

Form 5500 Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Annual Return/Report of Employee Benefit Plan This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6057(b) and 6058(a) of the Internal Revenue Code (the Code). ▶ Complete all entries in accordance with the instructions to the Form 5500.	OMB Nos. 1210-0110 1210-0089 2018 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>12/01/2018</u> and ending <u>11/30/2019</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>ESG HOLDINGS, LLC PENSION 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>07/01/1967</u></td> </tr> </table>	1b Three-digit plan number (PN) ▶	<u>001</u>	1c Effective date of plan <u>07/01/1967</u>	
1b Three-digit plan number (PN) ▶	<u>001</u>				
1c Effective date of plan <u>07/01/1967</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>ESG HOLDINGS, LLC</u> <u>330 E. KILBOURN AVENUE, SUITE 1400</u> <u>MILWAUKEE, WI 53202</u>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>2b Employer Identification Number (EIN) <u>38-3926387</u></td> </tr> <tr> <td>2c Plan Sponsor's telephone number <u>414-223-1560</u></td> </tr> <tr> <td>2d Business code (see instructions) <u>551112</u></td> </tr> </table>	2b Employer Identification Number (EIN) <u>38-3926387</u>	2c Plan Sponsor's telephone number <u>414-223-1560</u>	2d Business code (see instructions) <u>551112</u>	
2b Employer Identification Number (EIN) <u>38-3926387</u>					
2c Plan Sponsor's telephone number <u>414-223-1560</u>					
2d Business code (see instructions) <u>551112</u>					

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

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

SIGN HERE	Filed with authorized/valid electronic signature.	07/13/2020	JANELLE HETZEL
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	Filed with authorized/valid electronic signature.	07/13/2020	TODD FLUNKER
	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
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 1364
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	6a(1) 7 6a(2) 6 6b 765 6c 426 6d 1197 6e 137 6f 1334 6g 6h 0
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	7

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

1A 1I 3H

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

9a Plan funding arrangement (check all that apply) (1) ☐ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor	9b Plan benefit arrangement (check all that apply) (1) ☐ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor
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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 SB (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Single-Employer Defined Benefit Plan Actuarial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6059 of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500 or 5500-SF.	OMB No. 1210-0110 2018 This Form is Open to Public Inspection
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For calendar plan year 2018 or fiscal plan year beginning 12/01/2018 and ending 11/30/2019

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

A Name of plan <u>ESG HOLDINGS, LLC PENSION PLAN</u>	B Three-digit plan number (PN) ▶ <u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF <u>ESG HOLDINGS, LLC</u>	D Employer Identification Number (EIN) <u>38-3926387</u>

E Type of plan: ☒ Single ☐ Multiple-A ☐ Multiple-B **F** Prior year plan size: ☐ 100 or fewer ☐ 101-500 ☒ More than 500

Part I Basic Information

1 Enter the valuation date: Month <u>12</u> Day <u>01</u> Year <u>2018</u>			
2 Assets:			
a Market value.....	2a	<u>70338923</u>	
b Actuarial value	2b	<u>70338923</u>	
3 Funding target/participant count breakdown	(1) Number of participants	(2) Vested Funding Target	(3) Total Funding Target
a For retired participants and beneficiaries receiving payment	<u>882</u>	<u>46717853</u>	<u>46717853</u>
b For terminated vested participants	<u>475</u>	<u>17067037</u>	<u>17067037</u>
c For active participants	<u>7</u>	<u>787120</u>	<u>789657</u>
d Total	<u>1364</u>	<u>64572010</u>	<u>64574547</u>
4 If the plan is in at-risk status, check the box and complete lines (a) and (b)..... ☐			
a Funding target disregarding prescribed at-risk assumptions	4a		
b Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been in at-risk status for fewer than five consecutive years and disregarding loading factor	4b		
5 Effective interest rate	5	<u>5.63 %</u>	
6 Target normal cost	6	<u>0</u>	

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

SIGN HERE		<u>07/08/2020</u>
Signature of actuary		Date
<u>TIMOTHY J. HERMAN</u>		<u>20-05628</u>
Type or print name of actuary		Most recent enrollment number
<u>MILLIMAN, INC.</u>		<u>262-796-3318</u>
Firm name		Telephone number (including area code)
<u>15800 WEST BLUEMOUND RD SUITE 100 BROOKFIELD, WI 53005</u>		
Address of the firm		

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

Part II Beginning of Year Carryover and Prefunding Balances

	(a) Carryover balance	(b) Prefunding balance
7 Balance at beginning of prior year after applicable adjustments (line 13 from prior year)	0	3293650
8 Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	0	0
9 Amount remaining (line 7 minus line 8)	0	3293650
10 Interest on line 9 using prior year's actual return of <u>0.32</u> %	0	10540
11 Prior year's excess contributions to be added to prefunding balance:		
a Present value of excess contributions (line 38a from prior year)		0
b(1) Interest on the excess, if any, of line 38a over line 38b from prior year Schedule SB, using prior year's effective interest rate of <u>5.84</u> %		0
b(2) Interest on line 38b from prior year Schedule SB, using prior year's actual return		0
c Total available at beginning of current plan year to add to prefunding balance		0
d Portion of (c) to be added to prefunding balance		0
12 Other reductions in balances due to elections or deemed elections	0	0
13 Balance at beginning of current year (line 9 + line 10 + line 11d – line 12)	0	3304190

Part III Funding Percentages

14 Funding target attainment percentage	14	103.80%
15 Adjusted funding target attainment percentage	15	108.92%
16 Prior year's funding percentage for purposes of determining whether carryover/prefunding balances may be used to reduce current year's funding requirement	16	112.30%
17 If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage.	17	%

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

(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees
Totals ►			18(b)	0	18(c) 0

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

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

20 Quarterly contributions and liquidity shortfalls:

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

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

Part V Assumptions Used to Determine Funding Target and Target Normal Cost**21** Discount rate:**a** Segment rates:

1st segment:

3.92%

2nd segment:

5.52%

3rd segment:

6.29%

☐ N/A, full yield curve used**b** Applicable month (enter code).....**21b**

4

22 Weighted average retirement age**22**

63

23 Mortality table(s) (see instructions)

Prior regulation:

☐

Prescribed - combined

☒

Prescribed - separate

☐

Substitute

Current regulation:

☐

Prescribed - combined

☐

Prescribed - separate

☐

Substitute

Part VI Miscellaneous Items**24** Has a change been made in the non-prescribed actuarial assumptions for the current plan year? If "Yes," see instructions regarding required attachment. ☐ Yes ☒ No**25** Has a method change been made for the current plan year? If "Yes," see instructions regarding required attachment. ☐ Yes ☒ No**26** Is the plan required to provide a Schedule of Active Participants? If "Yes," see instructions regarding required attachment. ☒ Yes ☐ No**27** If the plan is subject to alternative funding rules, enter applicable code and see instructions regarding attachment**27****Part VII Reconciliation of Unpaid Minimum Required Contributions For Prior Years****28** Unpaid minimum required contributions for all prior years**28**

0

29 Discounted employer contributions allocated toward unpaid minimum required contributions from prior years (line 19a)**29**

0

30 Remaining amount of unpaid minimum required contributions (line 28 minus line 29)**30**

0

Part VIII Minimum Required Contribution For Current Year**31** Target normal cost and excess assets (see instructions):**a** Target normal cost (line 6)**31a**

0

b Excess assets, if applicable, but not greater than line 31a**31b**

0

32 Amortization installments:

Outstanding Balance

Installment

a Net shortfall amortization installment.....

0

0

b Waiver amortization installment

0

0

33 If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____) and the waived amount**33****34** Total funding requirement before reflecting carryover/prefunding balances (lines 31a - 31b + 32a + 32b - 33).....**34**

0

Carryover balance

Prefunding balance

Total balance

35 Balances elected for use to offset funding requirement.....

0

0

0

36 Additional cash requirement (line 34 minus line 35).....**36**

0

37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c).....**37**

0

38 Present value of excess contributions for current year (see instructions)**a** Total (excess, if any, of line 37 over line 36)**38a**

0

b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances**38b**

0

39 Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37).....**39**

0

40 Unpaid minimum required contributions for all years**40**

0

Part IX Pension Funding Relief Under Pension Relief Act of 2010 (See Instructions)**41** If an election was made to use PRA 2010 funding relief for this plan:**a** Schedule elected☐ 2 plus 7 years☐ 15 years**b** Eligible plan year(s) for which the election in line 41a was made☐ 2008☐ 2009☐ 2010☐ 2011

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 12/01/2018 and ending 11/30/2019		
A Name of plan ESG HOLDINGS, LLC PENSION PLAN	B Three-digit plan number (PN) ▶	001
C Plan sponsor's name as shown on line 2a of Form 5500 ESG HOLDINGS, LLC	D Employer Identification Number (EIN) 38-3926387	

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
SEI TRUST COMPANY
06-1271230

(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)

INCOME RESEARCH AND MANAGEMENT

04-2955404

(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?
51	INVESTMENT MGR	18297	Yes ☐ No ☒	Yes ☐ No ☐	0	Yes ☐ No ☐

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

PIONEER INSTITUTIONAL ASSET MGMT

43-2095408

(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?
19 27 28 51	INVESTMENT MGR	16087	Yes ☐ No ☒	Yes ☐ No ☐	0	Yes ☐ No ☐

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

BRANDYWINE GLOBAL INVESTMENT MGMT

51-0412248

(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?
51	INVESTMENT MGR	6295	Yes ☐ No ☒	Yes ☐ No ☐	0	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
(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide

Part III Termination Information on Accountants and Enrolled Actuaries (see instructions)
(complete as many entries as needed)

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE D (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration	DFE/Participating Plan Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ► File as an attachment to Form 5500.	OMB No. 1210-0110 2018 This Form is Open to Public Inspection.
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For calendar plan year 2018 or fiscal plan year beginning 12/01/2018 and ending 11/30/2019

A Name of plan <u>ESG HOLDINGS, LLC PENSION PLAN</u>	B Three-digit plan number (PN) ►	<u>001</u>
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 <u>ESG HOLDINGS, LLC</u>	D Employer Identification Number (EIN) <u>38-3926387</u>	

Part I	Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs) (Complete as many entries as needed to report all interests in DFEs)
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a Name of MTIA, CCT, PSA, or 103-12 IE: BRANDYWINE GLOBAL INVESTMENT MGMT

b Name of sponsor of entity listed in (a): BRANDYWINE GLOBAL INVESTMENT MANAGEMENT, LLC

c EIN-PN <u>51-0412248-017</u>	d Entity code <u>E</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>1421936</u>
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a Name of MTIA, CCT, PSA, or 103-12 IE: PIONEER MULTIPLE INVESTMENT TRUST

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

c EIN-PN <u>26-1933300-040</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>4850460</u>
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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)
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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)
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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)
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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)
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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)
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a Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)

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

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

a Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN

SCHEDULE H (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Financial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ► File as an attachment to Form 5500.	OMB No. 1210-0110 2018 This Form is Open to Public Inspection
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For calendar plan year 2018 or fiscal plan year beginning 12/01/2018 and ending 11/30/2019		
A Name of plan ESG HOLDINGS, LLC PENSION PLAN	B Three-digit plan number (PN) ►	001
C Plan sponsor's name as shown on line 2a of Form 5500 ESG HOLDINGS, LLC	D Employer Identification Number (EIN) 38-3926387	

Part I	Asset and Liability Statement
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1 Current value of plan assets and liabilities at the beginning and end of the plan year. Combine the value of plan assets held in more than one trust. Report the value of the plan's interest in a commingled fund containing the assets of more than one plan on a line-by-line basis unless the value is reportable on lines 1c(9) through 1c(14). Do not enter the value of that portion of an insurance contract which guarantees, during this plan year, to pay a specific dollar benefit at a future date. **Round off amounts to the nearest dollar.** MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 1b(1), 1b(2), 1c(8), 1g, 1h, and 1i. CCTs, PSAs, and 103-12 IEs also do not complete lines 1d and 1e. See instructions.

Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a	0	0
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions.....	1b(1)	0	0
(2) Participant contributions	1b(2)	0	0
(3) Other.....	1b(3)	13200	1393
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit).....	1c(1)	737299	1245603
(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)	17753109	19251427
(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)	0	0
(9) Value of interest in common/collective trusts	1c(9)	4409509	4850460
(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)	1323025	1421936
(13) Value of interest in registered investment companies (e.g., mutual funds).....	1c(13)	45642501	46073702
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)	0	0
(15) Other	1c(15)	460280	0

1d Employer-related investments:

		(a) Beginning of Year	(b) End of Year
(1) Employer securities	1d(1)	0	
(2) Employer real property	1d(2)	0	
e Buildings and other property used in plan operation	1e	0	
f Total assets (add all amounts in lines 1a through 1e)	1f	70338923	72844521

Liabilities

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

Net Assets

l Net assets (subtract line 1k from line 1f)	1l	70338923	72844521
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Part II Income and Expense Statement

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

Income

		(a) Amount	(b) Total
a Contributions:			
(1) Received or receivable in cash from: (A) Employers	2a(1)(A)	0	
(B) Participants	2a(1)(B)	0	
(C) Others (including rollovers)	2a(1)(C)	0	
(2) Noncash contributions	2a(2)	0	
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		0
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	15603	
(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)	0	
(F) Other	2b(1)(F)	0	
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		15603
(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)	878842	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		878842
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)	484947	
(B) Aggregate carrying amount (see instructions)	2b(4)(B)	483271	
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)		1676
(5) Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)	0	
(B) Other	2b(5)(B)	2061171	
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		2061171

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		0
(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)		4417602
c Other income.....	2c		202
d Total income. Add all income amounts in column (b) and enter total	2d		7375096

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	4828819	
(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)		4828819
f Corrective distributions (see instructions)	2f		0
g Certain deemed distributions of participant loans (see instructions)	2g		0
h Interest expense	2h		0
i Administrative expenses: (1) Professional fees.....	2i(1)	16087	
(2) Contract administrator fees.....	2i(2)	0	
(3) Investment advisory and management fees.....	2i(3)	24592	
(4) Other	2i(4)	0	
(5) Total administrative expenses. Add lines 2i(1) through (4).....	2i(5)		40679
j Total expenses. Add all expense amounts in column (b) and enter total	2j		4869498

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		2505598
l Transfers of assets:			
(1) To this plan.....	2l(1)		
(2) From this plan.....	2l(2)		

Part III Accountant's Opinion

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

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

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

b Did the accountant perform a limited scope audit pursuant to 29 CFR 2520.103-8 and/or 103-12(d)?

☒ Yes ☐ No

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

(1) Name: **BAKER TILLY, LLP**

(2) EIN: **39-0859910**

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

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

Part IV Compliance Questions

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

During the plan year:

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

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

	Yes	No	Amount
4a		X	
4b		X	

		Yes	No	Amount
c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)	4c		X	
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.).....	4d		X	
e Was this plan covered by a fidelity bond?	4e	X		10000000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?	4f		X	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?.....	4g		X	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?.....	4h		X	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	4i	X		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked, and see instructions for format requirements.)	4j	X		
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?	4k		X	
l Has the plan failed to provide any benefit when due under the plan?.....	4l		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	4m			
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 4217368. (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 12/01/2018 and ending 11/30/2019

A Name of plan <u>ESG HOLDINGS, LLC PENSION 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>ESG HOLDINGS, LLC</u>	D Employer Identification Number (EIN) <u>38-3926387</u>

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

1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions	1	<u>0</u>
2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits): EIN(s): <u>41-6271370</u>		
Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.		
3 Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year	3	<u>1</u>

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

Part III	Amendments
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9 If this is a defined benefit pension plan, were any amendments adopted during this plan year that increased or decreased the value of benefits? If yes, check the appropriate box. If no, check the "No" box.....	☐ Increase	☐ Decrease	☐ Both	☒ No
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Part IV	ESOPs (see instructions). If this is not a plan described under section 409(a) or 4975(e)(7) of the Internal Revenue Code, skip this Part.
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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: 45 % Investment-Grade Debt: 12 % High-Yield Debt: 0 % Real Estate: 0 % Other: 43 %

- 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):

ESG Holdings, LLC Pension Plan

Financial Statements and
Supplementary Information

November 30, 2019 and 2018

ESG Holdings, LLC Pension Plan

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November 30, 2019 and 2018

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Note: Supplementary schedules required by the Employee Retirement Income Security Act of 1974 not included as part of these statements are not applicable to the ESG Holdings, LLC Pension Plan.

Independent Auditors' Report

To the Plan Administrative Committee and Participants of
ESG Holdings, LLC Pension Plan

Report on the Financial Statements

We were engaged to audit the accompanying financial statements of the ESG Holdings, LLC Pension Plan (the Plan), which comprise the statements of net assets available for benefits as of November 30, 2019 and 2018, the related statements of changes in net assets available for benefits for the years then ended, the statement of accumulated plan benefits as of November 30, 2018, the related statement of changes in accumulated plan benefits for the year then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

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

Auditors' Responsibility

Our responsibility is to express an opinion on these financial statements based on conducting the audit in accordance with auditing standards generally accepted in the United States of America (U.S. GAAS). 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 (DOL) Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 (ERISA), the plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the investment information referenced in Note 8, which was certified by U.S. Bank, N.A., the trustee of the Plan, except for comparing such information with the related information included in the financial statements and supplementary schedules. We have been informed by the plan administrator that the trustee holds the Plan's investment assets and executes investment transactions. The plan administrator has obtained certifications from the trustee, as of and for the years ended November 30, 2019 and 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.

Other Matters - Supplementary Information

The supplementary schedules as defined in the table of contents, as of and for the year ended November 30, 2019 are required by the DOL's Rules and Regulations for Reporting and Disclosures under ERISA and are presented for the purpose of additional analysis and are not a required part of the financial statements. Because of the significance of the matter described in the Basis for Disclaimer of Opinion paragraph, we do not express an opinion on the supplementary schedules.

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

The form and content of the information included in the financial statements and supplementary schedules, other than that derived from the information certified by the trustee, has been audited by us in accordance with U.S. GAAS and, in our opinion, are presented in compliance with the DOL's Rules and Regulations for Reporting and Disclosure under ERISA.

Baker Tilly Virchow Krause, LLP

Milwaukee, Wisconsin
June 30, 2020

ESG Holdings, LLC Pension Plan

Statements of Net Assets Available for Benefits
November 30, 2019 and 2018

	<u>2019</u>	<u>2018</u>
Assets		
Investments, at fair value		
Money market funds	\$ 1,245,603	\$ 737,299
Partnership interests	25,523,823	23,485,643
Mutual funds	<u>46,073,702</u>	<u>45,642,501</u>
Total investments	<u>72,843,128</u>	<u>69,865,443</u>
Receivable		
Due from broker	-	460,280
Accrued income	<u>1,393</u>	<u>13,200</u>
Total receivables	<u>1,393</u>	<u>473,480</u>
Net assets available for benefits	<u>\$ 72,844,521</u>	<u>\$ 70,338,923</u>

See notes to financial statements

ESG Holdings, LLC Pension Plan

Statements of Changes in Net Assets Available for Benefits
Years Ended November 30, 2019 and 2018

	<u>2019</u>	<u>2018</u>
Additions		
Investment income		
Net appreciation in fair value of investments	\$ 6,480,449	\$ -
Interest and dividends	894,445	767,222
Other income (loss)	202	507,632
Investment income	<u>7,375,096</u>	<u>1,274,854</u>
Total additions	<u>7,375,096</u>	<u>1,274,854</u>
Deductions		
Net depreciation in fair value of investments	-	916,434
Benefits paid to participants	4,828,819	4,673,289
Administrative expenses	<u>40,679</u>	<u>260,141</u>
Total deductions	<u>4,869,498</u>	<u>5,849,864</u>
Net increase (decrease)	2,505,598	(4,575,010)
Net Assets Available for Benefits, Beginning	<u>70,338,923</u>	<u>74,913,933</u>
Net Assets Available for Benefits, Ending	<u><u>\$ 72,844,521</u></u>	<u><u>\$ 70,338,923</u></u>

See notes to financial statements

ESG Holdings, LLC Pension Plan

Statement of Accumulated Plan Benefits

November 30, 2018

Actuarial Present Value of Accumulated Plan Benefits

Vested benefits

Participants in pay status	\$ 43,730,956
Participants with deferred benefits	15,367,993
Active participants	<u>701,785</u>
	59,800,734

Non-vested benefits	<u>638</u>
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Total actuarial present value of accumulated plan benefits	<u><u>\$ 59,801,372</u></u>
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ESG Holdings, LLC Pension Plan

Statement of Changes in Accumulated Plan Benefits
Year Ended November 30, 2018

Actuarial Present Value of Accumulated Plan Benefits at Beginning of Year	\$ 60,180,871
Increase (Decrease) During Year Attributable to:	
Actuarial loss	665,452
Decrease in discount period	3,902,684
Benefits paid	(4,673,289)
Change of assumptions	<u>(274,346)</u>
Net decrease	<u>(379,499)</u>
Actuarial present value of accumulated plan benefits at end of year	<u><u>\$ 59,801,372</u></u>

See notes to financial statements

ESG Holdings, LLC Pension Plan

Notes to Financial Statements
November 30, 2019 and 2018

1. Description of the Plan

The following description of the ESG Holdings, LLC Pension Plan (the Plan) provides only general information. Participants should refer to the plan documents for a more complete description of the Plan's provisions.

General

The Plan is a noncontributory defined benefit plan established by ESG Holdings, LLC (the Company) and is subject to the provisions of the Employee Retirement Income Security Act of 1974, as amended (ERISA).

On December 31, 2008, the Company amended the Plan Part A (covering non-bargaining employees of Everett Smith Group, Ltd. and participating subsidiaries) and Part D (covering hourly employees of Trostel, Ltd.) to "freeze" the Plan effective January 1, 2009. On April 29, 2009 the Company amended Part F of the Plan (covering bargaining employees of the Maysteel Allenton plant) to "freeze" the Plan effective May 8, 2009, such that no employees would become participants, and no participants would earn Benefit Service on or after these dates. Prior to the dates mentioned above, all employees who had completed at least one year of service with the Company, as defined in the Plan, and were age 21 or older were eligible to participate. Certain exceptions applied to those who were participants in any of the plans that merged into the Plan.

Administration

A plan committee, comprised of three members appointed by the Chief Executive Officer of the Company, is responsible for administration of the Plan.

Contribution Policy and Funding

The Company has voluntarily agreed to make contributions to the Plan sufficient to provide the Plan with assets to pay pension benefits to plan participants. No voluntary employee contributions are permitted. Sponsor contributions are based on actuarial estimates of current year cost, adjusted for interest, plus an amount for amortization of prior service costs over a period of 30 years, and equal or exceed the minimum requirements of ERISA. The Plan is in compliance with those requirements for the years ended November 30, 2019 and 2018.

Pension Benefits

Plan members with five or more years of vesting service credit attaining the retirement age of 65 may receive benefits determined in accordance with plan provisions in effect at date of retirement. Plan members who have attained the required amount of vesting service may elect early retirement prior to reaching age 65. Benefits under the frozen plan are vested and may include a provision for disability benefits.

ESG Holdings, LLC Pension Plan

Notes to Financial Statements
November 30, 2019 and 2018

2. Summary of Significant Accounting Policies

Basis of Accounting and Use of Estimates

The accompanying financial statements have been prepared on the accrual basis of accounting. The preparation of financial statements in conformity with accounting principles generally accepted in the United States (U.S. GAAP) requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and changes therein, disclosures of contingent assets and liabilities, and the actuarial present value of accumulated plan benefits at the date of the financial statements, and changes therein. Actual results could differ from those estimates.

Payment of Benefits

Benefit payments to participants are recorded upon distribution.

Administrative Expenses

The Company pays the majority of the Plan's administrative expenses. Expenses that are paid directly by the Company are excluded from these financial statements. Certain expenses incurred in connection with the general administration of the Plan that are paid by the Plan are recorded as deductions in the accompanying Statements of Changes in Net Assets Available for Benefits. In addition, certain investment related expenses are included in net appreciation (depreciation) of fair value of investments presented in the accompanying Statements of Changes in Net Assets Available for Benefits.

Investment Valuation and Income Recognition

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

Net appreciation or depreciation of investments included in the accompanying statements of changes in net assets available for benefits includes realized gains or losses from the sale of investments and unrealized appreciation or depreciation in fair value of investments. Net unrealized appreciation or depreciation in the fair value of investments represents the net change in the fair value of the investments held during the period. Because unrealized gains and losses are recognized annually, the net realized gains or losses on the sale of investments represents the difference between the sale proceeds and the fair value at the beginning of the year or the original cost of the investment if purchased during the year.

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

Actuarial Present Value of Accumulated Plan Benefits

Accumulated plan benefits represent the estimated future periodic payments, including lump-sum distributions, under the Plan's provisions that are attributable to services rendered by the employees through the valuation date. Accumulated plan benefits include benefits expected to be paid to (a) retired or terminated employees or their beneficiaries, (b) beneficiaries of employees who have died, and (c) present employees or their beneficiaries. Benefits payable under all circumstances - retirement, death, disability and termination of employment - are included, to the extent they are deemed attributable to employee service rendered to the valuation date.

ESG Holdings, LLC Pension Plan

Notes to Financial Statements

November 30, 2019 and 2018

The actuarial present value of accumulated plan benefits is determined by the independent actuary, Milliman (actuary), and is the amount that results from applying actuarial assumptions to adjust the accumulated plan benefits for the time value of money (through discounts for interest) and the probability of payment (by means of decrements such as for death, disability, withdrawals or retirement) between the valuation date and the expected date of payment. All of the remaining groups of plan participants have had their benefits frozen.

The actuarial calculations as of November 30, 2019 were not yet completed for the Plan and, therefore (consistent with prior years) the accompanying financial statements utilize the calculations as of November 30, 2018.

The significant actuarial assumptions used in the valuation as of November 30, 2018 and 2017 are (a) discount rate 6.75 percent (b) normal retirement age of 65 years (c) Retirement Plans-2014 mortality tables projected back to 2006 base year, and 2018 and 2017 mortality tables for males and females, respectively, and (d) asset valuation method "market value" method. The only change was the use of an updated mortality table. The foregoing assumptions are based on the presumption that the Plan will continue. Were the Plan to terminate, different actuarial assumptions and other factors might be applicable in determining the actuarial present value of accumulated plan benefits.

3. Fair Value of Financial Instruments

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 authoritative guidance 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 other than quoted prices included within Level 1 that are observable for the asset or liability, either directly or indirectly, such as:

- quoted prices for similar assets or liabilities in active markets;
- quoted prices for identical or similar assets or liabilities in inactive markets;
- inputs other than quoted prices that are observable for the asset or liability; and
- 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's or liability's fair value measurement level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement. Valuation techniques used need to maximize the use of observable inputs and minimize the use of unobservable inputs.

ESG Holdings, LLC Pension Plan

Notes to Financial Statements
November 30, 2019 and 2018

The following is a description of the valuation methodologies used for the Plan's investments measured at fair value. There have been no changes in the methodologies used at November 30, 2019 and 2018.

Money market funds: Valued at the quoted net asset value (NAV) of shares held by the Plan at year end.

Mutual funds: Valued at the closing price as reported by the fund. Mutual funds held by the Plan are open-end mutual funds that are registered with the Securities and Exchange Commission. These funds are required to publish their daily NAV and to transact at that price. The mutual funds held by the Plan are deemed to be actively traded.

Partnership interests: Valued at estimated fair value, as determined by the respective general partners of each partnership, based on the NAV of the investment units held by the Plan at year-end, which is subject to judgment. These values are not publicly traded.

The following table sets forth by level, within the fair value hierarchy, the Plan's assets at fair value as of November 30, 2019 and 2018.

November 30, 2019				
	Level 1	Level 2	Level 3	Total
Money market funds	\$ 1,245,603	\$ -	\$ -	\$ 1,245,603
Mutual funds	46,073,702	-	-	46,073,702
Total assets in the fair value hierarchy	<u>\$ 47,319,305</u>	<u>\$ -</u>	<u>\$ -</u>	47,319,305
Investments measured at net asset value (a)				<u>25,523,823</u>
Investments at fair value				<u>\$ 72,843,128</u>
November 30, 2018				
	Level 1	Level 2	Level 3	Total
Money market funds	\$ 737,299	\$ -	\$ -	\$ 737,299
Mutual funds	45,642,501	-	-	45,642,501
Total assets in the fair value hierarchy	<u>\$ 46,379,800</u>	<u>\$ -</u>	<u>\$ -</u>	46,379,800
Investments measured at net asset value (a)				<u>23,485,643</u>
Investments at fair value				<u>\$ 69,865,443</u>

(a) In accordance with Subtopic 820-10, certain investments that were measured at 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.

ESG Holdings, LLC Pension Plan

Notes to Financial Statements
November 30, 2019 and 2018

The following table summarizes investments measured at fair value based on NAV per share as of November 30, 2019 and 2018, respectively:

	<u>Fair Value</u>	<u>Unfunded Commitments</u>	<u>Redemption Frequency (if currently eligible)</u>	<u>Redemption Notice Period</u>
November 30, 2019				
Brandywine Global Opp Fixed Income	\$ 1,421,936	None	Daily	5 days
IR&M Core Bond Fund	7,767,483	None	Daily	5 days
Pioneer Multi-Sector Fixed Income	4,850,460	None	Daily	5 days
Trg Forestry Fund 7 B LP	288,416	None	Annually	90 days
Parametric Global Defensive Eq Fd	<u>11,195,528</u>	None	Daily	5 days
	<u>\$25,523,823</u>			
November 30, 2018				
Brandywine Global Opp Fixed Income	\$ 1,323,025	None	Daily	5 days
IR&M Core Bond Fund	6,996,727	None	Daily	5 days
Pioneer Multi-Sector Fixed Income	4,409,509	None	Daily	5 days
Trg Forestry Fund 7 B LP	274,180	None	Annually	90 days
Parametric Global Defensive Eq Fd	<u>10,482,202</u>	None	Daily	5 days
	<u>\$23,485,643</u>			

4. Tax Status

The Internal Revenue Service (IRS) has determined and informed the Company by a letter dated August 2, 2013 that the Plan and related trust are designed in accordance with applicable sections of the Internal Revenue Code (IRC). The plan has been amended since receiving the determination letter. However, the plan administrator believes that the plan is designed and is currently being operated in compliance with the applicable requirements of the IRC.

U.S. GAAP requires management to evaluate tax positions taken by the Plan and recognize a tax liability if the Plan has taken an uncertain position that more likely than not would not be sustained upon examination by the IRS. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress.

5. Plan Termination

The Company has the right to terminate the Plan at any time subject to the provisions of ERISA. The Company has insured the Plan and continuation of benefits with the Pension Benefit Guaranty Corporation (PBGC) as required under ERISA.

ESG Holdings, LLC Pension Plan

Notes to Financial Statements
November 30, 2019 and 2018

In the event of termination, the plan assets will be distributed in the following manner:

- a. Retirement benefits to each participant who was receiving benefits or was eligible for such benefits as of three years prior to the termination of the Plan.
- b. Retirement benefits to participants who attained age 65 and accumulated five or more years of vesting service credit on or before the termination date.
- c. Retirement benefits to participants who attained age 55 and accumulated five or more years of vesting service credit.
- d. Retirement benefits to participants not having attained at least early retirement age but who accumulated five or more years of vesting service credit.
- e. Retirement benefits to all other participants.
- f. All distribution priorities noted above are limited to the amounts guaranteed under ERISA. After these priorities have been met, any remaining balance of assets will be distributed to participants having nonforfeitable rights in excess of the guaranteed amounts, in the order of preference indicated above.
- g. Any remaining balance is to be distributed to the Company.

If the assets under the Plan are insufficient to provide in full for the benefits in any of the above priority classes, the benefits of all participants in such class shall be reduced on a pro rata basis.

Certain benefits under the Plan are insured by the PBGC if the Plan terminates. Generally, the PBGC guarantees most vested normal age retirement benefits, early retirement benefits and certain disability and survivor's pensions. However, the PBGC does not guarantee all types of benefits under the plan, and the amount of benefit protection is subject to certain limitations. Vested benefits under the Plan are guaranteed at the level in effect on the date of the Plan's termination.

Whether all participants receive their benefits should the Plan terminate at some future time will depend on the sufficiency, at that time, of the Plan's net assets to provide those benefits and may also depend on the level of benefits guaranteed by the PBGC.

6. Related Party and Party In Interest Transactions

As described in Note 2, the Plan paid certain expenses related to plan operations and investment activity to various service providers. Additionally, certain administrative functions of the Plan are performed by officers or employees of the Company. No such officer or employee receives compensation from the Plan.

7. Risks and Uncertainties

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

As of November 30, 2019 and 2018, the Plan held investments of \$42,657,612 and \$33,503,894, that were concentrated in 4 and 3 investments, respectively.

ESG Holdings, LLC Pension Plan

Notes to Financial Statements
November 30, 2019 and 2018

In addition, the Plan invests in various investment securities. Investment securities are exposed to various risks such as interest rate, market and credit risks. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in the values of investment securities will occur in the near term and that such changes could materially affect the amounts reported in the Statements of Net Assets Available for Benefits.

8. Information Certified by Trustee

The plan administrator has elected the method of compliance as permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA for 2019 and 2018. Accordingly, U.S. Bank, N.A., the trustee of the Plan has certified to the completeness and accuracy of all investments reported in the accompanying Statements of Net Assets Available for Benefits as of November 30, 2019 and 2018 and the supplementary Schedule of Assets (Held at End of Year) as of November 30, 2019, the related investment activity reported in the Statements of Changes in Net Assets Available for Benefits for the years ended November 30, 2019 and 2018, and the information reported in the supplementary Schedule of Reportable Transactions for the year ended November 30, 2019.

9. Subsequent Events

The Plan has evaluated subsequent events through June 30, 2020, which is the date that the Plan's financial statements were approved and available to be issued, for events requiring recording or disclosure in the Plan's financial statements.

In late 2019, the Society of Actuaries released the MP-2019 mortality improvement scale, which is an update to the MP-2018 mortality improvement scale. The Plan's actuary estimated the effect on the present value of accumulated Plan benefits is a reduction from approximately \$59,801,000 to \$59,203,000 (or approximately 1 percent). The Plan intends to adopt the new mortality improvement scale for the statement of accumulated plan benefits and statement of changes in accumulated plan benefits as of and for the year ended November 30, 2019.

ESG HOLDINGS, LLC PENSION PLAN

Schedule H, line 4i – Schedule of Assets (Held at End of Year)

November 30, 2019

Plan 001

EIN 38-3926387

DESCRIPTION	SHARES/ FACE AMOUNT	MARKET PRICE/UNIT	BOOK VALUE	UNREALIZED GAIN (LOSS) SINCE INCEPTION/ CURRENT PERIOD	ENDING ACCRUAL	YIELD ON MARKET
Cash And Equivalents						
Money Markets						
First Am Govt Ob Fd Cl Z 31846V567 Asset Minor Code 1 ACCOUNT 000011697851	1,245,603.580	1,245,603.58 1.0000	1,245,603.58	.00 .00	1,392.90	1.48
Total Money Markets	1,245,603.580	1,245,603.58	1,245,603.58	.00 .00	1,392.90	1.48
Total Cash And Equivalents	1,245,603.580	1,245,603.58	1,245,603.58	.00 .00	1,392.90	1.48
Mutual Funds						
Mutual Funds-Equity						
Eaton Vance Atlanta Capital Smid Cap 277902235 Asset Minor Code 98 ACCOUNT 000011697851	93,598.638	3,721,481.85 39.7600	2,874,084.61	847,397.24 338,883.96	.00	0.12
Harbor Emerging Markets Equity Instl 411512692 Asset Minor Code 98 ACCOUNT 000011697851	323,077.099	3,544,155.78 10.9700	3,040,306.73	503,849.05 318,968.12	.00	0.80
Harding Loevner International Equity 412295107 Asset Minor Code 98 ACCOUNT 000011697851	223,920.989	5,174,814.06 23.1100	4,008,272.60	1,166,541.46 456,345.61	.00	1.25
Lazard International Equity Instl 52106N400 Asset Minor Code 98 ACCOUNT 000011697851	310,218.042	5,667,683.63 18.2700	5,330,463.75	337,219.88 219,438.14	.00	2.25

ESG HOLDINGS, LLC PENSION PLAN

Schedule H, line 4i – Schedule of Assets (Held at End of Year)

November 30, 2019

Plan 001

EIN 38-3926387

DESCRIPTION	SHARES/ FACE AMOUNT	MARKET PRICE/UNIT	BOOK VALUE	UNREALIZED GAIN (LOSS) SINCE INCEPTION/ CURRENT PERIOD	ENDING ACCRUAL	YIELD ON MARKET
Vanguard 500 Index Admiral 922908710 Asset Minor Code 98 ACCOUNT 000011697851	50,827.845	14,781,753.88 290.8200	9,160,818.45	5,620,935.43 1,327,120.97	.00	1.87
Total Mutual Funds-Equity	1,001,642.613	32,889,889.20	24,413,946.14	8,475,943.06 2,660,756.80	.00	1.52
Mutual Funds-Fixed Income						
Blackrock Strategic Income 09260B382 Asset Minor Code 99 ACCOUNT 000011697851	900,287.701	8,912,848.24 9.9000	8,968,672.84	- 55,824.60 271,019.43	.00	3.41
Blackrock Strategic Income 09260B382 Asset Minor Code 99 ACCOUNT 000011697870	.000	.00 9.9000	.00	.00 .08	.00	0.00
Total Blackrock Strategic Income	900,287.701	8,912,848.24	8,968,672.84	- 55,824.60 271,019.49	.00	3.41
Pimco Enhanced Short Maturity Etf 72201R833 Asset Minor Code 95 ACCOUNT 000011697851	9,850.000	1,002,336.00 101.7600	1,000,562.02	1,773.98 3,447.50	.00	2.68
Total Mutual Funds-Fixed Income	910,137.701	9,915,184.24	9,969,234.86	- 54,050.62 274,466.99	.00	3.34
Mutual Funds-Balanced						
Parametric Volatility Risk Premium 27826A144 Asset Minor Code 55 ACCOUNT 000011697851	274,444.014	3,268,628.21 11.9100	3,099,694.37	168,933.84 225,650.65	.00	1.08

ESG HOLDINGS, LLC PENSION PLAN

Schedule H, line 4i – Schedule of Assets (Held at End of Year)

November 30, 2019

Plan 001

EIN 38-3926387

DESCRIPTION	SHARES/ FACE AMOUNT	MARKET PRICE/UNIT	BOOK VALUE	UNREALIZED GAIN (LOSS) SINCE INCEPTION/ CURRENT PERIOD	ENDING ACCRUAL	YIELD ON MARKET
Total Mutual Funds-Balanced	274,444.014	3,268,628.21	3,099,694.37	168,933.84 225,650.65	.00	1.08
Total Mutual Funds	2,186,224.328	46,073,701.65	37,482,875.37	8,590,826.28 3,160,874.44	.00	1.88

Miscellaneous

Partnerships/Joint Ventures

Trg Forestry Fund 7 B LP 3620099Z7 Asset Minor Code 76 Date Last Priced: 09/30/19 ACCOUNT 000011697851	1,045,468.130	288,416.43 .2759 @	252,341.50	36,074.93 14,236.14	.00	0.00
Parametric Global Defensive Eq Fd 97MSCWCA3 Asset Minor Code 77 Date Last Priced: 10/31/19 ACCOUNT 000011697851	10,400,000.000	11,195,527.20 1.0765 @	10,400,000.00	795,527.20 713,325.60	.00	0.00
Brandywine Global Opp Fixed Income 97MSC2F73 Asset Minor Code 77 ACCOUNT 000011697851	30,425.313	1,421,936.13 46.7353	1,274,478.61	147,457.52 104,603.34	.00	0.00
Ir&m Core Bond Fund LLC 97MSC2F81 Asset Minor Code 77 ACCOUNT 000011697851	319,925.687	7,767,482.79 24.2790	6,483,232.07	1,284,250.72 786,390.34	.00	0.00
Pioneer Multi-Sector Fixed Income 97MSC2F99 Asset Minor Code 77 ACCOUNT 000011697851	319,529.654	4,850,460.15 15.1800	4,111,641.35	738,818.80 440,950.92	.00	0.00

ESG HOLDINGS, LLC PENSION PLAN

Schedule H, line 4i – Schedule of Assets (Held at End of Year)

November 30, 2019

Plan 001

EIN 38-3926387

DESCRIPTION	SHARES/ FACE AMOUNT	MARKET PRICE/UNIT	BOOK VALUE	UNREALIZED GAIN (LOSS) SINCE INCEPTION/ CURRENT PERIOD	ENDING ACCRUAL	YIELD ON MARKET
Total Partnerships/Joint Ventures	12,115,348.784	25,523,822.70	22,521,693.53	3,002,129.17 2,059,506.34	.00	0.00
Total Miscellaneous	12,115,348.784	25,523,822.70	22,521,693.53	3,002,129.17 2,059,506.34	.00	0.00
Total Assets	15,547,176.692	72,843,127.93	61,250,172.48	11,592,955.45 5,220,380.78	1,392.90	1.21
Accrued Income	.000	1,392.90	1,392.90			
Grand Total	15,547,176.692	72,844,520.83	61,251,565.38			

Note: "Book Value" equals cost

This schedule has been prepared by U.S. Bank, N.A., Trustee who certified that it is complete and accurate.

ESG HOLDINGS, LLC PENSION PLAN

Schedule H, line 4j – Schedule of Reportable Transactions
 Year Ended November 30, 2019
 Plan 001
 EIN 38-3926387

DATE	BOUGHT/ SOLD	SHARES/ PAR VALUE	UNIT PRICE	EXPENSE INCURRED	PRINCIPAL CASH	TRANSACTION COST	REALIZED GAIN/LOSS
BEGINNING MARKET VALUE					70,338,923.13		
COMPARATIVE VALUE (5%)					3,516,946.15		
CATEGORY 1 - SINGLE TRANSACTION EXCEEDS 5% OF VALUE							
"NO TRANSACTIONS QUALIFIED FOR THIS SECTION"							
CATEGORY 2 - SERIES OF TRANSACTIONS WITH SAME BROKER EXCEEDS 5% OF VALUE							
"NO TRANSACTIONS QUALIFIED FOR THIS SECTION"							
CATEGORY 3 - SERIES OF TRANSACTIONS IN SAME SECURITY EXCEEDS 5% OF VALUE							
Issue: 31846V567 - First Am Govt Ob Fd Cl Z							
12/04/2018	B	1,257.510	1.0000		- 1,258	1,258	
000011697851							
12/06/2018	B	2,265.500	1.0000		- 2,266	2,266	
000011697851							
12/06/2018	B	113.430	1.0000		- 113	113	
000011697851							
12/07/2018	B	500,000.000	1.0000		- 500,000	500,000	
000011697851							
12/13/2018	B	493.120	1.0000		- 493	493	
000011697851							
12/28/2018	B	199.990	1.0000		- 200	200	
000011697851							
01/03/2019	B	3,703.560	1.0000		- 3,704	3,704	
000011697851							
01/04/2019	B	707.920	1.0000		- 708	708	
000011697851							
01/09/2019	B	74.860	1.0000		- 75	75	
000011697851							

ESG HOLDINGS, LLC PENSION PLAN

Schedule H, line 4j – Schedule of Reportable Transactions
 Year Ended November 30, 2019
 Plan 001
 EIN 38-3926387

DATE	BOUGHT/ SOLD	SHARES/ PAR VALUE	UNIT PRICE	EXPENSE INCURRED	PRINCIPAL CASH	TRANSACTION COST	REALIZED GAIN/LOSS
01/11/2019 000011697851	B	509.220	1.0000		- 509	509	
01/15/2019 000011697851	B	347.980	1.0000		- 348	348	
01/16/2019 000011697851	B	36.870	1.0000		- 37	37	
01/18/2019 000011697851	B	46.780	1.0000		- 47	47	
02/04/2019 000011697851	B	929.140	1.0000		- 929	929	
02/06/2019 000011697851	B	2,561.000	1.0000		- 2,561	2,561	
02/07/2019 000011697851	B	155.100	1.0000		- 155	155	
02/08/2019 000011697851	B	155.100	1.0000		- 155	155	
02/11/2019 000011697851	B	427.400	1.0000		- 427	427	
02/15/2019 000011697851	B	1,200,000.000	1.0000		- 1,200,000	1,200,000	
02/28/2019 000011697851	B	227.120	1.0000		- 227	227	
03/04/2019 000011697851	B	1,180.680	1.0000		- 1,181	1,181	
03/06/2019 000011697851	B	2,265.500	1.0000		- 2,266	2,266	
03/11/2019 000011697851	B	470.410	1.0000		- 470	470	

ESG HOLDINGS, LLC PENSION PLAN

Schedule H, line 4j – Schedule of Reportable Transactions
 Year Ended November 30, 2019
 Plan 001
 EIN 38-3926387

DATE	BOUGHT/ SOLD	SHARES/ PAR VALUE	UNIT PRICE	EXPENSE INCURRED	PRINCIPAL CASH	TRANSACTION COST	REALIZED GAIN/LOSS
03/14/2019 000011697851	B	180.180	1.0000		- 180	180	
04/01/2019 000011697851	B	249.420	1.0000		- 249	249	
04/02/2019 000011697851	B	1,703.570	1.0000		- 1,704	1,704	
04/02/2019 000011697851	B	74.450	1.0000		- 74	74	
04/04/2019 000011697851	B	2,265.500	1.0000		- 2,266	2,266	
04/09/2019 000011697851	B	249.420	1.0000		- 249	249	
04/30/2019 000011697851	B	460,280.430	1.0000		- 460,280	460,280	
05/02/2019 000011697851	B	914.490	1.0000		- 914	914	
05/06/2019 000011697851	B	2,265.500	1.0000		- 2,266	2,266	
05/16/2019 000011697851	B	220.930	1.0000		- 221	221	
06/04/2019 000011697851	B	1,028.890	1.0000		- 1,029	1,029	
06/05/2019 000011697851	B	1,100,000.000	1.0000		- 1,100,000	1,100,000	
06/06/2019 000011697851	B	2,265.500	1.0000		- 2,266	2,266	
06/11/2019 000011697851	B	493.120	1.0000		- 493	493	

ESG HOLDINGS, LLC PENSION PLAN

Schedule H, line 4j – Schedule of Reportable Transactions
 Year Ended November 30, 2019
 Plan 001
 EIN 38-3926387

DATE	BOUGHT/ SOLD	SHARES/ PAR VALUE	UNIT PRICE	EXPENSE INCURRED	PRINCIPAL CASH	TRANSACTION COST	REALIZED GAIN/LOSS
06/17/2019 000011697851	B	36.870	1.0000		- 37	37	
07/02/2019 000011697851	B	2,057.110	1.0000		- 2,057	2,057	
07/05/2019 000011697851	B	2,265.500	1.0000		- 2,266	2,266	
07/10/2019 000011697851	B	403.060	1.0000		- 403	403	
07/15/2019 000011697851	B	42.830	1.0000		- 43	43	
07/16/2019 000011697851	B	852.310	1.0000		- 852	852	
08/02/2019 000011697851	B	1,583.270	1.0000		- 1,583	1,583	
08/06/2019 000011697851	B	2,265.500	1.0000		- 2,266	2,266	
08/08/2019 000011697851	B	680.040	1.0000		- 680	680	
08/09/2019 000011697851	B	286.290	1.0000		- 286	286	
08/14/2019 000011697851	B	254.450	1.0000		- 254	254	
08/22/2019 000011697851	B	899,659.980	1.0000		- 899,660	899,660	
08/22/2019 000011697851	B	340.020	1.0000		- 340	340	
09/04/2019 000011697851	B	1,145.150	1.0000		- 1,145	1,145	

ESG HOLDINGS, LLC PENSION PLAN

Schedule H, line 4j – Schedule of Reportable Transactions
 Year Ended November 30, 2019
 Plan 001
 EIN 38-3926387

DATE	BOUGHT/ SOLD	SHARES/ PAR VALUE	UNIT PRICE	EXPENSE INCURRED	PRINCIPAL CASH	TRANSACTION COST	REALIZED GAIN/LOSS
09/06/2019 000011697851	B	2,265.500	1.0000		- 2,266	2,266	
09/10/2019 000011697851	B	1,611.260	1.0000		- 1,611	1,611	
09/11/2019 000011697851	B	234.580	1.0000		- 235	235	
09/23/2019 000011697851	B	223.360	1.0000		- 223	223	
10/02/2019 000011697851	B	1,005.210	1.0000		- 1,005	1,005	
10/02/2019 000011697851	B	484.140	1.0000		- 484	484	
10/04/2019 000011697851	B	2,167.000	1.0000		- 2,167	2,167	
10/16/2019 000011697851	B	385.320	1.0000		- 385	385	
10/17/2019 000011697851	B	174.260	1.0000		- 174	174	
11/01/2019 000011697851	B	517.670	1.0000		- 518	518	
11/04/2019 000011697851	B	740.260	1.0000		- 740	740	
11/04/2019 000011697851	B	419.340	1.0000		- 419	419	
11/05/2019 000011697851	B	1,150,000.000	1.0000		- 1,150,000	1,150,000	
11/06/2019 000011697851	B	2,068.500	1.0000		- 2,069	2,069	

ESG HOLDINGS, LLC PENSION PLAN

Schedule H, line 4j – Schedule of Reportable Transactions
 Year Ended November 30, 2019
 Plan 001
 EIN 38-3926387

DATE	BOUGHT/ SOLD	SHARES/ PAR VALUE	UNIT PRICE	EXPENSE INCURRED	PRINCIPAL CASH	TRANSACTION COST	REALIZED GAIN/LOSS
11/07/2019 000011697851	B	494.820	1.0000		- 495	495	
11/08/2019 000011697851	B	494.820	1.0000		- 495	495	
11/13/2019 000011697851	B	926.340	1.0000		- 926	926	
11/26/2019 000011697851	B	1,644.750	1.0000		- 1,645	1,645	
Total For Buys				0	5,368,049	5,368,049	0
12/03/2018 000011697851	S	- 387,354.880	1.0000		387,355	387,355	
12/13/2018 000011697851	S	- 493.120	1.0000		493	493	
01/02/2019 000011697851	S	- 391,907.610	1.0000		391,908	391,908	
01/11/2019 000011697851	S	- 709.210	1.0000		709	709	
01/14/2019 000011697851	S	- 3,898.680	1.0000		3,899	3,899	
01/16/2019 000011697851	S	- 36.870	1.0000		37	37	
01/23/2019 000011697851	S	- 1,606.920	1.0000		1,607	1,607	
02/01/2019 000011697851	S	- 391,145.230	1.0000		391,145	391,145	
02/11/2019 000011697851	S	- 88.870	1.0000		89	89	

ESG HOLDINGS, LLC PENSION PLAN

Schedule H, line 4j – Schedule of Reportable Transactions
 Year Ended November 30, 2019
 Plan 001
 EIN 38-3926387

DATE	BOUGHT/ SOLD	SHARES/ PAR VALUE	UNIT PRICE	EXPENSE INCURRED	PRINCIPAL CASH	TRANSACTION COST	REALIZED GAIN/LOSS
02/20/2019 000011697851	S	- 1,571.700	1.0000		1,572	1,572	
03/01/2019 000011697851	S	- 391,551.900	1.0000		391,552	391,552	
03/21/2019 000011697851	S	- 28,987.990	1.0000		28,988	28,988	
04/01/2019 000011697851	S	- 391,316.980	1.0000		391,317	391,317	
04/03/2019 000011697851	S	- 249.420	1.0000		249	249	
04/09/2019 000011697851	S	- 249.420	1.0000		249	249	
04/12/2019 000011697851	S	- 3,762.970	1.0000		3,763	3,763	
04/16/2019 000011697851	S	- 145.600	1.0000		146	146	
05/01/2019 000011697851	S	- 393,137.880	1.0000		393,138	393,138	
05/22/2019 000011697851	S	- 13,548.830	1.0000		13,549	13,549	
06/03/2019 000011697851	S	- 392,669.590	1.0000		392,670	392,670	
06/11/2019 000011697851	S	- 493.120	1.0000		493	493	
06/14/2019 000011697851	S	- 36.870	1.0000		37	37	
07/01/2019 000011697851	S	- 392,669.590	1.0000		392,670	392,670	

ESG HOLDINGS, LLC PENSION PLAN

Schedule H, line 4j – Schedule of Reportable Transactions
 Year Ended November 30, 2019
 Plan 001
 EIN 38-3926387

DATE	BOUGHT/ SOLD	SHARES/ PAR VALUE	UNIT PRICE	EXPENSE INCURRED	PRINCIPAL CASH	TRANSACTION COST	REALIZED GAIN/LOSS
07/10/2019 000011697851	S	- 403.060	1.0000		403	403	
07/12/2019 000011697851	S	- 4,062.800	1.0000		4,063	4,063	
07/15/2019 000011697851	S	- 85.660	1.0000		86	86	
07/25/2019 000011697851	S	- 41,396.800	1.0000		41,397	41,397	
07/31/2019 000011697851	S	- 24,081.000	1.0000		24,081	24,081	
08/01/2019 000011697851	S	- 397,121.780	1.0000		397,122	397,122	
08/21/2019 000011697851	S	- 254.450	1.0000		254	254	
08/29/2019 000011697851	S	- 341.450	1.0000		341	341	
09/03/2019 000011697851	S	- 396,841.700	1.0000		396,842	396,842	
09/10/2019 000011697851	S	- 280.830	1.0000		281	281	
10/01/2019 000011697851	S	- 394,778.930	1.0000		394,779	394,779	
10/10/2019 000011697851	S	- 3,918.020	1.0000		3,918	3,918	
10/17/2019 000011697851	S	- 174.260	1.0000		174	174	
11/01/2019 000011697851	S	- 392,819.640	1.0000		392,820	392,820	

ESG HOLDINGS, LLC PENSION PLAN

Schedule H, line 4j – Schedule of Reportable Transactions

Year Ended November 30, 2019

Plan 001

EIN 38-3926387

DATE	BOUGHT/ SOLD	SHARES/ PAR VALUE	UNIT PRICE	EXPENSE INCURRED	PRINCIPAL CASH	TRANSACTION COST	REALIZED GAIN/LOSS
11/07/2019 000011697851	S	- 494.820	1.0000		495	495	
11/08/2019 000011697851	S	- 494.820	1.0000		495	495	
11/21/2019 000011697851	S	- 14,400.960	1.0000		14,401	14,401	
11/26/2019 000011697851	S	- 160.290	1.0000		160	160	
Total For Sells				0	4,859,747	4,859,747	0
Total First Am Govt Ob Fd Cl Z				0	10,227,796	10,227,796	0
GRAND TOTAL				0	10,227,796	10,227,796	0

CATEGORY 4 - SINGLE TRANSACTION WITH ONE BROKER EXCEEDS 5% OF VALUE
 "NO TRANSACTIONS QUALIFIED FOR THIS SECTION"

Note: This schedule has been prepared by U.S. Bank, N.A., trustee who certified that it is complete and accurate

SCHEDULE SB (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Single-Employer Defined Benefit Plan Actuarial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6059 of the Internal Revenue Code (the Code). ► File as an attachment to Form 5500 or 5500-SF.	OMB No. 1210-0110 2018 This Form is Open to Public Inspection
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For calendar plan year 2018 or fiscal plan year beginning 12/01/2018 and ending 11/30/2019

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

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

A Name of plan ESG Holdings, LLC Pension Plan	B Three-digit plan number (PN) ►	001
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF ESG Holdings, LLC	D Employer Identification Number (EIN) 38-3926387	
E Type of plan: ☒ Single ☐ Multiple-A ☐ Multiple-B		
F Prior year plan size: ☐ 100 or fewer ☐ 101-500 ☒ More than 500		

Part I Basic Information				
1 Enter the valuation date: Month <u>12</u> Day <u>1</u> Year <u>2018</u>				
2 Assets:				
a Market value.....	2a	70,338,923		
b Actuarial value	2b	70,338,923		
3 Funding target/participant count breakdown	(1) Number of participants	(2) Vested Funding Target	(3) Total Funding Target	
a For retired participants and beneficiaries receiving payment	882	46,717,853	46,717,853	
b For terminated vested participants	475	17,067,037	17,067,037	
c For active participants	7	787,120	789,657	
d Total	1,364	64,572,010	64,574,547	
4 If the plan is in at-risk status, check the box and complete lines (a) and (b)..... ☐				
a Funding target disregarding prescribed at-risk assumptions.....	4a			
b Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been in at-risk status for fewer than five consecutive years and disregarding loading factor	4b			
5 Effective interest rate.....	5	5.63 %		
6 Target normal cost	6	0		

Statement by Enrolled Actuary

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

SIGN HERE	Timothy J. Herman T.J.H. Signature of actuary	07/08/2020 Date
	Timothy J. Herman Type or print name of actuary	20-05628 Most recent enrollment number
	Milliman, Inc. Firm name	(262) 796-3318 Telephone number (including area code)
	15800 West Bluemound Rd Suite 100 Brookfield, WI 53005 Address of the firm	

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

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

**Schedule SB (Form 5500) 2018
v. 171027**

Part II Beginning of Year Carryover and Prefunding Balances

	(a) Carryover balance	(b) Prefunding balance
7 Balance at beginning of prior year after applicable adjustments (line 13 from prior year).....	0	3,293,650
8 Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	0	0
9 Amount remaining (line 7 minus line 8).....	0	3,293,650
10 Interest on line 9 using prior year's actual return of <u>0.32</u> %	0	10540
11 Prior year's excess contributions to be added to prefunding balance:		
a Present value of excess contributions (line 38a from prior year).....		0
b(1) Interest on the excess, if any, of line 38a over line 38b from prior year Schedule SB, using prior year's effective interest rate of <u>5.84</u> %.....		0
b(2) Interest on line 38b from prior year Schedule SB, using prior year's actual return		0
c Total available at beginning of current plan year to add to prefunding balance.....		0
d Portion of (c) to be added to prefunding balance.....		0
12 Other reductions in balances due to elections or deemed elections.....	0	0
13 Balance at beginning of current year (line 9 + line 10 + line 11d – line 12).....	0	3304190

Part III Funding Percentages

14 Funding target attainment percentage	14	103.80%
15 Adjusted funding target attainment percentage.....	15	108.92%
16 Prior year's funding percentage for purposes of determining whether carryover/prefunding balances may be used to reduce current year's funding requirement	16	112.30%
17 If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage.	17	%

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

(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees
Totals ►			18(b)	0	18(c) 0

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

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

20 Quarterly contributions and liquidity shortfalls:

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

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

Part V Assumptions Used to Determine Funding Target and Target Normal Cost**21** Discount rate:**a** Segment rates:1st segment:
3.92 %2nd segment:
5.52 %3rd segment:
6.29 %☐ N/A, full yield curve used**b** Applicable month (enter code).....**21b**

4

22 Weighted average retirement age**22**

63

23 Mortality table(s) (see instructions)

Prior regulation:

☐

Prescribed - combined

☒

Prescribed - separate

☐

Substitute

Current regulation:

☐

Prescribed - combined

☐

Prescribed - separate

☐

Substitute

Part VI Miscellaneous Items**24** Has a change been made in the non-prescribed actuarial assumptions for the current plan year? If "Yes," see instructions regarding required attachment. ☐ Yes ☒ No**25** Has a method change been made for the current plan year? If "Yes," see instructions regarding required attachment. ☐ Yes ☒ No**26** Is the plan required to provide a Schedule of Active Participants? If "Yes," see instructions regarding required attachment. ☒ Yes ☐ No**27** If the plan is subject to alternative funding rules, enter applicable code and see instructions regarding attachment**27****Part VII Reconciliation of Unpaid Minimum Required Contributions For Prior Years****28** Unpaid minimum required contributions for all prior years**28**

0

29 Discounted employer contributions allocated toward unpaid minimum required contributions from prior years (line 19a)**29**

0

30 Remaining amount of unpaid minimum required contributions (line 28 minus line 29)**30**

0

Part VIII Minimum Required Contribution For Current Year**31** Target normal cost and excess assets (see instructions):**a** Target normal cost (line 6)**31a**

0

b Excess assets, if applicable, but not greater than line 31a**31b**

0

32 Amortization installments:

Outstanding Balance

Installment

a Net shortfall amortization installment.....

0

0

b Waiver amortization installment

0

0

33 If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____) and the waived amount**33****34** Total funding requirement before reflecting carryover/prefunding balances (lines 31a - 31b + 32a + 32b - 33).....**34**

0

Carryover balance

Prefunding balance

Total balance

35 Balances elected for use to offset funding requirement.....

0

0

0

36 Additional cash requirement (line 34 minus line 35).....**36**

0

37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c).....**37**

0

38 Present value of excess contributions for current year (see instructions)**a** Total (excess, if any, of line 37 over line 36)**38a**

0

b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances**38b**

0

39 Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37).....**39**

0

40 Unpaid minimum required contributions for all years**40**

0

Part IX Pension Funding Relief Under Pension Relief Act of 2010 (See Instructions)**41** If an election was made to use PRA 2010 funding relief for this plan:**a** Schedule elected☐ 2 plus 7 years☐ 15 years**b** Eligible plan year(s) for which the election in line 41a was made☐ 2008☐ 2009☐ 2010☐ 2011

ESG HOLDINGS, LLC PENSION PLAN

Schedule H, line 4i – Schedule of Assets (Held at End of Year)

November 30, 2019

Plan 001

EIN 38-3926387

DESCRIPTION	SHARES/ FACE AMOUNT	MARKET PRICE/UNIT	BOOK VALUE	UNREALIZED GAIN (LOSS) SINCE INCEPTION/ CURRENT PERIOD	ENDING ACCRUAL	YIELD ON MARKET
Cash And Equivalents						
Money Markets						
First Am Govt Ob Fd Cl Z 31846V567 Asset Minor Code 1 ACCOUNT 000011697851	1,245,603.580	1,245,603.58 1.0000	1,245,603.58	.00 .00	1,392.90	1.48
Total Money Markets	1,245,603.580	1,245,603.58	1,245,603.58	.00 .00	1,392.90	1.48
Total Cash And Equivalents	1,245,603.580	1,245,603.58	1,245,603.58	.00 .00	1,392.90	1.48

Mutual Funds

Mutual Funds-Equity

Eaton Vance Atlanta Capital Smid Cap 277902235 Asset Minor Code 98 ACCOUNT 000011697851	93,598.638	3,721,481.85 39.7600	2,874,084.61	847,397.24 338,883.96	.00	0.12
Harbor Emerging Markets Equity Instl 411512692 Asset Minor Code 98 ACCOUNT 000011697851	323,077.099	3,544,155.78 10.9700	3,040,306.73	503,849.05 318,968.12	.00	0.80
Harding Loevner International Equity 412295107 Asset Minor Code 98 ACCOUNT 000011697851	223,920.989	5,174,814.06 23.1100	4,008,272.60	1,166,541.46 456,345.61	.00	1.25
Lazard International Equity Instl 52106N400 Asset Minor Code 98 ACCOUNT 000011697851	310,218.042	5,667,683.63 18.2700	5,330,463.75	337,219.88 219,438.14	.00	2.25

ESG HOLDINGS, LLC PENSION PLAN

Schedule H, line 4i – Schedule of Assets (Held at End of Year)

November 30, 2019

Plan 001

EIN 38-3926387

DESCRIPTION	SHARES/ FACE AMOUNT	MARKET PRICE/UNIT	BOOK VALUE	UNREALIZED GAIN (LOSS) SINCE INCEPTION/ CURRENT PERIOD	ENDING ACCRUAL	YIELD ON MARKET
Vanguard 500 Index Admiral 922908710 Asset Minor Code 98 ACCOUNT 000011697851	50,827.845	14,781,753.88 290.8200	9,160,818.45	5,620,935.43 1,327,120.97	.00	1.87
Total Mutual Funds-Equity	1,001,642.613	32,889,889.20	24,413,946.14	8,475,943.06 2,660,756.80	.00	1.52
Mutual Funds-Fixed Income						
Blackrock Strategic Income 09260B382 Asset Minor Code 99 ACCOUNT 000011697851	900,287.701	8,912,848.24 9.9000	8,968,672.84	- 55,824.60 271,019.43	.00	3.41
Blackrock Strategic Income 09260B382 Asset Minor Code 99 ACCOUNT 000011697870	.000	.00 9.9000	.00	.00 .08	.00	0.00
Total Blackrock Strategic Income	900,287.701	8,912,848.24	8,968,672.84	- 55,824.60 271,019.49	.00	3.41
Pimco Enhanced Short Maturity Etf 72201R833 Asset Minor Code 95 ACCOUNT 000011697851	9,850.000	1,002,336.00 101.7600	1,000,562.02	1,773.98 3,447.50	.00	2.68
Total Mutual Funds-Fixed Income	910,137.701	9,915,184.24	9,969,234.86	- 54,050.62 274,466.99	.00	3.34
Mutual Funds-Balanced						
Parametric Volatility Risk Premium 27826A144 Asset Minor Code 55 ACCOUNT 000011697851	274,444.014	3,268,628.21 11.9100	3,099,694.37	168,933.84 225,650.65	.00	1.08

ESG HOLDINGS, LLC PENSION PLAN

Schedule H, line 4i – Schedule of Assets (Held at End of Year)
 November 30, 2019
 Plan 001
 EIN 38-3926387

DESCRIPTION	SHARES/ FACE AMOUNT	MARKET PRICE/UNIT	BOOK VALUE	UNREALIZED GAIN (LOSS) SINCE INCEPTION/ CURRENT PERIOD	ENDING ACCRUAL	YIELD ON MARKET
Total Mutual Funds-Balanced	274,444.014	3,268,628.21	3,099,694.37	168,933.84 225,650.65	.00	1.08
Total Mutual Funds	2,186,224.328	46,073,701.65	37,482,875.37	8,590,826.28 3,160,874.44	.00	1.88

Miscellaneous

Partnerships/Joint Ventures

Trg Forestry Fund 7 B LP 3620099Z7 Asset Minor Code 76 Date Last Priced: 09/30/19 ACCOUNT 000011697851	1,045,468.130	288,416.43 .2759 @	252,341.50	36,074.93 14,236.14	.00	0.00
Parametric Global Defensive Eq Fd 97MSCWCA3 Asset Minor Code 77 Date Last Priced: 10/31/19 ACCOUNT 000011697851	10,400,000.000	11,195,527.20 1.0765 @	10,400,000.00	795,527.20 713,325.60	.00	0.00
Brandywine Global Opp Fixed Income 97MSC2F73 Asset Minor Code 77 ACCOUNT 000011697851	30,425.313	1,421,936.13 46.7353	1,274,478.61	147,457.52 104,603.34	.00	0.00
Ir&m Core Bond Fund LLC 97MSC2F81 Asset Minor Code 77 ACCOUNT 000011697851	319,925.687	7,767,482.79 24.2790	6,483,232.07	1,284,250.72 786,390.34	.00	0.00
Pioneer Multi-Sector Fixed Income 97MSC2F99 Asset Minor Code 77 ACCOUNT 000011697851	319,529.654	4,850,460.15 15.1800	4,111,641.35	738,818.80 440,950.92	.00	0.00

ESG HOLDINGS, LLC PENSION PLAN

Schedule H, line 4i – Schedule of Assets (Held at End of Year)

November 30, 2019

Plan 001

EIN 38-3926387

DESCRIPTION	SHARES/ FACE AMOUNT	MARKET PRICE/UNIT	BOOK VALUE	UNREALIZED GAIN (LOSS) SINCE INCEPTION/ CURRENT PERIOD	ENDING ACCRUAL	YIELD ON MARKET
Total Partnerships/Joint Ventures	12,115,348.784	25,523,822.70	22,521,693.53	3,002,129.17 2,059,506.34	.00	0.00
Total Miscellaneous	12,115,348.784	25,523,822.70	22,521,693.53	3,002,129.17 2,059,506.34	.00	0.00
Total Assets	15,547,176.692	72,843,127.93	61,250,172.48	11,592,955.45 5,220,380.78	1,392.90	1.21
Accrued Income	.000	1,392.90	1,392.90			
Grand Total	15,547,176.692	72,844,520.83	61,251,565.38			

Note: "Book Value" equals cost

This schedule has been prepared by U.S. Bank, N.A., Trustee who certified that it is complete and accurate.

ESG HOLDINGS, LLC PENSION PLAN

Schedule H, line 4j – Schedule of Reportable Transactions
 Year Ended November 30, 2019
 Plan 001
 EIN 38-3926387

DATE	BOUGHT/ SOLD	SHARES/ PAR VALUE	UNIT PRICE	EXPENSE INCURRED	PRINCIPAL CASH	TRANSACTION COST	REALIZED GAIN/LOSS
BEGINNING MARKET VALUE					70,338,923.13		
COMPARATIVE VALUE (5%)					3,516,946.15		
CATEGORY 1 - SINGLE TRANSACTION EXCEEDS 5% OF VALUE							
"NO TRANSACTIONS QUALIFIED FOR THIS SECTION"							
CATEGORY 2 - SERIES OF TRANSACTIONS WITH SAME BROKER EXCEEDS 5% OF VALUE							
"NO TRANSACTIONS QUALIFIED FOR THIS SECTION"							
CATEGORY 3 - SERIES OF TRANSACTIONS IN SAME SECURITY EXCEEDS 5% OF VALUE							
Issue: 31846V567 - First Am Govt Ob Fd Cl Z							
12/04/2018 000011697851	B	1,257.510	1.0000		- 1,258	1,258	
12/06/2018 000011697851	B	2,265.500	1.0000		- 2,266	2,266	
12/06/2018 000011697851	B	113.430	1.0000		- 113	113	
12/07/2018 000011697851	B	500,000.000	1.0000		- 500,000	500,000	
12/13/2018 000011697851	B	493.120	1.0000		- 493	493	
12/28/2018 000011697851	B	199.990	1.0000		- 200	200	
01/03/2019 000011697851	B	3,703.560	1.0000		- 3,704	3,704	
01/04/2019 000011697851	B	707.920	1.0000		- 708	708	
01/09/2019 000011697851	B	74.860	1.0000		- 75	75	

ESG HOLDINGS, LLC PENSION PLAN

Schedule H, line 4j – Schedule of Reportable Transactions
 Year Ended November 30, 2019
 Plan 001
 EIN 38-3926387

DATE	BOUGHT/ SOLD	SHARES/ PAR VALUE	UNIT PRICE	EXPENSE INCURRED	PRINCIPAL CASH	TRANSACTION COST	REALIZED GAIN/LOSS
01/11/2019 000011697851	B	509.220	1.0000		- 509	509	
01/15/2019 000011697851	B	347.980	1.0000		- 348	348	
01/16/2019 000011697851	B	36.870	1.0000		- 37	37	
01/18/2019 000011697851	B	46.780	1.0000		- 47	47	
02/04/2019 000011697851	B	929.140	1.0000		- 929	929	
02/06/2019 000011697851	B	2,561.000	1.0000		- 2,561	2,561	
02/07/2019 000011697851	B	155.100	1.0000		- 155	155	
02/08/2019 000011697851	B	155.100	1.0000		- 155	155	
02/11/2019 000011697851	B	427.400	1.0000		- 427	427	
02/15/2019 000011697851	B	1,200,000.000	1.0000		- 1,200,000	1,200,000	
02/28/2019 000011697851	B	227.120	1.0000		- 227	227	
03/04/2019 000011697851	B	1,180.680	1.0000		- 1,181	1,181	
03/06/2019 000011697851	B	2,265.500	1.0000		- 2,266	2,266	
03/11/2019 000011697851	B	470.410	1.0000		- 470	470	

ESG HOLDINGS, LLC PENSION PLAN

Schedule H, line 4j – Schedule of Reportable Transactions
 Year Ended November 30, 2019
 Plan 001
 EIN 38-3926387

DATE	BOUGHT/ SOLD	SHARES/ PAR VALUE	UNIT PRICE	EXPENSE INCURRED	PRINCIPAL CASH	TRANSACTION COST	REALIZED GAIN/LOSS
03/14/2019 000011697851	B	180.180	1.0000		- 180	180	
04/01/2019 000011697851	B	249.420	1.0000		- 249	249	
04/02/2019 000011697851	B	1,703.570	1.0000		- 1,704	1,704	
04/02/2019 000011697851	B	74.450	1.0000		- 74	74	
04/04/2019 000011697851	B	2,265.500	1.0000		- 2,266	2,266	
04/09/2019 000011697851	B	249.420	1.0000		- 249	249	
04/30/2019 000011697851	B	460,280.430	1.0000		- 460,280	460,280	
05/02/2019 000011697851	B	914.490	1.0000		- 914	914	
05/06/2019 000011697851	B	2,265.500	1.0000		- 2,266	2,266	
05/16/2019 000011697851	B	220.930	1.0000		- 221	221	
06/04/2019 000011697851	B	1,028.890	1.0000		- 1,029	1,029	
06/05/2019 000011697851	B	1,100,000.000	1.0000		- 1,100,000	1,100,000	
06/06/2019 000011697851	B	2,265.500	1.0000		- 2,266	2,266	
06/11/2019 000011697851	B	493.120	1.0000		- 493	493	

ESG HOLDINGS, LLC PENSION PLAN

Schedule H, line 4j – Schedule of Reportable Transactions
 Year Ended November 30, 2019
 Plan 001
 EIN 38-3926387

DATE	BOUGHT/ SOLD	SHARES/ PAR VALUE	UNIT PRICE	EXPENSE INCURRED	PRINCIPAL CASH	TRANSACTION COST	REALIZED GAIN/LOSS
06/17/2019 000011697851	B	36.870	1.0000		- 37	37	
07/02/2019 000011697851	B	2,057.110	1.0000		- 2,057	2,057	
07/05/2019 000011697851	B	2,265.500	1.0000		- 2,266	2,266	
07/10/2019 000011697851	B	403.060	1.0000		- 403	403	
07/15/2019 000011697851	B	42.830	1.0000		- 43	43	
07/16/2019 000011697851	B	852.310	1.0000		- 852	852	
08/02/2019 000011697851	B	1,583.270	1.0000		- 1,583	1,583	
08/06/2019 000011697851	B	2,265.500	1.0000		- 2,266	2,266	
08/08/2019 000011697851	B	680.040	1.0000		- 680	680	
08/09/2019 000011697851	B	286.290	1.0000		- 286	286	
08/14/2019 000011697851	B	254.450	1.0000		- 254	254	
08/22/2019 000011697851	B	899,659.980	1.0000		- 899,660	899,660	
08/22/2019 000011697851	B	340.020	1.0000		- 340	340	
09/04/2019 000011697851	B	1,145.150	1.0000		- 1,145	1,145	

ESG HOLDINGS, LLC PENSION PLAN

Schedule H, line 4j – Schedule of Reportable Transactions
 Year Ended November 30, 2019
 Plan 001
 EIN 38-3926387

DATE	BOUGHT/ SOLD	SHARES/ PAR VALUE	UNIT PRICE	EXPENSE INCURRED	PRINCIPAL CASH	TRANSACTION COST	REALIZED GAIN/LOSS
09/06/2019 000011697851	B	2,265.500	1.0000		- 2,266	2,266	
09/10/2019 000011697851	B	1,611.260	1.0000		- 1,611	1,611	
09/11/2019 000011697851	B	234.580	1.0000		- 235	235	
09/23/2019 000011697851	B	223.360	1.0000		- 223	223	
10/02/2019 000011697851	B	1,005.210	1.0000		- 1,005	1,005	
10/02/2019 000011697851	B	484.140	1.0000		- 484	484	
10/04/2019 000011697851	B	2,167.000	1.0000		- 2,167	2,167	
10/16/2019 000011697851	B	385.320	1.0000		- 385	385	
10/17/2019 000011697851	B	174.260	1.0000		- 174	174	
11/01/2019 000011697851	B	517.670	1.0000		- 518	518	
11/04/2019 000011697851	B	740.260	1.0000		- 740	740	
11/04/2019 000011697851	B	419.340	1.0000		- 419	419	
11/05/2019 000011697851	B	1,150,000.000	1.0000		- 1,150,000	1,150,000	
11/06/2019 000011697851	B	2,068.500	1.0000		- 2,069	2,069	

ESG HOLDINGS, LLC PENSION PLAN

Schedule H, line 4j – Schedule of Reportable Transactions
 Year Ended November 30, 2019
 Plan 001
 EIN 38-3926387

DATE	BOUGHT/ SOLD	SHARES/ PAR VALUE	UNIT PRICE	EXPENSE INCURRED	PRINCIPAL CASH	TRANSACTION COST	REALIZED GAIN/LOSS
11/07/2019 000011697851	B	494.820	1.0000		- 495	495	
11/08/2019 000011697851	B	494.820	1.0000		- 495	495	
11/13/2019 000011697851	B	926.340	1.0000		- 926	926	
11/26/2019 000011697851	B	1,644.750	1.0000		- 1,645	1,645	
Total For Buys				0	5,368,049	5,368,049	0
12/03/2018 000011697851	S	- 387,354.880	1.0000		387,355	387,355	
12/13/2018 000011697851	S	- 493.120	1.0000		493	493	
01/02/2019 000011697851	S	- 391,907.610	1.0000		391,908	391,908	
01/11/2019 000011697851	S	- 709.210	1.0000		709	709	
01/14/2019 000011697851	S	- 3,898.680	1.0000		3,899	3,899	
01/16/2019 000011697851	S	- 36.870	1.0000		37	37	
01/23/2019 000011697851	S	- 1,606.920	1.0000		1,607	1,607	
02/01/2019 000011697851	S	- 391,145.230	1.0000		391,145	391,145	
02/11/2019 000011697851	S	- 88.870	1.0000		89	89	

ESG HOLDINGS, LLC PENSION PLAN

Schedule H, line 4j – Schedule of Reportable Transactions
 Year Ended November 30, 2019
 Plan 001
 EIN 38-3926387

DATE	BOUGHT/ SOLD	SHARES/ PAR VALUE	UNIT PRICE	EXPENSE INCURRED	PRINCIPAL CASH	TRANSACTION COST	REALIZED GAIN/LOSS
02/20/2019 000011697851	S	- 1,571.700	1.0000		1,572	1,572	
03/01/2019 000011697851	S	- 391,551.900	1.0000		391,552	391,552	
03/21/2019 000011697851	S	- 28,987.990	1.0000		28,988	28,988	
04/01/2019 000011697851	S	- 391,316.980	1.0000		391,317	391,317	
04/03/2019 000011697851	S	- 249.420	1.0000		249	249	
04/09/2019 000011697851	S	- 249.420	1.0000		249	249	
04/12/2019 000011697851	S	- 3,762.970	1.0000		3,763	3,763	
04/16/2019 000011697851	S	- 145.600	1.0000		146	146	
05/01/2019 000011697851	S	- 393,137.880	1.0000		393,138	393,138	
05/22/2019 000011697851	S	- 13,548.830	1.0000		13,549	13,549	
06/03/2019 000011697851	S	- 392,669.590	1.0000		392,670	392,670	
06/11/2019 000011697851	S	- 493.120	1.0000		493	493	
06/14/2019 000011697851	S	- 36.870	1.0000		37	37	
07/01/2019 000011697851	S	- 392,669.590	1.0000		392,670	392,670	

ESG HOLDINGS, LLC PENSION PLAN

Schedule H, line 4j – Schedule of Reportable Transactions
 Year Ended November 30, 2019
 Plan 001
 EIN 38-3926387

DATE	BOUGHT/ SOLD	SHARES/ PAR VALUE	UNIT PRICE	EXPENSE INCURRED	PRINCIPAL CASH	TRANSACTION COST	REALIZED GAIN/LOSS
07/10/2019 000011697851	S	- 403.060	1.0000		403	403	
07/12/2019 000011697851	S	- 4,062.800	1.0000		4,063	4,063	
07/15/2019 000011697851	S	- 85.660	1.0000		86	86	
07/25/2019 000011697851	S	- 41,396.800	1.0000		41,397	41,397	
07/31/2019 000011697851	S	- 24,081.000	1.0000		24,081	24,081	
08/01/2019 000011697851	S	- 397,121.780	1.0000		397,122	397,122	
08/21/2019 000011697851	S	- 254.450	1.0000		254	254	
08/29/2019 000011697851	S	- 341.450	1.0000		341	341	
09/03/2019 000011697851	S	- 396,841.700	1.0000		396,842	396,842	
09/10/2019 000011697851	S	- 280.830	1.0000		281	281	
10/01/2019 000011697851	S	- 394,778.930	1.0000		394,779	394,779	
10/10/2019 000011697851	S	- 3,918.020	1.0000		3,918	3,918	
10/17/2019 000011697851	S	- 174.260	1.0000		174	174	
11/01/2019 000011697851	S	- 392,819.640	1.0000		392,820	392,820	

ESG HOLDINGS, LLC PENSION PLAN

Schedule H, line 4j – Schedule of Reportable Transactions

Year Ended November 30, 2019

Plan 001

EIN 38-3926387

DATE	BOUGHT/ SOLD	SHARES/ PAR VALUE	UNIT PRICE	EXPENSE INCURRED	PRINCIPAL CASH	TRANSACTION COST	REALIZED GAIN/LOSS
11/07/2019 000011697851	S	- 494.820	1.0000		495	495	
11/08/2019 000011697851	S	- 494.820	1.0000		495	495	
11/21/2019 000011697851	S	- 14,400.960	1.0000		14,401	14,401	
11/26/2019 000011697851	S	- 160.290	1.0000		160	160	
Total For Sells				0	4,859,747	4,859,747	0
Total First Am Govt Ob Fd Cl Z				0	10,227,796	10,227,796	0
GRAND TOTAL				0	10,227,796	10,227,796	0

CATEGORY 4 - SINGLE TRANSACTION WITH ONE BROKER EXCEEDS 5% OF VALUE
 "NO TRANSACTIONS QUALIFIED FOR THIS SECTION"

Note: This schedule has been prepared by U.S. Bank, N.A., trustee who certified that it is complete and accurate

Appendix A – Summary of Actuarial Methods

The ultimate cost of a pension plan is the excess of actual benefits and administrative expenses paid over actual net investment return on plan assets during the plan's existence until the last payment has been made to the last participant. A plan's "actuarial cost method" determines the expected incidence of actuarial costs by allocating portions of the ultimate cost to each plan year. The cost method is thus a budgeting tool to help ensure that a plan will be adequately and systematically funded. Annual contributions are also affected by a plan's "asset valuation method" (as well as plan provisions, actuarial assumptions, and actual plan demographic and investment experience each year).

Actuarial Cost Method

The actuarial cost method used for determining the Plan's ERISA funding requirements and the FASB ASC Topic 960 values is the Unit Credit method. Under this method, an accrued benefit is determined at each active participant's assumed retirement age based on compensation and service at both the beginning and the end of the current year. The Plan's Normal Cost is the sum of the present value of the excess of each active participant's accrued benefit at the end of the current year over that at the beginning of the current year. The Plan's accrued liability is the sum of (a) the present value of each active participant's accrued benefit at the beginning of the current year plus (b) the present value of each inactive participant's benefits. This method is prescribed for ERISA funding requirements by the Pension Protection Act of 2006.

Asset Valuation Method

The Actuarial Value of Assets used for determining the Plan's ERISA funding requirements is equal to the Market Value of Assets. The Market Value of Assets is equal to the Fair Value of Assets as of the valuation date plus the discounted value of employer contributions made after the valuation date. These contributions are discounted to the valuation date using the Effective Interest Rate for the prior plan year. The expected investment return for a plan year is based on the lesser of the expected rate of return on plan assets (currently 6.75% per year) or the applicable statutory interest rate for the year.

PBGC Variable-Rate Premium Method

The alternative method is used for the PBGC variable-rate premium calculation (adopted December 1, 2008).

Amortization Method

For the Plan's ERISA funding requirements, incremental Funding Shortfall amounts are amortized over a seven-year period, and the related shortfall amortization payment is determined on the first valuation date following the plan year in which it arises based on the segment rates used for ERISA minimum funding purposes on that date, as prescribed under IRC Section 430.

Changes in Actuarial Methods Since Prior Valuation

None.

Appendix B – Summary of Actuarial Assumptions

The assumptions summarized below represent mandated or our current best estimate of future expectations under this plan. If developing experience differs significantly from those assumptions, they may be revised for subsequent valuations.

ECONOMIC ASSUMPTIONS

Interest Rates

The current funding and PBGC interest rates are as follows. The funding interest rates are prescribed under IRS regulations based on the Plan Sponsor's interest rate election. The PBGC interest rates are based on the Plan Sponsor's elected method for determining the premium funding target.

	Minimum Funding	Maximum Deductible	PBGC Premium
Segment 1 (0–5 years)	3.92%	2.21%	2.21%
Segment 2 (5–20 years)	5.52%	3.77%	3.77%
Segment 3 (20+ years)	6.29%	4.45%	4.45%
Effective Interest Rate	5.63%	3.92%	3.92%

ERISA minimum funding: 24-month average segment rates, using a four-month lookback period, adjusted to reflect the applicable segment rate stabilization corridor.

Maximum Deductible Contribution: 24-month average segment rates, using a four-month lookback period, but not adjusted to reflect segment rate stabilization.

PBGC premium: 24-month average segment rates, using a four-month lookback period, but not adjusted to reflect segment rate stabilization. The alternative method (adopted December 1, 2008) is used for the PBGC variable-rate premium calculation.

FASB ASC Topic 960: 6.75% per year (adopted December 1, 2011). This is the assumed rate of return for the Plan's entire portfolio of assets. It is based on the Plan's investment policy, including target asset allocation, and Milliman's capital market expectations.

Asset Returns

ERISA minimum funding and Maximum Deductible Contribution: 6.75% per year (adopted December 1, 2011). It is based on the Plan's investment policy, including target asset allocation, and Milliman's capital market expectations.

Compensation Increases

Not applicable. (Benefit accruals are frozen.)

Inflation (CPI)

Not applicable. (Benefit accruals are frozen.)

Postretirement Benefit Increases

None.

Maximum Benefit and Annual Compensation Limitation Increases

ERISA minimum funding and Maximum Deductible Contribution: 0% per year as required by statute.

FASB ASC Topic 960: Not applicable. (Benefit accruals are frozen.)

Social Security Taxable Wage Base Increases

Not applicable. (Benefit accruals are frozen.)

Administrative Expenses

None assumed payable from plan assets.

DEMOGRAPHIC ASSUMPTIONS

Except where noted, demographic assumptions are based on Milliman's judgment and continued review of experience.

Mortality

ERISA minimum funding, Maximum Deductible Contribution, and PBGC premium: Effective December 1, 2018, mortality was updated as prescribed by IRC Section 430(h)(3)(A). The mortality assumption was updated to comply with IRS and PBGC requirements. ESG Holdings, LLC has elected to defer implementation of the new mortality tables under IRC §1.430(h)(3)-1 for the 2018 plan year, as permitted in IRS Notice 2017-60.

FASB ASC Topic 960: RP-2014 Mortality Table projected back to 2006 base year using Projection Scale MP-2014 projected forward from 2006 with Projection Scale MP-2018, applied generationally, with employee rates before benefit commencement and healthy annuitant rates after benefit commencement. As a generational table, it reflects mortality improvements both before and after the measurement date. For disabled lives, RP-2014 Disabled Annuitant Mortality Table projected back to 2006 base year using Projection Scale MP-2014 projected forward from 2006 with Projection Scale MP-2018.

Retirement

Annual rates of retirement are shown in the following table for active participants who are eligible to retire.

Age	% of Eligible Retiring at Given Year of Age
55	3%
56	3
57	3
58	3
59	3
60	10
61	10
62	15
63	10
64	10
65+	100

Terminated vested participants are assumed to retire at age 65.

Termination

Annual rates of termination are based on age and sex. Sample rates are shown in the following table.

Age	Male	Female
20	14.4%	21.2%
30	4.0	6.3
40	1.8	3.5
50	0.4	1.1
55 and Over	0.0	0.0

Disability

None assumed.

Decrement Timing

Decrements are assumed to occur at the middle of the year, except that 100% retirement (see above) is assumed to occur at the beginning of the year.

Form of Payment

Life annuity.

Marital Characteristics

For participants not in pay status: 90% of male participants are assumed to be married to a spouse of the opposite sex and 70% of female participants are assumed to be married to a spouse of the opposite sex. Males are assumed to be three years older than females.

For participants in pay status: Actual birth dates of beneficiaries are included in the census data, where relevant.

For beneficiaries: Actual birth dates are included in the census data, where relevant.

Benefits Not Valued

All plan benefits are valued.

Special Data Adjustments

None.

Weighted Average Retirement Age

The weighted average retirement age for active participants is 63. This equals the sum, over all retirement ages, of the retirement age multiplied by the probability of retiring at that age, as shown in the following table.

(a) Possible Retirement Age "r"	(b) Assumed Rate of Retirement at Age "r"	(c) Probability of Person Age 55 Still Working at "r"	(d) (b) x (c) = Probability of Person Age 55 Retiring at "r"	(e) (a) x (d) = Component of Weighted Average Retirement Age
55	0.0300	1.0000	0.0300	1.6500
56	0.0300	0.9700	0.2910	1.6296
57	0.0300	0.9409	0.0282	1.6089
58	0.0300	0.9127	0.0274	1.5881
59	0.0300	0.8853	0.0266	1.5670
60	0.1000	0.8587	0.0859	5.1524
61	0.1000	0.7729	0.0773	4.7144
62	0.1500	0.6956	0.1043	6.4688
63	0.1000	0.5912	0.0591	3.7248
64	0.1000	0.5321	0.0532	3.4055
65	1.0000	0.4789	0.4789	31.1287
Weighted Average Retirement Age:				62.6383
Rounded to Nearest Age:				63

Appendix C – Summary of Principal Plan Provisions

This summary of plan provisions is intended to only describe the essential features of the Plan. All eligibility requirements and benefit amounts shall be determined in strict accordance with the plan document itself.

Plan Sponsor

ESG Holdings, LLC

Plan Effective

December 1, 1989

Coverage and Participation

Employees who are not salespersons, compensated only on commissions, and are not covered by any other defined benefit retirement plan operated by the Company. Eligible employees who were participants of the prior plan as of November 30, 1989, became participants of this amended plan on December 1, 1989. Other eligible employees become participants when they have attained age 21 and completed a 12-month qualifying period.

Participants in the Pension Plan for Hourly Employees of Eagle Ottawa Leather Company (Part B), the Pension Plan for Hourly Employees of Eagle Tanning Company (Part C), the Trostel Specialty Elastomers Group Inc. Pension Plan (Part E), the Albert Trostel Packing, Ltd. Industrial Pension Plan (Part D), and the Maysteel Corporation Pension Plan for Non-Bargaining Employees became participants in this Plan when the plans were merged into the Plan as of December 1, 2002.

All employees at the Allenton Division Plant who are represented by District 121 of the International Association of Machinists and Aerospace Workers AFL-CIO and its Rock River Lodge No. 2053 are eligible to participate in this plan after completing the twelve-month qualifying period. Effective November 30, 2003, the Maysteel Corporation Pension Plan for Bargaining Employees of the Allenton Division (Part F) was merged into this Plan.

Employees of Part A and Part D who were not participants prior to January 1, 2009 are not eligible to enter the Plan.

Employees of Part F who were not participants prior to May 8, 2009 are not eligible to enter the Plan.

Locations providing benefits under Parts B, C, and E were closed on October 20, 2006, February 13, 2009, and December 1, 2006, respectively.

Average Monthly Compensation

The highest average monthly compensation during a period of sixty consecutive calendar months within the last one hundred and twenty calendar months. Compensation includes base salary, overtime pay and bonus, prior to any 401(k) and 125 deferrals.

Vesting Service

Part A Employees: Vesting Service equals the period of employment from date of hire, and shall include periods of severance not greater than twelve months.

Part B (Eagle Ottawa) Employees: Vesting Service is credited according to the following table:

Hours of Service in Calendar Year	Years of Vesting Service
1,000 or more	1.0
945-999	0.6
756-944	0.5
567-755	0.4
378-566	0.3
189-377	0.2
188	0.1
Less than 188	0.0

Part C (Eagle Tanning), Part D (Packing), and Part E (Specialty Elastomers) Employees: Vesting Service is credited according to the following schedule:

Hours of Service in Calendar Year	Years of Vesting Service
1,000 or more	1.0
900-999	0.5
720-899	0.4
540-719	0.3
360-539	0.2
180-359	0.1
Less than 180	0.0

Part F (Maysteel Allenton) Employees: The years of Vesting Service are equal to the sum of the years of credited service prior to March 1, 1980 plus years of Vesting Service credited after that date according to the following table:

Hours of Service in Calendar Year	Years of Vesting Service
1,000 or more	1.0000
900-999	0.5000
750-899	0.4167
600-749	0.3333
450-599	0.2500
300-449	0.1667
150-299	0.0833
Less than 150	0.0000

The Plan was amended effective July 1, 2013 for certain participants in Parts A, D, and F to be 100% vested with less than 5 years of Vesting Service.

Benefit Service

Part A Employees: Benefit Service is calculated based on elapsed time from date of participation.

Part B (Eagle Ottawa) Employees: Benefit Service is equal to the sum of "years of credited service" prior to 1976 as defined by the Plan in effect on July 31, 1976, plus years of Benefit Service credited after 1975 according to the following table:

Hours of Service in Calendar Year	Years of Vesting Service
1,700 or more	1.0
1,512-1,699	0.9
1,323-1,511	0.8
1,134-1,322	0.7
945-1,133	0.6
756-944	0.5
567-755	0.4
378-566	0.3
189-377	0.2
188	0.1
Less than 188	0.0

Part C (Eagle Tanning), Part D (Packing), and Part E (Specialty Elastomers) Employees: Benefit Service is equal to the sum of the Benefit Service accumulated under the Albert Trostel & Sons Company Administrative Pension Plan as of July 27, 1990, plus Benefit Service credited after July 27, 1990, according to the following table:

Hours of Service in Calendar Year	Years of Vesting Service
1,800 or more	1.0
1,620-1,799	0.9
1,440-1,619	0.8
1,260-1,439	0.7
1,080-1,259	0.6
900-1,079	0.5
720-899	0.4
540-719	0.3
360-539	0.2
180-359	0.1
Less than 188	0.0

Part F (Maysteel Allenton) Employees: Benefit Service is credited for each Plan Year, before and after the Effective Date, in accordance with the following table:

Hours of Service in Calendar Year	Years of Vesting Service
1,800 or more	1.0000
1,650-1,799	0.9167
1,500-1,649	0.8333
1,350-1,499	0.7500
1,200-1,349	0.6667
1,050-1,199	0.5833
900-1,049	0.5000
750-899	0.4167
600-749	0.3333
450-599	0.2500
300-449	0.1667
150-299	0.0833
Less than 150	0.0000

Benefit service accruals were frozen for Parts A through F on January 1, 2009; October 20, 2006; February 13, 2009; January 1, 2009; December 1, 2006; and May 8, 2009, respectively.

Accrued Benefit

Part B (Eagle Ottawa) Employees: The Accrued Benefit is equal to the Monthly Benefit Rate multiplied by Benefit Service. The most current Benefit Rates are:

Effective	Benefit Rate
April 15, 1999	\$26.00
April 15, 2004	\$27.00
April 15, 2005	\$28.00

Location closed on October 20, 2006.

Part C (Eagle Tanning) Employees: The Accrued Benefit is equal to the Monthly Benefit Rate multiplied by Benefit Service up to a maximum of 30 years. The most current Benefit Rates are:

Effective	Benefit Rate
July 28, 2002	\$17.00
July 27, 2003	\$18.00
July 25, 2004	\$19.00
July 24, 2005	\$20.00
July 30, 2006	\$20.50
July 29, 2007	\$21.00
July 27, 2008	\$22.00

Location closed on February 13, 2009.

Part D (Packing), and Part E (Specialty Elastomers) Employees: The monthly Accrued Benefit is equal to \$14.00 times years of Benefit Service up to a maximum of 35 years. Benefit is frozen as of January 1, 2009.

Part F (Maysteel Allenton) Employees: The Accrued Benefit is calculated as the sum of:

- 1) \$35.00 times Years of Benefit Service after 3/2/2008 and before 5/7/2009
- 2) \$32.50 times Years of Benefit Service from 5/1/2003 through 3/1/2008
- 3) \$77.00 times Years of Benefit Service from 12/1/2001 through 4/30/2003
- 4) \$67.50 times Years of Benefit Service from 12/1/2000 through 11/30/2001
- 5) \$57.50 times Years of Benefit Service from 12/1/1999 through 11/30/2000
- 6) \$47.50 times Years of Benefit Service from 12/1/1998 through 11/30/1999
- 7) \$32.50 times Years of Benefit Service from 12/1/1995 through 11/30/1998
- 8) \$17.00 times Years of Benefit Service from 12/1/1987 through 11/30/1995
- 9) \$8.64 times Years of Benefit Service before 12/1/1987.

Benefit is frozen as of May 8, 2009.

All Other Employees: The Accrued Benefit is calculated as the sum of:

- 1) One percent of Average Monthly Compensation times years of Benefit Service up to a maximum of 35 years; and
- 2) Additional benefits for individuals listed in Appendix B of the Plan Document.

Benefits are frozen as of January 1, 2009.

Normal Retirement

Normal Retirement Date: Age 65 and 5 years of either vesting or participation service.

Benefit: The Accrued Benefit.

Early Retirement

Eligibility:

Part B (Eagle Ottawa) Employees: Age 55 and five years of Vesting Service.

Part C (Eagle Tanning) Employees: Age 55 and five years of Vesting Service.

Part D (Packing) Employees, and Part E (Specialty Elastomers): Age 55 and five years of Vesting Service.

All Other Employees: Age 55 and five years of Vesting Service.

Participants retiring early may receive either a reduced retirement pension payable immediately or a normal retirement pension payable at age 65.

Benefit:

Part A and Part F (Maysteel Allenton) Employees: The Accrued Benefit reduced by 1/2% for each month from age 65.

All Other Employees: The Accrued Benefit reduced by 1/2% for each month from age 65.

Disability

Eligibility:

Part B (Eagle Ottawa), and Part C (Eagle Tanning) Employees: Ten years of Vesting Service.

Part D (Packing), and Part E (Specialty Elastomers) Employees: No special disability benefits are payable.

All Other Employees: At least five years of Vesting Service.

Participants who have satisfied the above requirements and who become totally and permanently disabled while employed are eligible for immediate benefits.

Benefit: The Accrued Benefit as of the disability retirement date. For Part D (Packing) and Part E (Specialty Elastomers), no special disability benefits are payable.

Deferred Pension on Termination of Service

Eligibility: Five years of Vesting Service. The benefit is payable at age 65 or early retirement if an employee satisfied respective service requirement shown above.

Benefit: The Accrued Benefit payable at age 65. Reduced benefits may commence at early retirement age.

Pre-Retirement Surviving Spouse's Pension

Eligibility: Five years of Vesting Service.

Benefit: Fifty percent of the amount that would have been paid to the participant if he had terminated on the day before his death and retired on the earliest possible pension commencement date, electing the Joint and 50% Survivor option.

Normal Form of Payment

For married participants, a Joint and 75% Survivor option. The amount of benefit is equal to the actuarial equivalent of the Accrued Benefit payable in the life-only form. For other participants, Accrued Benefit payable for life.

Adjustment for Pre-Retirement Surviving Spouse's Pension

Part F (Maysteel Allenton) Employees: Unless the participant had elected to waive the pre-retirement surviving spouse benefit, his monthly pension will be reduced by a percentage determined according to the following table for each year he is covered for that benefit:

Attained Age	Percentage Reduction	
	While Employed	After Employment Terminates
Under 34	0.00%	0.00%
35-44	0.00%	0.06%
45-54	0.00%	0.30%
55-65	0.00%	0.67%

Exhibit 16

Active Participants by Age and Service

The number of active participants, summarized by attained age and years of credited service as of December 1, 2018, is shown below.

Age	Years of Credited Service										Total
	0	1–4	5–9	10–14	15–19	20–24	25–29	30–34	35–39	40+	
0–24	-	-	-	-	-	-	-	-	-	-	-
25–29	-	-	-	-	-	-	-	-	-	-	-
30–34	-	-	-	1	-	-	-	-	-	-	1
35–39	-	-	-	-	-	-	-	-	-	-	-
40–44	-	-	-	-	-	-	-	-	-	-	-
45–49	-	-	-	1	-	1	-	-	-	-	2
50–54	-	-	-	-	-	1	-	-	-	-	1
55–59	-	-	-	-	-	1	-	1	-	-	2
60–64	-	-	-	-	-	-	-	-	-	-	-
65–69	-	-	-	-	-	-	-	-	-	-	-
70+	-	-	-	1	-	-	-	-	-	-	1
Total	-	-	-	3	-	3	-	1	-	-	7

ESG Holdings, LLC Pension Plan

(EIN: 38-3926387)

(PIN: 001)

Average Expected Retirement Method

Age (a)	Rate (b)	Weight (c)	Product (a) * (c)
55	3%	.03000	1.6500
56	3%	.02910	1.6296
57	3%	.02823	1.6089
58	3%	.02738	1.5881
59	3%	.02656	1.5670
60	10%	.08587	5.1524
61	10%	.07729	4.7144
62	15%	.10434	6.4688
63	10%	.05912	3.7248
64	10%	.05321	3.4055
65	100%	.47890	31.1287

Sum 62.6383

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