Workers District Council of Southern Ohio and Vicinity Pension Trust
Notes to Financial Statements
Years Ended January 31, 2018 and 2017

The table below sets forth a summary of changes in the fair value of the Plan's Level 3 assets for the years ended January 31, 2018 and 2017:

	Mortgage notes receivable	Corporate obligations	Total
Balance, January 31, 2016	\$ 1,131	3,315,694	3,316,825
Realized gains	-	(47,457)	(47,457)
Unrealized gains	-	(9,048)	(9,048)
Sales/ principle	(1,131)	(1,077,885)	(1,079,016)
Balance, January 31, 2017	-	2,181,304	2,181,304
Realized gains	-	15,731	15,731
Unrealized losses	-	215,733	215,733
Sales/ principle	-	(531,024)	(531,024)
Balance, January 31, 2018	\$ -	1,881,744	1,881,744

Iron Workers District Council of Southern Ohio and Vicinity Pension Trust
Notes to Financial Statements
Years Ended January 31, 2018 and 2017

The table below sets forth the fair value and redemption frequency for those assets whose fair value is estimated using the net asset value per share as of January 31, 2018:

Investment	Fair Value	Unfunded Commitment	Redemption Frequency	Redemption Notice Period
Common/Collective trusts:				
Multi-Employer Property Trust (a)	\$ 51,225,436	-	Quarterly	90 Days
FIAM Core Plus CL A (a)	71,278,871	-	Immediate	30 Days
Manning & Napier Non US Equity Collective Inv't Tr (a)	62,423,694	-	Immediate	None
State Street Russell 2000(R) Index (a)	26,368,436	-	Immediate	None
Thornburg Global Equity Fund (a)	50,201,143	-	Immediate	None
AFL-CIO Equity Index Fund (a)	176,340,723	-	Immediate	None
	<u>437,838,303</u>			
Partnerships/joint ventures:				
D.E. Shaw US Broad Market Core Alpha Extension Fund (b)	54,788,722	-	Limited	30 Days
Mesirow Financial Capital Partners X, L.P. (c)	1,831,945	120,000	Limited	Not applicable
Highstar Capital IV, L.P. & Subsidiaries (d)	4,865,408	97,436	Limited	Not applicable
Starwood Distressed Opportunity Fund IX - 1 U.S., L.P. (e)	1,815,705	1,620,000	Limited	Not applicable
Starwood International Opportunity Fund - 1 International, L.P. (e)	484,953	2,652,739	Limited	Not applicable
Warburg Pincus XI, LP (f)	5,571,375	126,000	Limited	Not applicable
Highbridge Irish Specialty Loan Fund III plc (g)	2,720,818	543,188	Limited	Not applicable
First Reserve Fund XIII, L.P. (h)	2,073,808	2,642,531	Limited	Not applicable
EnTrust Special Opportunities Fund II Ltd (i)	1,564,465	402,460	Limited	Not applicable
EnTrust Special Opportunities Fund III Ltd Class A (i)	8,331,200	71,666	Limited	Not applicable
Global Infrastructure Partners II B - Feeder Fund, L.P. (j)	4,275,197	500,650	Limited	Not applicable
Cornerstone Real Estate Fund VIII, LP (k)	313,825	385,226	Limited	Not applicable
Angelo Gordon Capital Recovery VIII Holdings, LP (l)	1,612,354	1,324,637	Limited	Not applicable
Angelo Gordon Realty Fund IX, LP(m)	5,274,250	2,982,000	Limited	Not applicable
Real Estate Equity Trust (n)	336,544	-	Limited	Not applicable
Boyd Watterson GSA Fund, LP and Subsidiary (o)	17,073,432	-	Limited	Not applicable
	<u>112,934,001</u>			
	<u>\$ 550,772,304</u>			

Iron Workers District Council of Southern Ohio and Vicinity Pension Trust
Notes to Financial Statements
Years Ended January 31, 2018 and 2017

The table below sets forth the fair value and redemption frequency for those assets whose fair value is estimated using the net asset value per share as of January 31, 2017:

Investment	Fair Value	Unfunded Commitment	Redemption Frequency	Redemption Notice Period
Common/Collective trusts:				
Multi-Employer Property Trust (a)	\$ 48,539,607	-	Quarterly	90 Days
BUILD Fund of Indiana (a)	816,202	-	Limited	Not applicable
FIAM Core Plus CL A (a)	63,912,008	-	Immediate	30 Days
Manning & Napier Non US Equity Collective Inv't Tr (a)	49,433,005	-	Immediate	None
Thornburg Global Equity Fund (a)	40,745,965	-	Immediate	None
AFL-CIO Equity Index Fund (a)	139,548,225	-	Immediate	None
	<u>342,995,012</u>			
Partnerships/joint ventures:				
D.E. Shaw US Broad Market Core Alpha Extension Fund (b)	42,976,804	-	Limited	30 Days
Mesirow Financial Capital Partners X, L.P. (c)	3,196,944	120,000	Limited	Not applicable
Highstar Capital IV, L.P. & Subsidiaries (d)	5,270,682	505,806	Limited	Not applicable
Starwood Distressed Opportunity Fund IX - 1 U.S., L.P. (e)	2,285,013	1,620,000	Limited	Not applicable
Starwood International Opportunity Fund - 1 International, L.P. (e)	655,925	2,652,739	Limited	Not applicable
Warburg Pincus XI, LP (f)	5,930,804	702,000	Limited	Not applicable
Highbridge Irish Specialty Loan Fund III plc (g)	3,671,033	747,499	Limited	Not applicable
First Reserve Fund XIII, L.P. (h)	1,713,921	3,797,642	Limited	Not applicable
EnTrust Special Opportunities Fund II Ltd (i)	2,323,437	402,460	Limited	Not applicable
EnTrust Special Opportunities Fund III Ltd Class A (i)	4,593,779	3,488,621	Limited	Not applicable
Global Infrastructure Partners II B - Feeder Fund, L.P. (j)	3,787,593	644,313	Limited	Not applicable
Cornerstone Real Estate Fund VIII, LP (k)	708,831	385,226	Limited	Not applicable
Angelo Gordon Capital Recovery VIII Holdings, LP (l)	1,607,836	1,427,217	Limited	Not applicable
Angelo Gordon Realty Fund IX, LP(m)	3,642,926	4,068,750	Limited	Not applicable
Real Estate Equity Trust (n)	1,426,896	-	Limited	Not applicable
Boyd Watterson GSA Fund, LP and Subsidiary (o)	11,026,253	-	Limited	Not applicable
	<u>94,818,677</u>			
	<u>\$ 437,813,689</u>			

- (a) Direct filing entity.
- (b) The D.E. Shaw US Broad Market Core Alpha Extension Fund was established to maximize the risk-adjusted performance and minimize the correlation of excess returns to particular asset classes, style risk factors, or other macroeconomic variables. The fund invests solely in D.E. Shaw US Broad Market Core Alpha Extension Portfolios, L.L.C, the objective of which is to earn a return comparable to that of the Russell 1000 Index. The Plan can sell its investment in this fund with prior written consent for the transfer of ownership from the fund's managing member. The ability to transfer ownership is at the sole discretion of the managing member.
- (c) Mesirow Financial Capital Partners X, L.P. specializes in buyouts, expansion, and growth capital investments, seeks to invest between \$10 million and \$15 million, and prefers to co-invest along with other funds of the sponsor. The Plan's investment in the fund is subject to lock-up until the end of the fund term, which is 10 years after the initial closing date in June 2011. The fund term is subject to three 1-year extensions to provide for orderly liquidation of remaining assets. The investment is deemed to be illiquid until the expiration of the fund term.
- (d) Highstar Capital IV, LP & Subsidiaries was established to generate both current income and long-term capital appreciation for the limited partners of the fund by investing in infrastructure assets and businesses, including assets and businesses in energy, transportation, and environmental services sectors. The Plan's investment in the fund is subject to lock-up until the end of the fund term, which is 10 years after the final admission date, May 31, 2012, unless terminated earlier, or extended beyond that date, but the general partner for up to one year, or further extended by the general partner for up to three successive periods of one year each, provided that in no event the term of the fund be extended beyond the fifteenth anniversary of the initial closing. The fund term is subject to three 1-year extensions to provide for orderly liquidation of remaining assets. The investment is deemed to be illiquid until the expiration of the fund term.
- (e) Starwood Distressed Opportunity Fund IX and Starwood International Opportunity Fund -1 International, L.P. consists of multiple partnerships organized to generate returns by making opportunistic real estate equity and debt investments in office properties, retail centers, zoned residential land opportunities and other real estate assets located in the United States and abroad. Areas of investment focus include individual properties, as well as property portfolios. The partnerships may also make equity and debt investments in real estate related businesses, as well as in select development opportunities. The ability to transfer ownership or withdraw from the partnerships is restricted.
- (f) Warburg Pincus XI, LP was organized in 2012 for the purpose of making private equity and related investments for a 12 year partnership life unless its term is extended or dissolved earlier. The entity consists of multiple partnerships and related companies which invest in portfolio companies in various geographic regions throughout the world. The partnership has no obligation to redeem or liquidate any limited partnership interest prior to the completion of the winding-up of the entity.
- (g) Highbridge Irish Specialty Loan Fund III plc will continue until 2019, unless terminated earlier or extended beyond that date by the general partner and/or advisory committee or majority in interest. The objective of the fund is to generate both current income and long-term capital appreciation by investing primarily in senior debt. The Company will also invest some of its capital in second and third lien secured loans and other corporate instruments.
- (h) First Reserve Fund XIII, L.P. was established during 2014 to make investments in private entities operating in the energy sector. The Plan's investment is considered illiquid until the expiration of the fund term.

- (i) EnTrust Special Opportunities Fund II Ltd and EnTrust Special Opportunities Fund III Ltd Class A are funds-of-hedge-funds. The Plan's investment in the funds is subject to lock-up, which is determined based upon the lock-up periods of the underlying investments. The investment is deemed to be illiquid until the expiration of the fund term.
- (j) Global Infrastructure Partners II B – Feeder Fund, L.P. was organized to invest in portfolio companies that, own, operate, develop, manage or support infrastructure assets through Global Infrastructure Partners II-B, L.P. and GIP II-B Eagle AIV 1, L.P. The Partnership will continue until GIP II-B is dissolved. The investment is deemed to be illiquid until the expiration of the fund term.
- (k) Cornerstone Real Estate Fund VIII, LP was established to acquire investments in real estate assets. The Plan's investment in the fund is subject to lock-up until the end of the fund term, which is 7 years after the initial closing date in March 2011. The fund term is subject to two 1-year extensions to provide for orderly liquidation of remaining assets. The investment is deemed to be illiquid until the expiration of the fund term.
- (l) Angelo Gordon Capital Recovery VIII Holdings, L.P. is a Cayman Islands exempted limited partnership. The fund invests solely in AG Capital Recovery Partners VIII, L.P., a Delaware limited partnership established to primarily invest in distressed issuers. The term of the fund shall continue until the dissolution of the partnership or unless the fund is sooner dissolved at the discretion of the partnership agreement of the general partner of the fund, AG Capital Recovery VIII L.L.C. The ability to transfer ownership from the fund is restricted.
- (m) Angelo Gordon Realty Fund IX, L.P. holds AG Realty Fund, IX L.P. and AG Realty Fund IIX (A), L.P.; both are Delaware limited partnerships. The fund has a general partner, AGR IX LLC. Angelo Gordon Realty Fund IX, L.P.'s principal objective is capital appreciation primarily through investments in distressed real estate assets and sub-performing and non-performing mortgages. The term of the fund shall continue eight years from the management fee start date on January 31, 2015 unless the fund's general partner extends the term for one or two additional one-year periods. The ability to transfer ownership from the fund is restricted.
- (n) Real Estate Equity Trust I was established to acquire equity investments in new real estate development projects in the Greater Cincinnati, Ohio area. The entity is structured as a common/collective trust fund, but does not file as a direct filing entity. The underlying assets include a limited partnership investment. The beneficiaries of the Trust have elected to liquidate the investments of the Trust in an orderly and prudent manner. Proceeds from the liquidation will be paid to the beneficiaries as the underlying assets are disposed. The amount and timing of the ultimate liquidation of the Trust's assets have not been estimated.
- (o) Boyd Watterson GSA Fund, L.P. was formed to operate as a perpetual life, open-end, commingled collective investment fund and intends to invest primarily in real estate that is leased to the U.S. federal government either through the General Services Administration or other federal government agencies. The ability to transfer ownership from the fund is restricted.

6. ACCUMULATED PLAN BENEFITS:

The actuarial present value of the accumulated plan benefits was calculated by the Plan's actuaries as the amount that results from applying actuarial assumptions to plan participant data to determine the accumulated plan benefits earned to date by the participants. The present value reflects the time value of money (through discounts for interest) and the probability of payment recognizing decrements such as for death, disability, withdrawal or retirement between the valuation date and the expected dates for payment.

Iron Workers District Council of Southern Ohio and Vicinity Pension Trust
Notes to Financial Statements
Years Ended January 31, 2018 and 2017

The actuarial present value of accumulated plan benefits at January 31, 2017 is as follows:

Vested:	
Participants currently receiving benefits	\$ 692,437,885
Other participants	<u>334,607,988</u>
	1,027,045,873
Nonvested:	<u>51,511,018</u>
Total actuarial present value of accumulated plan benefits	<u><u>\$ 1,078,556,891</u></u>

The change in actuarial present value of accumulated plan benefits for the year ended January 31, 2017 is as follows:

Actuarial present value of accumulated plan benefits at beginning of year	<u>\$ 1,040,659,771</u>
Increase (decrease) attributed to:	
Interest	77,240,571
Benefits paid	(81,244,143)
Benefits accumulated, net experience gain or loss, changes in data	22,072,916
Changes in actuarial assumptions	<u>19,827,776</u>
Net increase	<u>37,897,120</u>
Actuarial value of accumulated plan benefits at end of year	<u><u>\$ 1,078,556,891</u></u>

The significant assumptions underlying the actuarial computations are as follows:

1. Healthy mortality rates: RP-2014 Blue Collar Employee Mortality Tables (sex distinct) with rates increased by 25%, projected generationally using Scale MP-2016 for non-pensioners or beneficiaries. RP-2014 Blue Collar Healthy Annuitant Mortality Tables (sex distinct) with rates increased by 25%, projected generationally from 2014 using scale MP-2016 for pensioners and beneficiaries.
2. Disability mortality rates: Disabled after March 31, 2003 – RP-2014 Blue Collar Healthy Annuitant Mortality Table (sex distinct) with rates increased by 25%, projected generationally using Scale MP-2016, if not eligible for a Social Security Disability Pension and RP-2014 Disabled Retiree Mortality Tables (sex distinct) with rates increased by 25%, projected generationally using Scale MP-2016, if eligible for a Social Security Disability Pension. Disabled from 1998 to March 31, 2003 – RP-2014 Disabled Retiree Mortality Tables (sex distinct) with rates increased by 25%, projected generationally using Scale MP-2016. Disabled before 1998 – RP-2014 Disabled Retire Mortality Tables (sex distinct), projected generationally using Scale MP-2016.
3. Retirement age: At various rates between ages of 55 and 65.
4. Investment rate of return: 7.50%, net of investment expenses for the actuarial present value of accumulated plan benefits

5. Future benefit accruals: 0.95 pension credit, one year of vesting service and benefit accrual of \$110 per year.
6. Actuarial cost method: Unit credit actuarial cost method. Normal cost and actuarial accrued liability are calculated on an individual basis and are allocated based on accruals under the Plan.

Changes in actuarial assumptions reflected in the January 31, 2017 valuation include lowering the assumed rate of return from 7.75% to 7.5%, updating mortality assumptions and increasing the administrative expense assumption from \$1,100,000 to \$1,400,000.

The actuarial present value of accumulated plan benefits is reported based on certain assumptions pertaining to investment return, inflation rates and participant demographics, all of which are subject to change. Due to uncertainties inherent in the estimations and assumptions process, it is at least reasonably possible that changes in these estimates and assumptions in the near term would be material to the financial statements.

At January 31, 2018 and 2017, the Plan was classified as endangered under the provisions of the Pension Protection Act of 2006. Due to the funding deficiency, the Trustees have adopted a funding improvement plan, under which the contribution rate was increased by \$.30 per hour for all bargaining groups each June 1st through 2016. In addition, effective January 1, 2018, the Plan was amended in order to eliminate pre-retirement death benefits for all individuals other than spouses of participants.

7. PLAN TERMINATION:

In the event the Plan is terminated, the net assets of the Plan will be allocated for payment of plan benefits to the participants in order of priority determined in accordance with ERISA, applicable regulations thereunder, and the plan document.

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 benefits 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 their benefits should the Plan terminate at some future time will depend of the sufficiency, at that time, of the Plan's net assets to provide for accumulated benefit obligations and the level and type of benefits guaranteed by the PBGC at that time. Some benefits may be fully or partially provided for by existing assets and the PBGC guarantee, while other benefits may not be provided for at all.

SUPPLEMENTAL SCHEDULES

Iron Workers District Council of Southern Ohio and Vicinity Pension Trust
Schedules of Investment and Administrative Expenses
Years Ended January 31, 2018 and 2017

	<u>2018</u>	<u>2017</u>
Investment expenses:		
Investment advisory - Segal Marco Advisors	\$ 285,000	280,287
Services fees:		
Fidelity	151,216	144,287
Amalgatrust	215,884	195,847
Exeter Trust Company	403,071	354,314
Southern Sun	147,833	179,884
Manning & Napier	357,473	345,062
Key Trust	30,596	37,917
Cooke & Bieler	266,880	224,077
Tributary Capital	154,186	136,144
State Street Global Advisors	545	-
JP Morgan	9,990	-
	<u>\$ 2,022,674</u>	<u>1,897,819</u>
Administrative expenses:		
Insurance	\$ 126,767	75,666
PBGC premium	230,776	221,778
Actuary and consulting	154,260	157,770
Legal fees	48,515	63,634
Accounting and audit	61,306	69,722
Miscellaneous	20,704	18,823
Real estate taxes	23,264	23,159
Depreciation	35,477	35,477
	<u>701,069</u>	<u>666,029</u>
Administrative expenses allocated from related Plans:		
Reimbursement of investment management fees	(52,000)	-
Trustee expenses and education	44,654	30,551
Collection costs	41,417	59,203
Personnel	202,137	207,165
Office pension cost and funded status change	(17,941)	56,591
Utilities, supplies, postage, and other	113,888	111,787
	<u>332,155</u>	<u>465,297</u>
	<u>\$ 1,033,224</u>	<u>1,131,326</u>

See accompanying notes to financial statements.

Iron Workers district Council of Southern Ohio and Vicinity Pension Trust
 EIN #31-6127229 PLAN #001
 Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
 January 31, 2018

(a)	(b)	(c)	(d)	(e)
	Identity of Issue, Borrower, Lessor or Similar Party	Description of investment including maturity date, rate of interest, collateral, par or maturity value	Cost	Current Value
* Investment manager: Segal Alternative Investments				
Money market funds:				
FEDERATED PRIME CASH OBLIGATIONS IS		4,602,854	\$ 4,602,854	4,602,854
* Investment manager: Key Trust - Pension Cash				
Money market funds:				
FEDERATED GOVERNMENT OBLIGATIONS IS		326,520	326,520	326,520
* Investment manager: SouthernSun				
Money market funds:				
FEDERATED PRIME CASH OBLIGATIONS IS		2	2	2
* Investment manager: Amalgatrust				
Money market funds:				
FEDERATED GOVERNMENT OBLIGATIONS IS		918,003	918,003	918,003
Equity securities:				
ADOBE SYSTEMS INC		9,585	927,131	1,914,700
ALIBABA GROUP HOLDING LTD		6,809	1,039,194	1,391,011
ALPHABET INC		347	78,339	410,230
ALPHABET INC		1,670	719,655	1,953,800
AMAZON COM INC		1,601	617,468	2,322,875
AMPHENOL CORP		19,819	517,257	1,838,609
ANSYS INC		5,816	370,975	940,156
BWX TECHNOLOGIES INC		13,658	771,281	866,464
CHARTER COMMUNICATIONS INC		3,030	1,115,643	1,143,068
COSTCO WHOLESALE CORP		7,295	651,944	1,421,577
DANAHER CORP DEL		16,543	793,176	1,675,475

Iron Workers district Council of Southern Ohio and Vicinity Pension Trust
 EIN #31-6127229 PLAN #001
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(a)	(b)	(c)	(d)	(e)
		Description of investment including maturity date, rate of interest, collateral, par or maturity value	Cost	Current Value
	Identity of Issue, Borrower, Lessor or Similar Party			
	DEXCOM INC	14,205	988,527	826,731
	ECOLAB INC	10,287	822,335	1,416,314
	EDWARDS LIFESCIENCES CORP	6,773	616,596	857,326
	ELECTRONICS ARTS INC	10,768	1,160,194	1,367,105
	ESTEE LAUDER COS INC	12,792	872,520	1,726,408
	FACEBOOK INC	9,882	851,338	1,846,847
	FLEETCOR TECHNOLOGIES INC	7,295	1,138,358	1,550,188
	FORTIVE CORP	22,129	990,569	1,682,247
	INTUIT	8,924	1,069,473	1,498,340
	INTUITIVE SURGICAL INC	4,678	579,431	2,019,352
	PAYPAL HOLDINGS INC	22,429	865,320	1,913,642
	PRICELINE GROUP INC	591	1,088,545	1,130,022
	ROPER TECHNOLOGIES INC	6,493	1,165,698	1,821,871
	SALESFORCE.COM INC	16,030	566,864	1,825,977
	SBA COMMUNICATIONS CORP	10,034	976,886	1,750,933
	SHERWIN WILLIAMS CO	2,022	857,290	843,396
	SMITH A O	18,388	941,782	1,227,950
	STARBUCKS CORP	7,951	277,216	451,696
	THERMO FISHER SCIENTIFIC INC	7,440	1,174,844	1,667,378
	TJX COS INC NEW	14,675	1,113,964	1,178,696
	VISA INC	17,727	811,236	2,202,225
	WABTEC CORP	8,284	589,727	671,335
	ZOETIS INC	28,506	1,666,856	2,187,265
	GENPACT LTD	37,408	679,789	1,269,628
	Total equity securities		29,467,421	50,810,837
	Total managed by Amalgatrust		30,385,424	51,728,840

Iron Workers district Council of Southern Ohio and Vicinity Pension Trust
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(a)	(b)	(c)	(d)	(e)
		Description of investment including maturity date, rate of interest, collateral, par or maturity value	Cost	Current Value
Identity of Issue, Borrower, Lessor or Similar Party				
* Investment manager: Manning & Napier - Equity				
Money market funds:				
	FEDERATED PRIME CASH OBLIGATIONS IS	2,950,752	2,950,752	2,950,752
Equity securities:				
	ADOBE SYSTEMS INC	5,350	836,054	1,068,716
	ADVANCED DISPOSAL SERVICES INC DEL	20,260	479,866	493,736
	ALPHABET INC	355	156,204	419,688
	ALPHABET INC	355	153,868	415,329
	AMAZON COM INC	675	441,312	979,351
	AMBEV SA	173,600	1,172,723	1,192,632
	AMERICAN TOWER CORP	5,890	699,367	869,953
	ARCONIC INC	37,465	795,951	1,126,198
	ATLASSIAN CORP PLC	5,950	238,140	321,241
	AUTOZONE INC	850	566,337	650,624
	BALL CORP	19,420	785,647	743,398
	BIOGEN INC	1,830	487,321	636,492
	BIOMARIN PHARMACEUTICAL INC	9,625	812,328	868,464
	BLACKROCK INC	1,485	508,381	834,273
	BRISTOL-MYERS SQUIBB CO	5,005	249,597	313,313
	CAMPBELL SOUP CO	20,815	1,123,051	968,938
	CDK GLOBAL INC	7,730	495,992	551,072
	CF INDUSTRIES HOLDINGS INC	7,490	207,701	317,876
	COCA COLA CO	16,970	610,607	807,602
	DAVITA INC	18,805	1,228,682	1,467,542
	DIAMOND OFFSHORE DRILLING INC	15,395	235,428	272,184
	DICKS SPORTING GOODS INC	23,940	819,100	753,152

Iron Workers district Council of Southern Ohio and Vicinity Pension Trust
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 Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
 January 31, 2018

(a)	(b)	(c)	(d)	(e)
		Description of investment including maturity date, rate of interest, collateral, par or maturity value	Cost	Current Value
	Identity of Issue, Borrower, Lessor or Similar Party			
	E TRADE FINANCIAL CORP	16,730	666,438	881,671
	ELECTRONIC ARTS INC	6,940	127,654	881,102
	EQUIFAX INC	4,055	454,002	506,591
	EURONET WORLDWIDE INC	5,560	499,408	521,917
	EXPRESS SCRIPTS HOLDING CO	5,245	413,646	415,299
	FACEBOOK INC	9,930	855,724	1,855,818
	FEDEX CORP	2,945	569,391	773,004
	FREEPORT-MCMORAN INC	43,105	607,008	840,548
	GENESEE & WYO INC	6,665	441,756	532,200
	INCYTE CORPORATION	6,295	671,858	568,376
	INTUITIVE SURGICAL INC	1,860	279,735	802,906
	JOHNSON & JOHNSON	6,285	578,882	868,524
	LULULEMON ATHLETICA INC	11,300	701,974	883,773
	MASTERCARD INC	7,520	598,661	1,270,880
	MERCK & CO INC	5,450	310,217	322,913
	MICROSOFT CORP	8,530	493,304	810,435
	NESTLE S A	6,940	415,864	600,379
	NIKE INC	11,250	588,454	767,475
	NOVARTIS AG	11,860	984,081	1,068,112
	O REILLY AUTOMOTIVE INC	4,280	1,010,127	1,132,873
	PRICELINE GROUP INC.	730	871,540	1,395,797
	QORVO INC	19,080	1,398,970	1,369,372
	REGENERON PHARMACEUTICALS	2,070	831,644	758,966
	SBA COMMUNICATIONS CORP	5,745	702,686	1,002,502
	SCHLUMBERGER LTD	13,695	948,274	1,007,678
	SCHWAB CHARLES CORP NEW	21,830	855,216	1,164,412
	SEALED AIR CORP	15,535	713,124	735,582
	SEATTLE GENETICS INC	11,345	613,935	593,343

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 Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
 January 31, 2018

(a)	(b)	(c)	(d)	(e)
		Description of investment including maturity date, rate of interest, collateral, par or maturity value	Cost	Current Value
	Identity of Issue, Borrower, Lessor or Similar Party			
	SERVICENOW INC	9,440	737,058	1,405,333
	SKYWORKS SOLUTIONS INC	8,810	645,370	856,420
	SOUTHERN COPPER CORP	10,170	358,032	493,753
	SPROUTS FARMERS MARKETS LLC	24,330	525,502	679,537
	TEXAS INSTRS INC	4,335	419,002	475,419
	THERMO FISHER SCIENTIFIC INC	1,835	220,130	411,242
	ULTA BEAUTY INC	2,740	636,578	608,554
	UNILEVER PLC	12,290	371,741	694,016
	VERTEX PHARMACEUTICALS INC	4,155	336,822	693,345
	VISA INC	9,070	603,868	1,126,766
	WEYERHAEUSER CO	20,335	620,247	763,376
	AMDOCS LTD	8,990	514,107	614,916
	AXALTA COATING SYSTEMS LTD	14,875	480,436	468,563
	ENSCO PLC	21,600	127,943	127,440
	MEDTRONIC PLC	17,890	1,337,865	1,544,302
	NIELSEN HOLDINGS PLC	16,270	766,815	608,661
	PAGSEGURO DIGITAL LTD	17,330	499,714	484,200
	PERRIGO CO PLC	14,810	1,542,823	1,342,082
	QIAGEN N	25,585	414,173	856,842
	TRANSOCEAN LTD	34,735	374,635	374,791
	ZAYO GROUP HOLDINGS INC	29,635	915,230	1,087,603
	Total equity securities		43,755,321	56,121,383
	Total managed by Manning & Napier - Equity		46,706,073	59,072,135

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 Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
 January 31, 2018

(a)	(b)	(c)	(d)	(e)
	Identity of Issue, Borrower, Lessor or Similar Party	Description of investment including maturity date, rate of interest, collateral, par or maturity value	Cost	Current Value
* Investment manager: Manning & Napier - International				
Money market funds:				
	FEDERATED PRIME CASH OBLIGATIONS IS	88,165	88,165	88,165
	Total managed by Manning & Napier - International		88,165	88,165
* Investment manager: Manning & Napier - Fixed Income				
Money market funds:				
	FEDERATED PRIME CASH OBLIGATIONS FUND INST SHARES	790,260	790,260	790,260
* Investment manager: Cooke & Bieler - Equity				
Money market funds:				
	FEDERATED PRIME CASH OBLIGATIONS IS	3,266,162	3,266,162	3,266,162
	Total Cash & Cash Equivalents		3,266,162	3,266,162
Equity securities:				
	ABBOTT LABS	19,700	772,545	1,224,552
	ACCENTURE PLC	5,100	615,432	819,570
	ALLIANCE DATA SYSTEMS CORP	3,300	686,222	846,978
	AMETEK INC	11,800	573,238	900,340
	ANALOG DEVICES INC	7,000	570,244	643,160
	ARROW ELECTRONICS INC	16,500	1,282,435	1,342,110
	BALL CORP	37,500	1,351,361	1,435,500
	BECTON DICKINSON & CO	4,000	490,225	971,760

Iron Workers district Council of Southern Ohio and Vicinity Pension Trust
 EIN #31-6127229 PLAN #001
 Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
 January 31, 2018

(a)	(b)	(c)	(d)	(e)
		Description of investment including maturity date, rate of interest, collateral, par or maturity value	Cost	Current Value
	Identity of Issue, Borrower, Lessor or Similar Party			
	BERKSHIRE HATHAWAY INC	6,900	857,172	1,479,222
	BRINKER INTL INC	11,800	546,896	428,812
	CARDINAL HEALTH INC	14,300	733,597	1,026,597
	CARNIVAL CORP	16,200	549,970	1,160,082
	CBRE GROUP INC	19,200	532,745	877,248
	CROWN HOLDINGS INC	20,700	969,809	1,201,635
	DIAGEO PLC	5,600	492,934	806,176
	EATON CORP PLC	13,500	797,100	1,133,595
	EXXON MOBIL CORP	17,000	1,079,481	1,484,100
	FIDELITY NATIONAL FINANCIAL INC	30,600	634,485	1,192,788
	HANESBRANDS INC	60,300	1,280,738	1,309,716
	INTERCONTINENTAL EXCHANGE INC	22,200	1,358,140	1,639,248
	JOHNSON & JOHNSON	6,100	445,330	842,959
	JP MORGAN CHASE & CO	14,650	617,108	1,694,566
	LABORATORY CORP AMER HLDGS	7,600	788,475	1,326,200
	MARKEL CORP	544	555,262	624,343
	OMNICOM GROUP INC	22,100	1,162,051	1,693,965
	PHILIP MORRIS INTERNATIONAL INC	8,900	747,091	954,347
	PNC FINANCIAL SERVICES GROUP INC	5,200	287,698	821,704
	PROGRESSIVE CORP OHIO	14,600	333,401	789,860
	RENAISSANCE RE HLDGS LTD	10,500	1,130,705	1,334,970
	SCHLUMBERGER LTD	11,600	817,018	853,528
	SNAP ON INC	8,800	1,345,450	1,507,528
	STATE STR CORP	13,200	697,904	1,454,244
	SYNCHRONY FINANCIAL	29,100	809,312	1,154,688
	TWENTY-FIRST CENTURY FOX INC	43,400	1,356,463	1,601,460
	UNILEVER N V	8,900	355,206	511,661
	UNITED PARCEL SERVICE INC	9,300	775,983	1,184,076

Iron Workers district Council of Southern Ohio and Vicinity Pension Trust
 EIN #31-6127229 PLAN #001
 Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
 January 31, 2018

(a)	(b)	(c)	(d)	(e)
		Description of investment including maturity date, rate of interest, collateral, par or maturity value	Cost	Current Value
	Identity of Issue, Borrower, Lessor or Similar Party			
	UNITEDHEALTH GROUP INC	3,700	270,033	876,086
	VERIZON COMMUNICATIONS INC	28,400	1,506,867	1,535,588
	WELLS FARGO CO	25,100	957,704	1,651,078
	WHIRLPOOL CORP	8,300	1,357,888	1,505,786
	AERCAP HOLDINGS NC	34,400	1,478,212	1,861,040
	ALLERGAN PLC	9,800	1,826,595	1,766,548
	AXALTA COATING SYSTEMS LTD	18,100	474,880	570,150
	BROOKFIELD ASSET MGMT INC	34,100	1,207,987	1,427,767
	CHUBB LIMITED	9,100	1,064,997	1,420,965
	GILDAN ACTIVEWEAR INC	53,900	1,462,197	1,830,983
	JOHNSON CONTROLS INTERNATIONAL	35,700	1,424,385	1,396,941
	TE CONNECTIVITY LTD	6,900	458,629	707,457
	WORLD FUEL SVCS CORP	28,200	1,145,020	786,498
	Total equity securities		43,034,620	57,610,175
	Total managed by Cooke & Bieler - Equity		46,300,782	60,876,337
* Investment manager: Tributary Capital				
Money market funds:				
	FEDERATED PRIME CASH OBLIGATIONS IS	1,351,178	1,351,178	1,351,178
Equity securities:				
	ALMOST FAMILY INC	5,600	275,872	319,480
	AMERICAN WOODMARK CORP	2,900	254,164	393,965
	AMN HEALTHCARE SERVICES INC	12,100	234,269	649,165
	ANALOGIC CORP	4,000	310,996	331,600

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(a)	(b)	(c)	(d)	(e)
		Description of investment including maturity date, rate of interest, collateral, par or maturity value	Cost	Current Value
	Identity of Issue, Borrower, Lessor or Similar Party			
	ANIXTER INTL INC	5,100	353,339	426,870
	BALCHEM CORP	4,200	241,699	331,800
	BARNES GROUP INC	6,900	216,199	453,951
	BOJANGLES' INC	19,800	351,281	242,550
	CACI INTL INC	3,200	227,682	449,760
	CALAMP CORP	18,020	306,220	441,130
	CALLON PETROLEUM CO	34,000	329,735	385,900
	CAMBREX CORP	5,324	267,128	300,007
	CARPENTER TECHNOLOGY CORP	5,900	275,083	303,260
	COLUMBIA BKG SYS INC	7,200	287,468	310,176
	DAVE & BUSTERS ENTERTAINMENT INC	4,800	224,567	225,600
	DORMAN PRODUCTS INC	5,500	307,920	414,920
	EASTERLY GOVT PROPERTIES INC	19,200	375,302	399,936
	EXLSERVICE HOLDINGS INC	7,000	281,044	425,250
	FIVE BELOW INC	4,900	189,599	318,157
	FORWARD AIR CORP	8,300	365,269	503,893
	FRANKLIN ELEC INC	8,300	311,431	375,990
	GENOMIC HEALTH INC	7,400	193,073	245,754
	GRANITE CONSTR INC	8,200	290,323	546,858
	GREAT WESTERN BANCORP INC	7,200	280,033	303,480
	IDACORP INC	5,300	268,696	457,284
	ILG INC	8,000	136,852	251,280
	INTEGRA LIFESCIENCES HOLDINGS	8,400	201,827	442,344
	J JILL INC	22,276	230,862	188,232
	KFORCE INC	17,400	335,645	451,530
	LITTELFUSE INC	2,300	175,886	499,882
	LTC PTYS INC	7,700	336,198	315,546
	MARCUS & MILLICHAP INC	12,800	311,924	417,920

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(a)	(b)	(c)	(d)	(e)
		Description of investment including maturity date, rate of interest, collateral, par or maturity value	Cost	Current Value
Identity of Issue, Borrower, Lessor or Similar Party				
	MASIMO CORP	3,000	67,365	282,720
	MATADOR RESOURCES CO	9,000	201,836	291,690
	MB FINANCIAL INC	10,600	277,145	453,468
	MERCANTILE BANK CORP	6,700	220,697	233,763
	METHODE ELECTRONICS INC	7,300	242,108	298,205
	MSG NETWORKS INC	12,700	282,096	304,800
	MTS SYS CORP	7,100	407,103	368,135
	MULTI COLOR CORP	5,900	261,869	457,250
	NAVIGANT CONSULTING CO	24,400	350,324	500,688
	NEXSTAR MEDIA GROUP INC	5,300	272,466	398,030
	OLD NATL BANCORP IND	23,200	301,866	401,360
	OMNICELL INC	5,600	222,447	274,680
	PC CONNECTION INC	8,600	240,718	225,320
	PDC ENERGY INC	6,800	356,342	352,580
	SCHULMAN A INC	10,900	333,330	425,100
	SELECTIVE INS GROUP INC	10,200	239,853	594,150
	SENSIENT TECHNOLOGIES CORP	5,400	259,378	387,990
	SILICON MOTION TECHNOLOGY CORP	5,400	176,945	268,272
	SOUTHSIDE BANCSHARES INC	10,255	208,100	352,054
	STIFEL FINL CORP	8,700	343,571	587,424
	STURM RUGER & CO INC	5,800	358,179	307,110
	SYKES ENTERPRISES INC	9,700	282,426	300,894
	TETRA TECH INC NEW	7,600	201,883	377,720
	UMB FINANCIAL CORP	5,100	275,935	388,518
	UNION BANKSHARES CORP	9,900	338,254	373,725
	UNITED BANKSHARES INC WEST VA	16,317	433,951	600,466
	AMBARELLA INC	6,000	337,517	302,400
	ARGO GROUP INTL HLDGS LTD	5,000	320,668	306,500

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(a)	(b)	(c)	(d)	(e)
	Identity of Issue, Borrower, Lessor or Similar Party	Description of investment including maturity date, rate of interest, collateral, par or maturity value	Cost	Current Value
	EDUCATION REALTY TRUST INC	11,300	394,719	373,239
	Total equity securities		16,956,677	22,911,721
	Total managed by Tributary Capital		18,307,855	24,262,899
* Investment manager: JP Morgan				
Equity securities:				
	EASTERLY GOVT PROPERTIES INC	172,046	942,892	3,583,718
	Total managed by JP Morgan		942,892	3,583,718
Registered investment companies:				
	* BAIRD CORE PLUS INSTITUTIONAL BOND FUND	6,233,390	68,091,456	69,190,630
			68,091,456	69,190,630
Common/collective trusts:				
	* MULTI-EMPLOYER PROPERTY TRUST	4,777	10,669,342	51,225,436
	* FIAM CORE PLUS CL A	3,511,274	31,001,368	71,278,871
	* MANNING & NAPIER NON US EQUITY COLLECTIVE INVT TR	5,271,988	47,714,857	62,423,694
	* STATE STREET RUSSELL 2000® INDEX NON-LENDING FUND	241,193	23,859,261	26,368,436
	* THORNBURG GLOBAL EQUITY FUND	1,887,261	25,436,799	50,201,143
	* AFL-CIO EQUITY INDEX FUND	7,212,801	88,731,794	176,340,723
			227,413,421	437,838,303

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(a)	(b)	(c)	(d)	(e)
		Description of investment including maturity date, rate of interest, collateral, par or maturity value	Cost	Current Value
	Identity of Issue, Borrower, Lessor or Similar Party			
	Partnership/joint venture interests:			
*	D.E. SHAW US BROAD MARKET CORE ALPHA EXTENSION FUND		11,538,178	54,788,722
*	MESIROW FINANCIAL CAPITAL PARTNERS X, LP		1,259,967	1,831,945
*	HIGHSTAR CAPITAL IV, L.P. & SUBSIDIARIES		4,006,495	4,865,408
*	STARWOOD DISTRESSED OPPORTUNITY FUND IX - 1 U.S., L.P.		889,112	1,815,705
*	STARWOOD INTERNATIONAL OPPORTUNITY FUND - 1 INTERNATIONAL, L.P.		316,608	484,953
*	WARBURG PINCUS XI, LP		3,680,188	5,571,375
*	HIGHBRIDGE IRISH SPECIALTY LOAN FUND III PLC		2,894,153	2,720,818
*	FIRST RESERVE FUND XIII. L.P.		2,129,185	2,073,808
*	ENTRUST SPECIAL OPPORTUNITIES FUND II LTD		1,097,944	1,564,465
*	ENTRUST SPECIAL OPPORTUNITIES FUND III LTD CLASS A		6,795,562	8,331,200
*	GLOBAL INFRASTRUCTURE PARTNERS II - B FEEDER FUND, L.P.		2,734,282	4,275,197
*	CORNERSTONE REAL ESTATE FUND VIII, LP		207,028	313,825
*	ANGELO GORDON CAPITAL RECOVERY VIII HOLDINGS, LP		1,487,492	1,612,354
*	ANGELO GORDON REALTY FUND IX, LP		4,450,838	5,274,250
*	REAL ESTATE EQUITY TRUST		434,198	336,544
*	BOYD WATTERSON GSA FUND, LP AND SUBSIDIARY		15,000,000	17,073,432
			<u>58,921,230</u>	<u>112,934,001</u>
* Investment manager: Key Bank Securities Lending Pool				
Money market funds:				
	FEDERATED GOVERNMENT OBLIGATIONS FD MONEY MARKET FUND	296,253	<u>296,253</u>	<u>296,253</u>
	Total money market funds		<u>296,253</u>	<u>296,253</u>
Repurchase agreements:				
	CITIGROUP CORPORATE REPO REPURCHASE AGREEMENT	5,500,000	5,500,000	5,500,000

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(a)	(b)	(c)	(d)	(e)
		Description of investment including maturity date, rate of interest, collateral, par or maturity value	Cost	Current Value
	Identity of Issue, Borrower, Lessor or Similar Party			
	WELLS FARGO CORP OBFR+15 REPURCHASE AGREEMENT	5,000,000	5,000,000	5,000,000
	GOLDMAN CORP EVERGREEN REPURCHASE AGREEMENT	6,000,000	6,000,000	6,000,000
	WELLS FARGO SECURITIES CORP REPURCHASE AGREEMENT	1,000,000	1,000,000	1,000,000
	MERRILL LYNCH EQUITY EVERGREEN REPURCHASE AGREEMENT	6,000,000	6,000,000	6,000,000
	JP MORGAN EG CORP REPURCHASE AGREEMENT	5,000,000	5,000,000	5,000,000
	WELLS FARGO SECURITIES CORP REPURCHASE AGREEMENT	1,000,000	1,000,000	1,000,000
	Total repurchase agreements		29,500,000	29,500,000
	Corporate obligations:			
	WISCONSIN GAS CO C/P DISC	1,800,000	1,798,838	1,798,838
	NSTAR ELECTRIC CO C/P DISC	2,000,000	1,999,922	1,999,922
	ABBEEY NATIONAL TREASURY SERVICES	2,000,000	1,999,926	1,999,926
	INVESCO GOVERNMENT & AGENCY PORT	2,000,000	2,000,000	2,000,000
	VFNC TRUST NOTE DTD 10/01/09 FL RT% DUE 09/20/18 1MO LIBOR FLAT	2,325,260	1,762,722	1,246,339
	GRYPHON FUNDING LTD P-T NT DTD 07/23/08 ADJ% DUE 08/05/18 EXTENDIBLE	2,928,135	2,115,187	635,406
	Total corporate obligations		11,676,595	9,680,431
	Total managed by Key Bank Securities Lending Pool		41,472,848	39,476,684
	Total investments		\$ 544,349,782	864,771,348

* Party in interest

Iron Workers District Council of Southern Ohio and Vicinity Pension Trust
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 Schedule H, Line 4j - Schedule of Reportable Transactions
 Year Ended January 31, 2018

(a)	(b)	(c)	(d)	(g)	(h)	(i)
Party Involved	Description of Asset	Purchase Price	Selling Price	Cost	Current Value on Transaction Date	Gain (Loss)
<i>Category (iii) - Series of Transactions in Excess of 5 percent of Net Assets</i>						
* Keybank	Federated Government Obligations IS					
	Purchases	\$ 122,379,684	-	122,379,684	122,379,684	-
	Sales	-	144,981,811	144,981,811	144,981,811	-
* Baird Core Plus Institutional Bond Fund	Purchases	\$ 41,254,811	-	41,254,811	41,254,811	-
* Party in interest						

There were no reportable category (i), (ii) or (iv) transactions for the year ended January 31, 2018.

Note: "Reportable Transactions" are defined in Section 2520.103-6 of the Department of Labor's Regulations.

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 January 31, 2018

(a)	(b)	(c)	(d)	(e)
	Identity of Issue, Borrower, Lessor or Similar Party	Description of investment including maturity date, rate of interest, collateral, par or maturity value	Cost	Current Value
* Investment manager: Segal Alternative Investments				
Money market funds:				
FEDERATED PRIME CASH OBLIGATIONS IS		4,602,854	\$ 4,602,854	4,602,854
* Investment manager: Key Trust - Pension Cash				
Money market funds:				
FEDERATED GOVERNMENT OBLIGATIONS IS		326,520	326,520	326,520
* Investment manager: SouthernSun				
Money market funds:				
FEDERATED PRIME CASH OBLIGATIONS IS		2	2	2
* Investment manager: Amalgatrust				
Money market funds:				
FEDERATED GOVERNMENT OBLIGATIONS IS		918,003	918,003	918,003
Equity securities:				
ADOBE SYSTEMS INC		9,585	927,131	1,914,700
ALIBABA GROUP HOLDING LTD		6,809	1,039,194	1,391,011
ALPHABET INC		347	78,339	410,230
ALPHABET INC		1,670	719,655	1,953,800
AMAZON COM INC		1,601	617,468	2,322,875
AMPHENOL CORP		19,819	517,257	1,838,609
ANSYS INC		5,816	370,975	940,156
BWX TECHNOLOGIES INC		13,658	771,281	866,464
CHARTER COMMUNICATIONS INC		3,030	1,115,643	1,143,068
COSTCO WHOLESALE CORP		7,295	651,944	1,421,577
DANAHER CORP DEL		16,543	793,176	1,675,475

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(a)	(b)	(c)	(d)	(e)
		Description of investment including maturity date, rate of interest, collateral, par or maturity value	Cost	Current Value
	Identity of Issue, Borrower, Lessor or Similar Party			
	DEXCOM INC	14,205	988,527	826,731
	ECOLAB INC	10,287	822,335	1,416,314
	EDWARDS LIFESCIENCES CORP	6,773	616,596	857,326
	ELECTRONICS ARTS INC	10,768	1,160,194	1,367,105
	ESTEE LAUDER COS INC	12,792	872,520	1,726,408
	FACEBOOK INC	9,882	851,338	1,846,847
	FLEETCOR TECHNOLOGIES INC	7,295	1,138,358	1,550,188
	FORTIVE CORP	22,129	990,569	1,682,247
	INTUIT	8,924	1,069,473	1,498,340
	INTUITIVE SURGICAL INC	4,678	579,431	2,019,352
	PAYPAL HOLDINGS INC	22,429	865,320	1,913,642
	PRICELINE GROUP INC	591	1,088,545	1,130,022
	ROPER TECHNOLOGIES INC	6,493	1,165,698	1,821,871
	SALESFORCE.COM INC	16,030	566,864	1,825,977
	SBA COMMUNICATIONS CORP	10,034	976,886	1,750,933
	SHERWIN WILLIAMS CO	2,022	857,290	843,396
	SMITH A O	18,388	941,782	1,227,950
	STARBUCKS CORP	7,951	277,216	451,696
	THERMO FISHER SCIENTIFIC INC	7,440	1,174,844	1,667,378
	TJX COS INC NEW	14,675	1,113,964	1,178,696
	VISA INC	17,727	811,236	2,202,225
	WABTEC CORP	8,284	589,727	671,335
	ZOETIS INC	28,506	1,666,856	2,187,265
	GENPACT LTD	37,408	679,789	1,269,628
	Total equity securities		29,467,421	50,810,837
	Total managed by Amalgatrust		30,385,424	51,728,840

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(a)	(b)	(c)	(d)	(e)
		Description of investment including maturity date, rate of interest, collateral, par or maturity value	Cost	Current Value
Identity of Issue, Borrower, Lessor or Similar Party				
* Investment manager: Manning & Napier - Equity				
Money market funds:				
	FEDERATED PRIME CASH OBLIGATIONS IS	2,950,752	2,950,752	2,950,752
Equity securities:				
	ADOBE SYSTEMS INC	5,350	836,054	1,068,716
	ADVANCED DISPOSAL SERVICES INC DEL	20,260	479,866	493,736
	ALPHABET INC	355	156,204	419,688
	ALPHABET INC	355	153,868	415,329
	AMAZON COM INC	675	441,312	979,351
	AMBEV SA	173,600	1,172,723	1,192,632
	AMERICAN TOWER CORP	5,890	699,367	869,953
	ARCONIC INC	37,465	795,951	1,126,198
	ATLASSIAN CORP PLC	5,950	238,140	321,241
	AUTOZONE INC	850	566,337	650,624
	BALL CORP	19,420	785,647	743,398
	BIOGEN INC	1,830	487,321	636,492
	BIOMARIN PHARMACEUTICAL INC	9,625	812,328	868,464
	BLACKROCK INC	1,485	508,381	834,273
	BRISTOL-MYERS SQUIBB CO	5,005	249,597	313,313
	CAMPBELL SOUP CO	20,815	1,123,051	968,938
	CDK GLOBAL INC	7,730	495,992	551,072
	CF INDUSTRIES HOLDINGS INC	7,490	207,701	317,876
	COCA COLA CO	16,970	610,607	807,602
	DAVITA INC	18,805	1,228,682	1,467,542
	DIAMOND OFFSHORE DRILLING INC	15,395	235,428	272,184
	DICKS SPORTING GOODS INC	23,940	819,100	753,152

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(a)	(b)	(c)	(d)	(e)
		Description of investment including maturity date, rate of interest, collateral, par or maturity value	Cost	Current Value
	Identity of Issue, Borrower, Lessor or Similar Party			
	E TRADE FINANCIAL CORP	16,730	666,438	881,671
	ELECTRONIC ARTS INC	6,940	127,654	881,102
	EQUIFAX INC	4,055	454,002	506,591
	EURONET WORLDWIDE INC	5,560	499,408	521,917
	EXPRESS SCRIPTS HOLDING CO	5,245	413,646	415,299
	FACEBOOK INC	9,930	855,724	1,855,818
	FEDEX CORP	2,945	569,391	773,004
	FREEPORT-MCMORAN INC	43,105	607,008	840,548
	GENESEE & WYO INC	6,665	441,756	532,200
	INCYTE CORPORATION	6,295	671,858	568,376
	INTUITIVE SURGICAL INC	1,860	279,735	802,906
	JOHNSON & JOHNSON	6,285	578,882	868,524
	LULULEMON ATHLETICA INC	11,300	701,974	883,773
	MASTERCARD INC	7,520	598,661	1,270,880
	MERCK & CO INC	5,450	310,217	322,913
	MICROSOFT CORP	8,530	493,304	810,435
	NESTLE S A	6,940	415,864	600,379
	NIKE INC	11,250	588,454	767,475
	NOVARTIS AG	11,860	984,081	1,068,112
	O REILLY AUTOMOTIVE INC	4,280	1,010,127	1,132,873
	PRICELINE GROUP INC.	730	871,540	1,395,797
	QORVO INC	19,080	1,398,970	1,369,372
	REGENERON PHARMACEUTICALS	2,070	831,644	758,966
	SBA COMMUNICATIONS CORP	5,745	702,686	1,002,502
	SCHLUMBERGER LTD	13,695	948,274	1,007,678
	SCHWAB CHARLES CORP NEW	21,830	855,216	1,164,412
	SEALED AIR CORP	15,535	713,124	735,582
	SEATTLE GENETICS INC	11,345	613,935	593,343

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(a)	(b)	(c)	(d)	(e)
		Description of investment including maturity date, rate of interest, collateral, par or maturity value	Cost	Current Value
	Identity of Issue, Borrower, Lessor or Similar Party			
	SERVICENOW INC	9,440	737,058	1,405,333
	SKYWORKS SOLUTIONS INC	8,810	645,370	856,420
	SOUTHERN COPPER CORP	10,170	358,032	493,753
	SPROUTS FARMERS MARKETS LLC	24,330	525,502	679,537
	TEXAS INSTRS INC	4,335	419,002	475,419
	THERMO FISHER SCIENTIFIC INC	1,835	220,130	411,242
	ULTA BEAUTY INC	2,740	636,578	608,554
	UNILEVER PLC	12,290	371,741	694,016
	VERTEX PHARMACEUTICALS INC	4,155	336,822	693,345
	VISA INC	9,070	603,868	1,126,766
	WEYERHAEUSER CO	20,335	620,247	763,376
	AMDOCS LTD	8,990	514,107	614,916
	AXALTA COATING SYSTEMS LTD	14,875	480,436	468,563
	ENSCO PLC	21,600	127,943	127,440
	MEDTRONIC PLC	17,890	1,337,865	1,544,302
	NIELSEN HOLDINGS PLC	16,270	766,815	608,661
	PAGSEGURO DIGITAL LTD	17,330	499,714	484,200
	PERRIGO CO PLC	14,810	1,542,823	1,342,082
	QIAGEN N	25,585	414,173	856,842
	TRANSOCEAN LTD	34,735	374,635	374,791
	ZAYO GROUP HOLDINGS INC	29,635	915,230	1,087,603
	Total equity securities		43,755,321	56,121,383
	Total managed by Manning & Napier - Equity		46,706,073	59,072,135

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(a)	(b)	(c)	(d)	(e)
	Identity of Issue, Borrower, Lessor or Similar Party	Description of investment including maturity date, rate of interest, collateral, par or maturity value	Cost	Current Value
* Investment manager: Manning & Napier - International				
Money market funds:				
	FEDERATED PRIME CASH OBLIGATIONS IS	88,165	88,165	88,165
	Total managed by Manning & Napier - International		88,165	88,165
* Investment manager: Manning & Napier - Fixed Income				
Money market funds:				
	FEDERATED PRIME CASH OBLIGATIONS FUND INST SHARES	790,260	790,260	790,260
* Investment manager: Cooke & Bieler - Equity				
Money market funds:				
	FEDERATED PRIME CASH OBLIGATIONS IS	3,266,162	3,266,162	3,266,162
	Total Cash & Cash Equivalents		3,266,162	3,266,162
Equity securities:				
	ABBOTT LABS	19,700	772,545	1,224,552
	ACCENTURE PLC	5,100	615,432	819,570
	ALLIANCE DATA SYSTEMS CORP	3,300	686,222	846,978
	AMETEK INC	11,800	573,238	900,340
	ANALOG DEVICES INC	7,000	570,244	643,160
	ARROW ELECTRONICS INC	16,500	1,282,435	1,342,110
	BALL CORP	37,500	1,351,361	1,435,500
	BECTON DICKINSON & CO	4,000	490,225	971,760

Iron Workers district Council of Southern Ohio and Vicinity Pension Trust
 EIN #31-6127229 PLAN #001
 Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
 January 31, 2018

(a)	(b)	(c)	(d)	(e)
		Description of investment including maturity date, rate of interest, collateral, par or maturity value	Cost	Current Value
	Identity of Issue, Borrower, Lessor or Similar Party			
	BERKSHIRE HATHAWAY INC	6,900	857,172	1,479,222
	BRINKER INTL INC	11,800	546,896	428,812
	CARDINAL HEALTH INC	14,300	733,597	1,026,597
	CARNIVAL CORP	16,200	549,970	1,160,082
	CBRE GROUP INC	19,200	532,745	877,248
	CROWN HOLDINGS INC	20,700	969,809	1,201,635
	DIAGEO PLC	5,600	492,934	806,176
	EATON CORP PLC	13,500	797,100	1,133,595
	EXXON MOBIL CORP	17,000	1,079,481	1,484,100
	FIDELITY NATIONAL FINANCIAL INC	30,600	634,485	1,192,788
	HANESBRANDS INC	60,300	1,280,738	1,309,716
	INTERCONTINENTAL EXCHANGE INC	22,200	1,358,140	1,639,248
	JOHNSON & JOHNSON	6,100	445,330	842,959
	JP MORGAN CHASE & CO	14,650	617,108	1,694,566
	LABORATORY CORP AMER HLDGS	7,600	788,475	1,326,200
	MARKEL CORP	544	555,262	624,343
	OMNICOM GROUP INC	22,100	1,162,051	1,693,965
	PHILIP MORRIS INTERNATIONAL INC	8,900	747,091	954,347
	PNC FINANCIAL SERVICES GROUP INC	5,200	287,698	821,704
	PROGRESSIVE CORP OHIO	14,600	333,401	789,860
	RENAISSANCE RE HLDGS LTD	10,500	1,130,705	1,334,970
	SCHLUMBERGER LTD	11,600	817,018	853,528
	SNAP ON INC	8,800	1,345,450	1,507,528
	STATE STR CORP	13,200	697,904	1,454,244
	SYNCHRONY FINANCIAL	29,100	809,312	1,154,688
	TWENTY-FIRST CENTURY FOX INC	43,400	1,356,463	1,601,460
	UNILEVER N V	8,900	355,206	511,661
	UNITED PARCEL SERVICE INC	9,300	775,983	1,184,076

Iron Workers district Council of Southern Ohio and Vicinity Pension Trust
 EIN #31-6127229 PLAN #001
 Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
 January 31, 2018

(a)	(b)	(c)	(d)	(e)
		Description of investment including maturity date, rate of interest, collateral, par or maturity value	Cost	Current Value
	Identity of Issue, Borrower, Lessor or Similar Party			
	UNITEDHEALTH GROUP INC	3,700	270,033	876,086
	VERIZON COMMUNICATIONS INC	28,400	1,506,867	1,535,588
	WELLS FARGO CO	25,100	957,704	1,651,078
	WHIRLPOOL CORP	8,300	1,357,888	1,505,786
	AERCAP HOLDINGS NC	34,400	1,478,212	1,861,040
	ALLERGAN PLC	9,800	1,826,595	1,766,548
	AXALTA COATING SYSTEMS LTD	18,100	474,880	570,150
	BROOKFIELD ASSET MGMT INC	34,100	1,207,987	1,427,767
	CHUBB LIMITED	9,100	1,064,997	1,420,965
	GILDAN ACTIVEWEAR INC	53,900	1,462,197	1,830,983
	JOHNSON CONTROLS INTERNATIONAL	35,700	1,424,385	1,396,941
	TE CONNECTIVITY LTD	6,900	458,629	707,457
	WORLD FUEL SVCS CORP	28,200	1,145,020	786,498
	Total equity securities		43,034,620	57,610,175
	Total managed by Cooke & Bieler - Equity		46,300,782	60,876,337
* Investment manager: Tributary Capital				
Money market funds:				
	FEDERATED PRIME CASH OBLIGATIONS IS	1,351,178	1,351,178	1,351,178
Equity securities:				
	ALMOST FAMILY INC	5,600	275,872	319,480
	AMERICAN WOODMARK CORP	2,900	254,164	393,965
	AMN HEALTHCARE SERVICES INC	12,100	234,269	649,165
	ANALOGIC CORP	4,000	310,996	331,600

Iron Workers district Council of Southern Ohio and Vicinity Pension Trust
 EIN #31-6127229 PLAN #001
 Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
 January 31, 2018

(a)	(b)	(c)	(d)	(e)
		Description of investment including maturity date, rate of interest, collateral, par or maturity value	Cost	Current Value
	Identity of Issue, Borrower, Lessor or Similar Party			
	ANIXTER INTL INC	5,100	353,339	426,870
	BALCHEM CORP	4,200	241,699	331,800
	BARNES GROUP INC	6,900	216,199	453,951
	BOJANGLES' INC	19,800	351,281	242,550
	CACI INTL INC	3,200	227,682	449,760
	CALAMP CORP	18,020	306,220	441,130
	CALLON PETROLEUM CO	34,000	329,735	385,900
	CAMBREX CORP	5,324	267,128	300,007
	CARPENTER TECHNOLOGY CORP	5,900	275,083	303,260
	COLUMBIA BKG SYS INC	7,200	287,468	310,176
	DAVE & BUSTERS ENTERTAINMENT INC	4,800	224,567	225,600
	DORMAN PRODUCTS INC	5,500	307,920	414,920
	EASTERLY GOVT PROPERTIES INC	19,200	375,302	399,936
	EXLSERVICE HOLDINGS INC	7,000	281,044	425,250
	FIVE BELOW INC	4,900	189,599	318,157
	FORWARD AIR CORP	8,300	365,269	503,893
	FRANKLIN ELEC INC	8,300	311,431	375,990
	GENOMIC HEALTH INC	7,400	193,073	245,754
	GRANITE CONSTR INC	8,200	290,323	546,858
	GREAT WESTERN BANCORP INC	7,200	280,033	303,480
	IDACORP INC	5,300	268,696	457,284
	ILG INC	8,000	136,852	251,280
	INTEGRA LIFESCIENCES HOLDINGS	8,400	201,827	442,344
	J JILL INC	22,276	230,862	188,232
	KFORCE INC	17,400	335,645	451,530
	LITTELFUSE INC	2,300	175,886	499,882
	LTC PTYS INC	7,700	336,198	315,546
	MARCUS & MILLICHAP INC	12,800	311,924	417,920

Iron Workers district Council of Southern Ohio and Vicinity Pension Trust
 EIN #31-6127229 PLAN #001
 Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
 January 31, 2018

(a)	(b)	(c)	(d)	(e)
		Description of investment including maturity date, rate of interest, collateral, par or maturity value	Cost	Current Value
	Identity of Issue, Borrower, Lessor or Similar Party			
	MASIMO CORP	3,000	67,365	282,720
	MATADOR RESOURCES CO	9,000	201,836	291,690
	MB FINANCIAL INC	10,600	277,145	453,468
	MERCANTILE BANK CORP	6,700	220,697	233,763
	METHODE ELECTRONICS INC	7,300	242,108	298,205
	MSG NETWORKS INC	12,700	282,096	304,800
	MTS SYS CORP	7,100	407,103	368,135
	MULTI COLOR CORP	5,900	261,869	457,250
	NAVIGANT CONSULTING CO	24,400	350,324	500,688
	NEXSTAR MEDIA GROUP INC	5,300	272,466	398,030
	OLD NATL BANCORP IND	23,200	301,866	401,360
	OMNICELL INC	5,600	222,447	274,680
	PC CONNECTION INC	8,600	240,718	225,320
	PDC ENERGY INC	6,800	356,342	352,580
	SCHULMAN A INC	10,900	333,330	425,100
	SELECTIVE INS GROUP INC	10,200	239,853	594,150
	SENSIENT TECHNOLOGIES CORP	5,400	259,378	387,990
	SILICON MOTION TECHNOLOGY CORP	5,400	176,945	268,272
	SOUTHSIDE BANCSHARES INC	10,255	208,100	352,054
	STIFEL FINL CORP	8,700	343,571	587,424
	STURM RUGER & CO INC	5,800	358,179	307,110
	SYKES ENTERPRISES INC	9,700	282,426	300,894
	TETRA TECH INC NEW	7,600	201,883	377,720
	UMB FINANCIAL CORP	5,100	275,935	388,518
	UNION BANKSHARES CORP	9,900	338,254	373,725
	UNITED BANKSHARES INC WEST VA	16,317	433,951	600,466
	AMBARELLA INC	6,000	337,517	302,400
	ARGO GROUP INTL HLDGS LTD	5,000	320,668	306,500

Iron Workers district Council of Southern Ohio and Vicinity Pension Trust
 EIN #31-6127229 PLAN #001
 Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
 January 31, 2018

(a)	(b)	(c)	(d)	(e)
		Description of investment including maturity date, rate of interest, collateral, par or maturity value	Cost	Current Value
Identity of Issue, Borrower, Lessor or Similar Party				
	EDUCATION REALTY TRUST INC	11,300	394,719	373,239
	Total equity securities		16,956,677	22,911,721
	Total managed by Tributary Capital		18,307,855	24,262,899
* Investment manager: JP Morgan				
Equity securities:				
	EASTERLY GOVT PROPERTIES INC	172,046	942,892	3,583,718
	Total managed by JP Morgan		942,892	3,583,718
Registered investment companies:				
	* BAIRD CORE PLUS INSTITUTIONAL BOND FUND	6,233,390	68,091,456	69,190,630
			68,091,456	69,190,630
Common/collective trusts:				
	* MULTI-EMPLOYER PROPERTY TRUST	4,777	10,669,342	51,225,436
	* FIAM CORE PLUS CL A	3,511,274	31,001,368	71,278,871
	* MANNING & NAPIER NON US EQUITY COLLECTIVE INVT TR	5,271,988	47,714,857	62,423,694
	* STATE STREET RUSSELL 2000® INDEX NON-LENDING FUND	241,193	23,859,261	26,368,436
	* THORNBURG GLOBAL EQUITY FUND	1,887,261	25,436,799	50,201,143
	* AFL-CIO EQUITY INDEX FUND	7,212,801	88,731,794	176,340,723
			227,413,421	437,838,303

Iron Workers district Council of Southern Ohio and Vicinity Pension Trust
 EIN #31-6127229 PLAN #001
 Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
 January 31, 2018

(a)	(b)	(c)	(d)	(e)
	Identity of Issue, Borrower, Lessor or Similar Party	Description of investment including maturity date, rate of interest, collateral, par or maturity value	Cost	Current Value
	Partnership/joint venture interests:			
*	D.E. SHAW US BROAD MARKET CORE ALPHA EXTENSION FUND		11,538,178	54,788,722
*	MESIROW FINANCIAL CAPITAL PARTNERS X, LP		1,259,967	1,831,945
*	HIGHSTAR CAPITAL IV, L.P. & SUBSIDIARIES		4,006,495	4,865,408
*	STARWOOD DISTRESSED OPPORTUNITY FUND IX - 1 U.S., L.P.		889,112	1,815,705
*	STARWOOD INTERNATIONAL OPPORTUNITY FUND - 1 INTERNATIONAL, L.P.		316,608	484,953
*	WARBURG PINCUS XI, LP		3,680,188	5,571,375
*	HIGHBRIDGE IRISH SPECIALTY LOAN FUND III PLC		2,894,153	2,720,818
*	FIRST RESERVE FUND XIII. L.P.		2,129,185	2,073,808
*	ENTRUST SPECIAL OPPORTUNITIES FUND II LTD		1,097,944	1,564,465
*	ENTRUST SPECIAL OPPORTUNITIES FUND III LTD CLASS A		6,795,562	8,331,200
*	GLOBAL INFRASTRUCTURE PARTNERS II - B FEEDER FUND, L.P.		2,734,282	4,275,197
*	CORNERSTONE REAL ESTATE FUND VIII, LP		207,028	313,825
*	ANGELO GORDON CAPITAL RECOVERY VIII HOLDINGS, LP		1,487,492	1,612,354
*	ANGELO GORDON REALTY FUND IX, LP		4,450,838	5,274,250
*	REAL ESTATE EQUITY TRUST		434,198	336,544
*	BOYD WATTERSON GSA FUND, LP AND SUBSIDIARY		15,000,000	17,073,432
			<u>58,921,230</u>	<u>112,934,001</u>
* Investment manager: Key Bank Securities Lending Pool				
	Money market funds:			
	FEDERATED GOVERNMENT OBLIGATIONS FD MONEY MARKET FUND	296,253	<u>296,253</u>	<u>296,253</u>
	Total money market funds		<u>296,253</u>	<u>296,253</u>
	Repurchase agreements:			
	CITIGROUP CORPORATE REPO REPURCHASE AGREEMENT	5,500,000	5,500,000	5,500,000

Iron Workers district Council of Southern Ohio and Vicinity Pension Trust
 EIN #31-6127229 PLAN #001
 Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
 January 31, 2018

(a)	(b)	(c)	(d)	(e)
		Description of investment including maturity date, rate of interest, collateral, par or maturity value	Cost	Current Value
	Identity of Issue, Borrower, Lessor or Similar Party			
	WELLS FARGO CORP OBFR+15 REPURCHASE AGREEMENT	5,000,000	5,000,000	5,000,000
	GOLDMAN CORP EVERGREEN REPURCHASE AGREEMENT	6,000,000	6,000,000	6,000,000
	WELLS FARGO SECURITIES CORP REPURCHASE AGREEMENT	1,000,000	1,000,000	1,000,000
	MERRILL LYNCH EQUITY EVERGREEN REPURCHASE AGREEMENT	6,000,000	6,000,000	6,000,000
	JP MORGAN EG CORP REPURCHASE AGREEMENT	5,000,000	5,000,000	5,000,000
	WELLS FARGO SECURITIES CORP REPURCHASE AGREEMENT	1,000,000	1,000,000	1,000,000
	Total repurchase agreements		29,500,000	29,500,000
	Corporate obligations:			
	WISCONSIN GAS CO C/P DISC	1,800,000	1,798,838	1,798,838
	NSTAR ELECTRIC CO C/P DISC	2,000,000	1,999,922	1,999,922
	ABBEEY NATIONAL TREASURY SERVICES	2,000,000	1,999,926	1,999,926
	INVESCO GOVERNMENT & AGENCY PORT	2,000,000	2,000,000	2,000,000
	VFNC TRUST NOTE DTD 10/01/09 FL RT% DUE 09/20/18 1MO LIBOR FLAT	2,325,260	1,762,722	1,246,339
	GRYPHON FUNDING LTD P-T NT DTD 07/23/08 ADJ% DUE 08/05/18 EXTENDIBLE	2,928,135	2,115,187	635,406
	Total corporate obligations		11,676,595	9,680,431
	Total managed by Key Bank Securities Lending Pool		41,472,848	39,476,684
	Total investments		\$ 544,349,782	864,771,348

* Party in interest

Iron Workers District Council of Southern Ohio and Vicinity Pension Trust
 EIN #31-6127229 PLAN #001
 Schedule H, Line 4j - Schedule of Reportable Transactions
 Year Ended January 31, 2018

(a)	(b)	(c)	(d)	(g)	(h)	(i)
Party Involved	Description of Asset	Purchase Price	Selling Price	Cost	Current Value on Transaction Date	Gain (Loss)
<i>Category (iii) - Series of Transactions in Excess of 5 percent of Net Assets</i>						
* Keybank	Federated Government Obligations IS					
	Purchases	\$ 122,379,684	-	122,379,684	122,379,684	-
	Sales	-	144,981,811	144,981,811	144,981,811	-
* Baird Core Plus Institutional Bond Fund	Purchases	\$ 41,254,811	-	41,254,811	41,254,811	-
* Party in interest						

There were no reportable category (i), (ii) or (iv) transactions for the year ended January 31, 2018.

Note: "Reportable Transactions" are defined in Section 2520.103-6 of the Department of Labor's Regulations.

Line 3

Unless otherwise noted, contributions are paid periodically throughout the year pursuant to collective bargaining agreements. The interest credited in the FSA is therefore assumed to be equivalent to an August 1 (mid-year) contribution date.



May 1, 2017

*Internal Revenue Service
Employee Plans Compliance Unit
Group 7602 (TEGE:EP:EPCU)
230 S. Dearborn Street
Room 1700 - 17th Floor
Chicago, IL 60604*

To Whom It May Concern:

As required by ERISA Section 305 and the Internal Revenue Code (IRC) Section 432, we have completed the actuarial status certification as of February 1, 2017 for the following plan:

*Name of Plan: Iron Workers District Council of Southern Ohio and Vicinity Pension Trust
Plan number: EIN 31-6038516 / PN 001
Plan sponsor: Board of Trustees, Iron Workers District Council of Southern Ohio and Vicinity Pension Trust
Address: 1470 Worldwide Place
Vandalia, Ohio 45377-1156
Phone number: (800) 331-4277*

As of February 1, 2017, the Plan is in endangered status. In addition, the Plan is not projected to be in critical status for any of the succeeding five plan years.

This certification notifies the IRS that the Plan is making the schedule progress in meeting the requirements of its funding improvement plan, based on information received from the plan sponsor.

If you have any questions on the attached certification, you may contact me at the following:

*Segal Consulting
101 North Wacker Drive, Suite 500
Chicago, IL 60606
Phone number: (312) 984-8500*

Sincerely,

*Daniel V. Ciner, MAAA
Senior Vice President and Actuary
Enrolled Actuary No. 17-05773*

May 1, 2017

ACTUARIAL STATUS CERTIFICATION AS OF FEBRUARY 1, 2017 UNDER IRC SECTION 432

This is to certify that Segal Consulting, a Member of The Segal Group, Inc. ("Segal") has prepared an actuarial status certification under Internal Revenue Code Section 432 for the Iron Workers District Council of Southern Ohio and Vicinity Pension Trust as of February 1, 2017 in accordance with generally accepted actuarial principles and practices. It has been prepared at the request of the Board of Trustees to assist in administering the Fund and meeting filing and compliance requirements under federal law. This certification may not otherwise be copied or reproduced in any form without the consent of the Board of Trustees and may only be provided to other parties in its entirety.

The measurements shown in this actuarial certification may not be applicable for other purposes. Future actuarial measurements may differ significantly from the current measurements presented in this report due to such factors as the following: plan experience differing from that anticipated by the economic or demographic assumptions; changes in economic or demographic assumptions; increases or decreases expected as part of the natural operation of the methodology used for these measurements (such as the end of an amortization period or additional cost or contribution requirements based on the plan's funded status); differences in statutory interpretation and changes in plan provisions or applicable law.

This certification is based on the February 1, 2016 actuarial valuation, dated November 1, 2016. This certification reflects the changes in the law made by the Multiemployer Pension Reform Act of 2014 (MPRA). Additional assumptions required for the projections (including those under MPRA), and sources of financial information used are summarized in Exhibit V.

Segal Consulting does not practice law and, therefore, cannot and does not provide legal advice. Any statutory interpretations on which this certification is based reflect Segal's understanding as an actuarial firm.

This certification was based on the assumption that the Plan was qualified as a multiemployer plan for the year.

I am a member of the American Academy of Actuaries and I meet the Qualification Standards of the American Academy of Actuaries to render the actuarial opinion herein. To the best of my knowledge, the information supplied in this actuarial certification is complete and accurate. As required by IRC Section 432(b)(3)(B)(iii), the projected industry activity is based on information provided by the plan sponsor. In my opinion, the projections are based on reasonable actuarial estimates, assumptions and methods that (other than projected industry activity) offer my best estimate of anticipated experience under the Plan.



Daniel V. Ciner, MAAA
Senior Vice President and Actuary
Enrolled Actuary No. 17-05773

Certificate Contents

EXHIBIT I	Status Determination as of February 1, 2017
EXHIBIT II	Summary of Actuarial Valuation Projections
EXHIBIT III	Funding Standard Account Projections
EXHIBIT IV	Funding Standard Account – Projected Bases Assumed Established After February 1, 2016
EXHIBIT V	Actuarial Assumptions and Methodology

EXHIBIT I

Status Determination as of February 1, 2017

Status	Condition	Component Result	Final Result
Critical Status:			
Determination of critical status:			
C1.	A funding deficiency is projected in four years?	No	No
C2. (a)	A funding deficiency is projected in five years,	No	
(b)	AND the present value of vested benefits for non-actives is more than present value of vested benefits for actives,.....	N/A	
(c)	AND the normal cost plus interest on unfunded actuarial accrued liability (unit credit basis) is greater than contributions for current year?	N/A	No
C3. (a)	A funding deficiency is projected in five years,	No	
(b)	AND the funded percentage is less than 65%?	N/A	No
C4. (a)	The funded percentage is less than 65%,	No	
(b)	AND the present value of assets plus contributions is less than the present value of benefit payments and administrative expenses over seven years?	N/A	No
C5.	The present value of assets plus contributions is less than the present value of benefit payments and administrative expenses over five years?	No	No
Test regular emergence rules for failure:			
C6. (a)	Was in critical status for the immediately preceding plan year,	No	
(b)	AND EITHER a funding deficiency is projected for the plan year or any of the next nine plan years, without regard to the use of the shortfall method but taking into account any extension of amortization periods under ERISA Section 304(d)(2) or ERISA Section 304 as in effect prior to PPA'06,	N/A	
(c)	OR insolvency is projected for the current year or any of the 30 succeeding plan years?	N/A	
In Critical Status? (If any of (C1) through (C6) is Yes then Yes)			No
Determination whether plan will be in critical status in any of the succeeding five plan years:			
C7. (a)	Is not in critical status,	Yes	
(b)	AND is projected to be in critical status in any of the next five years?	No	No
In Critical Status in any of the five succeeding plan years?			No

EXHIBIT I (continued)

Status Determination as of February 1, 2017

Status	Condition	Component Result	Final Result
Endangered Status:			
E1. (a)	Is not in critical status,	Yes	
(b)	AND the funded percentage is less than 80%?	Yes	Yes
E2. (a)	Is not in critical status,	Yes	
(b)	AND a funding deficiency is projected in seven years?	No	No
In Endangered Status? (Yes when EITHER (E1) or (E2) is Yes)			Yes
In Seriously Endangered Status? (Yes when BOTH (E1) and (E2) are Yes)			No
Neither Critical Status Nor Endangered Status:			
Neither Critical nor Endangered Status?			No

This certification notifies the IRS that the Plan is making the scheduled progress in meeting the requirements of its funding improvement plan, based on information from the plan sponsor.

EXHIBIT II

Summary of Actuarial Valuation Projections

The actuarial factors as of February 1, 2017 (based on projections from the February 1, 2016 valuation certificate):

I. Financial Information

1. Market value of assets			\$736,478,689
2. Actuarial value of assets			770,949,670
3. Reasonably anticipated contributions			
a. Upcoming year			56,142,625
b. Present value for the next five years			234,389,820
c. Present value for the next seven years			306,239,333
4. Projected benefit payments			83,009,411
5. Projected administrative expenses			1,088,356

II. Liabilities

1. Present value of vested benefits for active participants			240,299,404
2. Present value of vested benefits for non-active participants			760,892,244
3. Total unit credit accrued liability			1,052,667,068
4. Present value of payments	Benefit Payments	Administrative Expenses	Total
a. Next five years	\$355,771,932	\$4,982,683	\$360,754,615
b. Next seven years	469,812,537	6,681,791	476,494,328
5. Unit credit normal cost plus expenses			16,892,976
6. Ratio of inactive participants to active participants			N/A

III. Funded Percentage (I.2)/(II.3)

73.2%

IV. Funding Standard Account

1. Credit Balance as of the end of prior year	\$55,190,087
2. Years to projected funding deficiency	N/A

V. Year Projected to be in Critical Status (based on test C7. in Exhibit I), if within next five years

N/A

EXHIBIT III

Funding Standard Account Projections

The table below presents the Funding Standard Account Projections for the Plan Years beginning February 1, 2016 through 2026

	Year Beginning February 1,										
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025	2026
1. Credit balance at beginning of year	\$46,038,088	\$55,190,087	\$58,080,391	\$50,612,705	\$44,956,723	\$43,430,139	\$43,985,739	\$44,977,539	\$50,301,909	\$59,186,976	\$68,658,264
2. Interest on (1)	3,567,952	4,277,232	4,501,230	3,922,485	3,484,146	3,365,836	3,408,895	3,485,759	3,898,398	4,586,991	5,321,015
3. Normal cost	14,829,597	15,804,620	15,951,681	16,099,671	16,195,822	16,251,585	16,265,439	16,298,460	16,292,094	16,165,728	15,930,356
4. Administrative expenses	1,056,656	1,088,356	1,121,007	1,154,637	1,189,276	1,224,954	1,261,703	1,299,554	1,338,541	1,378,697	1,420,058
5. Net amortization charges	31,744,770	38,517,770	48,158,930	45,758,795	41,388,806	39,255,143	38,839,676	34,819,193	31,864,941	32,046,159	32,706,631
6. Interest on (3), (4) and (5)	3,691,404	4,294,334	5,055,450	4,883,516	4,554,978	4,396,706	4,368,429	4,062,334	3,835,907	3,843,271	3,879,421
7. Expected contributions	54,783,609	56,142,625	56,142,625	56,142,625	56,142,625	56,142,625	56,142,625	56,142,625	56,142,625	56,142,625	56,142,625
8. Interest on (7)	<u>2,122,865</u>	<u>2,175,527</u>	<u>2,175,527</u>	<u>2,175,527</u>	<u>2,175,527</u>	<u>2,175,527</u>	<u>2,175,527</u>	<u>2,175,527</u>	<u>2,175,527</u>	<u>2,175,527</u>	<u>2,175,527</u>
9. Credit balance at end of year: (1) + (2) - (3) - (4) - (5) - (6) + (7) + (8)	\$55,190,087	\$58,080,391	\$50,612,705	\$44,956,723	\$43,430,139	\$43,985,739	\$44,977,539	\$50,301,909	\$59,186,976	\$68,658,264	\$78,360,965

EXHIBIT IV

Funding Standard Account – Projected Bases Assumed Established After February 1, 2016

Schedule of Funding Standard Account Bases

Type of Base	Date Established	Base Established	Amortization Period	Amortization Payment
Experience Loss	2/ 1/2017	\$23,417,989	15	\$2,500,503
Experience Loss	2/ 1/2018	32,335,545	15	3,452,693
Experience Loss	2/ 1/2019	10,290,937	15	1,098,836
Experience Gain	2/ 1/2020	(6,064,640)	15	(647,564)
Experience Loss	2/ 1/2021	672,769	15	71,836
Experience Loss	2/ 1/2022	3,487	15	372
Experience Gain	2/ 1/2023	(91,230)	15	(9,741)
Experience Loss	2/ 1/2024	7,867	15	840
Experience Gain	2/ 1/2025	(3,009)	15	(321)
Experience Gain	2/ 1/2026	(1,639)	15	(175)

EXHIBIT V**Actuarial Assumptions and Methodology**

The actuarial assumptions and plan of benefits are as used in the February 1, 2016 actuarial valuation certificate, dated November 1, 2016, except as specifically described below. We also assumed that experience would emerge as projected, except as described below. The calculations are based on a current understanding of the requirements of ERISA Section 305 and IRC Section 432.

Asset Information:

The financial information as of February 1, 2017 was based on an unaudited financial statement provided by the Fund Administrator.

For projections after that date, the assumed administrative expenses were increased by 3% per year. Benefit payments were projected based on the February 1, 2016 actuarial valuation. The projected net investment return was assumed to be 7.75% of the average market value of assets for the 2017 - 2026 Plan Years. The actuarial value of assets was determined using the Plan's smoothing method. Any resulting investment gains or losses due to the operation of the asset valuation method are amortized over 15 years in the Funding Standard Account.

Projected Industry Activity:

As required by Internal Revenue Code Section 432, assumptions with respect to projected industry activity are based on information provided by the plan sponsor. Based on this information, total hours of contribution are assumed to be 5.9 million hours for the Plan year ending 2018 (equivalent to 3,377 active participants working 1,750 hours per year), and remain level thereafter.

Future Normal Costs:

Based on the assumed industry activity, we have determined the Normal Cost based on an open group forecast with the number of active participants assumed to increase from 3,197 to 3,377 for the Plan Year ending 2018, and remain level thereafter. New entrants are expected to have a demographic mix similar to recent new hires.

Segal Consulting ("Segal") does not practice law and, therefore, cannot and does not provide legal advice. Any statutory interpretation on which the certification is based reflects Segal's understanding as an actuarial firm. Due to the complexity of the statute and the significance of its ramifications, Segal recommends that the Board of Trustees consult with legal counsel when making any decisions regarding compliance with ERISA and the Internal Revenue Code.

Line 4c

The Trustees adopted the original Funding Improvement Plan in December 2008, with the most recent update on November 14, 2017, and the Funding Improvement Period began on February 1, 2011.

The Plan Sponsor has verified (on May 1, 2018) that, to the best of their knowledge, they have complied with the requirements of the Funding Improvement Plan.

Mortality Rates

Healthy Non-Pensioner or Beneficiary: RP-2014 Blue Collar Employee Mortality Tables (sex distinct) with rates increased by 25%, projected generationally from 2014 using Scale MP-2016

Healthy Pensioner or Beneficiary: RP-2014 Blue Collar Healthy Annuitant Mortality Tables (sex distinct) with rates increased by 25%, projected generationally from 2014 using Scale MP-2016

Disabled before 1998: RP-2014 Disabled Retiree Mortality Tables (sex distinct), projected generationally from 2014 using Scale MP-2016

Disabled from 1998 to March 31, 2003: RP-2014 Disabled Retiree Mortality Tables (sex distinct) with rates increased by 25%, projected generationally from 2014 using Scale MP-2016

Disabled after March 31, 2003:

- a) RP-2014 Blue Collar Healthy Annuitant Mortality Tables (sex distinct) with rates increased by 25%, projected generationally from 2014 using Scale MP-2016, if not eligible for a Social Security Disability Pension
- b) RP-2014 Disabled Retiree Mortality Tables (sex distinct) with rates increased by 25%, projected generationally from 2014 using Scale MP-2016, if eligible for a Social Security Disability Pension

The adjusted underlying tables with generational adjustment reasonably reflect the mortality experience of the Plan as of the measurement date.

The tables were then adjusted to future years using the generational projection to reflect future mortality improvement.

The mortality rates were based on historical and current demographic data, adjusted to reflect estimated future experience and professional judgment. As part of the analysis, a comparison was made between the actual number of deaths and change in liability and the projected number and expected liability change based on the prior year's assumption over the most recent five years.

**Termination Rates
Before Retirement**

Age	Rate (%)			
	Mortality*			
	Male	Female	Disability**	Withdrawal***
20	0.07	0.02	0.07	3.97
25	0.08	0.02	0.23	3.86
30	0.07	0.03	0.39	3.61
35	0.08	0.04	0.53	3.14
40	0.10	0.06	0.81	2.58
45	0.16	0.09	1.37	1.99
50	0.27	0.15	2.84	1.28
55	0.45	0.23	3.65	0.00
60	0.76	0.34	7.31	0.00

* Rates shown are from the base table.

** 80% of Disabled participants are assumed to qualify for a Social Security Disability pension.

*** Withdrawal rates cut out at early retirement age.

The termination rates and disability rates were based on historical and current demographic data, adjusted to reflect estimated future experience and professional judgment. As part of the analysis, a comparison was made between the actual number of terminations and disability retirements and the projected number based on the prior year's assumption over the most recent five years.

Retirement Rates

Age	Rate (%)	
	Not Eligible for 30 and Out Service Pension	Eligible for 30 and Out Service Pension
55 – 57	2	50
58 – 60	5	50
61	20	50
62	75	75
63 – 64	50	50
65	100	100

The retirement rates were based on historical and current demographic data, adjusted to reflect estimated future experience and professional judgment. As part of the analysis, a comparison was made between the actual number of retirements by age and change in liability and the projected number and expected liability change based on the prior year's assumption over the most recent five years.

Description of Weighted Average Retirement Age

Age 59, determined as follows: The weighted average retirement age for each participant is calculated as the sum of the product of each potential current or future retirement age times the probability of surviving from current age to that age and then retiring at that age, assuming no other decrements. The overall weighted retirement age is the average of the individual retirement ages based on all the active participants included in the February 1, 2017 actuarial valuation.

Retirement Age for Inactive Vested Participants

62

The retirement age for inactive vested participants was based on historical and current demographic data, adjusted to reflect estimated future experience and professional judgment. As part of the analysis, a comparison was made between the actual and projected retirement ages based on the prior years' assumption over the most recent five years.

Future Benefit Accruals

0.95 pension credit, one year of vesting service, and benefit accrual of \$110 per year

The future benefit accruals were based on historical and current demographic data, adjusted to reflect estimated future experience and professional judgment. As part of the analysis, a comparison was made between the assumed and the actual benefit accruals over the most recent five years.

Unknown Data for Participants

Same as those exhibited by participants with similar known characteristics. If not specified, participants are assumed to be male.

Liabilities for Future Pro-Rata Pensioners	<p>2% load on active liabilities and normal cost.</p> <p>The load for pro-rata pensioners was based on historical and current data, adjusted to reflect estimated future experience and professional judgment.</p>
Definition of Active Participants	<p>Participants who had worked at least 250 hours in the pension credit year that ended on December 31, 2016 and accumulated at least one pension credit, excluding those who have retired as of the valuation date. Liabilities for active participants are valued as of February 1, 2017, and include an adjustment to benefit accruals for 1/12 plan year.</p>
Inactive Vested Participants	<p>Inactive participants over age 70 are assumed to never return and apply for a benefit.</p> <p>The retirement assumption of inactive vested participants was based on historical and current demographic data, adjusted to reflect estimated future experience and professional judgment. As part of the analysis, the ages of new retirees from inactive vested status were reviewed.</p>
Percent Married	80%
Age of Spouse	Females are 4 years younger than their spouses.
Sex of Spouse	<p>Spouses are the opposite sex of participants.</p> <p>The percent married, age of spouse, and sex of spouse assumptions were based on historical and current demographic data, adjusted to reflect estimated future experience and professional judgment. As part of the analysis, a comparison was made between the assumed and actual demographic spousal data.</p>
Benefit Election	<p>Participants are assumed to elect a pension with the same value as the Single Life Annuity with 60 months guaranteed.</p> <p>The benefit elections were based on historical and current demographic data, adjusted to reflect the plan design, and estimated future experience and professional judgment.</p>
Net Investment Return	<p>7.50%</p> <p>The net investment return assumption is a long-term estimate derived from historical data, current and recent market expectations, and professional judgment. As part of the analysis, a building block approach was used that reflects inflation expectations and anticipated risk premiums for each of the portfolio's asset classes as provided by Segal Marco Advisors, as well as the Plan's target asset allocation.</p>
Annual Administrative Expenses	<p>\$1,140,000 for the year beginning February 1, 2017 (equivalent to \$1,096,443 payable at the beginning of the year)</p> <p>The annual administrative expenses were based on historical and current data, adjusted to reflect estimated future experience and professional judgment.</p>
Actuarial Value of Assets	<p>The market value of assets less unrecognized returns in each of the last four years. Unrecognized return is equal to the difference between the actual market return and the projected return on the actuarial value, and is recognized 25% per year over a four-year period (10% over a ten-year period for the investment loss incurred during the Plan Year ended January 31, 2009). The actuarial value is further adjusted, if necessary, to be within 20% of the market value.</p>
Actuarial Cost Method	<p>Unit Credit Actuarial Cost Method. Normal Cost and Actuarial Accrued Liability are calculated on an individual basis and are allocated based on accruals under the Plan.</p>

Benefits Valued	Unless otherwise indicated, includes all benefits summarized in <i>Exhibit 9</i> .
Current Liability Assumptions	<i>Interest:</i> 3.05%, within the permissible range prescribed under IRC Section 431(c)(6)(E) <i>Mortality:</i> Mortality prescribed under IRS Regulations 1.431(c)(6)-1 and 1.430(h)(3)-1: RP-2000 tables projected forward to the valuation year plus seven years for annuitants and 15 years for nonannuitants
Estimated Rate of Investment Return	<i>On actuarial value of assets (Schedule MB, line 6g):</i> 4.7%, for the Plan Year ending January 31, 2017 <i>On current (market) value of assets (Schedule MB, line 6h):</i> 13.2%, for the Plan Year ending January 31, 2017
FSA Contribution Timing (Schedule MB, line 3a)	Unless otherwise noted, contributions are paid periodically throughout the year pursuant to collective bargaining agreements. The interest credited in the FSA is therefore assumed to be equivalent to a July 31 contribution date.

This exhibit summarizes the major provisions of the Plan included in the valuation. It is not intended to be, nor should it be interpreted as, a complete statement of all plan provisions.

Plan Year	February 1 through January 31
Pension Credit Year	January 1 through December 31
Plan Status	Ongoing plan
Regular Pension	<ul style="list-style-type: none"> • <i>Age Requirement:</i> 62 • <i>Service Requirement:</i> 5 pension credits • <i>Amount:</i> The sum of the following: <ul style="list-style-type: none"> (i) \$35 times the pension credit earned before January 1, 1980; plus (ii) \$120 times the pension credits earned January 1, 1980 through December 31, 2005, including hour bank pension credits earned prior to January 1, 2006; plus (iii) \$120 times the pension credits earned after December 31, 2005, including hours from the hour bank. No pension credit accrual will be earned unless the participant works at least 250 hours in Covered Employment. Participants who work at least 250 hours, but less than 1,500 receive a prorated benefit accrual rate.
Thirty-and-Out Service Pension	<ul style="list-style-type: none"> • <i>Age Requirement:</i> 55 • <i>Service Requirement:</i> The sum of pension credits accrued prior to January 1, 2005 plus years of vesting service accrued on or after January 1, 2005 equal 30 or more. • <i>Amount:</i> For participants retiring prior to January 1, 2010, regular pension accrued. For participants retiring on or after January 1, 2010 with at least 30 years of participation based on vesting service, regular pension accrued. For participants retiring on or after January 1, 2010 with less than 30 years of participation based on vesting service, regular pension accrued for pension credits earned for hours worked prior to January 1, 2010, plus regular pension accrued reduced by 4.5% for each year of age under 62 for pension credits earned for hours worked after January 1, 2010.
100-and-Out Service Pension	<ul style="list-style-type: none"> • <i>Age Requirement:</i> 58 • <i>Service Requirement:</i> Age added to pension credits equal to 100 or more • <i>Amount:</i> Regular pension accrued

Early Retirement	<ul style="list-style-type: none"> • <i>Age Requirement:</i> 55 • <i>Service Requirement:</i> 15 pension credits • <i>Amount:</i> Regular pension accrued, reduced by 6% for each year of age less than 62 								
Regular Disability	<ul style="list-style-type: none"> • <i>Age Requirement:</i> None • <i>Service Requirement:</i> 30 pension credits or 5 pension credits and qualified for a Social Security Disabilities benefit. • <i>Amount:</i> According to the following table <table> <tr> <th>Pension Credits Earned</th><th>Amount of Disability Pension</th></tr> <tr> <td>5 Pension Credits</td><td>50% of the Regular Pension</td></tr> <tr> <td>Each additional Pension Credit</td><td>2% of the Regular Pension</td></tr> <tr> <td>30 or more Pension Credits</td><td>100% of the Regular Pension</td></tr> </table> 	Pension Credits Earned	Amount of Disability Pension	5 Pension Credits	50% of the Regular Pension	Each additional Pension Credit	2% of the Regular Pension	30 or more Pension Credits	100% of the Regular Pension
Pension Credits Earned	Amount of Disability Pension								
5 Pension Credits	50% of the Regular Pension								
Each additional Pension Credit	2% of the Regular Pension								
30 or more Pension Credits	100% of the Regular Pension								
Temporary Disability	<ul style="list-style-type: none"> • <i>Age Requirement:</i> None • <i>Service Requirement:</i> 5 pension credits • <i>Amount:</i> If the participant is totally and permanently disabled from employment as an iron worker, payments are made for 24 months, with the participant able to apply for a deferred benefit when otherwise eligible. • For participants awarded the temporary disability benefit on or after January 1, 2010, the amount of any other Pension benefits except for a regular disability pension will be actuarially reduced by the value of the temporary disability benefit payments received. 								
Pro-Rata	<ul style="list-style-type: none"> • <i>Age Requirement:</i> None • <i>Service Requirement:</i> 5 Combined Service Credits (pension credits under this Plan and any related Plan which has executed a Pro-Rata agreement) • <i>Amount:</i> Regular or early pension accrued based on Combined Service Credits, multiplied by the ratio of credits earned under this plan to Combined Service Credits 								

Vesting	<ul style="list-style-type: none"> • <i>Age Requirement:</i> None • <i>Service Requirement:</i> 5 pension credits earned during the contribution period or 5 years of vesting service Or • <i>Age and Service Requirement:</i> 65 • <i>Amount:</i> Regular or early pension accrued based on plan in effect when last active <p><i>Normal Retirement Age:</i> 65</p>
Spouse's Pre-Retirement Death Benefit	<ul style="list-style-type: none"> • <i>Age Requirement:</i> None • <i>Service Requirement:</i> 5 pension credits during the contribution period or 5 years of vesting service. • <i>Amount:</i> 50% of the benefit employee would have received had he or she retired the day before death and elected the joint and survivor option. If the employee died prior to eligibility for an early retirement pension, the spouse's benefit is deferred to the date employee would have been eligible to retire. • <i>Charge for Coverage:</i> None
Pre-Retirement 60-Payment Certain (Payable in lieu of Spouse's benefit)	<ul style="list-style-type: none"> • <i>Age Requirement:</i> 55 • <i>Service Requirement:</i> 15 pension credits or 5 pension credits at age 62. • <i>Amount:</i> Monthly benefit to which employee would have been entitled had he or she retired the day before death, payable to the designated beneficiary
Pre-Retirement Lump-Sum Death Benefit (Payable in lieu of Spouse's benefit)	<ul style="list-style-type: none"> • <i>Age Requirement:</i> None • <i>Service Requirement:</i> 5 pension credits earned during the contribution period • <i>Amount:</i> 100% of contributions made on behalf of the employee
Post-Retirement Death Benefit – Husband and Wife	<p>If married, beginning at age 55 pension benefits are paid in the form of a 50% joint and survivor annuity unless this form is rejected by the participant and spouse. If not rejected and the spouse pre-deceases the participant, the participants monthly benefit will subsequently be increased to the unreduced amount payable had the joint and survivor coverage been rejected. If rejected, or if not married, the benefits are payable for the life of the employee with five years of payment guaranteed without reduction, or in any other available optional form elected by the employee in an actuarially equivalent amount. Regular Disability pensioners are guaranteed five years of payment based on early retirement pension for which they would have been eligible or 100% return of contributions.</p>
Post-Retirement Death Benefit – Lump-Sum Benefit	<p>For all participants who retire or have retired on a Regular, Early, Disability, or Thirty and Out Service pension, a \$7,000 lump sum death benefit is payable at the time of death.</p>

Optional Forms of Benefits	Single Life Annuity with 60 months guaranteed 75% and 100% Husband and Wife Pension Options with a “pop-up” feature 50%, 75%, and 100% Joint-and-Survivor Options to a non-spouse Social Security Level Income Option, assuming Social Security benefits would start at age 62.
Participation	Earliest January 1 or July 1 after completion of 1,000 hours during a calendar year.
Pension Credit	One hundredth of a pension credit for each 15 hours in covered employment, up to one pension credit in any year; plus the pension credit earned, if any, from the hour bank. Hours in excess of 1,800 hours in a calendar year prior to 2005, and all hours in excess of 2,000 on or after January 1, 2005 are added to the hour bank.
Vesting Credit	One year of vesting service for each calendar year in which the employee works 1,000 hours in covered employment.
Contribution Rate	\$9.50 per hour effective June 1, 2016; previously \$9.20 per hour
Changes in Plan Provisions	There were no changes in plan provisions reflected in this actuarial valuation

Plan Year	Expected Annual Benefit Payments ¹
2017	\$82,859,153
2018	83,771,333
2019	84,713,300
2020	85,364,996
2021	86,096,977
2022	86,476,746
2023	86,698,252
2024	86,801,095
2025	87,407,062
2026	87,973,895

¹ Assuming as of the valuation date:

- no additional accruals,
- experience is in line with valuation assumptions, and
- no new entrants are covered by the plan.

The participant data is for the year ended December 31, 2016.

Age	Total	Pension Credits								
		1-4	5-9	10-14	15 - 19	20 - 24	25 - 29	30 - 34	35 - 39	40 & over
Under 25	166	162	4	–	–	–	–	–	–	–
25 - 29	306	184	112	9	–	–	–	–	–	–
30 - 34	437	161	182	89	5	–	–	–	–	–
35 - 39	517	93	160	124	135	5	–	–	–	–
40 - 44	528	61	91	112	187	75	2	–	–	–
45 - 49	538	30	79	95	145	126	58	5	–	–
50 - 54	430	21	47	58	89	94	82	38	1	–
55 - 59	212	9	20	23	38	45	39	22	16	–
60 - 64	49	4	4	5	9	11	6	6	2	2
65 - 69	3	–	–	–	–	–	1	–	–	2
70 & over	2	1	–	–	–	1	–	–	–	–
Unknown	5	5	–	–	–	–	–	–	–	–
Total	3,192	731	699	515	608	357	188	71	19	4

Note: Excludes 363 participants with less than one pension credit.

Line 11

Based on past experience and future expectations, the following actuarial assumptions were changed as of February 1, 2017 for funding purposes and January 31, 2017 for withdrawal liability purposes:

Net investment return assumption, previously 7.75%

Mortality improvement scale, previously MP-2015

Administrative expenses, previously \$1,100,000, payable monthly

Schedule of FSA Bases (Charges)

Type of Base	Date Established	Amortization Amount	Years Remaining	Outstanding Balance
Plan amendment	06/01/1989	\$228,093	2.33	\$507,590
Plan amendment	02/01/1990	2,647	3	7,400
Change in assumptions	02/01/1990	57,032	3	159,438
Plan amendment	06/01/1990	171,290	3.33	525,878
Plan amendment	06/01/1991	529,190	4.33	2,040,632
Plan amendment	06/01/1992	354,370	5.33	1,625,535
Plan amendment	02/01/1993	1,820,911	6	9,188,106
Plan amendment	02/01/1994	1,607,503	7	9,152,877
Experience loss	02/01/1995	1,429,273	8	8,999,560
Plan amendment	02/01/1996	2,251,176	9	15,436,998
Change in assumptions	02/01/1997	731,539	10	5,397,940
Change in assumptions	02/01/1998	317,251	11	2,494,886
Plan amendment	02/01/1998	2,885,563	11	22,692,304
Plan amendment	02/01/1999	1,612,102	12	13,405,309
Plan amendment	02/01/2000	1,874,439	13	16,373,745
Plan amendment	02/01/2002	2,596,325	15	24,636,924
Experience loss	02/01/2003	6,959,397	1	6,959,397
Experience loss	02/01/2004	3,344,757	2	6,456,158
Experience loss	02/01/2005	3,463,872	3	9,683,480
Experience loss	02/01/2006	1,791,349	4	6,449,798
Experience loss	02/01/2008	2,047,609	6	10,331,999
Experience loss	02/01/2009	1,329,061	7	7,567,468

Schedule of FSA Bases (Charges)

Type of Base	Date Established	Amortization Amount	Years Remaining	Outstanding Balance
Base due to Jan. 31, 2009 Investment Loss	02/01/2009	10,739,741	21	120,225,936
Base due to Jan. 31, 2009 Investment Loss	02/01/2010	569,818	21	6,378,825
Base due to Jan. 31, 2009 Investment Loss	02/01/2011	806,573	21	9,029,175
Change in assumptions	02/01/2012	862,559	10	6,364,729
Base due to Jan. 31, 2009 Investment Loss	02/01/2012	1,036,388	21	11,601,834
Base due to Jan. 31, 2009 Investment Loss	02/01/2013	1,302,453	21	14,580,297
Base due to Jan. 31, 2009 Investment Loss	02/01/2014	2,767,159	21	30,976,933
Experience loss	02/01/2015	1,834,004	13	16,020,537
Change in assumptions	02/01/2015	2,552,868	13	22,300,010
Change in assumptions	02/01/2016	985,493	14	8,993,455
Experience loss	02/01/2016	3,226,127	14	29,441,118
Change in assumptions	02/01/2017	2,089,520	15	19,827,776
Experience loss	02/01/2017	3,006,923	15	28,533,157
Total		\$69,184,375		\$504,367,204

Schedule of FSA Bases (Credits)

Type of Base	Date Established	Amortization Amount	Years Remaining	Outstanding Balance
Combined bases	02/01/2008	\$4,061,603	0.35	\$4,061,603
Change in Method	02/01/2008	9,086,259	1	9,086,259
Change in Asset Method	02/01/2009	3,722,372	22	42,485,223
Plan amendment	02/01/2010	588,797	8	3,707,417
Experience gain	02/01/2010	1,020,703	8	6,426,957
Experience gain	02/01/2011	2,906,455	9	19,930,441
Experience gain	02/01/2012	1,274,978	10	9,407,920
Experience gain	02/01/2013	2,674,306	11	21,030,960
Experience gain	02/01/2014	3,172,417	12	26,379,995
Total		\$28,507,890		\$142,516,775

**SCHEDULE MB
(Form 5500)**Department of the Treasury
Internal Revenue ServiceDepartment of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

**Multiemployer Defined Benefit Plan and Certain
Money Purchase Plan Actuarial Information**

This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6059 of the Internal Revenue Code (the Code).

▶ **File as an attachment to Form 5500 or 5500-SF.**

OMB No. 1210-0110

2017**This Form Is Open to Public
Inspection**

For calendar plan year 2017 or fiscal plan year beginning 02/01/2017 and ending 01/31/2018

▶ **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 IRON WORKERS DISTRICT COUNCIL OF SOUTHERN OHIO & VICINITY PENSION TRUST	B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF IRON WORKERS DISTRICT COUNCIL OF SO OH & VICINITY PENSION	D Employer Identification Number (EIN) 31-6038516

E Type of plan: (1) ☒ Multiemployer Defined Benefit (2) ☐ Money Purchase (see instructions)**1a** Enter the valuation date: Month 02 Day 01 Year 2017**b** Assets

(1) Current value of assets.....	1b(1)	739,862,942
(2) Actuarial value of assets for funding standard account.....	1b(2)	772,038,621

c (1) Accrued liability for plan using immediate gain methods	1c(1)	1,078,556,891
--	--------------	---------------

(2) Information for plans using spread gain methods:

(a) Unfunded liability for methods with bases	1c(2)(a)	
---	-----------------	--

(b) Accrued liability under entry age normal method.....	1c(2)(b)	
--	-----------------	--

(c) Normal cost under entry age normal method	1c(2)(c)	
---	-----------------	--

(3) Accrued liability under unit credit cost method	1c(3)	1,078,556,891
---	--------------	---------------

d Information on current liabilities of the plan:

(1) Amount excluded from current liability attributable to pre-participation service (see instructions)	1d(1)	
---	--------------	--

(2) "RPA '94" information:

(a) Current liability.....	1d(2)(a)	2,011,444,121
----------------------------	-----------------	---------------

(b) Expected increase in current liability due to benefits accruing during the plan year.....	1d(2)(b)	42,027,180
---	-----------------	------------

(c) Expected release from "RPA '94" current liability for the plan year.....	1d(2)(c)	82,347,755
--	-----------------	------------

(3) Expected plan disbursements for the plan year.....	1d(3)	83,487,755
--	--------------	------------

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	Daniel V. Ciner <i>DVC</i>	10/18/2018
	Signature of actuary	Date
DANIEL V. CINER, MAAA		1705773
	Type or print name of actuary	Most recent enrollment number
SEGAL CONSULTING		312-984-8500
	Firm name	Telephone number (including area code)
101 NORTH WACKER DRIVE		
CHICAGO IL 60606-1724		
	Address of the firm	

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

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

Schedule MB (Form 5500) 2017

2 Operational information as of beginning of this plan year:

a Current value of assets (see instructions)	2a	739,862,942
b "RPA '94" current liability/participant count breakdown:	(1) Number of participants	(2) Current liability
(1) For retired participants and beneficiaries receiving payment	3,798	1,092,507,994
(2) For terminated vested participants	1,253	185,933,511
(3) For active participants:		
(a) Non-vested benefits		111,911,730
(b) Vested benefits		621,090,886
(c) Total active	3,192	733,002,616
(4) Total	8,243	2,011,444,121
c If the percentage resulting from dividing line 2a by line 2b(4), column (2), is less than 70%, enter such percentage	2c	36.78 %

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

(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees
08/01/2018	56,564,889	0			
Totals ▶			3(b)	56,564,889	3(c) 0

4 Information on plan status:

a Funded percentage for monitoring plan's status (line 1b(2) divided by line 1c(3))	4a	71.6 %
b Enter code to indicate plan's status (see instructions for attachment of supporting evidence of plan's status). If code is "N," go to line 5	4b	E
c Is the plan making the scheduled progress under any applicable funding improvement or rehabilitation plan?		☒ Yes ☐ No
d If the plan is in critical status or critical and declining status, were any benefits reduced (see instructions)?		☐ Yes ☐ No
e If line d is "Yes," enter the reduction in liability resulting from the reduction in benefits (see instructions), measured as of the valuation date	4e	
f If the rehabilitation plan projects emergence from critical status or critical and declining status, enter the plan year in which it is projected to emerge. If the rehabilitation plan is based on forestalling possible insolvency, enter the plan year in which insolvency is expected and check here ☐	4f	

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

- | | | | |
|--|--|--|---|
| a ☐ Attained age normal | b ☐ Entry age normal | c ☒ Accrued benefit (unit credit) | d ☐ Aggregate |
| e ☐ Frozen initial liability | f ☐ Individual level premium | g ☐ Individual aggregate | h ☐ Shortfall |

i ☐ Other (specify):

j If box h is checked, enter period of use of shortfall method 5j

k Has a change been made in funding method for this plan year? ☐ Yes ☒ No

l If line k is "Yes," was the change made pursuant to Revenue Procedure 2000-40 or other automatic approval? ☐ Yes ☐ No

m If line k is "Yes," and line l is "No," enter the date (MM-DD-YYYY) of the ruling letter (individual or class) approving the change in funding method 5m

6 Checklist of certain actuarial assumptions:

a Interest rate for "RPA '94" current liability 6a 3.05 %

	Pre-retirement		Post-retirement	
b Rates specified in insurance or annuity contracts	☐ Yes	☐ No ☒ N/A	☐ Yes	☐ No ☒ N/A
c Mortality table code for valuation purposes:				
(1) Males	6c(1)	A		A
(2) Females	6c(2)	A		A
d Valuation liability interest rate	6d	7.50 %		7.50 %
e Expense loading	6e	7.0 % ☐ N/A	%	☒ N/A
f Salary scale	6f	% ☒ N/A		
g Estimated investment return on actuarial value of assets for year ending on the valuation date	6g			4.7 %
h Estimated investment return on current value of assets for year ending on the valuation date	6h			13.2 %

7 New amortization bases established in the current plan year:

(1) Type of base	(2) Initial balance	(3) Amortization Charge/Credit
1	28,533,157	3,006,923
4	19,827,776	2,089,520

8 Miscellaneous information:

a If a waiver of a funding deficiency has been approved for this plan year, enter the date (MM-DD-YYYY) of the ruling letter granting the approval 8a

b(1) Is the plan required to provide a projection of expected benefit payments? (See the instructions.) If "Yes," attach a schedule. ☒ Yes ☐ No

b(2) Is the plan required to provide a Schedule of Active Participant Data? (See the instructions.) If "Yes," attach a schedule. ☒ Yes ☐ No

c Are any of the plan's amortization bases operating under an extension of time under section 412(e) (as in effect prior to 2008) or section 431(d) of the Code? ☐ Yes ☒ No

d If line c is "Yes," provide the following additional information:

(1) Was an extension granted automatic approval under section 431(d)(1) of the Code? ☐ Yes ☐ No

(2) If line 8d(1) is "Yes," enter the number of years by which the amortization period was extended 8d(2)

(3) Was an extension approved by the Internal Revenue Service under section 412(e) (as in effect prior to 2008) or 431(d)(2) of the Code? ☐ Yes ☐ No

(4) If line 8d(3) is "Yes," enter number of years by which the amortization period was extended (not including the number of years in line (2)) 8d(4)

(5) If line 8d(3) is "Yes," enter the date of the ruling letter approving the extension 8d(5)

(6) If line 8d(3) is "Yes," is the amortization base eligible for amortization using interest rates applicable under section 6621(b) of the Code for years beginning after 2007? ☐ Yes ☐ No

e If box 5h is checked or line 8c is "Yes," enter the difference between the minimum required contribution for the year and the minimum that would have been required without using the shortfall method or extending the amortization base(s) 8e

9 Funding standard account statement for this plan year:

Charges to funding standard account:

a Prior year funding deficiency, if any 9a 0

b Employer's normal cost for plan year as of valuation date 9b 16,694,117

c Amortization charges as of valuation date:		Outstanding balance	
(1) All bases except funding waivers and certain bases for which the amortization period has been extended	9c(1)	504,367,204	69,184,375
(2) Funding waivers	9c(2)		
(3) Certain bases for which the amortization period has been extended	9c(3)		
d Interest as applicable on lines 9a, 9b, and 9c.....	9d		6,440,887
e Total charges. Add lines 9a through 9d.....	9e		92,319,379
Credits to funding standard account:			
f Prior year credit balance, if any.....	9f		55,332,159
g Employer contributions. Total from column (b) of line 3.....	9g		56,564,889
		Outstanding balance	
h Amortization credits as of valuation date.....	9h	142,516,775	28,507,890
i Interest as applicable to end of plan year on lines 9f, 9g, and 9h	9i		8,409,187
j Full funding limitation (FFL) and credits:			
(1) ERISA FFL (accrued liability FFL)	9j(1)	441,524,242	
(2) "RPA '94" override (90% current liability FFL)	9j(2)	1,086,084,862	
(3) FFL credit.....	9j(3)		0
k (1) Waived funding deficiency.....	9k(1)		0
(2) Other credits	9k(2)		0
l Total credits. Add lines 9f through 9i, 9j(3), 9k(1), and 9k(2).....	9l		148,814,125
m Credit balance: If line 9l is greater than line 9e, enter the difference.....	9m		56,494,746
n Funding deficiency: If line 9e is greater than line 9l, enter the difference	9n		
9 o Current year's accumulated reconciliation account:			
(1) Due to waived funding deficiency accumulated prior to the 2016 plan year	9o(1)		0
(2) Due to amortization bases extended and amortized using the interest rate under section 6621(b) of the Code:			
(a) Reconciliation outstanding balance as of valuation date	9o(2)(a)		
(b) Reconciliation amount (line 9c(3) balance minus line 9o(2)(a))	9o(2)(b)		0
(3) Total as of valuation date	9o(3)		0
10 Contribution necessary to avoid an accumulated funding deficiency. (See instructions.).....	10		
11 Has a change been made in the actuarial assumptions for the current plan year? If "Yes," see instructions.			☒ Yes ☐ No

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 <div style="text-align: center; font-size: 1.2em; font-weight: bold;">2017</div> This Form is Open to Public Inspection
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Part I Annual Report Identification Information	
For calendar plan year 2017 or fiscal plan year beginning <u>02/01/2017</u> and ending <u>01/31/2018</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 Iron Workers District Council of SO OH & Vicinity Pension Trust	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%; padding: 5px;">1b Three-digit plan number (PN) ▶</td> <td style="width: 40%; padding: 5px;">001</td> </tr> <tr> <td colspan="2" style="padding: 5px;">1c Effective date of plan 12/01/1962</td> </tr> <tr> <td colspan="2" style="padding: 5px;">2b Employer Identification Number (EIN) 31-6038516</td> </tr> <tr> <td colspan="2" style="padding: 5px;">2c Plan Sponsor's telephone number (937) 454-1744</td> </tr> <tr> <td colspan="2" style="padding: 5px;">2d Business code (see instructions) 238900</td> </tr> </table>	1b Three-digit plan number (PN) ▶	001	1c Effective date of plan 12/01/1962		2b Employer Identification Number (EIN) 31-6038516		2c Plan Sponsor's telephone number (937) 454-1744		2d Business code (see instructions) 238900	
1b Three-digit plan number (PN) ▶	001										
1c Effective date of plan 12/01/1962											
2b Employer Identification Number (EIN) 31-6038516											
2c Plan Sponsor's telephone number (937) 454-1744											
2d Business code (see instructions) 238900											
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) Iron Workers District Council of Southern Ohio & Vicinity 1470 Worldwide Pl Vandalia OH 45377-1156											

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>11-1-18</u> Date	Bradley Winans Enter name of individual signing as plan administrator
SIGN HERE	 Signature of employer/plan sponsor	<u>11/1/18</u> Date	Clinton Suggs Enter name of individual signing as employer or plan sponsor
SIGN HERE	 Signature of DFE	 Date	 Enter name of individual signing as DFE

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

Form 5500 (2017)
v. 170203

Filing Authorization
2017 Form 5500 / Form 8955-SSA

Name of Plan: Iron Workers District Council of SO OH & Vicinity Pension Trust

EIN / PN: 31-6038516 / 001

Plan Year Ending: January 31, 2018

PART I - Authorization of Practitioner to Electronically Sign and File

I hereby authorize Clark Schaefer Hackett to electronically sign and file the above-named returns/reports through EFAST2 and FIRE.

I understand that in granting this authority:

I/we must manually sign and date page 1 of the Form 5500 and Form 8955-SSA, if applicable, and provide a scanned copy of the signature pages to Clark Schaefer Hackett before the electronic filing can be initiated;

Clark Schaefer Hackett will retain a copy of this written authorization in its records;

Clark Schaefer Hackett will notify the individual(s) signing below as plan administrator/employer about any inquiries and information it receives from EFAST2, FIRE, DOL, IRS, or PBGC regarding this annual return/report; and

A copy of my signature, as it appears on page 1 of the Form 5500, will be included with the return/report posted by the Department of Labor on the Internet for public disclosure. The 8955-SSA will not be posted on the Internet for public disclosure.

Clark Schaefer Hackett shall not be deemed an administrator or other fiduciary with respect to any Plan solely on account of the services performed under this authorization.

This authorization is applicable only to the filing for the above-named Plan and applies only for Plan year end stated above.

 _____ Plan Administrator (Bradley Winans - Trustee)	11-1-18 _____ Date
 _____ Employer/Plan Sponsor (Clinton Suggs - Trustee)	11/1/18 _____ Date

PART II Acknowledgement of Receipt of Authorization

On behalf of Clark Schaefer Hackett, I hereby certify that the firm will use the authority granted only for the express purposes described above; that the firm will not disclose confidential information to any parties other than the DOL and/or IRS, as required for EFAST and/or FIRE filings; and that the firm will take reasonable steps to assure that confidential information provided by the Plan Administrator or Plan Sponsor is protected from unauthorized disclosure.

_____ Signature	_____ Title	_____ Date
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The designated service provider must retain this authorization.
Do not submit this form to the DOL or IRS unless requested to do so.

Iron Workers District Council of Southern Ohio and Vicinity Pension Trust

Funding Improvement Plan
For the Plan Year beginning February 1, 2015

INTRODUCTION

The Pension Protection Act of 2006 ("PPA")¹ requires the Trustees of a multiemployer pension plan that has been certified by the plan's actuary as being in endangered status (also known as "Yellow Zone" status) or seriously endangered status (also known as "Orange Zone" status) to develop a Funding Improvement Plan ("FIP"). A FIP must prescribe actions, including recommended actions to be taken by the bargaining parties, that are expected to enable a plan to meet stated financial benchmarks by the end of the Funding Improvement Period, based on reasonably anticipated experience and on reasonable actuarial assumptions.

The Iron Workers District Council of Southern Ohio and Vicinity Pension Trust ("Pension Trust") was first certified by its actuary to be in endangered status for the plan year beginning February 1, 2008. A FIP was adopted in compliance with the deadlines established by the PPA.

In 2009, the Pension Trust was certified by its actuary to be in seriously endangered status for the plan year beginning February 1, 2009 and an updated FIP was adopted in compliance with the PPA. The Pension Trust was certified to again be in seriously endangered status for the plan year beginning February 1, 2010. An updated FIP was adopted, unchanged from the prior year, except for the passage of another plan year.

For the plan years beginning February 1, 2011 through 2015, the Pension Trust was certified to be in endangered status. The Funding Improvement Period began February 1, 2011, and the Pension Trust was certified as making scheduled progress in meeting the requirements of the FIP every year since that date. The FIP has been updated annually in compliance with the deadlines established by the PPA, unchanged since 2009 except for the passage of each plan year.

Based upon the past practice of this Board of Trustees and the cooperation of the participating Local Unions, the Trustees have determined that the Schedules under this FIP will be effective as detailed below. The Trustees anticipate that the contribution rate increases will be paid to the Pension Trust from negotiated wage and benefits packages that are already in the existing Collective Bargaining Agreements ("CBA") or other written Agreements until such Agreements are renewed. In the event that the new contributions are not paid starting June 1, 2016 in accordance with the Alternative Schedule, the benefits will be reduced for all covered employment in that local union's jurisdiction on or after January 1, 2017 in accordance with Default Schedule that has been adopted by the Trustees (see below).

¹ Section 202 of the Pension Protection Act of 2006, Public Law 109-280 ("PPA"), amended the Employee Retirement Income Security Act of 1974 ("ERISA") by adding Section 305, and Section 212 of the PPA amended the Internal Revenue Code ("IRC") by adding Section 432, to provide additional rules for multiemployer defined benefit pension plans in endangered or critical status.

FUNDING IMPROVEMENT PERIOD

The start of the Pension Trust's Funding Improvement Period was determined to be February 1, 2011, based on the collective bargaining agreements in effect at that time. Based on the Pension Trust's endangered status, the Funding Improvement Period is the period of 10 plan years beginning February 1, 2011. If the actuary certifies before the end of this period that the Pension Trust is no longer in endangered or seriously endangered status for a plan year, the Funding Improvement Period will end as of the close of the preceding plan year.

FUNDING IMPROVEMENT PLAN - SCHEDULES

The FIP must be designed to accomplish the following:

1. An increase in the Pension Trust's PPA funded percentage by the end of the Funding Improvement Period of at least 33% of the difference between the funded percentage as of the beginning of the period (February 1, 2011) and 100%; and
2. No accumulated funding deficiency for any plan year during the Funding Improvement Period.

Based on the funded percentage as of February 1, 2011 of 71.8%, the FIP must contain schedules of plan and/or contribution changes that are projected to enable the funded percentage to improve to at least 81.1% by the end of the Funding Improvement Period and avoid a projected accumulated funding deficiency for any plan year during the specified period.

Projections based on reasonable assumptions, and the FIP Schedules described below, indicate the Pension Trust will meet these requirements. Both the Default Schedule (the schedule that would be applicable should a schedule not be adopted in collective bargaining on a timely basis) and the Alternative Schedule remain unchanged in 2015 for the sixth consecutive year, except for passage of another plan year. Details of each Schedule are shown below.

Default Schedule

1. A contribution rate of at least \$9.20 per hour for all contributing employers and for every year (beginning with adoption of this updated FIP) that the Pension Trust is in endangered or seriously endangered status, and
2. The plan of benefits in effect, including all amendments adopted by the date this updated FIP is adopted by the Trustees, for all current and future active participants and for every year that the Plan is in endangered or seriously endangered status, except for:
 - a) A 45% reduction in the benefit accrual rate for service earned on or after January 1, 2017 (*i.e. benefit accrual rate of \$66 per pension credit*), and
 - b) Any benefit changes required for the Plan to continue meeting the requirements to maintain its tax qualification under the Internal Revenue Code and comply with other applicable law.

Alternative Schedule

1. Contribution rates no less than the following until the Pension Trust is no longer in endangered or seriously endangered status:

Period of Hours Worked	Hourly Contribution Rate
On or before May 31, 2016	\$9.20
On or after June 1, 2016	9.50

2. The plan of benefits in effect, including all amendments adopted by the date this updated FIP is adopted by the Trustees, for all current and future active participants and for every year that the Plan is in endangered or seriously endangered status, except for any benefit changes required for the Plan to continue meeting the requirements to maintain its tax qualification under the Internal Revenue Code and comply with other applicable law.

Regardless of the Schedule implemented, plan amendments increasing benefits will not be allowed unless the actuary determines that they will be financed out of contributions not contemplated for the FIP and will not impede the Pension Trust's progress toward achieving the PPA benchmarks for plans in endangered status.

As noted below, these schedules are subject to revision if the Trustees determine that is necessary in light of the Pension Trust's financial condition and legal requirements, or as appropriate.

AUTOMATIC IMPLEMENTATION OF FIP DEFAULT SCHEDULE

Generally, if a Collective Bargaining Agreement providing for contributions under the Pension Trust that was in effect at the time the Plan entered endangered status expires, and after receiving FIP schedules, the bargaining parties fail to adopt a Collective Bargaining Agreement that provides for contributions at the scheduled rates, the Default Schedule will be implemented automatically 180 days after the date on which the Collective Bargaining Agreement expires, provided the employer has not withdrawn from the Pension Trust.

If a Collective Bargaining Agreement providing for contributions under a FIP Schedule (or the FIP Default Schedule is imposed as described above) expires while the Plan is in endangered status, and after receiving one or more updated FIP Schedules, the bargaining parties fail to adopt an updated FIP Schedule within 180 days after the date on which the Collective Bargaining Agreement expired, the Trustees will at that time implement the Schedule that was applicable under the expired Collective Bargaining Agreement, as updated and in effect on the date the Collective Bargaining Agreement expired.

However, in the present situation, the Trustees adopted a Plan Amendment to the Pension Trust which reduces the benefits for any participants who are working under a Collective Bargaining Agreement or Participation Agreement in accordance with the Default Schedule above if the required \$0.30 increase in contributions under the Alternative Schedule is not paid beginning June 1, 2016.

ADOPTION OF FUNDING IMPROVEMENT PLAN

The Trustees have adopted this updated FIP in compliance with the statutory deadline under the PPA. As detailed above, it is anticipated that the Alternative Schedule will be adopted through allocation of current wage and benefit packages outlined in the Collective Bargaining Agreements as of June 1, 2016. In the event that the contribution increases outlined in the Alternative Schedule are not approved by the membership and paid effective June 1, 2016, then the participants under those Collective Bargaining Agreements will have their benefits reduced as outlined in the Default Schedule effective for all covered employment beginning January 1, 2017.

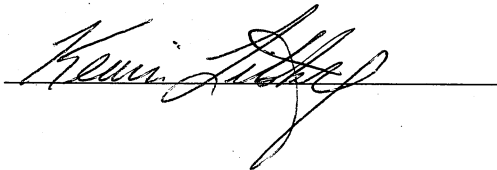
MONITORING AND ANNUAL UPDATING OF FUNDING IMPROVEMENT PLAN

Each year the plan's actuary will review and certify the status of the Pension Trust under the PPA funding rules and whether the Pension Trust is making the scheduled progress toward the requirements of the FIP. If the Trustees determine that it is necessary in light of updated information, they will revise the FIP and the benefit and contribution schedules recommended under it. Notwithstanding subsequent changes in benefit and contribution schedules, a schedule of contribution rates provided by the Trustees and relied upon by the bargaining parties in negotiating a Collective Bargaining Agreement shall remain in effect for the duration of that Collective Bargaining Agreement.

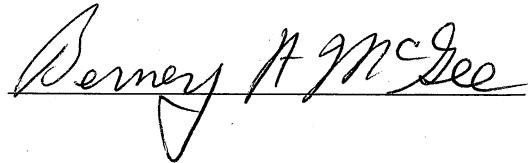
ADOPTION BY THE BOARD OF TRUSTEES

The Board of Trustees for the Iron Workers District Council of Southern Ohio and Vicinity Pension Trust indicated their adoption and approval of the aforesaid Funding Improvement Plan on January 12, 2016 in accordance with the requirements of the PPA and authorized the Co-Chairmen of the Trust to sign as follows:

UNION CO-CHAIRMAN

A handwritten signature in cursive script, appearing to read "Kevin Fisher", written over a horizontal line.

EMPLOYER CO-CHAIRMAN

A handwritten signature in cursive script, appearing to read "Bernard A. McGee", written over a horizontal line.