

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;">2018</div> This Form is Open to Public Inspection
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Part I	Annual Report Identification Information
For calendar plan year 2018 or fiscal plan year beginning <u>01/01/2018</u> and ending <u>12/31/2018</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>ICE INDUSTRIES 401(K) PLAN</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>03/01/2001</u></td> </tr> </table>	1b Three-digit plan number (PN) ▶	<u>001</u>	1c Effective date of plan <u>03/01/2001</u>	
1b Three-digit plan number (PN) ▶	<u>001</u>				
1c Effective date of plan <u>03/01/2001</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>ICE INDUSTRIES, INC.</u> <u>3810 HERR ROAD</u> <u>SYLVANIA, OH 43560-8925</u>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>2b Employer Identification Number (EIN) <u>01-0572966</u></td> </tr> <tr> <td>2c Plan Sponsor's telephone number <u>419-842-3603</u></td> </tr> <tr> <td>2d Business code (see instructions) <u>332110</u></td> </tr> </table>	2b Employer Identification Number (EIN) <u>01-0572966</u>	2c Plan Sponsor's telephone number <u>419-842-3603</u>	2d Business code (see instructions) <u>332110</u>	
2b Employer Identification Number (EIN) <u>01-0572966</u>					
2c Plan Sponsor's telephone number <u>419-842-3603</u>					
2d Business code (see instructions) <u>332110</u>					

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

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

SIGN HERE	Filed with authorized/valid electronic signature.	10/15/2019	MONICA PEREZ
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

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

Form 5500 (2018)
v. 171027

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	5 453
6 Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines 6a(1) , 6a(2) , 6b , 6c , and 6d). a(1) Total number of active participants at the beginning of the plan year a(2) Total number of active participants at the end of the plan year b Retired or separated participants receiving benefits..... c Other retired or separated participants entitled to future benefits d Subtotal. Add lines 6a(2) , 6b , and 6c e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits. f Total. Add lines 6d and 6e g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item) h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested	<div style="background-color: #cccccc; height: 20px; width: 100%;"></div> 6a(1) 415 6a(2) 361 6b 0 6c 39 6d 400 6e 0 6f 400 6g 293 6h 73
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	7

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

2E 2F 2G 2J 2K 2S 2T 3D

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)** ☐ **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 2018 Form M-1 annual report. If the plan was not required to file the 2018 Form M-1 annual report, enter the Receipt Confirmation Code for the most recent Form M-1 that was required to be filed under the Form M-1 filing requirements. (Failure to enter a valid Receipt Confirmation Code will subject the Form 5500 filing to rejection as incomplete.)

Receipt Confirmation Code _____

SCHEDULE C (Form 5500) 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
		2018
		This Form is Open to Public Inspection.

For calendar plan year 2018 or fiscal plan year beginning 01/01/2018 and ending 12/31/2018		
A Name of plan ICE INDUSTRIES 401(K) PLAN	B Three-digit plan number (PN) ▶	001
C Plan sponsor's name as shown on line 2a of Form 5500 ICE INDUSTRIES, INC.	D Employer Identification Number (EIN) 01-0572966	

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
FIDELITY INVESTMENTS INSTITUTIONAL
04-2647786

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

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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)

TDC LLC

20-1017513

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "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	ADVISOR	50382	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

FIDELITY INVESTMENTS INSTITUTIONAL

04-2647786

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
37 64 65	RECORDKEEPER	43050	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☐ No ☒

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

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

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

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

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

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

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

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

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

Part I Service Provider Information (continued)

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

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

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
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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
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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 2018 This Form is Open to Public Inspection
For calendar plan year 2018 or fiscal plan year beginning 01/01/2018 and ending 12/31/2018		
A Name of plan ICE INDUSTRIES 401(K) PLAN	B Three-digit plan number (PN) ►	001
C Plan sponsor's name as shown on line 2a of Form 5500 ICE INDUSTRIES, INC.	D Employer Identification Number (EIN) 01-0572966	

Part I Asset and Liability Statement			
1 Current value of plan assets and liabilities at the beginning and end of the plan year. Combine the value of plan assets held in more than one trust. Report the value of the plan's interest in a commingled fund containing the assets of more than one plan on a line-by-line basis unless the value is reportable on lines 1c(9) through 1c(14). Do not enter the value of that portion of an insurance contract which guarantees, during this plan year, to pay a specific dollar benefit at a future date. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 1b(1), 1b(2), 1c(8), 1g, 1h, and 1i. CCTs, PSAs, and 103-12 IEs also do not complete lines 1d and 1e. See instructions.			
Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a	0	0
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions.....	1b(1)	2348	3995
(2) Participant contributions	1b(2)	5956	0
(3) Other.....	1b(3)	0	0
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit).....	1c(1)	493407	424007
(2) U.S. Government securities	1c(2)	0	0
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)	0	0
(B) All other.....	1c(3)(B)	0	0
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)	0	0
(B) Common.....	1c(4)(B)	0	0
(5) Partnership/joint venture interests	1c(5)	0	0
(6) Real estate (other than employer real property).....	1c(6)	0	0
(7) Loans (other than to participants)	1c(7)	0	0
(8) Participant loans.....	1c(8)	273332	260843
(9) Value of interest in common/collective trusts	1c(9)	365392	336359
(10) Value of interest in pooled separate accounts	1c(10)	0	0
(11) Value of interest in master trust investment accounts	1c(11)	0	0
(12) Value of interest in 103-12 investment entities.....	1c(12)	0	0
(13) Value of interest in registered investment companies (e.g., mutual funds).....	1c(13)	10199339	9053368
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)		
(15) Other	1c(15)	0	0

1d Employer-related investments:		(a) Beginning of Year	(b) End of Year
(1) Employer securities	1d(1)	0	0
(2) Employer real property	1d(2)	0	0
e Buildings and other property used in plan operation	1e	0	0
f Total assets (add all amounts in lines 1a through 1e)	1f	11339774	10078572

Liabilities

g Benefit claims payable	1g	0	0
h Operating payables	1h	0	0
i Acquisition indebtedness	1i	0	0
j Other liabilities	1j	13878	5191
k Total liabilities (add all amounts in lines 1g through 1j)	1k	13878	5191

Net Assets

l Net assets (subtract line 1k from line 1f)	1l	11325896	10073381
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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 Contributions:			
(1) Received or receivable in cash from: (A) Employers.....	2a(1)(A)	169414	
(B) Participants.....	2a(1)(B)	855732	
(C) Others (including rollovers)	2a(1)(C)	31548	
(2) Noncash contributions	2a(2)	0	1056694
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	9925	
(B) U.S. Government securities	2b(1)(B)	0	
(C) Corporate debt instruments.....	2b(1)(C)	0	
(D) Loans (other than to participants).....	2b(1)(D)	0	
(E) Participant loans	2b(1)(E)	12346	
(F) Other	2b(1)(F)	0	
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		22271
(2) Dividends: (A) Preferred stock.....	2b(2)(A)	0	
(B) Common stock.....	2b(2)(B)	0	
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	320517	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		320517
(3) Rents.....	2b(3)		0
(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds.....	2b(4)(A)	0	
(B) Aggregate carrying amount (see instructions)	2b(4)(B)	0	
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)		
(5) Unrealized appreciation (depreciation) of assets: (A) Real estate.....	2b(5)(A)	0	
(B) Other	2b(5)(B)	0	
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		0

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		7517
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		0
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		0
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		0
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds).....	2b(10)		-1213471
c Other income.....	2c		0
d Total income. Add all income amounts in column (b) and enter total.....	2d		193528

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	1334162	
(2) To insurance carriers for the provision of benefits	2e(2)	0	
(3) Other	2e(3)	0	
(4) Total benefit payments. Add lines 2e(1) through (3).....	2e(4)		1334162
f Corrective distributions (see instructions)	2f		16158
g Certain deemed distributions of participant loans (see instructions)	2g		2291
h Interest expense.....	2h		0
i Administrative expenses: (1) Professional fees.....	2i(1)	0	
(2) Contract administrator fees.....	2i(2)	0	
(3) Investment advisory and management fees.....	2i(3)	0	
(4) Other	2i(4)	93432	
(5) Total administrative expenses. Add lines 2i(1) through (4).....	2i(5)		93432
j Total expenses. Add all expense amounts in column (b) and enter total	2j		1446043

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		-1252515
l Transfers of assets:			
(1) To this plan.....	2l(1)		0
(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: GILMORE, JASION & MAHLER

(2) EIN: 34-1827159

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

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

Part IV Compliance Questions

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

During the plan year:

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

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

	Yes	No	Amount
4a		X	
4b		X	

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

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 _____. (See instructions.)

SCHEDULE R (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Retirement Plan Information This schedule is required to be filed under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110 2018 This Form is Open to Public Inspection.
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For calendar plan year 2018 or fiscal plan year beginning 01/01/2018 and ending 12/31/2018

A Name of plan <u>ICE INDUSTRIES 401(K) PLAN</u>	B Three-digit plan number (PN) ▶ <u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>ICE INDUSTRIES, INC.</u>	D Employer Identification Number (EIN) <u>01-0572966</u>

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

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

1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions	1	
2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits): EIN(s): <u>04-6568107</u>		
Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.		
3 Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year	3	

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) 2018
v. 171027

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

b The plan year immediately preceding the current plan year

c The second preceding plan year

14a**14b****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

b The corresponding number for the second preceding plan year

15a**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

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

16a**16b**

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

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

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

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

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

Stock: _____ % Investment-Grade Debt: _____ % High-Yield Debt: _____ % Real Estate: _____ % Other: _____ %

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

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

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

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

**ICE INDUSTRIES 401(K) PLAN
FINANCIAL STATEMENTS
AND SUPPLEMENTAL SCHEDULE
WITH INDEPENDENT AUDITOR'S REPORT**

**DECEMBER 31, 2018 AND 2017
AND FOR THE YEAR ENDED DECEMBER 31, 2018**

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INDEPENDENT AUDITOR'S REPORT

Trustees and Plan Participants
Ice Industries 401(k) Plan
Sylvania, Ohio

Report on the Financial Statements

We were engaged to audit the accompanying financial statements of Ice Industries 401(k) Plan (the Plan), which comprise the statements of net assets available for benefits as of December 31, 2018 and 2017, and the related statement of changes in net assets available for benefits for the year ended December 31, 2018, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

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

Auditor's Responsibility

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

Basis for Disclaimer of Opinion

As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the Plan Administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Note 3, which was certified or provided by Fidelity Management Trust Company, the trustee of the Plan, except for comparing this information with the related information included in the financial statements. We have been informed by the Plan Administrator that the trustee holds the Plan's assets and executes transactions. The Plan Administrator has obtained certifications from the trustee as of December 31, 2018 and 2017, and for the year ended December 31, 2018, that the information provided to the Plan Administrator by the trustee is complete and accurate.

Disclaimer of Opinion

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

GJMLTD.COM

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Other Matter

The supplemental schedule H, line 4(i) – schedule of assets (held at end of year) as of December 31, 2018, is required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 and is presented for the purposes of additional analysis and is not a required part of the financial statements. The supplemental schedule is the responsibility of the Plan's management. Because of the significance of the matter described in the Basis for Disclaimer of Opinion paragraph, we do not express an opinion on the supplemental schedule.

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

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

Gilmore Jasion Mahler, LTD

Maumee, Ohio
October 14, 2019

ICE INDUSTRIES 401(K) PLAN
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
December 31, 2018 and 2017

	<u>2018</u>	<u>2017</u>
Assets		
Participant directed investments, at fair value	\$ 9,813,734	\$ 11,059,182
Receivables:		
Participant contributions	0	5,956
Employer contributions	3,995	2,348
Notes receivable from participants	260,843	273,332
Total receivables	<u>264,838</u>	<u>281,636</u>
Total assets	10,078,572	11,340,818
Liabilities - excess contributions payable	<u>5,191</u>	<u>13,878</u>
Net assets available for benefits	<u><u>\$ 10,073,381</u></u>	<u><u>\$ 11,326,940</u></u>

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

ICE INDUSTRIES 401(K) PLAN
STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
For the Year Ended December 31, 2018

Additions to net assets attributable to:

Investment income:		
Dividends and interest	\$	337,778
Interest income on notes receivable from participants		12,529
Contributions:		
Participant		855,732
Employer		169,414
Participants' rollovers from other qualified plans		31,548
Total contributions		<u>1,056,694</u>
Total additions		1,407,001

Deductions from net assets attributable to:

Retirement benefits and withdrawals		1,336,211
Net depreciation in fair value of investments		1,230,917
Administrative expenses		93,432
Total deductions		<u>2,660,560</u>
Net decrease		(1,253,559)

Net assets available for benefits

Beginning of year		<u>11,326,940</u>
End of year	\$	<u><u>10,073,381</u></u>

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

ICE INDUSTRIES 401(k) PLAN
NOTES TO FINANCIAL STATEMENTS-CONTINUED
December 31, 2018 and 2017

Note 1—Description of Plan

The following description of the Ice Industries 401(k) Plan (the Plan) is provided for general information purposes only. Participants should refer to the plan agreement and plan amendments for a more complete description of the Plan's provisions.

General

The Plan is a defined contribution plan covering substantially all employees of the subsidiaries of Ice Industries, Inc. (the Employer or Plan Sponsor) who have attained the age of 18 and 3 months of service, except employees covered by a collective bargaining agreement (union employees). The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974, as amended (ERISA).

Contributions

Participants may elect a percentage reduction in compensation, subject to Internal Revenue Service (IRS) limitations, which may be contributed to the Plan on a pretax basis as designated by the participant. Matching contributions for employees of the Employer are provided at the discretion of the Employer. At December 31, 2018, the matching contribution equaled 50% of the first 6% that the participant contributed to the Plan. The Plan includes an auto-enrollment provision whereby all newly eligible employees are automatically enrolled in the Plan unless they affirmatively elect not to participate in the Plan. Automatically enrolled participants have their deferral rate set at 6% of eligible compensation and their contributions invested in a target retirement date fund until changed by the participant. Participants may also contribute amounts representing distributions from other qualified plans (rollover).

Participant accounts

Individual accounts are maintained for each participant. Each participant's account is credited with the participant's contribution and the employer's contributions. Plan earnings are allocated based on the participant's share of net earnings or losses of their respective elected investment option. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

Retirement benefits and withdrawals

Upon termination of service due to death, disability, or retirement, a participant may elect to receive a lump-sum payment equal to the value of the participant's vested interest in his or her account. If employment is terminated for any reason other than those mentioned above, a participant will only be entitled to the portion of the employer's account that is vested.

In the event of a hardship, as defined in the plan agreement, participants may take a distribution from their accounts in an amount necessary to satisfy a financial need, subject to certain tax withholding.

ICE INDUSTRIES 401(k) PLAN
NOTES TO FINANCIAL STATEMENTS-CONTINUED
December 31, 2018 and 2017

Note 1—Description of Plan—continued

Vesting

Participants are immediately vested in their voluntary contributions plus actual earnings thereon. Participants are vested in the employer contributions over a six year-period as described in the table below:

1 year of service	0%
2 years of service	20%
3 years of service	40%
4 years of service	60%
5 years of service	80%
6 years of service	100%

Forfeitures

Forfeited balances of terminated participant accounts are used to offset administrative expenses and supplement employer contributions. Unused forfeitures at December 31, 2018 and 2017 were \$0 and \$95,858, respectively. Forfeitures used to reduce employer contributions during the year ended December 31, 2018 totaled \$173,891.

Notes receivable from participants

Participants may borrow the lesser of 50% of the fair market value of the vested account balance or \$50,000. The interest rate is established based on a reasonable rate of interest as determined by the Plan Administrator based on prevailing rates charged by persons in the business of lending money for loans which would be made under similar circumstances. The loan repayment schedule can be no longer than 60 months except if the loan is for the purpose of acquiring any house, apartment, condominium, or mobile home that is to be used as the principal residence of the participant. The Plan Administrator will determine the term of such loan. Principal and interest is paid ratably through payroll deductions. The loans are secured by the balance in the participant's account. Only one loan can be outstanding at any given time.

Plan termination

Although it has not expressed any intent to do so, the Employer has the right under the Plan provisions to discontinue its contributions at any time and to terminate the Plan subject to the provisions of ERISA. In the event of plan termination, participants become 100% vested in their account balances.

Note 2—Summary of significant accounting policies

Basis of accounting

The Plan maintains its records on the accrual basis, whereby income is recognized when earned and expenses are recognized when the obligations are incurred. Benefit payments are recorded when distributed by the Plan.

Use of estimates

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

ICE INDUSTRIES 401(k) PLAN
NOTES TO FINANCIAL STATEMENTS-CONTINUED
December 31, 2018 and 2017

Note 2—Summary of significant accounting policies—continued

Contributions

Employee salary deferrals and employer matching contributions are included in income during the period the related salary is earned.

Notes receivable from participants

Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest. Delinquent notes receivable from participants are recorded as a distribution based upon the terms of the plan document.

Administrative costs

The Plan Sponsor pays the administrative expenses of the Plan, unless the expenses relate to specific investment directions of the participant. Administrative expenses that are paid by the Plan Sponsor are excluded from these financial statements. Fees related to the administration of the participant's account are included in administrative expenses.

Valuation of investments and income recognition

Investments held by the Plan 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 4 for further discussion and disclosures related to fair value measurements.

Purchases and sales of investments are recorded on a trade-date basis. Interest income is recorded on the accrual basis. Dividend income is recorded on the ex-dividend date. Net appreciation (depreciation) includes gains and losses on investments bought and sold as well as held during the year.

Subsequent events

The Plan Sponsor has evaluated subsequent events through October 14, 2019, the date the financial statements were available to be issued.

Note 3—Investments

All investment information disclosed in the accompanying financial statements and supplemental schedule, including investments held and notes receivable from participants as of December 31, 2018 and 2017, and, realized and unrealized appreciation (depreciation) in fair value of investments, interest, dividends and interest income on notes receivable from participants for the year ended December 31, 2018, were obtained or derived from information supplied to the Plan Sponsor and certified by Fidelity Management Trust Company, as complete and accurate in accordance with Section 2520.103-5 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Such information has not been examined by independent auditors.

ICE INDUSTRIES 401(k) PLAN
NOTES TO FINANCIAL STATEMENTS-CONTINUED
December 31, 2018 and 2017

Note 4—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 under Financial Accounting Standards Board Accounting Standards Codification Topic, Fair Value Measurement, 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:

- a. Quoted prices for similar assets or liabilities in active markets;
- b. Quoted prices for identical or similar assets or liabilities in inactive markets;
- c. Inputs other than quoted prices that are observable for the asset or liability;
- d. 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 maximize the use of relevant observable inputs and minimize the use of unobservable inputs.

Following is a description of the valuation methodologies used for each major class of assets measured at fair value. There have been no changes in the methodologies used at December 31, 2018 and 2017.

Money Market – valued using amortized cost which approximates fair value.

Mutual Funds – valued at quoted market prices, which represent the net asset value of shares held by the Plan at year end.

ICE INDUSTRIES 401(k) PLAN
NOTES TO FINANCIAL STATEMENTS-CONTINUED
December 31, 2018 and 2017

Note 4—Fair value measurements—continued

Common/Collective Trust Fund – valued at the net asset value of units of a bank collective trust. The net asset value, as provided by the trustee, is used as a practical expedient to estimate fair value. The net asset value is based on the fair value of the underlying investments held by the fund less its liabilities. This practical expedient is not used when it is determined to be probable that the fund will sell the investment for an amount different from the reported net asset value. Participant transactions (purchases and sales) may occur daily. Were the Plan to initiate a full redemption of the collective trust, the investment adviser reserves the right to temporarily delay withdrawal from the trust in order to ensure that securities liquidations will be carried out in an orderly business manner.

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

The following tables set forth, by level, within the fair value hierarchy, the Plan's assets carried at fair value:

Description	Total	Fair Value Measurements at December 31, 2018		
		Level (1)	Using Level (2)	Level (3)
Money market	\$ 424,007	\$ 424,007	\$ 0	\$ 0
Mutual funds	9,053,368	9,053,368		
Total investments in the fair value hierarchy	9,477,375	\$ 9,477,375	\$ 0	\$ 0
Investments measured at net asset value ^(a)	336,359			
Total investment assets at fair value	\$ 9,813,734			

ICE INDUSTRIES 401(k) PLAN
NOTES TO FINANCIAL STATEMENTS-CONTINUED
December 31, 2018 and 2017

Note 4—Fair value measurements—continued

<u>Description</u>	<u>Total</u>	Fair Value Measurements at December 31, 2017		
		<u>Level (1)</u>	<u>Using Level (2)</u>	<u>Level (3)</u>
Money market	\$ 493,407	\$ 493,407	\$ 0	\$ 0
Mutual funds	<u>10,199,339</u>	<u>10,199,339</u>		
Total investments in the fair value hierarchy	10,692,746	<u>\$ 10,692,746</u>	<u>\$ 0</u>	<u>\$ 0</u>
Investments measured at net asset value (a)	<u>366,436</u>			
Total investment assets at fair value	<u>\$ 11,059,182</u>			

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

The common/collective trust fund's fair value, as measured at the net asset value (or its equivalent) as a practical expedient, is \$336,359 and \$366,436 at December 31, 2018 and 2017, respectively. The common/collective trust fund has no unfunded commitments, has a daily redemption frequency and requires a 1 day redemption period.

Note 5—Related party transactions and party-in-interest transactions

The Plan invests in a common/collective trust fund managed by Fidelity Management Trust Company. Fidelity Management Trust Company is the current trustee as defined by the Plan and, therefore, these transactions qualify as party-in interest transactions. Fees incurred by the Plan for the investment management services are included in net appreciation (depreciation) in fair value of the investment. The Plan made direct payments to the current trustee of approximately \$43,000 during 2018.

Note 6—Income tax status

The Plan is a prototype plan. The currently designed prototype plan has received a favorable opinion letter, dated March 31, 2014, from the IRS that the prototype plan as designed qualifies for federal income tax-exempt status. The Plan has not individually sought a determination from the IRS on its qualification status. Therefore, no provision for income taxes has been included in the Plan's financial statements.

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

ICE INDUSTRIES 401(k) PLAN
NOTES TO FINANCIAL STATEMENTS-CONTINUED
December 31, 2018 and 2017

Note 7—Risks and uncertainties

The Plan invests in various investment securities. Investment securities are exposed to various risks such as interest rate, market, and credit. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that the changes in the values of investment securities will occur in a near term and that such changes could materially affect participants' account balances and the amounts reported in the statements of net assets available for benefits.

Note 8—Reconciliation to Form 5500

The following is a reconciliation of net assets available for benefits per the financial statements at December 31, 2018 and 2017 to the Form 5500:

	2018	2017
Net assets available for benefits per the financial statements	\$ 10,073,381	\$ 11,326,940
Adjustment for net asset value as a practical expedient for the common/collective trust fund	(3,571)	(1,044)
Adjustment for excess contributions payable	5,191	0
Adjustment for employer contributions receivable	(3,995)	0
Net assets available for benefits per the Form 5500	<u>\$ 10,071,006</u>	<u>\$ 11,325,896</u>

The following is a reconciliation of changes in net assets available for benefits per the financial statements for the year ended December 31, 2018 to the Form 5500:

Net decrease in net assets per the financial statements	\$ (1,253,559)
Change in adjustment for net asset value as a practical expedient for the common/collective trust fund	(2,527)
Adjustment for excess contribution	5,191
Adjustment for employer contribution	(3,995)
Net decrease per the Form 5500	<u>\$ (1,254,890)</u>

SUPPLEMENTAL SCHEDULE

ICE INDUSTRIES 401(K) PLAN
SCHEDULE H, LINE 4(i) - SCHEDULE OF ASSETS (HELD AT END OF YEAR)
Employee Identification No. 01-0572966 Plan No. 001
December 31, 2018

(a)/(b) Identity of Issue, Borrower, Lessor or Similar Party	(c) Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	(d) Cost	(e) Current Value
	Money market		
Vanguard	Vanguard Federal Money Market Fund Investor Shares	**	\$ 424,007
	Mutual funds		
Vanguard	Vanguard Total Bond Market Index Fund Admiral Shares	**	1,004,638
Dimensional Fund Advisors	DFA U.S. Core Equity II Portfolio Institutional Class	**	998,292
Vanguard	Vanguard Short Term Bond Index Fund Admiral Shares	**	662,956
Dimensional Fund Advisors	DFA U.S. Small Cap Value Portfolio Institutional Class	**	606,070
Vanguard	Vanguard Growth Index Fund Admiral Shares	**	489,269
Dimensional Fund Advisors	DFA International Value Portfolio Institutional Class	**	488,661
Dimensional Fund Advisors	DFA International Small Cap Value Portfolio Institutional Class	**	443,843
Dimensional Fund Advisors	DFA U.S. Large Cap Value Portfolio Institutional Class	**	419,014
Dimensional Fund Advisors	DFA Emerging Markets Core Equity Portfolio Institutional Class	**	410,105
Vanguard	Vanguard Target Retirement 2020 Fund Investor Shares	**	409,934
Vanguard	Vanguard 500 Index Fund Admiral Class	**	357,526
Dimensional Fund Advisors	DFA International Core Equity Portfolio Institutional Class	**	339,515
Vanguard	Vanguard Mid-Cap Growth Index Fund Admiral Shares	**	338,288
Dimensional Fund Advisors	DFA U.S. Micro Cap Portfolio Institutional Class	**	308,350
Vanguard	Vanguard Target Retirement 2040 Fund Investor Shares	**	307,867
Vanguard	Vanguard Mid-Cap Value Index Fund Admiral Shares	**	266,260
Vanguard	Vanguard Target Retirement 2050 Fund Investor Shares	**	265,584
Vanguard	Vanguard Target Retirement 2030 Fund Investor Shares	**	195,335
Vanguard	Vanguard REIT Index Fund Admiral Shares	**	165,674
Dimensional Fund Advisors	DFA Commodity Strategy Portfolio Institutional Class Shares	**	121,840
Vanguard	Vanguard Target Retirement 2025 Fund Investor Shares	**	108,794
Dimensional Fund Advisors	DFA International Real Estate Securities Portfolio Institutional Class	**	91,168
Vanguard	Vanguard Target Retirement 2035 Fund Investor Shares	**	79,240
Vanguard	Vanguard Target Retirement 2060 Fund Investor Shares	**	61,453
Vanguard	Vanguard Target Retirement 2045 Fund Investor Shares	**	56,765
Vanguard	Vanguard Target Retirement 2055 Fund Investor	**	47,322
Vanguard	Vanguard Target Retirement 2015 Fund Investor	**	9,605
			<u>9,053,368</u>
	Common/collective trust fund		
* Fidelity	Managed Income Portfolio Class 1	**	332,788
	Participant loans, interest rate at 4.25% - 6.25% with varying maturity dates		260,843
* Plan Participants			<u>260,843</u>
	Total Investments		<u>\$ 10,071,006</u>

* Party in interest

** Cost is not a required disclosure on participant directed investments.

**ICE INDUSTRIES 401(K) PLAN
FINANCIAL STATEMENTS
AND SUPPLEMENTAL SCHEDULE
WITH INDEPENDENT AUDITOR'S REPORT**

**DECEMBER 31, 2018 AND 2017
AND FOR THE YEAR ENDED DECEMBER 31, 2018**

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INDEPENDENT AUDITOR'S REPORT

Trustees and Plan Participants
Ice Industries 401(k) Plan
Sylvania, Ohio

Report on the Financial Statements

We were engaged to audit the accompanying financial statements of Ice Industries 401(k) Plan (the Plan), which comprise the statements of net assets available for benefits as of December 31, 2018 and 2017, and the related statement of changes in net assets available for benefits for the year ended December 31, 2018, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

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

Auditor's Responsibility

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

Basis for Disclaimer of Opinion

As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the Plan Administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Note 3, which was certified or provided by Fidelity Management Trust Company, the trustee of the Plan, except for comparing this information with the related information included in the financial statements. We have been informed by the Plan Administrator that the trustee holds the Plan's assets and executes transactions. The Plan Administrator has obtained certifications from the trustee as of December 31, 2018 and 2017, and for the year ended December 31, 2018, that the information provided to the Plan Administrator by the trustee is complete and accurate.

Disclaimer of Opinion

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

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Other Matter

The supplemental schedule H, line 4(i) – schedule of assets (held at end of year) as of December 31, 2018, is required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 and is presented for the purposes of additional analysis and is not a required part of the financial statements. The supplemental schedule is the responsibility of the Plan's management. Because of the significance of the matter described in the Basis for Disclaimer of Opinion paragraph, we do not express an opinion on the supplemental schedule.

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

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

Gilmore Jasion Mahler, LTD

Maumee, Ohio
October 14, 2019

ICE INDUSTRIES 401(K) PLAN
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
December 31, 2018 and 2017

	<u>2018</u>	<u>2017</u>
Assets		
Participant directed investments, at fair value	\$ 9,813,734	\$ 11,059,182
Receivables:		
Participant contributions	0	5,956
Employer contributions	3,995	2,348
Notes receivable from participants	260,843	273,332
Total receivables	<u>264,838</u>	<u>281,636</u>
Total assets	10,078,572	11,340,818
Liabilities - excess contributions payable	<u>5,191</u>	<u>13,878</u>
Net assets available for benefits	<u><u>\$ 10,073,381</u></u>	<u><u>\$ 11,326,940</u></u>

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

ICE INDUSTRIES 401(K) PLAN
STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
For the Year Ended December 31, 2018

Additions to net assets attributable to:

Investment income:		
Dividends and interest	\$	337,778
Interest income on notes receivable from participants		12,529
Contributions:		
Participant		855,732
Employer		169,414
Participants' rollovers from other qualified plans		31,548
	Total contributions	<u>1,056,694</u>
	Total additions	1,407,001

Deductions from net assets attributable to:

Retirement benefits and withdrawals		1,336,211
Net depreciation in fair value of investments		1,230,917
Administrative expenses		93,432
	Total deductions	<u>2,660,560</u>
	Net decrease	(1,253,559)

Net assets available for benefits

Beginning of year		<u>11,326,940</u>
End of year	\$	<u><u>10,073,381</u></u>

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

ICE INDUSTRIES 401(k) PLAN
NOTES TO FINANCIAL STATEMENTS-CONTINUED
December 31, 2018 and 2017

Note 1—Description of Plan

The following description of the Ice Industries 401(k) Plan (the Plan) is provided for general information purposes only. Participants should refer to the plan agreement and plan amendments for a more complete description of the Plan's provisions.

General

The Plan is a defined contribution plan covering substantially all employees of the subsidiaries of Ice Industries, Inc. (the Employer or Plan Sponsor) who have attained the age of 18 and 3 months of service, except employees covered by a collective bargaining agreement (union employees). The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974, as amended (ERISA).

Contributions

Participants may elect a percentage reduction in compensation, subject to Internal Revenue Service (IRS) limitations, which may be contributed to the Plan on a pretax basis as designated by the participant. Matching contributions for employees of the Employer are provided at the discretion of the Employer. At December 31, 2018, the matching contribution equaled 50% of the first 6% that the participant contributed to the Plan. The Plan includes an auto-enrollment provision whereby all newly eligible employees are automatically enrolled in the Plan unless they affirmatively elect not to participate in the Plan. Automatically enrolled participants have their deferral rate set at 6% of eligible compensation and their contributions invested in a target retirement date fund until changed by the participant. Participants may also contribute amounts representing distributions from other qualified plans (rollover).

Participant accounts

Individual accounts are maintained for each participant. Each participant's account is credited with the participant's contribution and the employer's contributions. Plan earnings are allocated based on the participant's share of net earnings or losses of their respective elected investment option. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

Retirement benefits and withdrawals

Upon termination of service due to death, disability, or retirement, a participant may elect to receive a lump-sum payment equal to the value of the participant's vested interest in his or her account. If employment is terminated for any reason other than those mentioned above, a participant will only be entitled to the portion of the employer's account that is vested.

In the event of a hardship, as defined in the plan agreement, participants may take a distribution from their accounts in an amount necessary to satisfy a financial need, subject to certain tax withholding.

ICE INDUSTRIES 401(k) PLAN
NOTES TO FINANCIAL STATEMENTS-CONTINUED
December 31, 2018 and 2017

Note 1—Description of Plan—continued

Vesting

Participants are immediately vested in their voluntary contributions plus actual earnings thereon. Participants are vested in the employer contributions over a six year-period as described in the table below:

1 year of service	0%
2 years of service	20%
3 years of service	40%
4 years of service	60%
5 years of service	80%
6 years of service	100%

Forfeitures

Forfeited balances of terminated participant accounts are used to offset administrative expenses and supplement employer contributions. Unused forfeitures at December 31, 2018 and 2017 were \$0 and \$95,858, respectively. Forfeitures used to reduce employer contributions during the year ended December 31, 2018 totaled \$173,891.

Notes receivable from participants

Participants may borrow the lesser of 50% of the fair market value of the vested account balance or \$50,000. The interest rate is established based on a reasonable rate of interest as determined by the Plan Administrator based on prevailing rates charged by persons in the business of lending money for loans which would be made under similar circumstances. The loan repayment schedule can be no longer than 60 months except if the loan is for the purpose of acquiring any house, apartment, condominium, or mobile home that is to be used as the principal residence of the participant. The Plan Administrator will determine the term of such loan. Principal and interest is paid ratably through payroll deductions. The loans are secured by the balance in the participant's account. Only one loan can be outstanding at any given time.

Plan termination

Although it has not expressed any intent to do so, the Employer has the right under the Plan provisions to discontinue its contributions at any time and to terminate the Plan subject to the provisions of ERISA. In the event of plan termination, participants become 100% vested in their account balances.

Note 2—Summary of significant accounting policies

Basis of accounting

The Plan maintains its records on the accrual basis, whereby income is recognized when earned and expenses are recognized when the obligations are incurred. Benefit payments are recorded when distributed by the Plan.

Use of estimates

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

ICE INDUSTRIES 401(k) PLAN
NOTES TO FINANCIAL STATEMENTS-CONTINUED
December 31, 2018 and 2017

Note 2—Summary of significant accounting policies—continued

Contributions

Employee salary deferrals and employer matching contributions are included in income during the period the related salary is earned.

Notes receivable from participants

Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest. Delinquent notes receivable from participants are recorded as a distribution based upon the terms of the plan document.

Administrative costs

The Plan Sponsor pays the administrative expenses of the Plan, unless the expenses relate to specific investment directions of the participant. Administrative expenses that are paid by the Plan Sponsor are excluded from these financial statements. Fees related to the administration of the participant's account are included in administrative expenses.

Valuation of investments and income recognition

Investments held by the Plan 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 4 for further discussion and disclosures related to fair value measurements.

Purchases and sales of investments are recorded on a trade-date basis. Interest income is recorded on the accrual basis. Dividend income is recorded on the ex-dividend date. Net appreciation (depreciation) includes gains and losses on investments bought and sold as well as held during the year.

Subsequent events

The Plan Sponsor has evaluated subsequent events through October 14, 2019, the date the financial statements were available to be issued.

Note 3—Investments

All investment information disclosed in the accompanying financial statements and supplemental schedule, including investments held and notes receivable from participants as of December 31, 2018 and 2017, and, realized and unrealized appreciation (depreciation) in fair value of investments, interest, dividends and interest income on notes receivable from participants for the year ended December 31, 2018, were obtained or derived from information supplied to the Plan Sponsor and certified by Fidelity Management Trust Company, as complete and accurate in accordance with Section 2520.103-5 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Such information has not been examined by independent auditors.

ICE INDUSTRIES 401(k) PLAN
NOTES TO FINANCIAL STATEMENTS-CONTINUED
December 31, 2018 and 2017

Note 4—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 under Financial Accounting Standards Board Accounting Standards Codification Topic, Fair Value Measurement, 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:

- a. Quoted prices for similar assets or liabilities in active markets;
- b. Quoted prices for identical or similar assets or liabilities in inactive markets;
- c. Inputs other than quoted prices that are observable for the asset or liability;
- d. 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 maximize the use of relevant observable inputs and minimize the use of unobservable inputs.

Following is a description of the valuation methodologies used for each major class of assets measured at fair value. There have been no changes in the methodologies used at December 31, 2018 and 2017.

Money Market – valued using amortized cost which approximates fair value.

Mutual Funds – valued at quoted market prices, which represent the net asset value of shares held by the Plan at year end.

ICE INDUSTRIES 401(k) PLAN
NOTES TO FINANCIAL STATEMENTS-CONTINUED
December 31, 2018 and 2017

Note 4—Fair value measurements—continued

Common/Collective Trust Fund – valued at the net asset value of units of a bank collective trust. The net asset value, as provided by the trustee, is used as a practical expedient to estimate fair value. The net asset value is based on the fair value of the underlying investments held by the fund less its liabilities. This practical expedient is not used when it is determined to be probable that the fund will sell the investment for an amount different from the reported net asset value. Participant transactions (purchases and sales) may occur daily. Were the Plan to initiate a full redemption of the collective trust, the investment adviser reserves the right to temporarily delay withdrawal from the trust in order to ensure that securities liquidations will be carried out in an orderly business manner.

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

The following tables set forth, by level, within the fair value hierarchy, the Plan's assets carried at fair value:

Description	Total	Fair Value Measurements at December 31, 2018		
		Level (1)	Using Level (2)	Level (3)
Money market	\$ 424,007	\$ 424,007	\$ 0	\$ 0
Mutual funds	9,053,368	9,053,368		
Total investments in the fair value hierarchy	9,477,375	<u>\$ 9,477,375</u>	<u>\$ 0</u>	<u>\$ 0</u>
Investments measured at net asset value ^(a)	336,359			
Total investment assets at fair value	<u>\$ 9,813,734</u>			

ICE INDUSTRIES 401(k) PLAN
NOTES TO FINANCIAL STATEMENTS-CONTINUED
December 31, 2018 and 2017

Note 4—Fair value measurements—continued

<u>Description</u>	<u>Total</u>	Fair Value Measurements at December 31, 2017		
		<u>Level (1)</u>	<u>Using Level (2)</u>	<u>Level (3)</u>
Money market	\$ 493,407	\$ 493,407	\$ 0	\$ 0
Mutual funds	<u>10,199,339</u>	<u>10,199,339</u>		
Total investments in the fair value hierarchy	10,692,746	<u>\$ 10,692,746</u>	<u>\$ 0</u>	<u>\$ 0</u>
Investments measured at net asset value (a)	<u>366,436</u>			
Total investment assets at fair value	<u>\$ 11,059,182</u>			

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

The common/collective trust fund's fair value, as measured at the net asset value (or its equivalent) as a practical expedient, is \$336,359 and \$366,436 at December 31, 2018 and 2017, respectively. The common/collective trust fund has no unfunded commitments, has a daily redemption frequency and requires a 1 day redemption period.

Note 5—Related party transactions and party-in-interest transactions

The Plan invests in a common/collective trust fund managed by Fidelity Management Trust Company. Fidelity Management Trust Company is the current trustee as defined by the Plan and, therefore, these transactions qualify as party-in interest transactions. Fees incurred by the Plan for the investment management services are included in net appreciation (depreciation) in fair value of the investment. The Plan made direct payments to the current trustee of approximately \$43,000 during 2018.

Note 6—Income tax status

The Plan is a prototype plan. The currently designed prototype plan has received a favorable opinion letter, dated March 31, 2014, from the IRS that the prototype plan as designed qualifies for federal income tax-exempt status. The Plan has not individually sought a determination from the IRS on its qualification status. Therefore, no provision for income taxes has been included in the Plan's financial statements.

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

ICE INDUSTRIES 401(k) PLAN
NOTES TO FINANCIAL STATEMENTS-CONTINUED
December 31, 2018 and 2017

Note 7—Risks and uncertainties

The Plan invests in various investment securities. Investment securities are exposed to various risks such as interest rate, market, and credit. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that the changes in the values of investment securities will occur in a near term and that such changes could materially affect participants' account balances and the amounts reported in the statements of net assets available for benefits.

Note 8—Reconciliation to Form 5500

The following is a reconciliation of net assets available for benefits per the financial statements at December 31, 2018 and 2017 to the Form 5500:

	<u>2018</u>	<u>2017</u>
Net assets available for benefits per the financial statements	\$ 10,073,381	\$ 11,326,940
Adjustment for net asset value as a practical expedient for the common/collective trust fund	(3,571)	(1,044)
Adjustment for excess contributions payable	5,191	0
Adjustment for employer contributions receivable	(3,995)	0
Net assets available for benefits per the Form 5500	<u>\$ 10,071,006</u>	<u>\$ 11,325,896</u>

The following is a reconciliation of changes in net assets available for benefits per the financial statements for the year ended December 31, 2018 to the Form 5500:

Net decrease in net assets per the financial statements	\$ (1,253,559)
Change in adjustment for net asset value as a practical expedient for the common/collective trust fund	(2,527)
Adjustment for excess contribution	5,191
Adjustment for employer contribution	(3,995)
Net decrease per the Form 5500	<u>\$ (1,254,890)</u>

SUPPLEMENTAL SCHEDULE

ICE INDUSTRIES 401(K) PLAN
SCHEDULE H, LINE 4(i) - SCHEDULE OF ASSETS (HELD AT END OF YEAR)
Employee Identification No. 01-0572966 Plan No. 001
December 31, 2018

(a)/(b) Identity of Issue, Borrower, Lessor or Similar Party	(c) Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	(d) Cost	(e) Current Value
	Money market		
Vanguard	Vanguard Federal Money Market Fund Investor Shares	**	\$ 424,007
	Mutual funds		
Vanguard	Vanguard Total Bond Market Index Fund Admiral Shares	**	1,004,638
Dimensional Fund Advisors	DFA U.S. Core Equity II Portfolio Institutional Class	**	998,292
Vanguard	Vanguard Short Term Bond Index Fund Admiral Shares	**	662,956
Dimensional Fund Advisors	DFA U.S. Small Cap Value Portfolio Institutional Class	**	606,070
Vanguard	Vanguard Growth Index Fund Admiral Shares	**	489,269
Dimensional Fund Advisors	DFA International Value Portfolio Institutional Class	**	488,661
Dimensional Fund Advisors	DFA International Small Cap Value Portfolio Institutional Class	**	443,843
Dimensional Fund Advisors	DFA U.S. Large Cap Value Portfolio Institutional Class	**	419,014
Dimensional Fund Advisors	DFA Emerging Markets Core Equity Portfolio Institutional Class	**	410,105
Vanguard	Vanguard Target Retirement 2020 Fund Investor Shares	**	409,934
Vanguard	Vanguard 500 Index Fund Admiral Class	**	357,526
Dimensional Fund Advisors	DFA International Core Equity Portfolio Institutional Class	**	339,515
Vanguard	Vanguard Mid-Cap Growth Index Fund Admiral Shares	**	338,288
Dimensional Fund Advisors	DFA U.S. Micro Cap Portfolio Institutional Class	**	308,350
Vanguard	Vanguard Target Retirement 2040 Fund Investor Shares	**	307,867
Vanguard	Vanguard Mid-Cap Value Index Fund Admiral Shares	**	266,260
Vanguard	Vanguard Target Retirement 2050 Fund Investor Shares	**	265,584
Vanguard	Vanguard Target Retirement 2030 Fund Investor Shares	**	195,335
Vanguard	Vanguard REIT Index Fund Admiral Shares	**	165,674
Dimensional Fund Advisors	DFA Commodity Strategy Portfolio Institutional Class Shares	**	121,840
Vanguard	Vanguard Target Retirement 2025 Fund Investor Shares	**	108,794
Dimensional Fund Advisors	DFA International Real Estate Securities Portfolio Institutional Class	**	91,168
Vanguard	Vanguard Target Retirement 2035 Fund Investor Shares	**	79,240
Vanguard	Vanguard Target Retirement 2060 Fund Investor Shares	**	61,453
Vanguard	Vanguard Target Retirement 2045 Fund Investor Shares	**	56,765
Vanguard	Vanguard Target Retirement 2055 Fund Investor	**	47,322
Vanguard	Vanguard Target Retirement 2015 Fund Investor	**	9,605
			<u>9,053,368</u>
	Common/collective trust fund		
* Fidelity	Managed Income Portfolio Class 1	**	332,788
	Participant loans, interest rate at 4.25% - 6.25%		
* Plan Participants	with varying maturity dates		260,843
		Total Investments	<u>\$ 10,071,006</u>

* Party in interest

** Cost is not a required disclosure on participant directed investments.