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

2019

This Form is Open to Public Inspection

Part I Annual Report Identification Information

For calendar plan year 2019 or fiscal plan year beginning 01/01/2019 and ending 12/31/2019

A This return/report is for:
- [X] 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
- [X] 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. . . . . ▶ [X]

D Check box if filing under:
- [X] Form 5558
- [ ] automatic extension
- [ ] the DFVC program
- [ ] special extension (enter description)

Part II Basic Plan Information—enter all requested information

1a Name of plan
NORTHWESTERN OHIO PLUMBERS AND PIPEFITTERS PENSION PLAN AND TRUST

1b Three-digit plan number (PN) ▶ 001

1c Effective date of plan 10/01/1962

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)
BOARD OF TRUSTEES NORTHWESTERN OHIO PLUMBERS AND PIPEFITTERS
PENSION PLAN AND TRUST

7570 CAPLE BLVD STE B
NORTHWOOD, OH 43619

2b Employer Identification Number (EIN)
34-6502487

2c Plan Sponsor's telephone number
419-662-1388

2d Business code (see instructions)
238220

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

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

SIGN HERE	Filed with authorized/valid electronic signature.	10/01/2020	ERIC OSBORN
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	Filed with authorized/valid electronic signature.	10/01/2020	PETE VAVRINEK
	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

3a	Plan administrator's name and address [X] 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:	**4b**	EIN
a	Sponsor's name	**4d**	PN
c	Plan Name		

5	Total number of participants at the beginning of the plan year	**5**	1928
6	Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines **6a(1), 6a(2), 6b, 6c,** and **6d**).		
a(1)	Total number of active participants at the beginning of the plan year	**6a(1)**	1042
a(2)	Total number of active participants at the end of the plan year	**6a(2)**	1058
b	Retired or separated participants receiving benefits	**6b**	620
c	Other retired or separated participants entitled to future benefits	**6c**	157
d	Subtotal. Add lines **6a(2)**, **6b**, and **6c**	**6d**	1835
e	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	**6e**	151
f	Total. Add lines **6d** and **6e**.	**6f**	1986
g	Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**	
h	Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested	**6h**	
7	Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	**7**	83

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

1B

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

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

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

a Pension Schedules

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

b General Schedules

- **(1)** [X] **H** (Financial Information)
- **(2)** [ ] **I** (Financial Information – Small Plan)
- **(3)** [ ] ___ **A** (Insurance Information)
- **(4)** [X] **C** (Service Provider Information)
- **(5)** [ ] **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 2019 Form M-1 annual report. If the plan was not required to file the 2019 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 MB (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information

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

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

OMB No. 1210-0110

2019

This Form is Open to Public Inspection

For calendar plan year 2019 or fiscal plan year beginning 01/01/2019 and ending 12/31/2019

▶ **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
NORTHWESTERN OHIO PLUMBERS AND PIPEFITTERS PENSION PLAN AND TRUST

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF
BOARD OF TRUSTEES NORTHWESTERN OHIO PLUMBERS AND PIPEFITTERS

D Employer Identification Number (EIN)
34-6502487

E Type of plan: **(1)** [X] Multiemployer Defined Benefit **(2)** [ ] Money Purchase (see instructions)

1a	Enter the valuation date: Month 01 Day 01 Year 2019		
b	Assets		
(1)	Current value of assets	**1b(1)**	153244057
(2)	Actuarial value of assets for funding standard account	**1b(2)**	163377026
c	**(1)** Accrued liability for plan using immediate gain methods	**1c(1)**	199318283
(2)	Information for plans using spread gain methods:		
(a)	Unfunded liability for methods with bases	**1c(2)(a)**	
(b)	Accrued liability under entry age normal method	**1c(2)(b)**	
(c)	Normal cost under entry age normal method	**1c(2)(c)**	
(3)	Accrued liability under unit credit cost method	**1c(3)**	199318283
d	Information on current liabilities of the plan:		
(1)	Amount excluded from current liability attributable to pre-participation service (see instructions)	**1d(1)**	
(2)	"RPA '94" information:		
(a)	Current liability	**1d(2)(a)**	387106927
(b)	Expected increase in current liability due to benefits accruing during the plan year	**1d(2)(b)**	15208695
(c)	Expected release from "RPA '94" current liability for the plan year	**1d(2)(c)**	12297699
(3)	Expected plan disbursements for the plan year	**1d(3)**	12652699

Statement by Enrolled Actuary

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

SIGN HERE

Signature of actuary

07/07/2020
Date

RICHARD L. KUBIAK
Type or print name of actuary

20-08540
Most recent enrollment number

CUNI RUST AND STRENK
Firm name

513-891-0270
Telephone number (including area code)

4555 LAKE FOREST DR, CINCINNATI, OH 45242
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 [ ]

2 Operational information as of beginning of this plan year:

a Current value of assets (see instructions)	**2a**		153244057
b "RPA '94" current liability/participant count breakdown:		**(1)** Number of participants	**(2)** Current liability
(1) For retired participants and beneficiaries receiving payment		755	166107350
(2) For terminated vested participants		196	27754518
(3) For active participants:			
(a) Non-vested benefits			18788351
(b) Vested benefits			174456708
(c) Total active		1008	193245059
(4) Total		1959	387106927
c If the percentage resulting from dividing line 2a by line 2b(4), column (2), is less than 70%, enter such percentage	**2c**		39.59 %

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

(a) Date (MM-DD-YYYY)	**(b)** Amount paid by employer(s)	**(c)** Amount paid by employees	**(a)** Date (MM-DD-YYYY)	**(b)** Amount paid by employer(s)	**c)** Amount paid by employees
01/01/2019					
12/31/2019	15888348				
			Totals ► **3(b)**	15888348	**3(c)**

4 Information on plan status:

a Funded percentage for monitoring plan's status (line 1b(2) divided by line 1c(3))	**4a**	82.0 %
b Enter code to indicate plan's status (see instructions for attachment of supporting evidence of plan's status). If entered code is "N," go to line 5	**4b**	N

c Is the plan making the scheduled progress under any applicable funding improvement or rehabilitation plan? ☐ Yes ☐ No

d If the plan is in critical status or critical and declining status, were any benefits reduced (see instructions)? ☐ Yes ☐ No

e If line d is "Yes," enter the reduction in liability resulting from the reduction in benefits (see instructions), measured as of the valuation date	**4e**	
f If the rehabilitation plan projects emergence from critical status or critical and declining status, enter the plan year in which it is projected to emerge. If the rehabilitation plan is based on forestalling possible insolvency, enter the plan year in which insolvency is expected and check here ☐	**4f**	

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

a ☐ Attained age normal **b** ☐ Entry age normal **c** ☒ Accrued benefit (unit credit) **d** ☐ Aggregate

e ☐ Frozen initial liability **f** ☐ Individual level premium **g** ☐ Individual aggregate **h** ☐ Shortfall

i ☐ Other (specify):

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

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

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

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

6 Checklist of certain actuarial assumptions:

a Interest rate for "RPA '94" current liability				**6a**	3.06 %
		Pre-retirement		Post-retirement	
b Rates specified in insurance or annuity contracts		☐ Yes ☐ No ☒ N/A		☐ Yes ☐ No ☒ N/A	
c Mortality table code for valuation purposes:					
(1) Males	**6c(1)**	A		A	
(2) Females	**6c(2)**	AF		AF	
d Valuation liability interest rate	**6d**	7.50 %		7.50 %	
e Expense loading	**6e**	6.1 %	☐ N/A	%	☒ N/A
f Salary scale	**6f**	%	☒ N/A		
g Estimated investment return on actuarial value of assets for year ending on the valuation date			**6g**	5.2 %	
h Estimated investment return on current value of assets for year ending on the valuation date			**6h**	-2.8 %	

7 New amortization bases established in the current plan year:

(1) Type of base	**(2)** Initial balance	**(3)** Amortization Charge/Credit
1	5495143	579097
4	-1153792	-121591

8 Miscellaneous information:

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

9 Funding standard account statement for this plan year:

Charges to funding standard account:

a Prior year funding deficiency, if any		**9a**	
b Employer's normal cost for plan year as of valuation date		**9b**	5779396
c Amortization charges as of valuation date:		Outstanding balance	
(1) All bases except funding waivers and certain bases for which the amortization period has been extended	**9c(1)**	75123981	12199288
(2) Funding waivers	**9c(2)**		
(3) Certain bases for which the amortization period has been extended	**9c(3)**		
d Interest as applicable on lines 9a, 9b, and 9c		**9d**	1348402
e Total charges. Add lines 9a through 9d		**9e**	19327086

Credits to funding standard account:

f	Prior year credit balance, if any		**9f**	14846552
g	Employer contributions. Total from column (b) of line 3		**9g**	15888348
		Outstanding balance		
h	Amortization credits as of valuation date	**9h** 24336172		3951973
i	Interest as applicable to end of plan year on lines 9f, 9g, and 9h		**9i**	1994931
j	Full funding limitation (FFL) and credits:			
	(1) ERISA FFL (accrued liability FFL)	**9j(1)** 71702687		
	(2) "RPA '94" override (90% current liability FFL)	**9j(2)** 199377339		
	(3) FFL credit		**9j(3)**	
k	**(1)** Waived funding deficiency		**9k(1)**	
	(2) Other credits		**9k(2)**	
l	Total credits. Add lines 9f through 9i, 9j(3), 9k(1), and 9k(2)		**9l**	36681804
m	Credit balance: If line 9l is greater than line 9e, enter the difference		**9m**	17354718
n	Funding deficiency: If line 9e is greater than line 9l, enter the difference		**9n**	

9 o	Current year's accumulated reconciliation account:		
	(1) Due to waived funding deficiency accumulated prior to the 2019 plan year	**9o(1)**	
	(2) Due to amortization bases extended and amortized using the interest rate under section 6621(b) of the Code:		
	(a) Reconciliation outstanding balance as of valuation date	**9o(2)(a)**	
	(b) Reconciliation amount (line 9c(3) balance minus line 9o(2)(a))	**9o(2)(b)**	
	(3) Total as of valuation date	**9o(3)**	
10	Contribution necessary to avoid an accumulated funding deficiency. (See instructions.)	**10**	0
11	Has a change been made in the actuarial assumptions for the current plan year? If "Yes," see instructions		[X] Yes [ ] No

SCHEDULE C (Form 5500)	Service Provider Information	OMB No. 1210-0110
Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ **File as an attachment to Form 5500.**	**2019** **This Form is Open to Public Inspection.**

For calendar plan year 2019 or fiscal plan year beginning 01/01/2019 and ending 12/31/2019

A Name of plan	**B** Three-digit plan number (PN) ▶
NORTHWESTERN OHIO PLUMBERS AND PIPEFITTERS PENSION PLAN AND TRUST	001
C Plan sponsor's name as shown on line 2a of Form 5500	**D** Employer Identification Number (EIN)
BOARD OF TRUSTEES NORTHWESTERN OHIO PLUMBERS AND PIPEFITTERS	34-6502487

Part I Service Provider Information (see instructions)

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

b If you answered line 1a "Yes," enter the name and EIN or address of each person providing the required disclosures for the service providers who received only eligible indirect compensation. Complete as many entries as needed (see instructions).

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

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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)

NOVARA TESIJA, PLLC

888 W BIG BEAVER STE 600
TROY, MI 48084

38-3507129

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
29	NONE	50138	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

MARQUETTE ASSOCIATES, INC.

180 N LASALLE ST STE 3500
CHICAGO, IL 60601

36-3485298

(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?
17	NONE	65417	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

CUNI, RUST, AND STRENK

4555 LAKE FOREST STE 620
CINCINNATI, OH 45242-3760

31-1227755

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
11	NONE	53225	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

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

BENESYS, INC.

700 TOWER DR, STE. 300
TROY, MI 48098

38-2383171

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
13	NONE	38683	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

TITUS & URBANSKI, INC.

1540 S HOLLAND-SYLVANIA
MAUMEE, OH 43537

34-1695540

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
10	AUDITOR	19595	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

COMERICA

411 W LAFAYETTE BLVD
DETROIT, MI 48226

42-1741646

(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 72	NONE	71822	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

Part I Service Provider Information (continued)

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

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

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

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

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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

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

(complete as many entries as needed)

a	Name: CUNI, RUST & STRENK	**b** EIN:	31-1227755
c	Position: ACTUARY		
d	Address: 4555 LAKE FOREST STE 620 CINCINNATI, OH 45242	**e** Telephone:	

Explanation: THE ENROLLED ACTUARY WAS CHANGED BECAUSE WORK INTERNALLY AT CUNI, RUST & STRENK WAS REASSIGNED.

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 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

2019

This Form is Open to Public Inspection

For calendar plan year 2019 or fiscal plan year beginning 01/01/2019 and ending 12/31/2019

A Name of plan
NORTHWESTERN OHIO PLUMBERS AND PIPEFITTERS PENSION PLAN AND TRUST

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
BOARD OF TRUSTEES NORTHWESTERN OHIO PLUMBERS AND PIPEFITTERS

D Employer Identification Number (EIN)
34-6502487

Part I Asset and Liability Statement

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

Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a	497771	1059324
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	2050829	3122759
(2) Participant contributions	1b(2)		
(3) Other	1b(3)	847899	259899
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	4336671	4669895
(2) U.S. Government securities	1c(2)		
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)		
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)		
(9) Value of interest in common/collective trusts	1c(9)		
(10) Value of interest in pooled separate accounts	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	67566225	84197574
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other	1c(15)	79272228	89709635

			(a) Beginning of Year	(b) End of Year
1d	Employer-related investments:			
	(1) Employer securities	1d(1)		
	(2) Employer real property	1d(2)		
e	Buildings and other property used in plan operation	1e	2765	2296
f	Total assets (add all amounts in lines 1a through 1e)	1f	154574388	183021382
	Liabilities			
g	Benefit claims payable	1g		
h	Operating payables	1h	1330331	454936
i	Acquisition indebtedness	1i		
j	Other liabilities	1j		
k	Total liabilities (add all amounts in lines 1g through1j)	1k	1330331	454936
	Net Assets			
l	Net assets (subtract line 1k from line 1f)	1l	153244057	182566446

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)	15888348	
	(B) Participants	2a(1)(B)		
	(C) Others (including rollovers)	2a(1)(C)		
	(2) Noncash contributions	2a(2)		
	(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		15888348
b	**Earnings on investments:**			
	(1) Interest:			
	(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	94999	
	(B) U.S. Government securities	2b(1)(B)		
	(C) Corporate debt instruments	2b(1)(C)		
	(D) Loans (other than to participants)	2b(1)(D)		
	(E) Participant loans	2b(1)(E)		
	(F) Other	2b(1)(F)		
	(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		94999
	(2) Dividends: **(A)** Preferred stock	2b(2)(A)		
	(B) Common stock	2b(2)(B)	3144026	
	(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)		
	(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		3144026
	(3) Rents	2b(3)		
	(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	2b(4)(A)	8389426	
	(B) Aggregate carrying amount (see instructions)	2b(4)(B)	6550171	
	(C) Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result	2b(4)(C)		1839255
	(5) Unrealized appreciation (depreciation) of assets: **(A)** Real estate	2b(5)(A)		
	(B) Other	2b(5)(B)	20908409	
	(C) Total unrealized appreciation of assets. Add lines **2b(5)(A)** and **(B)**	2b(5)(C)		20908409

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		
c Other income	2c		
d Total income. Add all **income** amounts in column (b) and enter total	2d		41875037
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	12043997	
(2) To insurance carriers for the provision of benefits	2e(2)		
(3) Other	2e(3)		
(4) Total benefit payments. Add lines **2e(1)** through **(3)**	2e(4)		12043997
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions)	2g		
h Interest expense	2h		
i Administrative expenses: (1) Professional fees	2i(1)	185447	
(2) Contract administrator fees	2i(2)	18371	
(3) Investment advisory and management fees	2i(3)	71822	
(4) Other	2i(4)	233011	
(5) Total administrative expenses. Add lines **2i(1)** through **(4)**	2i(5)		508651
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		12552648
Net Income and Reconciliation			
k Net income (loss). Subtract line **2j** from line **2d**	2k		29322389
l Transfers of assets:			
(1) To this plan	2l(1)		
(2) From this plan	2l(2)		

Part III Accountant's Opinion

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

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

(1) [X] Unmodified **(2)** [ ] Qualified **(3)** [ ] Disclaimer **(4)** [ ] Adverse

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

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

(1) Name: TITUS & URBANSKI INC **(2)** EIN: 34-1695540

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

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

Part IV Compliance Questions

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

During the plan year:

		Yes	No	Amount
a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)	4a		X	
b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)	4b		X	

			Yes	No	Amount
c	Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)	4c		X	
d	Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)	4d		X	
e	Was this plan covered by a fidelity bond?	4e	X		500000
f	Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?	4f		X	
g	Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?	4g		X	
h	Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?	4h		X	
i	Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	4i	X		
j	Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked, and see instructions for format requirements.)	4j	X		
k	Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?	4k		X	
l	Has the plan failed to provide any benefit when due under the plan?	4l		X	
m	If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	4m		X	
n	If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.	4n			

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

5b If, during this plan year, any assets or liabilities were transferred from this plan to another plan(s), identify the plan(s) to which assets or liabilities were transferred. (See instructions.)

5b(1) Name of plan(s)	**5b(2)** EIN(s)	**5b(3)** PN(s)

5c If the plan is a defined benefit plan, is it covered under the PBGC insurance program (See ERISA section 4021.)? ..... ☒ Yes ☐ No ☐ Not determined
If "Yes" is checked, enter the My PAA confirmation number from the PBGC premium filing for this plan year 4244689. (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

2019

This Form is Open to Public Inspection.

For calendar plan year 2019 or fiscal plan year beginning 01/01/2019 and ending 12/31/2019

A Name of plan
NORTHWESTERN OHIO PLUMBERS AND PIPEFITTERS PENSION PLAN AND TRUST

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
BOARD OF TRUSTEES NORTHWESTERN OHIO PLUMBERS AND PIPEFITTERS

D Employer Identification Number (EIN)
34-6502487

Part I Distributions

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

1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions ..... | **1** |

2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits):

EIN(s): _____ _____

Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.

3 Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year ..... | **3** | 0

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

4 Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)? ..... ☐ **Yes** ☒ **No** ☐ **N/A**

If the plan is a defined benefit plan, go to line 8.

5 If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. **Date:** Month _____ Day _____ Year _____

If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.

6 **a** Enter the minimum required contribution for this plan year (include any prior year accumulated funding deficiency not waived) ..... | **6a** |

b Enter the amount contributed by the employer to the plan for this plan year ..... | **6b** |

c Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount) ..... | **6c** |

If you completed line 6c, skip lines 8 and 9.

7 Will the minimum funding amount reported on line 6c be met by the funding deadline? ..... ☐ **Yes** ☐ **No** ☐ **N/A**

8 If a change in actuarial cost method was made for this plan year pursuant to a revenue procedure or other authority providing automatic approval for the change or a class ruling letter, does the plan sponsor or plan administrator agree with the change? ..... ☐ **Yes** ☐ **No** ☒ **N/A**

Part III Amendments

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

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

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

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

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

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

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 INDUSTRIAL POWER SYSTEMS

b EIN 34-1473329 **c** Dollar amount contributed by employer 2290743

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 06 Day 30 Year 2021

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) 7.16
(2) Base unit measure: ☒ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):

a Name of contributing employer GEM INDUSTRIAL INC

b EIN 31-1036493 **c** Dollar amount contributed by employer 2265010

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 06 Day 30 Year 2021

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) 7.16
(2) Base unit measure: ☒ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):

a Name of contributing employer RMF NOOTER INC

b EIN 20-0154319 **c** Dollar amount contributed by employer 2217198

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 06 Day 30 Year 2021

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) 7.16
(2) Base unit measure: ☒ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):

a Name of contributing employer DUNBAR MECHANICAL INC

b EIN 34-4467756 **c** Dollar amount contributed by employer 1147877

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 06 Day 30 Year 2021

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) 7.16
(2) Base unit measure: ☒ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month Day Year

e Contribution rate information *(If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents)
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month Day Year

e Contribution rate information *(If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents)
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):

14 Enter the number of participants on whose behalf no contributions were made by an employer as an employer of the participant for:

a The current year	**14a**	
b The plan year immediately preceding the current plan year	**14b**	
c The second preceding plan year	**14c**	

15 Enter the ratio of the number of participants under the plan on whose behalf no employer had an obligation to make an employer contribution during the current plan year to:

a The corresponding number for the plan year immediately preceding the current plan year	**15a**	
b The corresponding number for the second preceding plan year	**15b**	

16 Information with respect to any employers who withdrew from the plan during the preceding plan year:

a Enter the number of employers who withdrew during the preceding plan year	**16a**	
b If line 16a is greater than 0, enter the aggregate amount of withdrawal liability assessed or estimated to be assessed against such withdrawn employers	**16b**	

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

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

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

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

a Enter the percentage of plan assets held as:
Stock: 50.0 % Investment-Grade Debt: 18.0 % High-Yield Debt: 4.0 % Real Estate: 10.0 % Other: 18.0 %

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):

20 **PBGC missed contribution reporting requirements.** If this is a multiemployer plan or a single-employer plan that is not covered by PBGC, skip line 20.

a Is the amount of unpaid minimum required contributions for all years from Schedule SB (Form 5500) line 40 greater than zero? ☐ Yes ☒ No

b If line 20a is "Yes," has PBGC been notified as required by ERISA sections 4043(c)(5) and/or 303(k)(4)? Check the applicable box:

☐ Yes.

☐ No. Reporting was waived under 29 CFR 4043.25(c)(2) because contributions equal to or exceeding the unpaid minimum required contribution were made by the 30th day after the due date.

☐ No. The 30-day period referenced in 29 CFR 4043.25(c)(2) has not yet ended, and the sponsor intends to make a contribution equal to or exceeding the unpaid minimum required contribution by the 30th day after the due date.

☐ No. Other. Provide explanation_____

NORTHWESTERN OHIO PLUMBERS AND PIPEFITTERS PENSION PLAN AND TRUST

Financial Statements and Supplemental Schedules

Years Ended December 31, 2019 and 2018

With Independent Auditor's Report

TITUS & URBANSKI, INC.

CERTIFIED PUBLIC ACCOUNTANTS

MAUMEE, OHIO

NORTHWESTERN OHIO PLUMBERS AND PIPEFITTERS
PENSION PLAN AND TRUST

Financial Statements and Supplemental Schedules
Years Ended December 31, 2019 and 2018
With Independent Auditor's Report

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TITUS & URBANSKI

E. Thomas Titus, CPA

Michael D. Urbanski, CPA PFS

CERTIFIED PUBLIC ACCOUNTANTS

AN INDEPENDENT FIRM ASSOCIATED WITH HANTZGROUP SM

Qinghong Li, CPA

Song Li, CPA

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Sonja M. Crouch, CPA

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Fax: (440) 942-4235
Phone: (440) 942-2810

INDEPENDENT AUDITOR'S REPORT

Board of Trustees
Northwestern Ohio Plumbers and Pipefitters
Pension Plan and Trust
Northwood, Ohio

We have audited the accompanying financial statements of Northwestern Ohio Plumbers and Pipefitters Pension Plan and Trust (the Plan), which comprise the statements of net assets available for benefits as of December 31, 2019 and 2018, and the related statements of changes in net assets available for benefits for the years then ended, the statement of accumulated plan benefits as of December 31, 2018 and 2017 and the related statement of changes in accumulated plan benefits for the years then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

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

Auditor's Responsibility

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

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

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

Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the net assets available for benefits of Northwestern Ohio Plumbers and Pipefitters Retirement Plan and Trust as of December 31, 2019 and 2018, and the changes in net assets available for benefits for the years then ended and the statement of accumulated plan benefits as of December 31, 2018 and 2017 and the related statement of changes in accumulated plan benefits for the years ended in accordance with accounting principles generally accepted in the United States of America.

Report on Supplemental Information

Our audits were conducted for the purpose of forming an opinion on the financial statements as a whole. The supplemental Schedule H, line 4i - Schedule of Assets (Held at End of Year) and the supplemental Schedule H, line 4j - Schedule of Reportable Transactions as of and for the year ended December 31, 2019, are presented for the purpose of additional analysis and are not a required part of the financial statements but are supplemental information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974. The supplemental Schedule of Administrative Expense is presented for the purpose of additional analysis and is not a required part of the financial statements. Such information is the responsibility of the Plan's management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the information is fairly stated in all material respects in relation to the financial statements as a whole.

Titus & Urbanski Inc.
Certified Public Accountants
Titus & Urbanski, Inc.
Maumee, OH
August 13, 2020

NORTHWESTERN OHIO PLUMBERS AND PIPEFITTERS
PENSION PLAN AND TRUST

Statements of Net Assets Available for Benefits

Assets

	December 31, 2019	December 31, 2018
Investments (at Fair Value)	$ 178,577,104	$ 151,175,124
Receivables		
Employers' Contributions	3,122,759	2,050,829
Interest and Dividends	5,240	5,817
Total Receivables	3,127,999	2,056,646
Cash	1,059,324	497,771
Office Equipment, at Cost, Net of Accumulated Depreciation of $11,878 and $11,409, Respectively	2,296	2,765
Other Recievables	254,659	842,082
Total Assets	183,021,382	154,574,388

Liabilities

Due to Broker	-	1,039,212
Accounts Payable	454,936	291,119
Total Liabilities	454,936	1,330,331
Net Assets Available for Benefits	$ 182,566,446	$ 153,244,057

See accompanying notes to the financial statements.

NORTHWESTERN OHIO PLUMBERS AND PIPEFITTERS
PENSION PLAN AND TRUST

Statements of Changes in Net Assets Available for Benefits

Additions

	Years Ended December 31, 2019	2018
Participating Employer Contributions, Net of Reciprocity	$ 15,888,348	$ 13,351,067
Investment Income (Loss)		
Interest and Dividends	3,239,025	2,080,983
Net Appreciation (Depreciation) of Investments	22,747,664	(6,335,979)
Total Investment Income (Loss)	25,986,689	(4,254,996)
Less: Investment Manager and Trustee Fees	(71,822)	(70,655)
Net Investment Income (Loss)	25,914,867	(4,325,651)
Total Additions	41,803,215	9,025,416

Deductions

Benefits and Withdrawals	12,043,997	11,628,265
Administrative Expense	436,829	412,997
Total Deductions	12,480,826	12,041,262
Net Increase (Decrease) in Net Assets Available for Benefits	29,322,389	(3,015,846)
Net Assets Available for Benefits		
Beginning of Year	153,244,057	156,259,903
End of Year	$ 182,566,446	$ 153,244,057

See accompanying notes to the financial statements.

NORTHWESTERN OHIO PLUMBERS AND PIPEFITTERS
PENSION PLAN AND TRUST

Statements of Accumulated Plan Benefits

	December 31, 2018	December 31, 2017
Acturarial Present Value of Accumulated Plan Benefits		
Vested Benefits		
Retired Participants	$ 110,109,948	$ 106,049,043
Other Participants	84,396,543	73,785,895
Total Vested Benefits	194,506,491	179,834,938
Non-Vested Benefits	10,738,573	10,755,450
Actuarial Present Value of Accumulated Plan Benefits	$ 205,245,064	$ 190,590,388

See accompanying notes to the financial statements.

NORTHWESTERN OHIO PLUMBERS AND PIPEFITTERS
PENSION PLAN AND TRUST

Statements of Changes in Accumulated Plan Benefits

	December 31, 2018	December 31, 2017
Actuarial Present Value of Accumulated Plan Benefits at Beginning of Year	$ 190,590,388	$ 180,604,369
Increase (Decrease) During the Year Attributed To:		
Plan Experience and Benefits Accrual	8,006,565	7,304,135
Changes in Actuarial Assumptions	(1,096,730)	858,069
Discount Rate Change	5,565,923	-
Decrease in Discount Period	13,807,183	13,129,046
Benefits Paid	(11,628,265)	(11,305,231)
Net Increase (Decrease) During the Year	14,654,676	9,986,019
Actuarial Present Value of Accumulated Plan Benefits at End of Year	$ 205,245,064	$ 190,590,388

See accompanying notes to the financial statements.

Notes to Financial Statements
Years Ended December 31, 2019 and 2018

Note 1 - Description of the Plan

The following description of the Northwestern Ohio Plumbers and Pipefitters Pension Plan and Trust (Plan) is provided for general information purposes only. Participants should refer to the Plan document for a more complete description of the Plan's provisions.

General

The Plan is a multi-employer defined benefit pension plan covering eligible members of the Northwestern Ohio Plumbers and Pipefitters Local No. 50 Union (Union) and is subject to the provisions of the Employee Retirement Income Security Act of 1974, as amended (ERISA).

Pension Benefits

Participants are vested and entitled to monthly pension benefits as follows:

Normal Benefit:	Earlier of age 65 with 5 more years of credited service or age 60 and 30 or more years of credited service or when age plus credited service total at least 90.
Reduced Benefit:	Age 55 with 10 vesting service credits - normal benefits are reduced by .5% for each month participant is younger than 65 at retirement.
	Age 55-60 with 30 or more years of credited service - normal benefit is reduced up to 20% depending on age at retirement.

Normal monthly benefit per year of credited service between:

July 1, 1940 - December 31, 1961	$8.50
January 1, 1962 - December 31, 1976	$19.00
January 1, 1977 - December 31, 1982	$27.00
January 1, 1983 - December 31, 1987	$48.00
January 1, 1988 - December 31, 1988	$48.00 or 2.25% of employer contributions made on participant's behalf, whichever is greater.
January 1, 1989 - December 31, 1997	2.25% of employer contributions made on participant's behalf.
January 1, 1998 - December 31, 2016	2.5% of employer contributions made participant's behalf through June 30, 2005. Effective July 1, 2005, only $2.35 per hour is subject to the benefits accrual percentage. An additional $87.50 per month is accrued for all current retirees and active members who retire after January 1, 2000.

Note 1 - Description of the Plan (continued)

Pension Benefits (continued)

January 1, 2017 - December 31, 2019	1.2% of employer contributions made on participant's behalf on or after January 1, 2017. An additional $87.50 per month is accrued for all current retirees and active members who retire after January 1, 2000.

Death and Disability

If a participant dies prior to retirement but while vested, the beneficiary is entitled to the 50% Survivor Benefit, or 60 of 120 monthly payments of the participant's accrued benefit, actuarially adjusted. If a participant dies after pension benefits have begun, the beneficiary will receive postretirement death benefits depending on the type of benefit elected at the time of retirement (50%, 75% or 100% survivor annuity or the remainder of a five- or ten-year certain benefit).

Note 2 - Summary of Significant Accounting Policies

Basis of Accounting

The accompanying financial statements of Northwestern Ohio Plumbers and Pipefitters Pension Plan and Trust are presented on the accrual basis of accounting.

Management Estimates

The preparation of financial statements in conformity with generally accepted accounting principles requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

Contributions

Contributions are accrued when earned by participants as documented in employer reports and are based upon negotiated rates per hour paid. Contributions are net of reciprocity to other plans.

Note 2 - Summary of Significant Accounting Policies (continued)

Investment Valuation and Income

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. See Note 4 for a discussion of fair value measurements.

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

Benefits

Benefits are recorded when paid.

Administrative Expense

The Plan participates in a cost-sharing agreement with Northwestern Ohio Plumbers and Pipefitters Retiree Health and Welfare Plan, the Northwestern Ohio Plumbers and Pipefitters Active Health and Welfare Plan, and the Northwestern Ohio Plumbers and Pipefitters Retirement Plan (Retiree Plan, Active Health and Welfare Plan, and Retirement Plan, respectively). Certain shared operating expenses, and wages and payroll taxes are paid by the Active Health and Welfare Plan, which are reimbursed by the Plan, the Retirement Plan, and the Retiree Plan. Other administrative expenses are paid by the Plan and recorded when incurred.

Note 3 - Investments

The Plan's investments were held and managed by The Trust Company of Toledo, N.A., Trustee. and other investment managers until January, 2018 when the Plan began transferring investments to Comerica Bank who now manages the investments, along with other investment managers pursuant to ERISA. During 2019 and 2018, the Plan's investments (including investments bought, sold and held during the year) appreciated (depreciated) in value by $21,842,741 and $(6,335,879), respectively.

Note 4 - Fair Value Measurements

Financial Accounting Standards Board (FASB) Accounting Standards Codification topic, Fair Value Measurements and Disclosures, provides a framework for measuring fair value. That framework provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value.

Note 4 - Fair Value Measurements (continued)

The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (level 1 measurements) and the lowest priority to unobservable inputs (level 3 measurements). The three levels of the fair value hierarchy are described as follows:

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

Level 2: Inputs to the valuation methodology include:

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

If the asset or liability has a specified (contractual) term, the level 2 input must be observable for substantially the full term of the asset or liability.

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

The asset'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.

The following is a description of the valuation methodologies used for assets at fair value. There have been no changes in the methodologies used at December 31, 2019 and 2018.

Mutual Funds, Equity Funds, Short Term Liquidity and Bond Funds: Valued at the net asset value (NAV) of shares held by the Plan at year end.

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

Note 4 - Fair Value Measurements (continued)

AFL-CIO Building Investment Trust: The Trust invests in commercial real estate developments and acquisitions located throughout the United States of America. These investments are valued at estimated fair value based on a variety of methods using observable and unobservable inputs, including independent third-party appraisals, discounted cash flows methodologies, and income or cost and sales comparisons. Unit values are determined by the Trustee at the end of each calendar quarter. Participants are admitted to and withdrawn from the Trust on the basis of the preceding quarter's unit value. Regulations of the Office of the Comptroller require bank collective trusts to complete redemption requests no later than the expiration of a one-year notice period.

Grosvenor Opportunistic Credit Fund V, Ltd and Grosvenor Escrow Account: The Funds generally hold positions in a limited partnership that invests in readily marketable securities and derivatives that are valued at quoted market values and/or less liquid non-marketable securities and derivatives that are valued at estimated fair value.

Grosvenor Opportunistic Credit Fund III, Ltd: The Fund generally hold positions in readily marketable securities and derivatives that are valued at quoted market values and/or less liquid non-marketable securities and derivatives that are valued at estimated fair value.

Grosvenor Institutional Partners, L.P.: The Limited Partnership Funds generally hold positions in readily marketable securities and derivatives that are valued at quoted market values and/or less liquid non-marketable securities and derivatives that are valued at estimated fair value.

Crescent Capital Trust II: The Fund's investment objective is to seek to realize superior risk-adjusted returns by investing in a multi-asset class, diversified portfolio of primarily below-investment grade debt securities.

UBS Trumbull Property Fund L.P.: The Fund invests in real estate developments throughout the United States. These investments are valued at estimated fair value based on a variety of methods using observable and unobservable inputs, including independent third-party appraisals, discounted cash flows methodologies, and income or cost and sales comparisons. The valuation methods may produce a fair value calculation that may not be indicative of net realizable value or reflective of future fair values. Furthermore, although the Plan believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair value of certain financial instruments could result in a different fair value measurement at the reporting date.

Note 4 - Fair Value Measurements (continued)

Levine Leichtman Capital Partners V: The Fund provides financing to developing companies that fit the criteria of the Fund as determined by General Partner. These investments are valued at estimated fair value using a variety of observable and unobservable inputs, including discounted cash flow model, and independent third-party appraisals. Redemption of the capital contribution made by the Plan to the Fund is restricted to the discretion of the General Partner. Should there be a Material Adverse Effect on the Plan if it were to remain a Limited Partner in the Fund, the Plan is entitled to sell its entrie interest in the Fund upon written notice to the General Partner.

Artisan International Growth Trust Tier 1: The Trust generally holds positions in readily marketable securities of international equities that are valued at quoted market values and/or less liquid non-marketable securities and derivatives that are valued at estimated fair value.

IR&M Intermediate Fund: The Fund generally holds positions in fixed income securities that are primarily valued based on evaluated prices received from independent pricing services or from dealers who make markets in such securities.

Parametric Defensive Equity Fund: The Fund generally holds positions in readily marketable securities that are valued at quoted market values and deemed to be actively traded. The funds held are required to publish their daily net asset value and to transact at that price.

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

Note 4 - Fair Value Measurements (continued)

The following table sets forth by level, within the fair value hierarchy, the Plan's assets at fair value as of December 31, 2019:

	Investments at Fair Value as of December 31, 2019				
	Level 1	Level 2	Level 3	at NAV	Total
Mutual Funds	$ 84,197,574	$ -	$ -	$ -	$ 84,197,574
Money Market Funds	4,669,895	-	-	-	4,669,895
UBS Trumbull Property Fund	-	-	9,025,293	-	9,025,293
Grosvenor Institutional Partners	-	-	7,616,520	-	7,616,520
Grosvenor Opportunistic Credit Fund V Ltd.	-	-	2,991,170	-	2,991,170
Grosvenor Opportunistic Credit Fund V Escrow	-	-	940,632	-	940,632
Grosvenor Opportunistic Credit Fund III	-	-	804,341	-	804,341
IR&M Intermediate Fund	-	-	-	24,204,225	24,204,225
Parametric Defensive Equity Fund	-	-		8,586,268	8,586,268
Levine Leichtman Capital Partners V	-	-	6,751,805	-	6,751,805
Artisan International Growth Trust Tier I	-	-	8,808,102	-	8,808,102
AFL-CIO Housing Investment Trust	-	-		7,465,911	7,465,911
Crescent Capital Trust II	-	-	-	3,313,706	3,313,706
AFL-CIO Building Investment Trust	-	-	9,201,662	-	9,201,662
Total Investments at Fair Value	$ 88,867,469	$ -	$ 46,139,525	$ 43,570,110	$ 178,577,104

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

	Investments at Fair Value as of December 31, 2018				
	Level 1	Level 2	Level 3	at NAV	Total
Mutual Funds	$ 67,566,225	$ -	$ -	$ -	$ 67,566,225
Money Market Funds	4,336,671	-	-	-	4,336,671
UBS Trumbull Property Fund	-	-	9,624,610	-	9,624,610
Grosvenor Institutional Partners	-	-	7,188,497	-	7,188,497
Grosvenor Opportunistic Credit Fund V Ltd.	-	-	1,835,871	-	1,835,871
Grosvenor Opportunistic Credit Fund V Escrow	-	-	692,947	-	692,947
Grosvenor Opportunistic Credit Fund III	-	-	1,697,952	-	1,697,952
IR&M Intermediate Fund	-	-	-	21,725,889	21,725,889
Parametric Defensive Equity Fund	-	-	-	7,384,593	7,384,593
Levine Leichtman Capital Partners V	-	-	6,838,468	-	6,838,468
Artisan International Growth Trust Tier I	-	-	6,799,574	-	6,799,574
AFL-CIO Housing Investment Trust	-	-	-	6,001,843	6,001,843
Crescent Capital Trust II	-	-	-	557,514	557,514
AFL-CIO Building Investment Trust	-	-	8,924,470	-	8,924,470
Total Investments at Fair Value	$ 71,902,896	$ -	$ 43,602,389	$ 35,669,839	$ 151,175,124

Note 4 - Fair Value Measurements (continued)

The following table sets forth a summary of changes in the fair value of the Plan's level 3 assets for the year ended December 31, 2019:

	Investments at Fair Value as of December 31, 2019								
	Grosvenor Institutional Partners L.P.	Grosvenor Opportunistic Credit V	AFL-CIO Building Investment Trust	Grosvenor Opporunistic Credit Fund III	Grosvenor Opportunistic Fund V Escrow	USB Trumbull Property Fund L.P.	Levine Leichtman Capital Partners	Artisan International Growth Trust Tier I	Total
Balance at Beginning of Year	$ 7,188,497	$ 1,835,871	$ 8,924,470	$ 1,697,952	$ 692,947	$ 9,624,610	$ 6,838,468	$ 6,799,574	$ 43,602,389
Realized Gains	-	-	-	-	-	(3,041)	189,219	-	186,178
Unrealized gains/(losses) relating to instruments still held at the reporting date	(2,821,977)	(1,891,405)	277,192	(1,195,612)	(485,878)	(631,010)	1,000,869	2,008,528	(3,739,293)
Sales	(5,500,000)	-	-	(4,697,999)	(1,062,079)	434,806	(1,273,404)	-	(12,098,676)
Purchases	8,750,000	3,046,704	-	5,000,000	1,795,642	(310,549)	81,701	-	18,363,498
Fees	-	-	-	-	-	(89,523)	(85,048)	-	(174,571)
Balance at End of Year	$ 7,616,520	$ 2,991,170	$ 9,201,662	$ 804,341	$ 940,632	$ 9,025,293	$ 6,751,805	$ 8,808,102	$ 46,139,525

The following table sets forth a summary of changes in the fair value of the Plan's level 3 assets for the year ended December 31, 2018:

	Investments at Fair Value as of December 31, 2018								
	Grosvenor Institutional Partners L.P.	Grosvenor Opportunistic Credit V	AFL-CIO Building Investment Trust	Grosvenor Opporunistic Credit Fund III	Grosvenor Opportunistic Fund V Escrow	USB Trumbull Property Fund L.P.	Levine Leichtman Capital Partners	Artisan International Growth Trust Tier I	Total
Balance at Beginning of Year	$ 7,299,544	$ -	$ 8,331,779	$ 2,815,880	$ -	$ 9,278,825	$ 6,771,116	$ 7,611,940	$ 42,109,084
Realized Gains	-	-	-	-	-	-	22,446	-	22,446
Unrealized gains/(losses) relating to instruments still held at the reporting date	(111,047)	35,871	592,691	(117,928)	-	733,988	741,176	(812,366)	1,062,385
Sales	-	-	-	(1,000,000)	-	(296,212)	(758,399)	-	(2,054,611)
Purchases	-	1,800,000	-	-	692,947	-	151,757	-	2,644,704
Fees	-	-	-	-	-	(91,991)	(89,628)	-	(181,619)
Balance at End of Year	$ 7,188,497	$ 1,835,871	$ 8,924,470	$ 1,697,952	$ 692,947	$ 9,624,610	$ 6,838,468	$ 6,799,574	$ 43,602,389

Note 4 - Fair Value Measurements (continued)

Quantitative Information About Significant Unobservable Inputs Used in Level 3 Fair Value Measurements

The following table represents the Plan's level 3 financial instruments, the valuation techniques used to measure the fair value of those financial instruments as of December 31, 2019, and the significant unobservable inputs and the ranges in value for those inputs:

Instrument	Fair Value	Principal Valuation Technique	Significant Unobservable Inputs	Range of Significant Input	Weighted Average
Grosvenor Institutional Partners L.P.	$ 7,616,520	Practical Expendient	Value of Holdings	N/A	N/A
Partners Opportunistic Credit Fund V	$ 2,991,170		Value of Holdings	N/A	N/A
Grosvenor Opportunistic Credit Fund V Escrow	$ 940,632	Practical Expendient	Value of Holdings	N/A	N/A
AFL-CIO Building Investment Trust	$ 9,201,662	Discounted Cash Flow	Discount Rate Terminal Cap Rate	5.25-9.75% 4.25-7.75%	6.39% 5.50%
Opportunistic Credit Fund III	$ 804,341	Practical Expendient	Value of Holdings	N/A	N/A
UBS Trumbull Property Fund L.P.	$ 9,025,293	Discounted Cash Flow	Market Based Discount Rate Exit Cap Rate	5.10-10.25% 4.00-8.50%	6.60% 5.60%
Levine Leichtman Capital Partners	$ 6,751,805	Market Based Discount Cash Flow	EBITDA Market Discount Rate	10.27x-17.04x 2.50-19.00%	14.95% 9.20%
Artisan International Growth Trust Tier I	$ 8,808,102	Practical Expendient	Value of Holdings	N/A	N/A

Note 4 - Fair Value Measurements (continued)

Quantitative Information About Significant Unobservable Inputs Used in Level 3 Fair Value Measurements

The following table represents the Plan's level 3 financial instruments, the valuation techniques used to measure the fair value of those financial instruments as of December 31, 2018, and the significant unobservable inputs and the ranges in value for those inputs:

Instrument	Fair Value	Principal Valuation Technique	Significant Unobservable Inputs	Range of Significant Input	Weighted Average
Grosvenor Institutional Partners L.P.	$ 7,188,497	Practical Expendient	Value of Holdings	N/A	N/A
Partners Opportunistic Credit Fund V	$ 1,835,871		Value of Holdings	N/A	N/A
Grosvenor Opportunistic Credit Fund V Escrow	$ 692,947	Practical Expendient	Value of Holdings	N/A	N/A
AFL-CIO Building Investment Trust	$ 8,924,470	Discounted Cash Flow	Dicount Rate Terminal Cap Rate	5.25-9.75% 4.25-7.75%	6.39% 5.50%
Opportunistic Credit Fund III	$ 1,697,952	Practical Expendient	Value of Holdings	N/A	N/A
UBS Trumbull Property Fund L.P.	$ 9,624,610	Discounted Cash Flow	Market Based Discount Rate Exit Cap Rate	5.10-10.25% 4.00-8.50%	6.60% 5.60%
Levine Leichtman Capital Partners	$ 6,838,468	Market Based Discounted Cash Flow	EBITDA Market Discount Rate	10.27x-17.04x 2.50-19.00%	14.95%
Artisan International Growth Trust Tier I	$ 6,799,574	Practical Expedient	Value of Holdings	N/A	N/A

Note 5 - Related Party

The Plan, along with the Retirement Plan, the Active Health and Welfare Plan, and the Retiree Plan, leases its current office facilities from the Union on a month to month basis. Rent expense for the Plan for the years ended December 31, 2019 and 2018 was $2,394 and $2,394, respectively.

The Plan participates in a cost expense sharing agreement with related Plans (see Note 2). At December 31, 2019 and 2018, amounts due from the related Plans were $57,196 and $57,301,respectively, and are included in Other Assets. The amounts due to the related Plans were $181,550 and $237,085 as of December 31, 2019 and 2018, respectively, and are included in Accounts Payable and Other.

Note 6 - Actuarial Present Value of Accumulated Plan Benefits

The actuarial present value of accumulated plan benefits represents the present value of (1) the benefits expected to become payable to participants who have retired, terminated with vested rights, become disabled, or to beneficiaries of those who died; and (2) the accrued benefits based on service rendered to the valuation date with respect to present participants, taking into account valuation assumptions as to mortality and, in the case of present participants, such other matters as withdrawal, retirement and disability.

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

The significant actuarial assumptions used in the valuation at December 31, 2018 and 2017 were as follows:

	2018	2017
Actuarial Cost Method	Unit Credit	Unit Credit
Discount Rate	7.25% Per Annum	7.5% per Annum
Post-Retirement Mortality Rates	RP-2014, with Blue Collar Adjustment	RP-2014, with Blue Collar Adjustment

Note 7 - Plan Status

The Plan's actuary has determined that the Plan is in the Green Zone as of January 1, 2019 and 2018.

At December 31, 2018 and 2017, the Plan's vested benefits exceeded that net assets available for benefits by $41,262,434 and $23,575,035. Pursuant to the collective bargaining agreement, the contribution rate per hour paid increased from $6.66 to $6.91 effective July 2, 2018 and from $6.91 to $7.16 effective July 2, 2019. The Board is further reviewing the matter and it is expected that the deficiency will be funded through future increase in the collectively bargained contribution rates, reductions in benefits, or some combination thereof.

Note 8 - Tax Status

The Internal Revenue Service has determined and informed the Plan by letter dated November 17, 2015 that the Plan is qualified, and the related trust established under the Plan is tax-exempt, under the applicable sections of the Internal Revenue Code (IRC). The Plan has been amended since receiving the determination letter. The Plan administrator and the Plan's legal counsel believe that the Plan is currently designed and being operated in compliance with applicable provisions of the Internal Revenue Code. Therefore, they believe that the Plan continues to qualify and operate in accordance with the applicable provisions of the Internal Revenue Code.

The Plan has determined that there are no uncertain tax positions that require disclosure in these financial statements under the FASB Accounting Standards Codification topic Income Taxes.

Note 9 - Plan Termination

The Plan's Board of Trustees has the right under the Plan to modify the benefits provided to participants. The Plan may be terminated by joint agreement between participating employers and the Union, subject to the provisions set forth in ERISA. The Pension Benefit Guaranty Corporation (PBGC) reserves the right to terminate the Plan if the Plan fails to meet the minimum funding standards or is unable to pay benefits when due. Should the Plan terminate at some future time, its net assets generally will not be available on a pro-rata basis to provide participants' benefits. Whether a particular participant's accumulated plan benefits will be paid depends on both the priority of those benefits and the level of benefits guaranteed by the PBGC at that time. Some benefits may be fully or partially provided for by the then existing net assets and the PBGC guarantee while other benefits may not be provided at all. Participants should refer to the Plan document for further information.

Note 10 - Risks and Uncertainties

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 investments will occur in the near term and that such changes could materially affect investment account balances and the amounts reported in the statement of net assets available for benefits.

Note 11 - Concentration of Credit Risk

The Plan maintains deposits in federally insured financial institutions. At times, these deposits exceed federally insured limits. Management monitors the soundness of these financial institutions and does not believe it is exposed to significant credit risk with respect to its deposit accounts.

Note 12 - Subsequent Events

The Plan has evaluated subsequent events through August 13, 2020, the date the financial statements were available to be issued. There were no subsequent events that required adjustment to the financial statements or additional disclosure.

SUPPLEMENTAL SCHEDULES

NORTHWESTERN OHIO PLUMBERS AND PIPEFITTERS
PENSION PLAN AND TRUST

Schedules of Administrative Expense

	Years Ended December 31, 2019	2018
Salaries, Payroll Taxes and Benefits	117,523	109,417
Consulting Fees	62,489	58,811
Legal	50,138	51,333
Actuarial Fees	53,225	49,125
Pension Benefit Guaranty	51,591	48,104
Administrative Manager Fee	18,371	20,318
Data Processing	20,312	20,312
Accounting	19,595	18,000
Office Expense	26,057	16,943
Seminars and Meetings	7,730	11,120
Payroll Audit Fees	5,603	4,596
Rent	2,394	2,394
Depreciation	469	1,606
Insurance and Bonding	1,332	918
Total Administrative Expense	$ 436,829	$ 412,997

See accompanying notes to the financial statements.

NORTHWESTERN OHIO PLUMBERS AND PIPEFITTERS
PENSION PLAN AND TRUST

EIN #34-6502487 Plan #001

Schedule H, line 4i - Schedule of Assets (Held at End of Year)
(Prepared Pursuant to Requirements of the Employee Retirement Income Security Act of 1974)

The enclosed Comerica Bank Account Statements
is incorporated herein by reference.

December 31, 2019

(a)(b)(c) Identity of issuer, borrower, lessor or similar party and description of investment	(d) Cost	(e) Market Value
DFA Emerging Mkts Core Equity	$ 4,899,641	$ 5,201,568
Neuberger Berman High Income	5,096,647	4,966,863
Vanguard Total Int St IDX-IS	11,188,419	12,619,311
Vanguard Inst Index	14,147,641	44,059,836
Vangaurd Extended Market Index	9,502,389	17,349,996
Blackrock Liquidity Funds	4,669,895	4,669,895
IR&M Intermediate Funds	22,037,551	24,204,225
UBS Trumbull Property Fund	6,863,868	9,025,293
AFL-CIO Building Investment Trust	4,964,857	9,201,662
Artisan International Growth Trust Tier I	6,000,000	8,808,102
Grosvenor Institutional Partners	3,250,000	7,616,520
Parametric Definsive Equity Fund	6,500,000	8,586,268
Levine Leichtman Capital Partners V	4,115,539	6,751,805
AFL-CIO Housing Investment Trust	6,895,491	7,465,911
Grosvenor Opportunistic Credit Fund III	1,653,883	804,341
Grosvenor Opportunistic Credit Fund V	2,896,876	2,991,170
Grosvenor Opportunistic Credit Fund V Escrow	757,286	940,632
Crescent Capital Trust II	2,715,993	3,313,706
Total Investments at Fair Value	$ 118,155,976	$ 178,577,104

See accompanying notes to the financial statements.

Schedule Of Assets Held

UNITS	ASSET DESCRIPTION	COST	UNIT PRICE	MARKET VALUE	UNREALIZED GAIN/LOSS	YIELD AT MARKET
	OPEN END MF - FIXED INC TAX					
573,540.836	NEUBERGER BERMAN HIGH INCOME BOND FUND-INS 64128K868 ACCOUNT 1055082558 573,540.836	5,096,646.77	8.66	4,966,863.64	129,783.13-	5.416
	CIF - FIXED INCOME					
6,547.666	AFL-CIO HOUSING INVESTMENT TR 997633AF9 ACCOUNT 1055082567 6,547.666	6,895,490.97	1140.24	7,465,910.68	570,419.71	0.000
1,203.7303	AFL-CIO BLDG INVESTMENT TRUST 997636AF2 ACCOUNT 1055082576 1,203.7303	4,964,857.34	7644.2884	9,201,661.54	4,236,804.20	0.000
1,737,641.37	IR&M INTERMEDIATE FUND LLC CIFF02328 ACCOUNT 1055082567 1,737,641.37	22,037,551.33	13.9294	24,204,225.24	2,166,673.91	0.000
	TOTAL CIF - FIXED INCOME	33,897,899.64		40,871,797.46	6,973,897.82	
	TOTAL DEBT SECURITIES	38,994,546.41		45,838,661.10	6,844,114.69	
	EQUITY SECURITIES					
	CLOSELY HELD - EQUITY					
7,616,520	GROSVENOR INSTITUTIONAL PARTNERS LP FUND 999302AM4 ACCOUNT 1055082567 7,615,954	3,250,000.00	1.00	7,616,520.00	4,366,520.00	0.000
3,313,706.16	CRESCENT CAPITAL TRUST II CHB042208 ACCOUNT 1055082567 2,712,866.67	2,715,993.35	1.00	3,313,706.16	597,712.81	0.000
	TOTAL CLOSELY HELD - EQUITY	5,965,993.35		10,930,226.16	4,964,232.81	
	OPEN END MF - EQUITY					
238,932.821	DFA EMERGING MKTS CORE EQUITY PORT 233203421 ACCOUNT 1055082558 238,932.821	4,899,641.42	21.77	5,201,567.51	301,926.09	2.421
105,627.449	VANGUARD TOTAL INT ST IDX-IS 921909784 ACCOUNT 1055082558 105,627.449	11,188,419.19	119.47	12,619,311.33	1,430,892.14	3.065

Schedule Of Assets Held

UNITS	ASSET DESCRIPTION	COST	UNIT PRICE	MARKET VALUE	UNREALIZED GAIN/LOSS	YIELD AT MARKET
151,810.067	VANGUARD INST INDEX 922040100 ACCOUNT 1055082558 151,810.067	14,147,641.20	290.23	44,059,835.75	29,912,194.55	1.912
181,485.312	VANGUARD EXTENDED MARKET INDEX FUND 922908884 ACCOUNT 1055082558 181,485.312	9,502,388.68	95.60	17,349,995.83	7,847,607.15	1.312
	TOTAL OPEN END MF - EQUITY	39,738,090.49		79,230,710.42	39,492,619.93	
	CTF - EQUITY					
319,829.424	ARTISAN INTERNATIONAL GROWTH TRUST TIER I CTFE00743 ACCOUNT 1055082567 319,829.424	6,000,000.00	27.54	8,808,102.34	2,808,102.34	0.000
6,751,805	LEVINE LEICHTMAN CAPITAL PARTNERS V LP CTFE00750 ACCOUNT 1055082576 6,366,574.21	4,115,539.15	1.00	6,751,805.00	2,636,265.85	0.000
	TOTAL CTF - EQUITY	10,115,539.15		15,559,907.34	5,444,368.19	
	CIF - EQUITY					
8,586,268	PARAMETRIC DEFENSE EQUITY FUND LLC CIFE08088 ACCOUNT 1055082567 8,586,268	6,500,000.00	1.00	8,586,268.00	2,086,268.00	0.000
	TOTAL EQUITY SECURITIES	62,319,622.99		114,307,111.92	51,987,488.93	
	OTHER INVESTMENTS					
	CTF - OTHER					
2,451.6918	GROSVENOR OPPORTUNISTIC CREDIT FUND III LTD CTFO00170 ACCOUNT 1055082567 2,483.7727	1,653,883.05	328.0759	804,341.00	849,542.05-	0.000
	CTF - HEDGE FUND					
2,991,170	GCM GROSVENOR OPPORTUNISTIC CREDIT FUND V LTD CTFH00597 ACCOUNT 1055082567 2,965,726	2,896,876.00	1.00	2,991,170.00	94,294.00	0.000

Schedule Of Assets Held

UNITS	ASSET DESCRIPTION	COST	UNIT PRICE	MARKET VALUE	UNREALIZED GAIN/LOSS	YIELD AT MARKET
940,632	GCM GROSVENOR OPP FUND V LTD ESCROW CTFH00985 ACCOUNT 1055082567 940,632	757,286.00	1.00	940,632.00	183,346.00	0.000
	TOTAL CTF - HEDGE FUND	3,654,162.00		3,931,802.00	277,640.00	
	PARTNERSHIPS ALT INVESTMENTS					
838.626	UBS (US) TRUMBELL PROPERTY FUND LP PART13143 ACCOUNT 1055082576 847.605	6,863,868.41	10762.00	9,025,292.66	2,161,424.25	0.000
	TOTAL OTHER INVESTMENTS	12,171,913.46		13,761,435.66	1,589,522.20	
	SHORT TERM INVESTMENTS					
	SHORT TERM INVESTMENTS					
4,669,895.14	BLACKROCK LIQUIDITY FUNDS FEDFUND PORTFOLIO-INST 09248U700 ACCOUNT 1055082558 4,625,439.33 ACCOUNT 1055082576 44,455.81	4,669,895.14	1.00	4,669,895.14	0.00	1.580
	CASH ACCOUNT 1055082558 21,013.1 ACCOUNT 1055082567 16,018.97	37,032.07		37,032.07	0.00	0.000
	DUE TO BROKERS ACCOUNT 1055082558 21,013.1 ACCOUNT 1055082567 16,018.97	37,032.07-		37,032.07-	0.00	0.000
	ACCRUED INCOME	5,239.49		5,239.49	0.00	0.000
	TOTAL CASH	5,239.49		5,239.49	0.00	
	TOTAL SHORT TERM INVESTMENTS	4,675,134.63		4,675,134.63	0.00	
	Total Assets	118,161,217.49		178,582,343.31	60,421,125.82	

NORTHWESTERN OHIO PLUMBERS AND PIPEFITTERS
PENSION PLAN AND TRUST

EIN #34-6502487 Plan #001

Schedule H, line 4j - Schedule of Reportable Transactions
(Prepared Pursuant to Requirements of the Employee Retirement Income Security Act of 1974)

The enclosed Comerica Bank Reportable Transactions
are incorporated herein by reference.

For the Year Ended December 31, 2019

Report Of 5% Transactions

AGGREGATE BY ASSET VALUATION 150,141,725.37 THRESHOLD 7,507,086.27

DESCRIPTION	TRAN TYPE	SETTLE DATE/ SHARES/UNITS	PURCHASE/SALE COST/PROCEEDS	BROKER COMMISSION/ OTH EXPENSE	COST OF ASSET/ PREV ANNL MKT	NET GAIN/LOSS
CUSIP # 09248U700						
BLACKROCK LIQUIDITY FUNDS						
FEDFUND PORTFOLIO-INST	BUY	01/02/2019	39,894.23		39,894.23	
ACCOUNT 1055082558		39,894.230			39,894.23	
	SEL	01/02/2019	34,080.40		34,080.40	
ACCOUNT 1055082576		34,080.400			34,080.40	
	BUY	01/11/2019	60,086.19		60,086.19	
ACCOUNT 1055082576		60,086.190			60,086.19	
	SEL	01/15/2019	43,292.00		43,292.00	
ACCOUNT 1055082558		43,292.000			43,292.00	
	BUY	01/15/2019	74,504.06		74,504.06	
ACCOUNT 1055082576		74,504.060			74,504.06	
	SEL	01/29/2019	3,919.24		3,919.24	
ACCOUNT 1055082558		3,919.240			3,919.24	
	BUY	01/31/2019	307,000.00		307,000.00	
ACCOUNT 1055082558		307,000.000			307,000.00	
	BUY	02/01/2019	140,506.22		140,506.22	
ACCOUNT 1055082558		140,506.220			140,506.22	
	SEL	02/01/2019	134,464.50		134,464.50	
ACCOUNT 1055082576		134,464.500			134,464.50	
	SEL	02/01/2019	306,106.75		306,106.75	
ACCOUNT 1055082558		306,106.750			306,106.75	
	BUY	02/01/2019	19,489.94		19,489.94	
ACCOUNT 1055082576		19,489.940			19,489.94	
	BUY	03/01/2019	25,168.28		25,168.28	
ACCOUNT 1055082558		25,168.280			25,168.28	
	SEL	03/01/2019	19,605.75		19,605.75	
ACCOUNT 1055082576		19,605.750			19,605.75	
	BUY	03/01/2019	12,305.78		12,305.78	
ACCOUNT 1055082576		12,305.780			12,305.78	
	BUY	03/08/2019	192,124.21		192,124.21	
ACCOUNT 1055082558		192,124.210			192,124.21	

Report Of 5% Transactions

AGGREGATE BY ASSET

VALUATION 150,141,725.37 THRESHOLD 7,507,086.27

DESCRIPTION	TRAN TYPE	SETTLE DATE/ SHARES/UNITS	PURCHASE/SALE COST/PROCEEDS	BROKER COMMISSION/ OTH EXPENS	COST OF ASSET PREV ANNL MKT	NET GAIN/LOSS
CUSIP # 09248U700						
BLACKROCK LIQUIDITY FUNDS						
FEDFUND PORTFOLIO-INST	BUY	03/13/2019	626,054.65		626,054.65	
ACCOUNT 1055082576		626,054.650			626,054.65	
	BUY	03/22/2019	222,092.81		222,092.81	
ACCOUNT 1055082576		222,092.810			222,092.81	
	BUY	04/01/2019	866,977.33		866,977.33	
ACCOUNT 1055082558		866,977.330			866,977.33	
	SEL	04/01/2019	859,627.03		859,627.03	
ACCOUNT 1055082576		859,627.030			859,627.03	
	BUY	04/01/2019	9,420.62		9,420.62	
ACCOUNT 1055082576		9,420.620			9,420.62	
	BUY	04/01/2019	529.37		529.37	
ACCOUNT 1055082558		529.370			529.37	
	BUY	04/11/2019	71,733.31		71,733.31	
ACCOUNT 1055082558		71,733.310			71,733.31	
	BUY	04/11/2019	144,711.16		144,711.16	
ACCOUNT 1055082576		144,711.160			144,711.16	
	BUY	04/15/2019	78,353.47		78,353.47	
ACCOUNT 1055082576		78,353.470			78,353.47	
	SEL	04/24/2019	102,570.56		102,570.56	
ACCOUNT 1055082558		102,570.560			102,570.56	
	SEL	04/26/2019	4,001.79		4,001.79	
ACCOUNT 1055082558		4,001.790			4,001.79	
	BUY	04/30/2019	6,981.51		6,981.51	
ACCOUNT 1055082576		6,981.510			6,981.51	
	BUY	05/01/2019	248,244.47		248,244.47	
ACCOUNT 1055082558		248,244.470			248,244.47	
	SEL	05/01/2019	240,063.32		240,063.32	
ACCOUNT 1055082576		240,063.320			240,063.32	
	BUY	05/06/2019	274,807.30		274,807.30	
ACCOUNT 1055082558		274,807.300			274,807.30	

Report Of 5% Transactions

AGGREGATE BY ASSET

VALUATION 150,141,725.37 THRESHOLD 7,507,086.27

DESCRIPTION	TRAN TYPE	SETTLE DATE/ SHARES/UNITS	PURCHASE/SALE COST/PROCEEDS	BROKER COMMISSION/ OTH EXPENSE	COST OF ASSET PREV ANNL MKT	NET GAIN/LOSS
CUSIP # 09248U700						
BLACKROCK LIQUIDITY FUNDS						
FEDFUND PORTFOLIO-INST	BUY	05/31/2019	7,178.99		7,178.99	
ACCOUNT 1055082576		7,178.990			7,178.99	
	BUY	05/31/2019	427.12		427.12	
ACCOUNT 1055082558		427.120			427.12	
	BUY	06/03/2019	16,274.73		16,274.73	
ACCOUNT 1055082558		16,274.730			16,274.73	
	SEL	06/03/2019	7,439.72		7,439.72	
ACCOUNT 1055082576		7,439.720			7,439.72	
	BUY	06/06/2019	276,793.44		276,793.44	
ACCOUNT 1055082558		276,793.440			276,793.44	
	BUY	06/28/2019	7,440.73		7,440.73	
ACCOUNT 1055082576		7,440.730			7,440.73	
	BUY	07/01/2019	16,415.82		16,415.82	
ACCOUNT 1055082558		16,415.820			16,415.82	
	SEL	07/01/2019	7,439.42		7,439.42	
ACCOUNT 1055082576		7,439.420			7,439.42	
	BUY	07/01/2019	8,892.26		8,892.26	
ACCOUNT 1055082576		8,892.260			8,892.26	
	BUY	07/09/2019	348,087.74		348,087.74	
ACCOUNT 1055082558		348,087.740			348,087.74	
	BUY	07/10/2019	131,000.00		131,000.00	
ACCOUNT 1055082558		131,000.000			131,000.00	
	SEL	07/11/2019	130,755.88		130,755.88	
ACCOUNT 1055082558		130,755.880			130,755.88	
	SEL	07/15/2019	35,000.00		35,000.00	
ACCOUNT 1055082558		35,000.000			35,000.00	
	SEL	07/15/2019	3,409.00		3,409.00	
ACCOUNT 1055082576		3,409.000			3,409.00	
	BUY	07/16/2019	78,683.25		78,683.25	
ACCOUNT 1055082576		78,683.250			78,683.25	

Report Of 5% Transactions

AGGREGATE BY ASSET VALUATION 150,141,725.37 THRESHOLD 7,507,086.27

DESCRIPTION	TRAN TYPE	SETTLE DATE/ SHARES/UNITS	PURCHASE/SALE COST/PROCEEDS	BROKER COMMISSION/ OTH EXPENS	COST OF ASSET PREV ANNL MKT	NET GAIN/LOSS
CUSIP # 09248U700						
BLACKROCK LIQUIDITY FUNDS						
FEDFUND PORTFOLIO-INST	BUY	07/26/2019	42,576.96		42,576.96	
ACCOUNT 1055082576		42,576.960			42,576.96	
	SEL	07/29/2019	4,176.27		4,176.27	
ACCOUNT 1055082558		4,176.270			4,176.27	
	BUY	07/31/2019	6,783.64		6,783.64	
ACCOUNT 1055082576		6,783.640			6,783.64	
	BUY	08/01/2019	143,281.15		143,281.15	
ACCOUNT 1055082558		143,281.150			143,281.15	
	SEL	08/01/2019	133,431.17		133,431.17	
ACCOUNT 1055082576		133,431.170			133,431.17	
	BUY	08/07/2019	136,000.00		136,000.00	
ACCOUNT 1055082558		136,000.000			136,000.00	
	SEL	08/08/2019	135,352.88		135,352.88	
ACCOUNT 1055082558		135,352.880			135,352.88	
	BUY	08/09/2019	412,465.99		412,465.99	
ACCOUNT 1055082558		412,465.990			412,465.99	
	BUY	08/30/2019	6,952.17		6,952.17	
ACCOUNT 1055082576		6,952.170			6,952.17	
	BUY	09/03/2019	16,582.83		16,582.83	
ACCOUNT 1055082558		16,582.830			16,582.83	
	SEL	09/03/2019	7,049.45		7,049.45	
ACCOUNT 1055082576		7,049.450			7,049.45	
	BUY	09/09/2019	894.30		894.30	
ACCOUNT 1055082558		894.300			894.30	
	BUY	10/01/2019	9,193.75		9,193.75	
ACCOUNT 1055082558		9,193.750			9,193.75	
	SEL	10/01/2019	0.15		0.15	
ACCOUNT 1055082576		0.150			0.15	
	BUY	10/01/2019	21,313.65		21,313.65	
ACCOUNT 1055082576		21,313.650			21,313.65	

Report Of 5% Transactions

AGGREGATE BY ASSET

VALUATION 150,141,725.37 THRESHOLD 7,507,086.27

DESCRIPTION	TRAN TYPE	SETTLE DATE/ SHARES/UNITS	PURCHASE/SALE COST/PROCEEDS	BROKER COMMISSION/ OTH EXPENSE	COST OF ASSET/ PREV ANNL MKT	NET GAIN/LOSS
CUSIP # 09248U700 BLACKROCK LIQUIDITY FUNDS FEDFUND PORTFOLIO-INST ACCOUNT 1055082558	BUY	10/03/2019 268,690.980	268,690.98		268,690.98 268,690.98	
ACCOUNT 1055082576	BUY	10/10/2019 70,493.180	70,493.18		70,493.18 70,493.18	
ACCOUNT 1055082558	SEL	10/15/2019 329,358.690	329,358.69		329,358.69 329,358.69	
ACCOUNT 1055082576	BUY	10/15/2019 79,005.990	79,005.99		79,005.99 79,005.99	
ACCOUNT 1055082558	BUY	10/16/2019 300,000.000	300,000.00		300,000.00 300,000.00	
ACCOUNT 1055082576	BUY	10/21/2019 8,293.850	8,293.85		8,293.85 8,293.85	
ACCOUNT 1055082558	SEL	10/29/2019 4,213.500	4,213.50		4,213.50 4,213.50	
ACCOUNT 1055082558	BUY	11/01/2019 187,726.770	187,726.77		187,726.77 187,726.77	
ACCOUNT 1055082576	SEL	11/01/2019 178,949.820	178,949.82		178,949.82 178,949.82	
ACCOUNT 1055082576	BUY	11/01/2019 7,975.540	7,975.54		7,975.54 7,975.54	
ACCOUNT 1055082558	BUY	11/06/2019 249,961.650	249,961.65		249,961.65 249,961.65	
ACCOUNT 1055082558	SEL	11/19/2019 1,000,000.000	1,000,000.00		1,000,000.00 1,000,000.00	
ACCOUNT 1055082558	SEL	11/20/2019 500,000.000	500,000.00		500,000.00 500,000.00	
ACCOUNT 1055082558	SEL	11/26/2019 1,000,000.000	1,000,000.00		1,000,000.00 1,000,000.00	
ACCOUNT 1055082558	BUY	12/02/2019 15,008.520	15,008.52		15,008.52 15,008.52	

Report Of 5% Transactions

AGGREGATE BY ASSET VALUATION 150,141,725.37 THRESHOLD 7,507,086.27

DESCRIPTION	TRAN TYPE	SETTLE DATE/ SHARES/UNITS	PURCHASE/SALE COST/PROCEEDS	BROKER COMMISSION/ OTH EXPENSE	COST OF ASSET/ PREV ANNL MKT	NET GAIN/LOSS
CUSIP # 09248U700						
BLACKROCK LIQUIDITY FUNDS						
FEDFUND PORTFOLIO-INST	SEL	12/02/2019	8,123.87		8,123.87	
ACCOUNT 1055082576		8,123.870			8,123.87	
	BUY	12/02/2019	26,750.50		26,750.50	
ACCOUNT 1055082576		26,750.500			26,750.50	
	SEL	12/02/2019	106,058.65		106,058.65	
ACCOUNT 1055082558		106,058.650			106,058.65	
	BUY	12/06/2019	370,998.92		370,998.92	
ACCOUNT 1055082558		370,998.920			370,998.92	
	BUY	12/31/2019	17,696.08		17,696.08	
ACCOUNT 1055082576		17,696.080			17,696.08	

52 PURCHASES FOR 6,710,825.41 28 SALES FOR 5,338,489.81 ISSUE AGGREGATE TOTAL 12,049,315.22

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NORTHWESTERN OHIO PLUMBERS AND PIPEFITTERS
PENSION PLAN AND TRUST

EIN #34-6502487 Plan #001

Schedule H, line 4i - Schedule of Assets (Held at End of Year)
(Prepared Pursuant to Requirements of the Employee Retirement Income Security Act of 1974)

The enclosed Comerica Bank Account Statements
is incorporated herein by reference.

December 31, 2019

(a)(b)(c) Identity of issuer, borrower, lessor or similar party and description of investment	(d) Cost	(e) Market Value
DFA Emerging Mkts Core Equity	$ 4,899,641	$ 5,201,568
Neuberger Berman High Income	5,096,647	4,966,863
Vanguard Total Int St IDX-IS	11,188,419	12,619,311
Vanguard Inst Index	14,147,641	44,059,836
Vangaurd Extended Market Index	9,502,389	17,349,996
Blackrock Liquidity Funds	4,669,895	4,669,895
IR&M Intermediate Funds	22,037,551	24,204,225
UBS Trumbull Property Fund	6,863,868	9,025,293
AFL-CIO Building Investment Trust	4,964,857	9,201,662
Artisan International Growth Trust Tier I	6,000,000	8,808,102
Grosvenor Institutional Partners	3,250,000	7,616,520
Parametric Definsive Equity Fund	6,500,000	8,586,268
Levine Leichtman Capital Partners V	4,115,539	6,751,805
AFL-CIO Housing Investment Trust	6,895,491	7,465,911
Grosvenor Opportunistic Credit Fund III	1,653,883	804,341
Grosvenor Opportunistic Credit Fund V	2,896,876	2,991,170
Grosvenor Opportunistic Credit Fund V Escrow	757,286	940,632
Crescent Capital Trust II	2,715,993	3,313,706
Total Investments at Fair Value	$ 118,155,976	$ 178,577,104

See accompanying notes to the financial statements.

Schedule Of Assets Held

UNITS	ASSET DESCRIPTION	COST	UNIT PRICE	MARKET VALUE	UNREALIZED GAIN/LOSS	YIELD AT MARKET
	OPEN END MF - FIXED INC TAX					
573,540.836	NEUBERGER BERMAN HIGH INCOME BOND FUND-INS 64128K868 ACCOUNT 1055082558 573,540.836	5,096,646.77	8.66	4,966,863.64	129,783.13-	5.416
	CIF - FIXED INCOME					
6,547.666	AFL-CIO HOUSING INVESTMENT TR 997633AF9 ACCOUNT 1055082567 6,547.666	6,895,490.97	1140.24	7,465,910.68	570,419.71	0.000
1,203.7303	AFL-CIO BLDG INVESTMENT TRUST 997636AF2 ACCOUNT 1055082576 1,203.7303	4,964,857.34	7644.2884	9,201,661.54	4,236,804.20	0.000
1,737,641.37	IR&M INTERMEDIATE FUND LLC CIFF02328 ACCOUNT 1055082567 1,737,641.37	22,037,551.33	13.9294	24,204,225.24	2,166,673.91	0.000
	TOTAL CIF - FIXED INCOME	33,897,899.64		40,871,797.46	6,973,897.82	
	TOTAL DEBT SECURITIES	38,994,546.41		45,838,661.10	6,844,114.69	
	EQUITY SECURITIES					
	CLOSELY HELD - EQUITY					
7,616,520	GROSVENOR INSTITUTIONAL PARTNERS LP FUND 999302AM4 ACCOUNT 1055082567 7,615,954	3,250,000.00	1.00	7,616,520.00	4,366,520.00	0.000
3,313,706.16	CRESCENT CAPITAL TRUST II CHB042208 ACCOUNT 1055082567 2,712,866.67	2,715,993.35	1.00	3,313,706.16	597,712.81	0.000
	TOTAL CLOSELY HELD - EQUITY	5,965,993.35		10,930,226.16	4,964,232.81	
	OPEN END MF - EQUITY					
238,932.821	DFA EMERGING MKTS CORE EQUITY PORT 233203421 ACCOUNT 1055082558 238,932.821	4,899,641.42	21.77	5,201,567.51	301,926.09	2.421
105,627.449	VANGUARD TOTAL INT ST IDX-IS 921909784 ACCOUNT 1055082558 105,627.449	11,188,419.19	119.47	12,619,311.33	1,430,892.14	3.065

Schedule Of Assets Held

UNITS	ASSET DESCRIPTION	COST	UNIT PRICE	MARKET VALUE	UNREALIZED GAIN/LOSS	YIELD AT MARKET
151,810.067	VANGUARD INST INDEX 922040100 ACCOUNT 1055082558 151,810.067	14,147,641.20	290.23	44,059,835.75	29,912,194.55	1.912
181,485.312	VANGUARD EXTENDED MARKET INDEX FUND 922908884 ACCOUNT 1055082558 181,485.312	9,502,388.68	95.60	17,349,995.83	7,847,607.15	1.312
	TOTAL OPEN END MF - EQUITY	39,738,090.49		79,230,710.42	39,492,619.93	
	CTF - EQUITY					
319,829.424	ARTISAN INTERNATIONAL GROWTH TRUST TIER I CTFE00743 ACCOUNT 1055082567 319,829.424	6,000,000.00	27.54	8,808,102.34	2,808,102.34	0.000
6,751,805	LEVINE LEICHTMAN CAPITAL PARTNERS V LP CTFE00750 ACCOUNT 1055082576 6,366,574.21	4,115,539.15	1.00	6,751,805.00	2,636,265.85	0.000
	TOTAL CTF - EQUITY	10,115,539.15		15,559,907.34	5,444,368.19	
	CIF - EQUITY					
8,586,268	PARAMETRIC DEFENSE EQUITY FUND LLC CIFE08088 ACCOUNT 1055082567 8,586,268	6,500,000.00	1.00	8,586,268.00	2,086,268.00	0.000
	TOTAL EQUITY SECURITIES	62,319,622.99		114,307,111.92	51,987,488.93	
	OTHER INVESTMENTS					
	CTF - OTHER					
2,451.6918	GROSVENOR OPPORTUNISTIC CREDIT FUND III LTD CTFO00170 ACCOUNT 1055082567 2,483.7727	1,653,883.05	328.0759	804,341.00	849,542.05-	0.000
	CTF - HEDGE FUND					
2,991,170	GCM GROSVENOR OPPORTUNISTIC CREDIT FUND V LTD CTFH00597 ACCOUNT 1055082567 2,965,726	2,896,876.00	1.00	2,991,170.00	94,294.00	0.000

Schedule Of Assets Held

UNITS	ASSET DESCRIPTION	COST	UNIT PRICE	MARKET VALUE	UNREALIZED GAIN/LOSS	YIELD AT MARKET
940,632	GCM GROSVENOR OPP FUND V LTD ESCROW CTFH00985 ACCOUNT 1055082567 940,632	757,286.00	1.00	940,632.00	183,346.00	0.000
	TOTAL CTF - HEDGE FUND	3,654,162.00		3,931,802.00	277,640.00	
	PARTNERSHIPS ALT INVESTMENTS					
838.626	UBS (US) TRUMBELL PROPERTY FUND LP PART13143 ACCOUNT 1055082576 847.605	6,863,868.41	10762.00	9,025,292.66	2,161,424.25	0.000
	TOTAL OTHER INVESTMENTS	12,171,913.46		13,761,435.66	1,589,522.20	
	SHORT TERM INVESTMENTS					
	SHORT TERM INVESTMENTS					
4,669,895.14	BLACKROCK LIQUIDITY FUNDS FEDFUND PORTFOLIO-INST 09248U700 ACCOUNT 1055082558 4,625,439.33 ACCOUNT 1055082576 44,455.81	4,669,895.14	1.00	4,669,895.14	0.00	1.580
	CASH ACCOUNT 1055082558 21,013.1 ACCOUNT 1055082567 16,018.97	37,032.07		37,032.07	0.00	0.000
	DUE TO BROKERS ACCOUNT 1055082558 21,013.1 ACCOUNT 1055082567 16,018.97	37,032.07-		37,032.07-	0.00	0.000
	ACCRUED INCOME	5,239.49		5,239.49	0.00	0.000
	TOTAL CASH	5,239.49		5,239.49	0.00	
	TOTAL SHORT TERM INVESTMENTS	4,675,134.63		4,675,134.63	0.00	
	Total Assets	118,161,217.49		178,582,343.31	60,421,125.82	

NORTHWESTERN OHIO PLUMBERS AND PIPEFITTERS
PENSION PLAN AND TRUST

EIN #34-6502487 Plan #001

Schedule H, line 4j - Schedule of Reportable Transactions
(Prepared Pursuant to Requirements of the Employee Retirement Income Security Act of 1974)

The enclosed Comerica Bank Reportable Transactions
are incorporated herein by reference.

For the Year Ended December 31, 2019

Report Of 5% Transactions

AGGREGATE BY ASSET VALUATION 150,141,725.37 THRESHOLD 7,507,086.27

DESCRIPTION	TRAN TYPE	SETTLE DATE/ SHARES/UNITS	PURCHASE/SALE COST/PROCEEDS	BROKER COMMISSION/ OTH EXPENSE	COST OF ASSET/ PREV ANNL MKT	NET GAIN/LOSS
CUSIP # 09248U700						
BLACKROCK LIQUIDITY FUNDS						
FEDFUND PORTFOLIO-INST	BUY	01/02/2019	39,894.23		39,894.23	
ACCOUNT 1055082558		39,894.230			39,894.23	
	SEL	01/02/2019	34,080.40		34,080.40	
ACCOUNT 1055082576		34,080.400			34,080.40	
	BUY	01/11/2019	60,086.19		60,086.19	
ACCOUNT 1055082576		60,086.190			60,086.19	
	SEL	01/15/2019	43,292.00		43,292.00	
ACCOUNT 1055082558		43,292.000			43,292.00	
	BUY	01/15/2019	74,504.06		74,504.06	
ACCOUNT 1055082576		74,504.060			74,504.06	
	SEL	01/29/2019	3,919.24		3,919.24	
ACCOUNT 1055082558		3,919.240			3,919.24	
	BUY	01/31/2019	307,000.00		307,000.00	
ACCOUNT 1055082558		307,000.000			307,000.00	
	BUY	02/01/2019	140,506.22		140,506.22	
ACCOUNT 1055082558		140,506.220			140,506.22	
	SEL	02/01/2019	134,464.50		134,464.50	
ACCOUNT 1055082576		134,464.500			134,464.50	
	SEL	02/01/2019	306,106.75		306,106.75	
ACCOUNT 1055082558		306,106.750			306,106.75	
	BUY	02/01/2019	19,489.94		19,489.94	
ACCOUNT 1055082576		19,489.940			19,489.94	
	BUY	03/01/2019	25,168.28		25,168.28	
ACCOUNT 1055082558		25,168.280			25,168.28	
	SEL	03/01/2019	19,605.75		19,605.75	
ACCOUNT 1055082576		19,605.750			19,605.75	
	BUY	03/01/2019	12,305.78		12,305.78	
ACCOUNT 1055082576		12,305.780			12,305.78	
	BUY	03/08/2019	192,124.21		192,124.21	
ACCOUNT 1055082558		192,124.210			192,124.21	

Report Of 5% Transactions

AGGREGATE BY ASSET

VALUATION 150,141,725.37 THRESHOLD 7,507,086.27

DESCRIPTION	TRAN TYPE	SETTLE DATE/ SHARES/UNITS	PURCHASE/SALE COST/PROCEEDS	BROKER COMMISSION/ OTH EXPENS	COST OF ASSET PREV ANNL MKT	NET GAIN/LOSS
CUSIP # 09248U700						
BLACKROCK LIQUIDITY FUNDS						
FEDFUND PORTFOLIO-INST	BUY	03/13/2019	626,054.65		626,054.65	
ACCOUNT 1055082576		626,054.650			626,054.65	
	BUY	03/22/2019	222,092.81		222,092.81	
ACCOUNT 1055082576		222,092.810			222,092.81	
	BUY	04/01/2019	866,977.33		866,977.33	
ACCOUNT 1055082558		866,977.330			866,977.33	
	SEL	04/01/2019	859,627.03		859,627.03	
ACCOUNT 1055082576		859,627.030			859,627.03	
	BUY	04/01/2019	9,420.62		9,420.62	
ACCOUNT 1055082576		9,420.620			9,420.62	
	BUY	04/01/2019	529.37		529.37	
ACCOUNT 1055082558		529.370			529.37	
	BUY	04/11/2019	71,733.31		71,733.31	
ACCOUNT 1055082558		71,733.310			71,733.31	
	BUY	04/11/2019	144,711.16		144,711.16	
ACCOUNT 1055082576		144,711.160			144,711.16	
	BUY	04/15/2019	78,353.47		78,353.47	
ACCOUNT 1055082576		78,353.470			78,353.47	
	SEL	04/24/2019	102,570.56		102,570.56	
ACCOUNT 1055082558		102,570.560			102,570.56	
	SEL	04/26/2019	4,001.79		4,001.79	
ACCOUNT 1055082558		4,001.790			4,001.79	
	BUY	04/30/2019	6,981.51		6,981.51	
ACCOUNT 1055082576		6,981.510			6,981.51	
	BUY	05/01/2019	248,244.47		248,244.47	
ACCOUNT 1055082558		248,244.470			248,244.47	
	SEL	05/01/2019	240,063.32		240,063.32	
ACCOUNT 1055082576		240,063.320			240,063.32	
	BUY	05/06/2019	274,807.30		274,807.30	
ACCOUNT 1055082558		274,807.300			274,807.30	

Report Of 5% Transactions

AGGREGATE BY ASSET

VALUATION 150,141,725.37 THRESHOLD 7,507,086.27

DESCRIPTION	TRAN TYPE	SETTLE DATE/ SHARES/UNITS	PURCHASE/SALE COST/PROCEEDS	BROKER COMMISSION/ OTH EXPENSE	COST OF ASSET PREV ANNL MKT	NET GAIN/LOSS
CUSIP # 09248U700						
BLACKROCK LIQUIDITY FUNDS						
FEDFUND PORTFOLIO-INST	BUY	05/31/2019	7,178.99		7,178.99	
ACCOUNT 1055082576		7,178.990			7,178.99	
	BUY	05/31/2019	427.12		427.12	
ACCOUNT 1055082558		427.120			427.12	
	BUY	06/03/2019	16,274.73		16,274.73	
ACCOUNT 1055082558		16,274.730			16,274.73	
	SEL	06/03/2019	7,439.72		7,439.72	
ACCOUNT 1055082576		7,439.720			7,439.72	
	BUY	06/06/2019	276,793.44		276,793.44	
ACCOUNT 1055082558		276,793.440			276,793.44	
	BUY	06/28/2019	7,440.73		7,440.73	
ACCOUNT 1055082576		7,440.730			7,440.73	
	BUY	07/01/2019	16,415.82		16,415.82	
ACCOUNT 1055082558		16,415.820			16,415.82	
	SEL	07/01/2019	7,439.42		7,439.42	
ACCOUNT 1055082576		7,439.420			7,439.42	
	BUY	07/01/2019	8,892.26		8,892.26	
ACCOUNT 1055082576		8,892.260			8,892.26	
	BUY	07/09/2019	348,087.74		348,087.74	
ACCOUNT 1055082558		348,087.740			348,087.74	
	BUY	07/10/2019	131,000.00		131,000.00	
ACCOUNT 1055082558		131,000.000			131,000.00	
	SEL	07/11/2019	130,755.88		130,755.88	
ACCOUNT 1055082558		130,755.880			130,755.88	
	SEL	07/15/2019	35,000.00		35,000.00	
ACCOUNT 1055082558		35,000.000			35,000.00	
	SEL	07/15/2019	3,409.00		3,409.00	
ACCOUNT 1055082576		3,409.000			3,409.00	
	BUY	07/16/2019	78,683.25		78,683.25	
ACCOUNT 1055082576		78,683.250			78,683.25	

Report Of 5% Transactions

AGGREGATE BY ASSET VALUATION 150,141,725.37 THRESHOLD 7,507,086.27

DESCRIPTION	TRAN TYPE	SETTLE DATE/ SHARES/UNITS	PURCHASE/SALE COST/PROCEEDS	BROKER COMMISSION/ OTH EXPENS	COST OF ASSET PREV ANNL MKT	NET GAIN/LOSS
CUSIP # 09248U700						
BLACKROCK LIQUIDITY FUNDS						
FEDFUND PORTFOLIO-INST	BUY	07/26/2019	42,576.96		42,576.96	
ACCOUNT 1055082576		42,576.960			42,576.96	
	SEL	07/29/2019	4,176.27		4,176.27	
ACCOUNT 1055082558		4,176.270			4,176.27	
	BUY	07/31/2019	6,783.64		6,783.64	
ACCOUNT 1055082576		6,783.640			6,783.64	
	BUY	08/01/2019	143,281.15		143,281.15	
ACCOUNT 1055082558		143,281.150			143,281.15	
	SEL	08/01/2019	133,431.17		133,431.17	
ACCOUNT 1055082576		133,431.170			133,431.17	
	BUY	08/07/2019	136,000.00		136,000.00	
ACCOUNT 1055082558		136,000.000			136,000.00	
	SEL	08/08/2019	135,352.88		135,352.88	
ACCOUNT 1055082558		135,352.880			135,352.88	
	BUY	08/09/2019	412,465.99		412,465.99	
ACCOUNT 1055082558		412,465.990			412,465.99	
	BUY	08/30/2019	6,952.17		6,952.17	
ACCOUNT 1055082576		6,952.170			6,952.17	
	BUY	09/03/2019	16,582.83		16,582.83	
ACCOUNT 1055082558		16,582.830			16,582.83	
	SEL	09/03/2019	7,049.45		7,049.45	
ACCOUNT 1055082576		7,049.450			7,049.45	
	BUY	09/09/2019	894.30		894.30	
ACCOUNT 1055082558		894.300			894.30	
	BUY	10/01/2019	9,193.75		9,193.75	
ACCOUNT 1055082558		9,193.750			9,193.75	
	SEL	10/01/2019	0.15		0.15	
ACCOUNT 1055082576		0.150			0.15	
	BUY	10/01/2019	21,313.65		21,313.65	
ACCOUNT 1055082576		21,313.650			21,313.65	

Report Of 5% Transactions

AGGREGATE BY ASSET

VALUATION 150,141,725.37 THRESHOLD 7,507,086.27

DESCRIPTION	TRAN TYPE	SETTLE DATE/ SHARES/UNITS	PURCHASE/SALE COST/PROCEEDS	BROKER COMMISSION/ OTH EXPENSE	COST OF ASSET/ PREV ANNL MKT	NET GAIN/LOSS
CUSIP # 09248U700 BLACKROCK LIQUIDITY FUNDS FEDFUND PORTFOLIO-INST ACCOUNT 1055082558	BUY	10/03/2019 268,690.980	268,690.98		268,690.98 268,690.98	
ACCOUNT 1055082576	BUY	10/10/2019 70,493.180	70,493.18		70,493.18 70,493.18	
ACCOUNT 1055082558	SEL	10/15/2019 329,358.690	329,358.69		329,358.69 329,358.69	
ACCOUNT 1055082576	BUY	10/15/2019 79,005.990	79,005.99		79,005.99 79,005.99	
ACCOUNT 1055082558	BUY	10/16/2019 300,000.000	300,000.00		300,000.00 300,000.00	
ACCOUNT 1055082576	BUY	10/21/2019 8,293.850	8,293.85		8,293.85 8,293.85	
ACCOUNT 1055082558	SEL	10/29/2019 4,213.500	4,213.50		4,213.50 4,213.50	
ACCOUNT 1055082558	BUY	11/01/2019 187,726.770	187,726.77		187,726.77 187,726.77	
ACCOUNT 1055082576	SEL	11/01/2019 178,949.820	178,949.82		178,949.82 178,949.82	
ACCOUNT 1055082576	BUY	11/01/2019 7,975.540	7,975.54		7,975.54 7,975.54	
ACCOUNT 1055082558	BUY	11/06/2019 249,961.650	249,961.65		249,961.65 249,961.65	
ACCOUNT 1055082558	SEL	11/19/2019 1,000,000.000	1,000,000.00		1,000,000.00 1,000,000.00	
ACCOUNT 1055082558	SEL	11/20/2019 500,000.000	500,000.00		500,000.00 500,000.00	
ACCOUNT 1055082558	SEL	11/26/2019 1,000,000.000	1,000,000.00		1,000,000.00 1,000,000.00	
ACCOUNT 1055082558	BUY	12/02/2019 15,008.520	15,008.52		15,008.52 15,008.52	

Report Of 5% Transactions

AGGREGATE BY ASSET VALUATION 150,141,725.37 THRESHOLD 7,507,086.27

DESCRIPTION	TRAN TYPE	SETTLE DATE/ SHARES/UNITS	PURCHASE/SALE COST/PROCEEDS	BROKER COMMISSION/ OTH EXPENSE	COST OF ASSET/ PREV ANNL MKT	NET GAIN/LOSS
CUSIP # 09248U700						
BLACKROCK LIQUIDITY FUNDS						
FEDFUND PORTFOLIO-INST	SEL	12/02/2019	8,123.87		8,123.87	
ACCOUNT 1055082576		8,123.870			8,123.87	
	BUY	12/02/2019	26,750.50		26,750.50	
ACCOUNT 1055082576		26,750.500			26,750.50	
	SEL	12/02/2019	106,058.65		106,058.65	
ACCOUNT 1055082558		106,058.650			106,058.65	
	BUY	12/06/2019	370,998.92		370,998.92	
ACCOUNT 1055082558		370,998.920			370,998.92	
	BUY	12/31/2019	17,696.08		17,696.08	
ACCOUNT 1055082576		17,696.080			17,696.08	

52 PURCHASES FOR 6,710,825.41 28 SALES FOR 5,338,489.81 ISSUE AGGREGATE TOTAL 12,049,315.22

ComericA

SCHEDULE MB (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information

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

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

OMB No. 1210-0110

2019

This Form is Open to Public Inspection

For calendar plan year 2019 or fiscal plan year beginning 01/01/2019 and ending 12/31/2019

► **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
Northwestern Ohio Plumbers and Pipefitters Pension Plan and Trust

B Three-digit plan number (PN) ► 001

C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF
Trustees Northwestern Ohio Plumbers and Pipefitters Pension Plan

D Employer Identification Number (EIN)
34-6502487

E Type of plan: (1) [X] Multiemployer Defined Benefit (2) [ ] Money Purchase (see instructions)

1a Enter the valuation date: Month 01 Day 01 Year 2019

b	Assets:		
	(1) Current value of assets	1b(1)	153,244,057
	(2) Actuarial value of assets for funding standard account	1b(2)	163,377,026
c	(1) Accrued liability for plan using immediate gain methods	1c(1)	199,318,283
	(2) Information for plans using spread gain methods:		
	(a) Unfunded liability for methods with bases	1c(2)(a)	
	(b) Accrued liability under entry age normal method	1c(2)(b)	
	(c) Normal cost under entry age normal method	1c(2)(c)	
	(3) Accrued liability under unit credit cost method	1c(3)	199,318,283
d	Information on current liabilities of the plan:		
	(1) Amount excluded from current liability attributable to pre-participation service (see instructions)	1d(1)	0
	(2) "RPA '94" information:		
	(a) Current liability	1d(2)(a)	387,106,927
	(b) Expected increase in current liability due to benefits accruing during the plan year	1d(2)(b)	15,208,695
	(c) Expected release from "RPA '94" current liability for the plan year	1d(2)(c)	12,297,699
	(3) Expected plan disbursements for the plan year	1d(3)	12,652,699

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 Richard L Kubiak — 7/7/2020

Signature of actuary — Date

Richard L. Kubiak — 20-08540

Type or print name of actuary — Most recent enrollment number

Cuni, Rust & Strenk — (513) 891-0270

Firm name — Telephone number (including area code)

4555 Lake Forest Drive

US Cincinnati OH 45242-3760

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 [ ]

2 Operational information as of beginning of this plan year:

a Current value of assets (see instructions)		2a	153,244,057
b "RPA '94" current liability/participant count breakdown:	(1) Number of participants		(2) Current liability
(1) For retired participants and beneficiaries receiving payment	755		166,107,350
(2) For terminated vested participants	196		27,754,518
(3) For active participants:			
(a) Non-vested benefits			18,788,351
(b) Vested benefits			174,456,708
(c) Total active	1,008		193,245,059
(4) Total	1,959		387,106,927
c If the percentage resulting from dividing line 2a by line 2b(4), column (2), is less than 70%, enter such percentage		2c	39.59 %

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

(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees
01/01/2019	0				
12/31/2019	15,888,348				
			Totals ► 3(b)	15,888,348	3(c)

4 Information on plan status:

a Funded percentage for monitoring plan's status (line 1b(2) divided by line 1c(3))	4a	82.0 %
b Enter code to indicate plan's status (see instructions for attachment of supporting evidence of plan's status). If code is "N," go to line 5	4b	N

c Is the plan making the scheduled progress under any applicable funding improvement or rehabilitation plan? ☐ Yes ☐ No

d If the plan is in critical status or critical and declining status, were any benefits reduced (see instructions)? ☐ Yes ☐ No

e If line d is "Yes," enter the reduction in liability resulting from the reduction in benefits (see instructions), measured as of the valuation date	4e	
f If the rehabilitation plan projects emergence from critical status or critical and declining status, enter the plan year in which it is projected to emerge. If the rehabilitation plan is based on forestalling possible insolvency, enter the plan year in which insolvency is expected and check here ☐	4f	

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

a ☐ Attained age normal **b** ☐ Entry age normal **c** ☒ Accrued benefit (unit credit) **d** ☐ Aggregate

e ☐ Frozen initial liability **f** ☐ Individual level premium **g** ☐ Individual aggregate **h** ☐ Shortfall

i ☐ Other (specify):

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

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

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

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

6 Checklist of certain actuarial assumptions:

			Pre-retirement	Post-retirement
a	Interest rate for "RPA '94" current liability	6a	3.06 %	
b	Rates specified in insurance or annuity contracts		☐ Yes ☐ No ☒ N/A	☐ Yes ☐ No ☒ N/A
c	Mortality table code for valuation purposes			
	(1) Males	6c(1)	A	A
	(2) Females	6c(2)	A	A
d	Valuation liability interest rate	6d	7.50 %	7.50 %
e	Expense loading	6e	6.1 % ☐ N/A	% ☒ N/A
f	Salary scale	6f	% ☒ N/A	
g	Estimated investment return on actuarial value of assets for year ending on the valuation date	6g		5.2 %
h	Estimated investment return on current value of assets for year ending on the valuation date	6h		-2.8 %

7 New amortization bases established in the current plan year:

(1) Type of base	(2) Initial balance	(3) Amortization Charge/Credit
1	5,495,143	579,097
4	(1,153,792)	(121,591)

8 Miscellaneous information:

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

9 Funding standard account statement for this plan year:

			Outstanding balance	
	Charges to funding standard account:			
a	Prior year funding deficiency, if any	9a		0
b	Employer's normal cost for plan year as of valuation date	9b		5,779,396
c	Amortization charges as of valuation date:			
	(1) All bases except funding waivers and certain bases for which the amortization period has been extended	9c(1)	75,123,981	12,199,288
	(2) Funding waivers	9c(2)	0	0
	(3) Certain bases for which the amortization period has been extended	9c(3)	0	0
d	Interest as applicable on lines 9a, 9b, and 9c	9d		1,348,402
e	Total charges. Add lines 9a through 9d	9e		19,327,086

Credits to funding standard account:

f	Prior year credit balance, if any		9f	14,846,552
g	Employer contributions. Total from column (b) of line 3		9g	15,888,348
		Outstanding balance		
h	Amortization credits as of valuation date	9h 24,336,172		3,951,973
i	Interest as applicable to end of plan year on lines 9f, 9g, and 9h		9i	1,994,931
j	Full funding limitation (FFL) and credits:			
	(1) ERISA FFL (accrued liability FFL)	9j(1) 71,702,687		
	(2) "RPA '94" override (90% current liability FFL)	9j(2) 199,377,339		
	(3) FFL credit		9j(3)	0
k	(1) Waived funding deficiency		9k(1)	0
	(2) Other credits		9k(2)	0
l	Total credits. Add lines 9f through 9i, 9j(3), 9k(1), and 9k(2)		9l	36,681,804
m	Credit balance: If line 9l is greater than line 9e, enter the difference		9m	17,354,718
n	Funding deficiency: If line 9e is greater than line 9l, enter the difference		9n	

9 o	Current year's accumulated reconciliation account:		
	(1) Due to waived funding deficiency accumulated prior to the 2019 plan year	9o(1)	0
	(2) Due to amortization bases extended and amortized using the interest rate under section 6621(b) of the Code:		
	(a) Reconciliation outstanding balance as of valuation date	9o(2)(a)	0
	(b) Reconciliation amount (line 9c(3) balance minus line 9o(2)(a))	9o(2)(b)	0
	(3) Total as of valuation date	9o(3)	0
10	Contribution necessary to avoid an accumulated funding deficiency. (See instructions.)	10	0
11	Has a change been made in the actuarial assumptions for the current plan year? If "Yes," see instructions		[X] Yes [ ] No

Schedule MB, line 8b(2) – Schedule of Active Participant Data.

Plan Name: Northwestern Ohio Plumbers and Pipefitters Pension Plan

EIN: 34-6502487

PN: 001

Years of Credited Service:

Attained Age	Under 1		1 to 4		5 to 9		10 to 14		15 to 19		20 to 24		25 to 29		30 to 34		35 to 39		40 & up	
	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.
Under 25	0		59		6		0		0		0		0		0		0		0	
25 to 29	0		50		36		0		0		0		0		0		0		0	
30 to 34	0		46		44		37		0		0		0		0		0		0	
35 to 39	0		18		24		71		21		2		0		0		0		0	
40 to 44	0		11		16		34		36		30		1		0		0		0	
45 to 49	0		13		10		44		40		49		11		0		0		0	
50 to 54	0		7		8		19		28		36		23		22		1		0	
55 to 59	0		4		4		19		18		20		20		19		6		3	
60 to 64	0		1		0		8		7		9		7		2		1		3	
65 to 69	0		1		0		0		0		0		0		0		1		1	
70 & up	0		0		0		0		1		0		0		0		0		0	

Schedule MB, line 6 – Statement of Actuarial Assumptions/Methods.
Plan Name: Northwestern Ohio Plumbers and Pipefitters Pension Plan
EIN: 34-6502487
PN: 001

1. Interest Rates: 7.50%/3.06% (Funding/Current Liability).

2. Mortality Rates:

   a. Funding

      i. Non-Disabled — RP-2014 with Blue Collar adjustment.

      ii. Disabled — RP-2014 Disabled Retiree.

      iii. Base Year Adjustment — 2006 using Scale MP-2014.

      iv. Future Mortality Improvements — Generational projection using Scale MP-2018.

   b. Current Liability — 2018 Static Mortality (IRS Notice 2017-60).

3. Actuarial Cost Method: Unit Credit.

4. Hours Worked: 1,925 per year.

5. Termination/Disability Rates: Termination years 0 and 1 – 0.20, 2 and 3 – 0.15, then:

Age	Termination	Disability
25	0.052671	0.000364
35	0.044693	0.000364
45	0.067095	0.001000
55	0.105263	0.003640
65	0.000000	0.000000

6. Percent Married/Spousal Age: 80% with husbands 3 years older than their wives.

Schedule MB, line 6 – Statement of Actuarial Assumptions/Methods.
Plan Name: Northwestern Ohio Plumbers and Pipefitters Pension Plan
EIN: 34-6502487
PN: 001

7. Retirement Rates:

	Actives		Terminated
Age	≤30 Years	>30 Years	Vesteds*
55	0.05	0.10	0.05
56-57	0.05	0.10	0.05
58	0.05	0.15	0.05
59	0.10	0.20	0.05
60	0.10	0.25	0.10
61	0.10	0.25	0.15
62	0.20	0.50	0.20
63-64	0.20	1.00	0.20
65	1.00	1.00	0.25
66-69	1.00	1.00	0.30
70	1.00	1.00	1.00

*Alternate Payees when ex-spouse is age 65.

The weighted average retirement age is 61.0.

8. Expense Load: $355,000 per year.

9. Actuarial Value of Assets: Market Value of Assets minus a decreasing fraction ($^4/_5$, $^3/_5$, $^2/_5$ and $^1/_5$) of each of the preceding 4 years' gains/(losses). A gain/(loss) for a year is equal to the actual return minus the expected return using the funding interest rate. The Actuarial Value of Assets is adjusted to be within 80% and 120% of the Market Value of Assets.

10. Payment Form Election:

Payment Forms	% Electing
5-Year C&L	37%
10-Year C&L	11%
50% J&S	14%
75% J&S	11%
100% J&S	27%

Schedule MB, line 6 – Statement of Actuarial Assumptions/Methods.
Plan Name: Northwestern Ohio Plumbers and Pipefitters Pension Plan
EIN: 34-6502487
PN: 001

11. Changes Since Last Year: The mortality rate projection scale and retirement rates were updated, the expense load and hours worked assumption was lowered, a payment form election percentage was added, and the Current Liability mortality and interest rates were changed as mandated by the IRS.

Schedule MB, line 6 – Statement of Actuarial Assumptions/Methods.
Plan Name: Northwestern Ohio Plumbers and Pipefitters Pension Plan
EIN: 34-6502487
PN: 001

Rational for Selection of Significant Actuarial Assumptions:

1. Interest Rate:	Based on the Plan's target asset allocation, reflecting asset class future return expectations as determined by the Plan's investment consultant and publicly available inflation expectations, anticipated risk premiums, and associated long-term capital market assumptions.
2. Mortality Rates:	RP-2014 table used as base rates. Blue Collar adjustment used to reflect expected workforce mortality experience. RP-2014 Disabled Retiree table used to reflect expected disabled mortality experience. Both RP-2014 tables are adjusted to base year 2006 to reflect the mortality experience used to develop the RP-2014 table and for expected generational mortality improvement. Other adjustments are based on the Plan's most recent experience study, Society of Actuaries mortality studies, and expected generational mortality improvement from 2006 base year using Scale MP-2018.
3. Retirement Rates:	Based on the Plan's most recent experience study.
4. Hours Worked:	Based on prior year hours worked and adjusted for anticipated changes in future hours worked.
5. Termination/Disability Rates:	Based on the Plan's most recent experience study.
6. Payment Form Election:	Based on the Plan's most recent experience study.

Schedule MB, line 9c and 9h – Schedule of Funding Standard Account Bases.

Plan Name: Northwestern Ohio Plumbers and Pipefitters Pension Plan

EIN: 34-6502487

PN: 001

Charge Bases:

Date Established	Type	Initial Balance	Rem. Years	Payment	Remaining Balance
01/01/1980	Amendment	$ 792,126	1	$ 58,507	$ 58,507
01/01/1990	Amendment	1,762,520	1	138,824	138,824
01/01/1991	Assumption	559,152	2	44,041	85,010
01/01/1992	Amendment	201,958	3	15,907	44,468
01/01/1992	Assumption	395,727	3	31,169	87,138
01/01/1993	Assumption	12,849	4	1,012	3,644
01/01/1995	Amendment	1,536,782	6	121,043	610,773
01/01/1996	Amendment	4,734,959	7	372,944	2,123,483
01/01/1997	Amendment	2,178,433	8	171,582	1,080,390
01/01/1998	Amendment	3,489,668	9	274,860	1,884,799
01/01/1999	Amendment	4,785,121	10	376,895	2,781,074
01/01/2000	Amendment	279,595	11	22,022	173,185
01/01/2001	Amendment	2,343,179	12	184,558	1,534,683
01/01/2002	Amendment	743,665	13	58,574	511,668
01/01/2003	Amendment	738,028	14	58,130	530,494
01/01/2005	Amendment	375,832	16	29,602	290,895
01/01/2005	Assumption	2,672,454	16	210,493	2,068,542
01/01/2005	Experience	4,050,834	1	426,892	426,892
01/01/2006	Experience	5,949,301	2	626,958	1,210,175
01/01/2007	Experience	2,405,557	3	253,506	708,691
01/01/2008	Experience	2,377,640	4	250,564	902,164
01/01/2009	Experience	21,607,410	5	2,277,064	9,903,690
01/01/2011	Assumption	144,159	7	15,192	86,503
01/01/2011	Experience	462,653	7	48,756	277,611
01/01/2012	Assumption	9,767,768	8	1,029,361	6,481,482
01/01/2012	Experience	5,298,630	8	558,388	3,515,948
01/01/2013	Experience	5,441,358	9	573,429	3,932,181
01/01/2014	Assumption	1,378,486	10	145,270	1,071,927
01/01/2014	Experience	1,034,794	10	109,050	804,670
01/01/2015	Assumption	3,454,072	11	364,002	2,862,542
01/01/2015	Experience	8,505,696	11	896,360	7,049,045
01/01/2016	Experience	5,130,427	12	540,662	4,495,836
01/01/2017	Experience	6,978,201	13	735,387	6,423,811
01/01/2018	Assumption	858,069	14	90,426	825,216
01/01/2018	Experience	4,827,716	14	508,761	4,642,877
01/01/2019	Experience	5,495,143	15	579,097	5,495,143
	Total Charges			$12,199,288	$ 75,123,981

Schedule MB, line 9c and 9h – Schedule of Funding Standard Account Bases.

Plan Name: Northwestern Ohio Plumbers and Pipefitters Pension Plan

EIN: 34-6502487

PN: 001

Credit Bases:

Date Established	Type	Initial Balance	Rem. Years	Payment	Remaining Balance
01/01/1999	Asumption	$ 307,527	10	$ 24,222	$ 178,734
01/01/2010	Experience	6,013,457	6	633,719	3,197,677
01/01/2013	Assumption	7,318,408	9	771,239	5,288,625
01/01/2016	Assumption	2,141,066	12	225,633	1,876,233
01/01/2016	Cost Method	15,437,646	7	2,092,137	11,912,310
01/01/2017	Assumption	791,696	13	83,432	728,801
01/01/2019	Assumption	1,153,792	15	121,591	1,153,792
	Total Credits			$ 3,951,973	$ 24,336,172

1.	Net Amortization	$ 50,787,809
2.	Credit Balance	$ 14,846,552
3.	Balance Test: [(1) - (2)]	$ 35,941,257
4.	Unfunded Accrued Liability:	
	a. Accrued Liability	$199,318,283
	b. Actuarial Value of Assets	163,377,026
	c. Unfunded Accrued Liability: [(a) - (b)]	$ 35,941,257

Schedule MB, line 11 – Justification for Change in Actuarial Assumptions.
Plan Name: Northwestern Ohio Plumbers and Pipefitters Pension Plan
EIN: 34-6502487
PN: 001

Effective with the January 1, 2019 valuation, the following assumptions were changed based upon historical Plan and industry data as an indicator of anticipated future experience:

- The mortality rates projection scale was updated.
- The retirement rates were updated.
- The expense load was decreased from $365,000 to $355,000 per year.
- The hours worked assumption was lowered from 2,000 to 1,925 per year.
- A payment form election assumption was added.

Schedule MB, line 6 – Summary of Plan Provisions.
Plan Name: Northwestern Ohio Plumbers and Pipefitters Pension Plan
EIN: 34-6502487
PN: 001

1. Effective Date: June 29, 1962.

2. Plan Year: January 1st through December 31st.

3. Employees Covered: All employees covered by the Local 50 Collective Bargaining Agreement.

4. Eligibility: January 1st or July 1st following 435 Hours of Service.

5. Vesting Service: 1 Year for each Plan Year with 435 Hours of Service.

6. Contribution Rates:

Effective Date	Hourly Rate
7/29/2010	$5.25
7/02/2012	$5.45
7/04/2016	$6.45
10/02/2017	$6.66
7/02/2018	$6.91
7/02/2019	$7.16

7. Payment Forms:

   a. Normal: Life Annuity with 60 payments guaranteed for unmarried participants or an Actuarially Equivalent 50% Joint & Survivor Annuity for married participants.

   b. Optional: Actuarially Equivalent 75% or 100% Joint & Survivor Annuity, or a Life Annuity with 120 payments guaranteed.

Schedule MB, line 6 – Summary of Plan Provisions.
Plan Name: Northwestern Ohio Plumbers and Pipefitters Pension Plan
EIN: 34-6502487
PN: 001

8. Actuarial Equivalency: UP-1984 Mortality Table at 7.00% (Non-Disabled).

9. Normal Retirement:

a. Eligibility: Age 65 and 5 Years of Vesting Service.

b. Monthly Benefit

Effective Date	Benefit Credit
Prior to 1/1/1962	$8.50
1/1/1962 – 12/31/1976	$19.00
1/1/1977 – 12/31/1982	$27.00
1/1/1983 – 12/31/1987	$48.00

Effective Date	% of Contributions
1/1/1988 – 12/31/1997	2.25%
1/1/1998 – 12/31/2016	2.50%*
1/1/2017 and later	1.20%

Plus $87.50 for retirement from active service.

*Limited to $2.35 per hour (7/1/2005 – 12/31/2016).

10. Early Retirement:

a. Eligibility: Age 55 and 10 Years of Vesting Service.

b. Monthly Benefit: Calculated as for Normal Retirement reduced by $^1/_2$ of 1% per month from age 65. No reduction is applied if the sum of age and Years of Service equals at least 90. If a participant has 30 or more Years of Service but is not age 60, benefit will be reduced pursuant to schedule.

Schedule MB, line 6 – Summary of Plan Provisions.
Plan Name: Northwestern Ohio Plumbers and Pipefitters Pension Plan
EIN: 34-6502487
PN: 001

11. Vested Retirement:

a. Eligibility	5 Years of Vesting Service or 10 Years of Vesting Service prior to January 1, 1997.
b. Monthly Benefit	Calculated as for Normal or Early Retirement, without $87.50 (since retirement is not from active service).

12. Disability Retirement:

a. Eligibility	Total and permanent disability and 10 Years of Vesting Service, with at least one Year of Vesting Service in the three years prior to disability.
b. Monthly Benefit	Calculated as for Normal Retirement, payable at Social Security disability date with no reduction for early commencement.

13. Pre-Retirement Death:

a. Eligibility	Vested.
b. Monthly Benefit	For married participants, calculated as for an age 55 Early Retirement reflecting a 50% Joint & Survivor Annuity payment form with death immediately after Early Retirement for surviving spouses. Benefit for beneficiaries of unmarried participants equals Normal Retirement Benefit payable for 60 months.

14. Changes Since Last Year: The contribution rates were updated.

Schedule MB, line 8b(1) - Schedule of Projection of Expected Benefit Payments.

Plan Name: Northwestern Ohio Plumbers and Pipefitters Pension Plan

EIN: 34-6502487

PN: 001

1/1 Plan Year	Expected Annual Benefit Payments
2019	$12,281,166
2020	$12,616,832
2021	$13,085,430
2022	$13,543,913
2023	$14,016,871
2024	$14,411,292
2025	$14,849,329
2026	$15,289,708
2027	$15,590,239
2028	$15,928,589