

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 6047(e), 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

2013

This Form is Open to Public Inspection

Part I Annual Report Identification Information

For calendar plan year 2013 or fiscal plan year beginning **10/01/2013** and ending **09/30/2014**

- A** This return/report is for: a multiemployer plan; a multiple-employer plan; or a single-employer plan; a DFE (specify) _____
- B** This return/report is: the first return/report; the final return/report; an amended return/report; a short plan year return/report (less than 12 months).
- C** If the plan is a collectively-bargained plan, check here▶
- D** Check box if filing under: Form 5558; automatic extension; the DFVC program; special extension (enter description) _____

Part II Basic Plan Information - enter all requested information

1a Name of plan NEW ORLEANS EMPLOYERS-INTERNATIONAL LONGSHOREMEN'S ASSOCIATION, AFL-CIO, PENSION PLAN	1b Three-digit plan number (PN) ▶ 001
	1c Effective date of plan 10/01/1956
2a Plan sponsor's name and address; include room or suite number (employer, if for a single-employer plan) BOARD OF TRUSTEES, NEW ORLEANS EMPLOYERS INTERNATIO PENSION FUND 721 RICHARD ST. SUITE B NEW ORLEANS LA 70130-4505	2b Employer Identification Number (EIN) 72-6023317
	2c Sponsor's telephone number 504-525-0309
	2d Business code (see instructions) 488990

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 <i>Thomas R Daniel</i>	7-14-15	THOMAS R DANIEL
Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE		THOMAS R DANIEL
Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE		
Signature of DFE	Date	Enter name of individual signing as DFE
Preparer's name (including firm name, if applicable) and address; include room or suite number. (optional) WILLIAM G. STAMM, CPA DUPLANTIER, HRAPMANN, HOGAN & MAHER, LLP 1615 POYDRAS STREET, SUITE 2100 NEW ORLEANS LA 70112		Preparer's telephone number (optional) (504) 586-8866

For Paperwork Reduction Act Notice and OMB Control Numbers, see the instructions for Form 5500.

Form 5500 (2013)
v. 130118

3a Plan administrator's name and address <input checked="" type="checkbox"/> Same as Plan Sponsor Name <input checked="" type="checkbox"/> Same as Plan Sponsor Address	3b Administrator's EIN
	3c Administrator's telephone number

4 If the name and/or EIN of the plan sponsor has changed since the last return/report filed for this plan, enter the name, EIN and the plan number from the last return/report:	4b EIN
a Sponsor's name	4c PN

5 Total number of participants at the beginning of the plan year	5	3374
6 Number of participants as of the end of the plan year (welfare plans complete only lines 6a, 6b, 6c, and 6d).		
a Active participants	6a	591
b Retired or separated participants receiving benefits	6b	1539
c Other retired or separated participants entitled to future benefits	6c	209
d Subtotal. Add lines 6a, 6b, and 6c	6d	2339
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits	6e	959
f Total. Add lines 6d and 6e	6f	3298
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	6g	
h Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested	6h	
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	7	18

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) <ul style="list-style-type: none"> (1) <input checked="" type="checkbox"/> Insurance (2) <input type="checkbox"/> Code section 412(e)(3) insurance contracts (3) <input checked="" type="checkbox"/> Trust (4) <input type="checkbox"/> General assets of the sponsor 	9b Plan benefit arrangement (check all that apply) <ul style="list-style-type: none"> (1) <input type="checkbox"/> Insurance (2) <input type="checkbox"/> Code section 412(e)(3) insurance contracts (3) <input checked="" type="checkbox"/> Trust (4) <input type="checkbox"/> General assets of the sponsor
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10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)

a Pension Schedules <ul style="list-style-type: none"> (1) <input checked="" type="checkbox"/> R (Retirement Plan Information) (2) <input checked="" type="checkbox"/> MB (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary (3) <input type="checkbox"/> SB (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary 	b General Schedules <ul style="list-style-type: none"> (1) <input checked="" type="checkbox"/> H (Financial Information) (2) <input type="checkbox"/> I (Financial Information - Small Plan) (3) <input checked="" type="checkbox"/> <u>1</u> A (Insurance Information) (4) <input checked="" type="checkbox"/> C (Service Provider Information) (5) <input checked="" type="checkbox"/> D (DFE/Participating Plan Information) (6) <input type="checkbox"/> G (Financial Transaction Schedules)
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**SCHEDULE A
(Form 5500)**

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration
Pension Benefit Guaranty Corporation

Insurance Information

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

► **File as an attachment to Form 5500.**

► Insurance companies are required to provide the information pursuant to ERISA section 103(a)(2).

OMB No. 1210-0110

2013

This Form is Open to Public Inspection

For calendar plan year 2013 or fiscal plan year beginning **10/01/2013** and ending **09/30/2014**

A Name of plan NEW ORLEANS EMPLOYERS-INTERNATIONAL LONGSHOREMEN'S		B Three-digit plan number (PN) ► 001
C Plan sponsor's name as shown on line 2a of Form 5500 BOARD OF TRUSTEES, NEW ORLEANS EMPLOYERS INTERNATIO		D Employer Identification Number (EIN) 72-6023317

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

1 Coverage Information:

(a) Name of insurance carrier

PRINCIPAL LIFE INSURANCE COMPANY

(b) EIN	(c) NAIC code	(d) Contract or identification number	(e) Approximate number of persons covered at end of policy or contract year	Policy or contract year	
				(f) From	(g) To
42-0127290	61271	516516	3298	10/01/2013	09/30/2014

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

(a) Total amount of commissions paid 0	(b) Total amount of fees paid 0
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3 Persons receiving commissions and fees. (Complete as many entries as needed to report all persons).

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

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

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

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

For Paperwork Reduction Act Notice and OMB Control Numbers, see the instructions for Form 5500.

Schedule A (Form 5500) 2013 v. 130118

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

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

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

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

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

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

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

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

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

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

Part II Investment and Annuity Contract Information

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

4 Current value of plan's interest under this contract in the general account at year end	4	
5 Current value of plan's interest under this contract in separate accounts at year end	5	7790161

6 Contracts With Allocated Funds:

a State the basis of premium rates ▶

b Premiums paid to carrier	6b	
c Premiums due but unpaid at the end of the year	6c	
d If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, enter amount	6d	

Specify nature of costs ▶

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

f If contract purchased, in whole or in part, to distribute benefits from a terminating plan, check here

7 Contracts With Unallocated Funds (Do not include portions of these contracts maintained in separate accounts)

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

b Balance at the end of the previous year	7b	
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c Additions: (1) Contributions deposited during the year	7c(1)	
(2) Dividends and credits	7c(2)	
(3) Interest credited during the year	7c(3)	
(4) Transferred from separate account	7c(4)	
(5) Other (specify below)	7c(5)	

(6) Total additions	7c(6)	0
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d Total of balance and additions (add lines 7b and 7c(6))	7d	
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e Deductions:		
(1) Disbursed from fund to pay benefits or purchase annuities during year	7e(1)	
(2) Administration charge made by carrier	7e(2)	
(3) Transferred to separate account	7e(3)	
(4) Other (specify below)	7e(4)	

(5) Total deductions	7e(5)	0
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f Balance at the end of the current year (subtract line 7e(5) from line 7d)	7f	
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Part III Welfare Benefit Contract Information
 If more than one contract covers the same group of employees of the same employer(s) or members of the same employee organization(s), the information may be combined for reporting purposes if such contracts are experience-rated as a unit. Where contracts cover individual employees, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

- 8** Benefit and contract type (check all applicable boxes)
- | | | | |
|--------------------------------------------------------------------------------|--------------------------------------------------------|-------------------------------------------------------------|------------------------------------------------------|
| a <input type="checkbox"/> Health (other than dental or vision) | b <input type="checkbox"/> Dental | c <input type="checkbox"/> Vision | d <input type="checkbox"/> Life insurance |
| e <input type="checkbox"/> Temporary disability (accident and sickness) | f <input type="checkbox"/> Long-term disability | g <input type="checkbox"/> Supplemental unemployment | h <input type="checkbox"/> Prescription drug |
| i <input type="checkbox"/> Stop loss (large deductible) | j <input type="checkbox"/> HMO contract | k <input type="checkbox"/> PPO contract | l <input type="checkbox"/> Indemnity contract |
| m <input type="checkbox"/> Other (specify) ▶ | | | |

9 Experience-rated contracts:

a Premiums: (1) Amount received	9a(1)	
(2) Increase (decrease) in amount due but unpaid	9a(2)	
(3) Increase (decrease) in unearned premium reserve	9a(3)	
(4) Earned ((1) + (2) - (3))		9a(4)
b Benefit charges: (1) Claims paid	9b(1)	
(2) Increase (decrease) in claim reserves	9b(2)	
(3) Incurred claims (add (1) and (2))		9b(3)
(4) Claims charged		9b(4)
c Remainder of premium: (1) Retention charges (on an accrual basis) --		
(A) Commissions	9c(1)(A)	
(B) Administrative service or other fees	9c(1)(B)	
(C) Other specific acquisition costs	9c(1)(C)	
(D) Other expenses	9c(1)(D)	
(E) Taxes	9c(1)(E)	
(F) Charges for risks or other contingencies	9c(1)(F)	
(G) Other retention charges	9c(1)(G)	
(H) Total retention		9c(1)(H)
(2) Dividends or retroactive rate refunds. (These amounts were <input type="checkbox"/> paid in cash, or <input type="checkbox"/> credited.)		9c(2)
d Status of policyholder reserves at end of year: (1) Amount held to provide benefits after retirement		9d(1)
(2) Claim reserves		9d(2)
(3) Other reserves		9d(3)
e Dividends or retroactive rate refunds due. (Do not include amount entered in line 9c(2).)		9e
10 Nonexperience-rated contracts:		
a Total premiums or subscription charges paid to carrier		10a
b If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, other than reported in Part I, line 2 above, report amount		10b
Specify nature of costs ▶		

Part IV Provision of Information

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

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

SCHEDULE C (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Service Provider Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ► File as an attachment to Form 5500.	OMB No. 1210-0110 2013 This Form is Open to Public Inspection.
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For calendar plan year 2013 or fiscal plan year beginning **10/01/2013** and ending **09/30/2014**

A Name of plan NEW ORLEANS EMPLOYERS--INTERNATIONAL LONGSHOREMEN'S	B Three-digit plan number (PN) ►	001
C Plan sponsor's name as shown on line 2a of Form 5500 BOARD OF TRUSTEES, NEW ORLEANS EMPLOYERS INTERNATIO	D Employer Identification Number (EIN) 72-6023317	

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

GROSVENOR CAPITAL MANAGEMENT LP 36-3795985
 900 NORTH MICHIGAN AVE, SUITE 1100
 CHICAGO IL 60611

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

PRINCIPAL REAL ESTATE INVESTORS 42-0127290
 801 GRAND AVE
 DES MOINES IA 50392

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

FIRST EAGLE INVESTMENT MANAGEMENT, 57-1156902
 1345 AVE OF THE AMERICAS
 NEW YORK NY 10105

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

SEGAL SELECT INSURANCE SERVICES 46-0619194
 333 WEST 34TH STREET, 2ND FLOOR
 NEW YORK NY 10001

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

NEW TOWER TRUST COMPANY 20-1641876
3 BETHESDA METRO CENTER, SUITE 1600
BETHESDA MD 20814

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

ATTALUS CAPITAL, LP 23-2981828
2929 ARCH STREET, SUITE 1500
PHILADELPHIA PA 19104

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

ATTALUS MULTI STRATEGY FUND 98-1032745
PO BOX 309
GEORGE TOWN KY GRAND CAYMAN

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

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

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

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

2. Information on Other Service Providers Receiving Direct or Indirect Compensation. Except for those persons for whom you answered "Yes" to line 1a on page 2, 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).

SEE STATEMENT 1

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

RBC GLOBAL ASSET MANAGEMENT US, INC 41-1460668
 50 SOUTH SIXTH STREET, SUITE 2350
 MINNEAPOLIS MN 55402

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
51	NONE	191300.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

FRED ALGER MANAGEMENT, INC. 13-2510833
 360 PARK AVENUE SOUTH
 NEW YORK NY 10010

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28	NONE	144810.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	5822.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

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

INVESTMENT PERFORMANCE SERVICES 58-2432390
 7402 HODGSON MEMORIAL DRIVE STE 100
 SAVANNAH GA 31406

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
16 27	NONE	132500.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

2. Information on Other Service Providers Receiving Direct or Indirect Compensation. Except for those persons for whom you answered "Yes" to line 1a on page 2, 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).

SEE STATEMENT 1

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

ASB CAPITAL MANAGEMENT 80-0618452
7501 WISCONSIN AVE, STE 1400 WEST
BETHESDA MD 20814

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
51	NONE	130807.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	0.	Yes <input type="checkbox"/> No <input type="checkbox"/>

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

WEDGE CAPITAL MANAGEMENT 56-1557450
301 SOUTH COLLEGE STREET 2920
CHARLOTTE NC 28202

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
51 68	NONE	108338.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	0.	Yes <input type="checkbox"/> No <input type="checkbox"/>

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

LOOMIS SAYLES TRUST CO 20-8080381
ONE FINANCIAL CENTER
BOSTON MA 02111

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
51	NONE	90015.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

2. Information on Other Service Providers Receiving Direct or Indirect Compensation. Except for those persons for whom you answered "Yes" to line 1a on page 2, 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).

SEE STATEMENT 1

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

THE SEGAL COMPANY (EASTERN STATES) 13-1835864
 333 WEST 34TH STREET, 2ND FLOOR
 NEW YORK NY 10001

(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 17	NONE	77710.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

EARNEST PARTNERS, LLC 58-2386669
 1180 PEACHTREE STREET, SUITE 2300
 ATLANTA GA 30309

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
51	NONE	65155.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	0.	Yes <input type="checkbox"/> No <input type="checkbox"/>

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

ROTHSCHILD ASSET MANAGEMENT 13-2544634
 1251 AVENUES OF THE AMERICAS
 NEW YORK NY 10020

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 51 68	NONE	60079.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	0.	Yes <input type="checkbox"/> No <input type="checkbox"/>

2. Information on Other Service Providers Receiving Direct or Indirect Compensation. Except for those persons for whom you answered "Yes" to line 1a on page 2, 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).

SEE STATEMENT 1

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

THOMAS R. DANIEL 72-0502386
 147 CARONDELET ST STE 300
 NEW ORLEANS LA 70130

(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?
30	EMPLOYEE	56653.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

AMALGAMATED BANK 13-4920330
 275 7TH AVE
 NEW YORK NY 10001

(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 51	NONE	34706.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

ALICE C. BAPTISTE 72-0502386
 147 CARONDELET ST STE 300
 NEW ORLEANS LA 70130

(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?
30	EMPLOYEE	32165.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

2. Information on Other Service Providers Receiving Direct or Indirect Compensation. Except for those persons for whom you answered "Yes" to line 1a on page 2, 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).

SEE STATEMENT 1

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

WELLINGTON TRUST **04-275549**
280 CONGRESS STREET
BOSTON MA 02210

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
51	NONE	30813.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

DUPLANTIER HRAPMANN HOGAN & MAHER L **72-0567396**
1615 POYDRAS ST, STE 2100
NEW ORLEANS LA 70112

(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	NONE	25584.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

WATERFRONT EMPLOYERS OF NEW ORLEANS **72-0456253**
721 RICHARD STREET, SUITE B
NEW ORLEANS LA 70130

(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?
15 64	NONE	25297.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

2. Information on Other Service Providers Receiving Direct or Indirect Compensation. Except for those persons for whom you answered "Yes" to line 1a on page 2, 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).

SEE STATEMENT 1

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

C.S. MCKEE, L.P. 25-1900687
 1 GATEWAY CENTER, 8TH FLOOR
 PITTSBURGH PA 15222

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28	NONE	21777.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

BLACKROCK INTERNATIONAL TRUST COMPA 94-3112180
 400 HOWARD STREET
 SAN FRANCISCO CA 94105

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
21 24 28	NONE	16812.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	0.	Yes <input type="checkbox"/> No <input type="checkbox"/>

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

US BANK NA 32-0841368
 225 WATER STREET, SUITE 700
 JACKSONVILLE FL 32202

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
51 19	NONE	15688.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

2. Information on Other Service Providers Receiving Direct or Indirect Compensation. Except for those persons for whom you answered "Yes" to line 1a on page 2, 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).

SEE STATEMENT 1

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

ROBEIN URANN SPENCER PICARD & CANGE 72-0999672
 2540 SEVERN AVE, STE 400
 METAIRIE LA 70002

(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	14309.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

CAPITAL ONE NA 72-0210640
 201 ST. CHARLES AVENUE
 NEW ORLEANS LA 70170

(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?
65	NONE	12804.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

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

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.	

**SCHEDULE D
(Form 5500)**

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

DFE/Participating Plan Information

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

► File as an attachment to Form 5500.

OMB No. 1210-0110

2013

This Form is Open to
Public Inspection.

For calendar plan year 2013 or fiscal plan year beginning 10/01/2013 and ending 09/30/2014

A Name of plan <u>NEW ORLEANS EMPLOYERS-INTERNATIONAL LONGSHOREMEN'S</u>	B Three-digit plan number (PN) ► <u>001</u>
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 <u>BOARD OF TRUSTEES, NEW ORLEANS EMPLOYERS INTERNATIO</u>	D Employer Identification Number (EIN) <u>72-6023317</u>

Part I Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs)
(Complete as many entries as needed to report all interests in DFEs)

a Name of MTIA, CCT, PSA, or 103-12 IE: ROTHSCHILD SMALL CAP TRUST ACCOUNT

b Name of sponsor of entity listed in (a): ROTHSCHILD ASSET MANAGEMENT INC

c EIN-PN <u>13-2544634 001</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>5473435.</u>
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a Name of MTIA, CCT, PSA, or 103-12 IE: LONGVIEW ULTRA1 CONSTRUCTION LN FD

b Name of sponsor of entity listed in (a): AMALGAMATED BANK

c EIN-PN <u>13-4920330 006</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>3468375.</u>
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a Name of MTIA, CCT, PSA, or 103-12 IE: ASB CAPITAL REAL ESTATE FUND

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

c EIN-PN <u>52-6257033 006</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>11577223.</u>
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a Name of MTIA, CCT, PSA, or 103-12 IE: MULTI-EMPLOYER PROPERTY TRUST

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

c EIN-PN <u>52-6218800 001</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>4493859.</u>
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a Name of MTIA, CCT, PSA, or 103-12 IE: LOOMIS SAYLES HIGH YIELD CONS.

b Name of sponsor of entity listed in (a): STATE STREET BANK AND TRUST CO

c EIN-PN <u>84-6391546 000</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>15241830.</u>
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a Name of MTIA, CCT, PSA, or 103-12 IE: COF OPP INV ALLOCATION PORTFOLIO

b Name of sponsor of entity listed in (a): WELLINGTON TRUST COMPANY, NA

c EIN-PN <u>04-2755549 000</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>2445417.</u>
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a Name of MTIA, CCT, PSA, or 103-12 IE: AFL-CIO EQUITY INDEX FUND

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

c EIN-PN <u>52-6257033 006</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>4232714.</u>
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For Paperwork Reduction Act Notice and OMB Control Numbers, see the instructions for Form 5500.

Schedule D (Form 5500) 2013
v. 130118

a Name of MTIA, CCT, PSA, or 103-12 IE: **RBC GAM INTERNATIONAL FUND**

b Name of sponsor of entity listed in (a): **RBC GLOBAL ASSET MANAGEMENT**

c EIN-PN 04-3405915 001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	18419349.
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a Name of MTIA, CCT, PSA, or 103-12 IE: **PRINCIPAL U.S. PROPERTY SEPARATE AC**

b Name of sponsor of entity listed in (a): **PRINCIPAL LIFE INSURANCE CO**

c EIN-PN 42-0127290 027	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	7790161.
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a Name of MTIA, CCT, PSA, or 103-12 IE: **BLACKROCK GLOBAL ALLOCATION COLLECT**

b Name of sponsor of entity listed in (a): **BLACKROCK INSTITUTIONAL TRUST COMPANY, N. A.**

c EIN-PN 94-3112180 000	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	4120881.
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a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
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a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
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a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
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a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
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a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
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a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
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Part II Information on Participating Plans (to be completed by DFEs)
(Complete as many entries as needed to report all participating plans)

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

**SCHEDULE H
(Form 5500)**

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security
Administration

Pension Benefit Guaranty Corporation

Financial Information

This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code).

► **File as an attachment to Form 5500.**

OMB No. 1210-0110

2013

**This Form is Open
to Public Inspection**

For calendar plan year 2013 or fiscal plan year beginning **10/01/2013** and ending **09/30/2014**

A Name of plan		B Three-digit plan number (PN) ►	001
NEW ORLEANS EMPLOYERS-INTERNATIONAL LONGSHOREMEN'S			
C Plan sponsor's name as shown on line 2a of Form 5500		D Employer Identification Number (EIN)	
BOARD OF TRUSTEES, NEW ORLEANS EMPLOYERS INTERNATIO		72-6023317	

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	2290588	2295670
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	636312	791023
(2) Participant contributions	1b(2)		
(3) Other SEE STATEMENT 2	1b(3)	753403	745609
c General investments:			
(1) Interest-bearing cash (incl. money market accounts & certificates of deposit)	1c(1)	4278750	5463664
(2) U.S. Government securities	1c(2)	2795205	2807100
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)	5791659	4829729
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)	48263187	48369749
(5) Partnership/joint venture interests	1c(5)	10814562	12744549
(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)	68822110	69473083
(10) Value of interest in pooled separate accounts	1c(10)	8300720	7790161
(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)	3352659	
(14) Value of funds held in insurance co. general account (unallocated contracts)	1c(14)		
(15) Other SEE STATEMENT 3	1c(15)	11989647	3867076

For Paperwork Reduction Act Notice and OMB Control Numbers, see the instructions for Form 5500

Schedule H (Form 5500) 2013
v. 130118

		(a) Beginning of Year	(b) End of Year
1 d	Employer-related investments:		
(1)	Employer securities	1d(1)	
(2)	Employer real property	1d(2)	
e	Buildings and other property used in plan operation	1e	
f	Total assets (add all amounts in lines 1a through 1e)	1f	168088802 159177413
Liabilities			
g	Benefit claims payable	1g	
h	Operating payables	1h	1063439 1074954
i	Acquisition indebtedness	1i	
j	Other liabilities	1j	11955779 3824011
SEE STATEMENT 4			
k	Total liabilities (add all amounts in lines 1g through 1j)	1k	13019218 4898965
Net Assets			
l	Net assets (subtract line 1k from line 1f)	1l	155069584 154278448

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.

		(a) Amount	(b) Total
Income			
a	Contributions:		
(1)	Received or receivable in cash from: (A) Employers	2a(1)(A)	8999644
	(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)	8999644
b	Earnings on investments:		
(1)	Interest:		
	(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	248
	(B) U.S. Government securities	2b(1)(B)	36646
	(C) Corporate debt instruments	2b(1)(C)	173775
	(D) Loans (other than to participants)	2b(1)(D)	
	(E) Participant loans	2b(1)(E)	
	(F) Other	2b(1)(F)	181904
	(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)	392573
(2)	Dividends: (A) Preferred stock	2b(2)(A)	
	(B) Common stock	2b(2)(B)	1390896
	(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)	1390896
(3)	Rents	2b(3)	
(4)	Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)	169200522
	(B) Aggregate carrying amount (see instructions)	2b(4)(B)	162976011
	(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)	6224511
(5)	Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)	
	(B) Other	2b(5)(B)	2425102
	(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)	2425102

	(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)	7254789
(7) Net investment gain (loss) from pooled separate accounts	2b(7)	866441
(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)	181293
c Other income SEE STATEMENT 5	2c	57407
d Total income. Add all income amounts in column (b) and enter total	2d	27792656

Expenses

e Benefit payment and payments to provide benefits:		
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	26816535
(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)	26816535
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)	117606
(2) Contract administrator fees	2i(2)	
(3) Investment advisory and management fees	2i(3)	1044190
(4) Other SEE STATEMENT 6	2i(4)	605461
(5) Total administrative expenses. Add lines 2i(1) through (4)	2i(5)	1767257
j Total expenses. Add all expense amounts in column (b) and enter total	2j	28583792

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k	-791136
l Transfers of assets:		
(1) To this plan	2l(1)	
(2) From this plan	2l(2)	

Part III Accountant's Opinion

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

a The attached opinion of an independent qualified public accountant for this plan is (see instructions):
 (1) Unqualified (2) Qualified (3) Disclaimer (4) Adverse

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

c Enter the name and EIN of the accountant (or accounting firm) below:
 (1) Name: **DUPLANTIER, HRAPMANN, HOGAN & MAHER** (2) EIN: **72-0567396**

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.) ...		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.)		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		3000000
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		X	

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

5 b 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)

5 c If the plan is a defined benefit plan, is it covered under the PBGC insurance program (see ERISA section 4021)? Yes No Not determined

Part V Trust Information (optional)

6a Name of trust	6b Trust's EIN

**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
2013
This Form is Open to Public Inspection

For calendar plan year 2013 or fiscal plan year beginning 10/01/2013, and ending 09/30/2014.

▶ **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 **B** Three-digit plan number (PN) ▶ 001
NEW ORLEANS EMPLOYERS-INTERNATIONAL LONGSHOREMEN'

C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF **D** Employer Identification Number (EIN)
72-6023317
BOARD OF TRUSTEES, NEW ORLEANS EMPLOYERS INTERNATIO

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

1 a Enter the valuation date: Month 10 Day 01 Year 2013

b Assets		
(1) Current value of assets	1b(1)	<u>155069584</u>
(2) Actuarial value of assets for funding standard account	1b(2)	<u>143448231</u>
c (1) Accrued liability for plan using immediate gain methods		1c(1) <u>239356230</u>
(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)	<u>239356230</u>
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)	<u>371070001</u>
(b) Expected increase in current liability due to benefits accruing during the plan year	1d(2)(b)	<u>3012980</u>
(c) Expected release from "RPA '94" current liability for the plan year	1d(2)(c)	<u>26980096</u>
(3) Expected plan disbursements for the plan year	1d(3)	<u>27730096</u>

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

SIGN HERE _____

Signature of actuary
K. ERIC FREDEN, FSA

Type or print name of actuary
THE SEGAL COMPANY

Firm name
2018 POWERS FERRY ROAD, SUITE 850
ATLANTA GA 30339-7200

Address of the firm

Date
1400553

Most recent enrollment number
678-306-3100

Telephone number (including area code)

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

For Paperwork Reduction Act Notice and OMB Control Numbers, see the instructions for Form 5500 or Form 5500-SF. Schedule MB (Form 5500) 2013 v.130118

7 New amortization bases established in the current plan year:

(1) Type of base	(2) Initial balance	(3) Amortization Charge/Credit
1	5118199	539374
4	-4622756	-487162

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 Is the plan required to provide a Schedule of Active Participant Data? (See the instructions.) If "Yes," attach 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 16353449

b Employer's normal cost for plan year as of valuation date 9b 2045134

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)	119058317	18121867
(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 2739034

e Total charges. Add lines 9a through 9d 9e 39259484

Credits to funding standard account:

f Prior year credit balance, if any 9f

g Employer contributions. Total from column (b) of line 3 9g 8999644

	Outstanding balance	
h Amortization credits as of valuation date 9h	39503767	4554219
i Interest as applicable to end of plan year on lines 9f, 9g, and 9h 9i		650929

j Full funding limitation (FFL) and credits:

(1) ERISA FFL (accrued liability FFL) 9j(1)	105299618
(2) "RPA '94" override (90% current liability FFL) 9j(2)	198701160
(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 14204792

m Credit balance: If line 9l is greater than line 9e, enter the difference 9m

n Funding deficiency: If line 9e is greater than line 9l, enter the difference 9n 25054692

9c	Current year's accumulated reconciliation account:		
(1)	Due to waived funding deficiency accumulated prior to the 2013 plan year	9c(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	9c(2)(a)	
(b)	Reconciliation amount (line 9c(3) balance minus line 9c(2)(a))	9c(2)(b)	
(3)	Total as of valuation date	9c(3)	
10	Contribution necessary to avoid an accumulated funding deficiency. (See instructions.)	10	25054692
11	Has a change been made in the actuarial assumptions for the current plan year? If "Yes," see instructions		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

**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 section 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

2013

This Form is Open to Public Inspection.

For calendar plan year 2013 or fiscal plan year beginning 10/01/2013 and ending 09/30/2014

A Name of plan
NEW ORLEANS EMPLOYERS-INTERNATIONAL LONGSHOREMEN'S

B Three-digit plan number (PN) ► 001

C Plan sponsor's name as shown on line 2a of Form 5500
BOARD OF TRUSTEES, NEW ORLEANS EMPLOYERS INTERNATIO

D Employer identification Number (EIN)
72-6023317

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

For Paperwork Reduction Act Notice and OMB Control Numbers, see the instructions for Form 5500.

Schedule R (Form 5500) 2013
v.130118

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 PORTS AMERICA LOUISIANA, LLC

b EIN 72-1053742 **c** Dollar amount contributed by employer 4034355.

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 09 Day 30 Year 2018

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 COOPER T. SMITH STEVEDORING CO, INC

b EIN 72-0319560 **c** Dollar amount contributed by employer 505707.

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 09 Day 30 Year 2015

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 CERES GULF, INC

b EIN 72-0953072 **c** Dollar amount contributed by employer 3813055.

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 09 Day 30 Year 2018

e Contribution rate information (If more than one rate applies, check this box and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: Hourly Weekly Unit of production Other (specify): _____

a Name of contributing employer _____

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

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

e Contribution rate information (If more than one rate applies, check this box and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: Hourly Weekly Unit of production Other (specify): _____

a Name of contributing employer _____

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

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

e Contribution rate information (If more than one rate applies, check this box and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: Hourly Weekly Unit of production Other (specify): _____

a Name of contributing employer _____

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

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

e Contribution rate information (If more than one rate applies, check this box and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: Hourly Weekly Unit of production Other (specify): _____

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

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

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

a The corresponding number for the plan year immediately preceding the current plan year	15a	97.80
b The corresponding number for the second preceding plan year	15b	95.20

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: 49.7 % Investment-Grade Debt: 3.1 % High-Yield Debt: 9.9 % Real Estate: 17.8 % Other: 19.5 %
- b Provide the average duration of the combined investment-grade and high-yield debt:
 0-3 years 3-6 years 6-9 years 9-12 years 12-15 years 15-18 years 18-21 years 21 years or more
- c What duration measure was used to calculate line 19(b)?
 Effective duration Macaulay duration Modified duration Other (specify):

SCHEDULE C OTHER SERVICE PROVIDER SERVICE CODES STATEMENT 1

NAME	SERVICE CODES
BLACKROCK INTERNATIONAL TRUST COMPA	21
BLACKROCK INTERNATIONAL TRUST COMPA	24
BLACKROCK INTERNATIONAL TRUST COMPA	28
BLACKROCK INTERNATIONAL TRUST COMPA	50
BLACKROCK INTERNATIONAL TRUST COMPA	51

CODES TO SCHEDULE C, LINE 2(B)

SCHEDULE H OTHER RECEIVABLES STATEMENT 2

DESCRIPTION	BEGINNING	ENDING
RECEIVABLES	753403.	745609.
TOTAL TO SCHEDULE H, LINE 1B(3)	753403.	745609.

SCHEDULE H OTHER GENERAL INVESTMENTS STATEMENT 3

DESCRIPTION	BEGINNING	ENDING
PREPAID INSURANCE, TAXES AND OTHER A COLLATERAL HELD UNDER SECURITIES LEN	33868. 11955779.	43065. 3824011.
TOTAL TO SCHEDULE H, LINE 1C(15)	11989647.	3867076.

SCHEDULE H OTHER PLAN LIABILITIES STATEMENT 4

DESCRIPTION	BEGINNING	ENDING
OBLIGATIONS UNDER SECURITIES LENDING	11955779.	3824011.
TOTAL TO SCHEDULE H, LINE 1J	11955779.	3824011.

SCHEDULE H	OTHER INCOME	STATEMENT	5
DESCRIPTION		AMOUNT	
COMMISSIONS RECAPTURE		8933.	
SECURITIES LENDING		10074.	
LITIGATION INCOME		38400.	
TOTAL TO SCHEDULE H, LINE 2C		57407.	

SCHEDULE H	OTHER ADMINISTRATIVE EXPENSES	STATEMENT	6
DESCRIPTION		AMOUNT	
OTHER ADMINISTRATIVE EXPENSES		605461.	
TOTAL TO SCHEDULE H, LINE 2I(4)		605461.	

REPORT
NEW ORLEANS EMPLOYERS -
INTERNATIONAL LONGSHOREMEN'S ASSOCIATION,
AFL-CIO
PENSION FUND

SEPTEMBER 30, 2014 AND 2013

NEW ORLEANS EMPLOYERS -
INTERNATIONAL LONGSHOREMEN'S ASSOCIATION, AFL-CIO
PENSION FUND

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SEPTEMBER 30, 2014 AND 2013

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DUPLANTIER, HRAPMANN,
HOGAN & MAHER, L.L.P.

CERTIFIED PUBLIC ACCOUNTANTS

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CLIFFORD J. GIFFIN, Jr., CPA

A.J. DUPLANTIER JR, C.P.A. (1919-1985)
FELIX J. HRAPMANN, JR, C.P.A. (1919-1990)
WILLIAM R. HOGAN, JR., CPA (1920-1996)
JAMES MAHER, JR, C.P.A. (1921-1999)

INDEPENDENT AUDITOR'S REPORT

March 20, 2015

Board of Trustees
New Orleans Employers -
International Longshoremen's Association - Pension Fund
New Orleans, Louisiana

We have audited the accompanying financial statements of the New Orleans Employers – International Longshoremen’s Association, AFL-CIO Pension Fund (the Fund), which comprise the statements of net assets available for benefits as of September 30, 2014 and 2013, and the related statements of changes in net assets available for benefits for the years then ended, and the related notes to the financial statements.

Management’s Responsibility for the Financial Statements

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

Auditor’s Responsibility

Our responsibility is to express an opinion on these financial statements based on 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 audit to obtain reasonable assurance about whether the financial statements are free of material misstatement.

1615 Poydras Street, Suite 2100 • New Orleans, LA 70112 • (504) 586-8866 • Fax (504) 525-5888
1670 Old Spanish Trail • Slidell, LA 70458 • (985) 649-9996 • Fax (985) 649-9940
247 Corporate Drive • Houma, LA 70360 • (985) 868-2630 • Fax (985) 872-3833
5047 Highway 1, P. O. Box 830 • Napoleonville, LA 70390 • (985) 369-6003 • Fax (985) 369-9941
www.dhmcpa.com

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 management, as well as evaluating the overall presentation of the financial statements.

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

Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial status of the New Orleans Employers – International Longshoremen's Association, AFL-CIO Pension Fund as of September 30, 2014 and 2013, and the changes in its financial status for the years then ended in accordance with accounting principles generally accepted in the United States of America.

Report on Supplemental Information

Our audits were conducted for the purpose of forming an opinion on the financial statements as a whole. The supplemental schedules included in pages 32 - 34, are presented for the purpose of additional analysis and are not a required part of the financial statements but are supplemental information. The supplemental schedule of assets (held at the end of the year), on pages 35 – 46 and the schedule of assets (acquired and disposed of within year) on page 47 referred to as "supplementary information," is presented for the purpose of additional analysis and is not a required part of the financial statements but is supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974. Such information is the responsibility of the Plan's management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the 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.

Duplantier, Hrapmann, Hogan & Maher, LLP

New Orleans, Louisiana

NEW ORLEANS EMPLOYERS -
INTERNATIONAL LONGSHOREMEN'S ASSOCIATION, AFL-CIO
PENSION FUND
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
SEPTEMBER 30, 2014 AND 2013

	<u>2014</u>	<u>2013</u>
ASSETS:		
Cash and cash equivalents	\$ 7,759,334	\$ 6,569,338
Investments, at fair value:		
U.S. Government securities	2,807,100	2,795,205
Foreign securities	438,593	529,757
Common collective trusts	69,473,083	72,174,769
Corporate bonds, notes and debentures	4,829,729	5,791,659
Common stock	47,931,156	47,733,430
Limited partnerships	12,744,549	10,814,562
Pooled investment funds	7,790,161	8,300,720
	<u>146,014,371</u>	<u>148,140,102</u>
Receivables:		
Interest	45,424	60,636
Dividends	39,827	44,914
Employer contributions	791,023	636,312
Due from brokers for sales of securities	585,358	572,745
Due from other funds	75,000	75,108
	<u>1,536,632</u>	<u>1,389,715</u>
OTHER:		
Collateral held under securities lending program	3,824,011	11,955,779
Prepaid insurance, taxes and other assets	43,065	33,868
	<u>3,867,076</u>	<u>11,989,647</u>
 Total assets	 <u>159,177,413</u>	 <u>168,088,802</u>
LIABILITIES:		
Obligations under securities lending program	3,824,011	11,955,779
Due to other funds	65,001	56,328
Due to MILA	510,232	429,751
Accounts payable	192,512	196,469
Accrued pension benefits	-	20,140
Due to brokers for purchase of securities	307,209	360,751
Total liabilities	<u>4,898,965</u>	<u>13,019,218</u>
 NET ASSETS AVAILABLE FOR BENEFITS	 <u>\$ 154,278,448</u>	 <u>\$ 155,069,584</u>

See accompanying notes.

NEW ORLEANS EMPLOYERS -
INTERNATIONAL LONGSHOREMEN'S ASSOCIATION, AFL-CIO
PENSION FUND
STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
FOR THE YEARS ENDED SEPTEMBER 30, 2014 AND 2013

	<u>2014</u>	<u>2013</u>
Employer Contributions - Regular	\$ 8,998,617	\$ 8,661,222
Penalty and Interest Income	1,027	1,442
Total contributions	<u>8,999,644</u>	<u>8,662,664</u>
Investment income:		
Net appreciation (depreciation) in fair value of investments:		
U.S. Government securities	2,402,884	5,673,642
Foreign securities	15,475	(14,526)
Common collective trusts	6,674,648	8,800,522
Corporate bonds, notes and debentures	354,956	(362,026)
Common stock	5,917,885	3,389,522
Limited partnerships	719,847	1,192,670
Pooled investment funds	866,441	932,451
Interest	392,573	818,387
Dividends	1,390,896	977,321
Commissions recapture	8,933	10,875
Securities lending	10,074	19,292
Litigation income	38,400	44,585
	<u>18,793,012</u>	<u>21,482,715</u>
Less: Investment expenses	1,044,190	922,722
Net investment gain	<u>17,748,822</u>	<u>20,559,993</u>
Total	<u>26,748,466</u>	<u>29,222,657</u>
Pension benefit payments to participants	26,816,535	27,754,170
Administrative expenses	723,067	743,358
Total	<u>27,539,602</u>	<u>28,497,528</u>
CHANGE IN NET ASSETS	(791,136)	725,129
NET ASSETS AVAILABLE FOR BENEFITS:		
Beginning of year	<u>155,069,584</u>	<u>154,344,455</u>
END OF YEAR	<u>\$ 154,278,448</u>	<u>\$ 155,069,584</u>

See accompanying notes.

NEW ORLEANS EMPLOYERS -
INTERNATIONAL LONGSHOREMEN'S ASSOCIATION, AFL-CIO
PENSION FUND
NOTES TO FINANCIAL STATEMENTS
SEPTEMBER 30, 2014 AND 2013

I. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES:

Basis of Accounting

The financial statements of the Pension Fund (the Plan) have been prepared on the accrual basis. The financial operations of the Plan are reflected in the financial statements of the Pension Fund.

Valuation of Investments

Investments are carried at fair value. Investments traded on a national exchange are valued at the last reported sales price. Shares in common collective trust and pooled investment funds are reported at net asset value. The change in net unrealized appreciation (depreciation) in fair value of such investments is included in investment income. Gains and losses on investments that were both bought and sold during the year are included in net appreciation (depreciation) in fair value.

Actuarial Present Value of Accumulated Plan Benefits

Accumulated plan benefits are those future periodic payments that are attributable under the provisions of the New Orleans Employers – International Longshoremen's Association, AFL-CIO Pension Fund (the Plan), to the service that employees have rendered. Accumulated plan benefits include benefits expected to be paid to: (a) retired or terminated vested employees or their beneficiaries, (b) beneficiaries of vested employees who have died, and (c) present vested employees or their beneficiaries. The financial statements present Plan benefits based on the benefit schedule, which was in effect at September 30, 2014 and 2013, respectively. Benefits are payable under all circumstances; retirement, death and disability, and are included in accumulated plan benefits, to the extent they are deemed attributable to employee services rendered to the valuation date.

Contributions

The Plan records contributions as reported by the employers. Employer contributions are based upon man-hours worked by International Longshoremen's Association bargaining unit labor and upon the rates established by collective bargaining agreements among the New Orleans Steamship Association, its successor, MidGulf Association of Stevedores, Inc., other signatory employers, and the local unions. Contributions received are allocated between the eligible Funds (Pension, Welfare and Vacation and Holiday) at the discretion of the Board of Trustees (the Board), pursuant to the collective bargaining agreements. In 2014 and 2013, \$5.00 per hour worked was allocated to the Management-ILA Managed Health Care Trust Fund (MILA) in accordance with the Master Contract between the United States Maritime Alliance and the International Longshoremen's Association, AFL-CIO (ILA).

NEW ORLEANS EMPLOYERS -
INTERNATIONAL LONGSHOREMEN'S ASSOCIATION, AFL-CIO
PENSION FUND
NOTES TO FINANCIAL STATEMENTS
SEPTEMBER 30, 2014 AND 2013

1. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES: (Continued)

Contributions (Continued)

In 2014, contributions from 3 of 19 total employers accounted for approximately 88% of total contributions to the Funds. In 2013, contributions from 3 of 19 total employers accounted for 89% of the total contributions to the Funds. Contributions from the single largest contributing employer accounted for approximately 42% and 43% of total contributions to the Funds in 2014 and 2013, respectively.

All hourly contributions were allocated to the Pension Fund by the Board in 2014 and 2013 with the exception of the \$5.00 per hour MILA contribution rate.

Pension Benefit Payments

Pension benefit payments to participants are recorded upon distribution.

Vesting

Plan participants vest after 5 years of creditable employment.

Expenses

Indirect expenses incurred in the administration of the Plan and other funds administered by the Board are paid through the Director's Operating Account and are allocated to the funds as described below. Expenses directly related to a specific fund are also paid through the Director's Operating Account and are charged to such fund. Investment expenses amounted to \$1,044,190 and \$922,722 in 2014 and 2013, respectively. Expenses not directly related to a specific fund are allocated to the funds based upon each employee's time attributable to each fund, as approved by the Board of Trustees. It is believed that the current allocation of staff and administrative expenses achieve the desired result of a meaningful allocation of expenses. The indirect expense allocation was changed from 50% to 52% effective October 1, 2011. Indirect expenses totaled \$479,199 and \$492,760 for the years ended September 30, 2014 and 2013, respectively.

Use of Estimates

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

NEW ORLEANS EMPLOYERS -
INTERNATIONAL LONGSHOREMEN'S ASSOCIATION, AFL-CIO
PENSION FUND
NOTES TO FINANCIAL STATEMENTS
SEPTEMBER 30, 2014 AND 2013

2. PLAN DESCRIPTION:

The following brief description of the Plan is provided for general information purposes only. Participants should refer to the Plan Document for more complete information.

The Plan was established under the terms of an Agreement and Declaration of Trust dated May 10, 1957, as amended, between the New Orleans Steamship Association, its successor, MidGulf Association of Stevedores, Inc., and various local unions of the ILA. The Plan is administered by the Board which also administers a Welfare Plan, and a Vacation and Holiday Plan, which were also created under the agreement identified above.

The Plan is a noncontributory defined benefit plan which provides normal retirement, disability and early retirement pension benefits. The Plan also provides pre-retirement and post-retirement death benefits to qualified surviving spouses and beneficiaries of deceased participants. Qualified employee participants consist principally of employees who are employed for 500 hours or more in the industry during a labor contract year and are covered by collective bargaining agreements between various local unions of the ILA, the New Orleans Steamship Association, its successor, MidGulf Association of Stevedores, Inc. and other employers.

The Plan is funded principally by investment income and employer contributions which are based upon man-hours worked. Pension plan funding anticipates that both net contributions (less administrative expenses) and net investment earnings (less investment fees) will be needed to cover benefit payments. The Plan is to continue for a term co-extensive with the terms of the collective bargaining agreements and the Agreement and Declaration of Trust, provided that provisions authorizing continuation of the Plan are contained therein. If the Plan is not extended, the Board shall continue to perform and carry out the provisions of the Plan on the basis that all employees who become thereafter eligible to receive benefits in accordance with the provisions of the Plan shall receive such benefits as if the Plan were extended until the total assets of the Fund are disbursed.

The Board is of the opinion that the Plan complies with the requirements of the Employee Retirement Income Security Act of 1974 (ERISA).

Participants in the Plan as of the date of the actuarial valuations October 1, 2013 and 2012 were as follows:

	<u>2013</u>	<u>2012</u>
Current retirees and beneficiaries	2,557	2,637
Inactive participants with vested rights	209	207
Active participants	<u>608</u>	<u>615</u>
Total participants as of the valuation date	<u>3,374</u>	<u>3,459</u>

NEW ORLEANS EMPLOYERS -
INTERNATIONAL LONGSHOREMEN'S ASSOCIATION, AFL-CIO
PENSION FUND
NOTES TO FINANCIAL STATEMENTS
SEPTEMBER 30, 2014 AND 2013

3. ACCUMULATED PLAN BENEFITS:

The actuarial present value of accumulated plan benefits was determined by consulting actuaries The Segal Company as of October 1 2013 and 2012, the most recent valuation dates. Such amounts result from applying actuarial assumptions to adjust the accumulated plan benefits to reflect the time value of money (through discounts for interest) and the probability of payment (by means of decrements such as for death, disability, withdrawal or retirement) between the valuation date and the expected date of payment.

Accumulated plan benefits at October 1, 2013 and 2012, the most recent valuation dates, were as follows:

	<u>2013</u>	<u>2012</u>
Actuarial present value of accumulated plan benefits:		
Vested benefits:		
Participants currently receiving benefits	\$ 204,861,567	\$ 215,212,264
Other participants	<u>33,156,505</u>	<u>35,137,040</u>
	238,018,072	250,349,304
Non-vested benefits	<u>1,338,158</u>	<u>1,533,223</u>
Total actuarial present value of accumulated plan benefits	<u>\$ 239,356,230</u>	<u>\$ 251,882,527</u>

Changes in accumulated plan benefits during 2013 and 2012, the most recent actuarial valuation dates, and their effect on accumulated plan benefits are as follows:

	<u>2013</u>	<u>2012</u>
Actuarial present value of accumulated plan benefits, beginning of year	\$ <u>251,882,527</u>	\$ <u>259,230,694</u>
Increase (decrease) during the year attributable to:		
Benefits paid	(27,754,170)	(28,574,518)
Interest	17,763,676	18,281,462
Increase during the period attributable to latest participant data and experience	2,086,953	2,944,889
Increase in benefits attributable to changes in actuarial assumptions	<u>(4,622,756)</u>	<u>---</u>
Net change	<u>(12,526,297)</u>	<u>(7,348,167)</u>
Actuarial present value of accumulated plan benefits, end of year	<u>\$ 239,356,230</u>	<u>\$ 251,882,527</u>

NEW ORLEANS EMPLOYERS -
INTERNATIONAL LONGSHOREMEN'S ASSOCIATION, AFL-CIO
PENSION FUND
NOTES TO FINANCIAL STATEMENTS
SEPTEMBER 30, 2014 AND 2013

3. ACCUMULATED PLAN BENEFITS: (Continued)

	<u>Net Assets Available for Benefits</u>	
	<u>September 30, 2013</u>	<u>September 30, 2012</u>
Investments	\$ 154,709,440	\$ 154,054,742
Receivables	1,389,715	1,687,138
Other	33,868	49,345
Liabilities	<u>(1,063,439)</u>	<u>(1,446,770)</u>
Net Assets	<u>\$ 155,069,584</u>	<u>\$ 154,344,455</u>

	<u>Changes in</u> <u>Net Assets Available for Benefits</u>	
	<u>September 30, 2013</u>	<u>September 30, 2012</u>
Contributions (net)	\$ 8,662,664	\$ 9,354,539
Investment gain (loss), net	20,559,993	24,171,085
Other income	-	2,726
Other expenses:		
Benefits paid	(27,754,170)	(28,574,518)
Administrative expenses	<u>(743,358)</u>	<u>(729,245)</u>
Change in net assets	725,129	4,224,587
Net assets:		
Beginning	<u>154,344,455</u>	<u>150,119,868</u>
Ending	<u>\$ 155,069,584</u>	<u>\$ 154,344,455</u>

The actuarial information is presented as of the beginning of the plan year and represents the most current information available. This is in accordance with Financial Accounting Standards on Accounting and Reporting by Defined Benefit Pension Plans.

The actuarial method and significant actuarial assumptions used in the valuation as of September 30, 2013 was as follows:

NEW ORLEANS EMPLOYERS -
INTERNATIONAL LONGSHOREMEN'S ASSOCIATION, AFL-CIO
PENSION FUND
NOTES TO FINANCIAL STATEMENTS
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3. ACCUMULATED PLAN BENEFITS: (Continued)

Significant actuarial assumptions:

2013

Actuarial Cost Method	Unit Credit Actuarial Cost Method			
Interest Rates (Net Investment Return)	7.5%, net of expenses			
Actuarial Value of Assets	Market value of assets less unrecognized returns in each of the last five years. Unrecognized return is the expected asset gain or loss on a market value basis and is recognized over the five year period. Finally, an additional adjustment (if necessary) is made so that the final actuarial value of assets is within a 20% corridor of market value.			
Retirement Rates	<u>Age</u>	<u>Retirement Rates</u>	<u>Age</u>	<u>Retirement Rates</u>
	51-59	2%	63-64	15%
	60	8%	65-70	50%
	61	13%	71	100%
	62	35%		
Age of Spouse	Spouses are assumed to be 3 years younger than participants.			
Percent Married	It is assumed that 66.67% of the active members will have eligible spouses when they retire.			
Mortality Rates	Healthy: 1990 U.S. Life Table, sex-distinct Disabled: 1990 U.S. Life Table, sex-distinct, set forward three years			

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

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3. ACCUMULATED PLAN BENEFITS: (Continued)

The following plan changes were included in the Preferred Schedule of the Rehabilitation Plan signed April 22, 2009, and adopted in Amendment No. 67 on September 30, 2009:

- 1) Changed unreduced retirement with 30 years of creditable employment to a 4% per year early retirement reduction for each year the participant is below age 62 for participants who commence benefits after October 1, 2009.
- 2) Eliminated the 30% and 20% supplemental benefit payable from retirement until age 62 for participants who commence benefits after October 1, 2009.
- 3) Eliminated subsidies in the pre-retirement 50% survivor benefit for terminated vested participants with spouse as beneficiary for benefits commencing after October 1, 2009.
- 4) Eliminated subsidies in the post-retirement 50% joint and survivor benefit for active and terminated vested participants with spouse as beneficiary for benefits commencing after October 1, 2009.
- 5) Eliminated the pre-retirement lump sum estate death benefit to the extent it exceeds the amount that may be distributed without consent under IRC 411(a)(11) effective January 26, 2009.

The calculations of the present value of all future benefits and of benefits to be funded by future contributions, which are used for funding purposes, were also made by consulting actuaries The Segal Company as of October 1, 2013 and 2012 as follows:

	<u>2013</u>	<u>2012</u>
Present value of all future benefits	\$ <u>239,356,230</u>	\$ <u>251,882,527</u>
Present value of benefits to be funded by future contributions	\$ <u>95,907,999</u>	\$ <u>95,014,747</u>

As of October 1, 2013 and 2012, using The Segal Company's mortality assumptions, the actuarial present value of vested Plan benefits for withdrawal liability purposes is as follows:

	<u>2013</u>	<u>2012</u>
Withdrawal liability	\$ 290,037,908	\$ 301,213,834
Market value of assets	<u>(155,069,584)</u>	<u>(154,344,455)</u>
Unfunded present value of vested benefits	\$ <u>134,968,324</u>	\$ <u>146,869,379</u>

NEW ORLEANS EMPLOYERS -
INTERNATIONAL LONGSHOREMEN'S ASSOCIATION, AFL-CIO
PENSION FUND
NOTES TO FINANCIAL STATEMENTS
SEPTEMBER 30, 2014 AND 2013

3. ACCUMULATED PLAN BENEFITS: (Continued)

The major assumptions used in the valuation of the current year's unfunded present value of vested benefits for withdrawal liability purposes by The Segal Company are as follows:

Interest:	For liabilities up to market value of assets, 2.60% for 20 years and 3.43% beyond. For liabilities in excess of market value of assets, same as used for Plan funding.
Administrative Expenses:	Calculated as prescribed by PBGC formula (29 CFR Part 4044, Appendix C); not applicable to those liabilities determined using funding interest rates.
Mortality:	Same as used for Plan funding.
Retirement Rates:	Same as used for Plan funding.

For purposes of withdrawal liability, these actuarial assumptions and methods, in the aggregate, are reasonable (taking into account the experience of the Plan and reasonable expectations) and which, in combination, offer the actuary's best estimate of anticipated experience under the Plan.

4. PLAN TERMINATION:

In the event the Plan terminates, the net assets of the Plan will be allocated, as prescribed by ERISA and its related regulations. Certain benefits under the Plan are insured by the PBGC if the Plan terminates. Only vested benefits are guaranteed. Specifically, the PBGC guarantees a monthly benefit payment equal to 100% of the first \$11 of the Plan's monthly benefit accrual rate, plus 75% of the next \$33 of the accrual rate, times each year of credited service. At September 30, 2014, the maximum guaranteed benefits insured by PBGC for multi-employer plans was \$35.75 per month times the participant's years of credited service.

Federal law has a number of special rules that apply to financially troubled multi-employer plans. Under so-called "plan reorganization rules," a plan with adverse financial experience may need to increase required contributions and may, under certain circumstances, reduce benefits that are not eligible for the PBGC's guarantee. If the Plan is in reorganization status, it must provide notification that the plan is in reorganization status and that, if contributions are not increased, accrued benefits under the plan may be reduced or an excise tax may be imposed.

An insolvent plan must reduce benefit payments to the highest level that can be paid from the plan's available financial resources.

NEW ORLEANS EMPLOYERS -
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5. CASH AND CASH EQUIVALENTS:

The following is a detail of the Fund's deposits and cash equivalents as of September 30, 2014 and 2013:

	<u>2014</u>	<u>2013</u>
Demand deposits (book balances)	\$ <u>2,295,670</u>	\$ <u>2,290,588</u>
Cash equivalents:		
Collective short-term investments	5,204,622	4,047,478
Interest in securities held by an agent of the Fund in the name of the agent	<u>259,042</u>	<u>231,272</u>
Total cash equivalents	<u>5,463,657</u>	<u>4,278,750</u>
Total cash and cash equivalents	\$ <u>7,759,334</u>	\$ <u>6,569,338</u>

Cash:

The balances in interest-bearing and noninterest-bearing accounts are insured by the Federal Deposit Insurance Corporation (FDIC) up to \$250,000 per insured bank through December 31, 2014. Due to the nature of the Fund issuing monthly pension checks there are days each month that the bank balance exceeds the FDIC limit.

Cash Equivalents:

The Fund, specifically the NOE-ILA Unallocated Contribution Account, entered into a Repurchase Agreement with First NBC Bank (the Bank). The agreement allows the Bank, on a daily basis, to automatically transfer and invest excess funds from a specified account maintained by the Fund with the Bank to a certain sale and repurchase transaction, having a one-day maturity, involving the Bank's interest in certain securities (the Securities) issued by the United States Government or agencies thereof. The Bank is a custodian of the Fund and at all times maintains possession of the underlying investments. The repurchase transaction is not insured by the FDIC, is not a deposit of the bank and is subject to investment risk including possible loss of the principal amount invested. Should the Bank refuse, decline or otherwise fail to repurchase those Securities, such default will give rise to an immediate cause of action in favor of the Fund against the Bank (i) for specific performance by the Bank of its agreement to repurchase the Securities or (ii) for such reasonable reliance damages as a court of competent jurisdiction may award.

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6. INVESTMENTS:

As of September 30, 2014, the Plan's investments are held in fourteen separate custodial trust funds and an account used to disburse benefit payments. The following table presents the cost and fair values of investments as of September 30, 2014 and 2013.

	<u>2014</u>		<u>2013</u>	
	<u>Cost</u>	<u>Fair Value</u>	<u>Cost</u>	<u>Fair Value</u>
Investments, at fair value, as determined by quoted market price:				
U.S. Government	\$ 2,812,179	\$ 2,807,100	\$ 2,825,072	\$ 2,795,205
Foreign securities	437,644	438,593	534,245	529,757
Common collective trusts	49,484,087	69,473,083	51,572,239	72,174,769
Corporate bonds, notes and debentures	4,865,178	4,829,729	5,804,909	5,791,659
Common stock	38,595,434	47,931,156	38,401,589	47,733,430
Limited partnership	11,073,323	12,744,549	9,954,855	10,814,562
Pooled investment funds	<u>4,999,425</u>	<u>7,790,161</u>	<u>6,376,425</u>	<u>8,300,720</u>
	<u>\$ 112,267,270</u>	<u>\$ 146,014,371</u>	<u>\$ 118,600,034</u>	<u>\$ 146,126,062</u>

The above table includes investments classified as securities on loan at September 30, 2014 and 2013. These investments are described in footnote 11.

The fair value of individual investments that represent 5 percent or more of the Fund's net assets as of September 30, 2014 and 2013 are as follows:

	<u>2014</u>	<u>2013</u>
Common collective trusts:		
ASB Capital Real Estate Fund	\$ 11,577,223	\$ 12,313,843
Loomis High Yield Conservative Trust	15,241,830	15,862,809
RBC Global Asset Management	18,419,349	18,363,571
Principal	7,790,161	8,300,720

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6. INVESTMENTS: (Continued)

Net appreciation in the fair value of investments during the years ended September 30, 2014 and 2013, (including investments bought and sold, as well as those held at the end of the year) is summarized as follows:

	<u>2014</u>	<u>2013</u>
Net appreciation (depreciation) in fair value of investments, as determined by quoted market price:		
U.S. Government securities	\$ 102,253	\$ (107,094)
Common collective trusts	2,750,768	6,847,812
Corporate bonds, notes and debentures	354,956	(362,026)
Common stock	5,917,885	3,389,522
Foreign stock	15,475	(14,526)
Limited partnerships	719,847	1,192,670
Pooled investment funds	<u>866,441</u>	<u>934,042</u>
	10,727,625	11,880,400
Net realized gains	<u>6,224,511</u>	<u>7,731,855</u>
Net appreciation in fair value of investments	<u>\$ 16,952,136</u>	<u>\$ 19,612,255</u>

The Pension Fund is invested in certain funds that calculate net asset value per share. These investments do not have a readily determinable fair value (i.e., shares of these investments are not actively traded in financial markets) and are in investment companies or similar entities that report their investment assets at fair value. These investments are generally categorized as common collective trusts, limited partnerships, mutual funds and pooled investment funds. There are no outstanding commitments on these aforementioned investments.

The following summarizes the investment strategy of the entities above that calculate net asset value per share, as well as the terms and conditions under which the investments may be redeemed.

Common Collective Trusts:

Amalgamated Bank – Longview Ultra Construction Loan Investment Fund

The Longview Ultra Construction Loan Investment Fund (the Fund) was established to invest the pooled contributions of eligible trusts principally in real estate construction loans which are secured by properties constructed with union labor. All loans made by the Fund have an initially approved exit strategy, including, but not limited to, a permanent take-out commitment or acceptable alternative.

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6. INVESTMENTS: (Continued)

Amalgamated Bank – Longview Ultra Construction Loan Investment Fund (Continued)

Construction loan and real estate investments are typically less liquid than many investment alternatives. Accordingly, the plan documents specify that any request for withdrawal from the Fund must be received by the Trustee at least one year prior to the date that such withdrawal would be made. However, the Trustee reserves the right to pay such withdrawal at an earlier or later date as conditions warrant. A request for full redemption was submitted by the Board of Trustees on February 24, 2010.

The fund experienced a net gain for the years ended September 30, 2014 and 2013 in the amount of \$237,054 and \$334,616 respectively.

The fair market value of the fund was \$3,468,380 and \$3,614,140 at September 30, 2014 and 2013, respectively.

ASB – Allegiance Real Estate Fund

The ASB Allegiance Real Estate Fund (the Fund) was established to provide employee benefit plans access to systematic investment in real property on a commingled basis with other such plans. The Investment Manager for the Fund is ASB Capital Management, LLC, an SEC registered investment advisor. Chevy Chase Trust Company is the Trustee for the Fund. Real Estate Investments of the Fund may consist of debt or equity interests of any kind in or relating to real property as the Trustee may in its discretion select, including, but not limited to: (1) interests in limited partnerships or other entity forms which invest in real property; (2) loans or debt obligations secured by mortgages or other interests in real property; (3) mortgages on the fee, leasehold or other interests in real property; or (4) equity interests or equity participation in improved or unimproved real property, either in the form of direct ownership, or other forms of interest in the entity owning or developing such real property. Real estate investments are typically less liquid than many investment alternatives. In accordance with the Fund's policy, outstanding withdrawals will be honored as soon as practical on a valuation date following the Trustees receipt of written notice. Payment may be made in cash, ratably in-kind, a combination of ratably in-kind and cash, or any other manner consistent with applicable law in the state of Maryland.

In the discretion of the Chevy Chase Trust Company, withdrawal payments may be made in cash, ratably in-kind, a combination of cash and ratably in-kind, or in any other manner consistent with applicable law.

The fund experienced a net gain for the years ended September 30, 2014 and 2013 in the amount of \$1,411,382 and \$1,503,742 respectively.

The fair market value of the fund was \$11,578,883 and \$12,315,498 at September 30, 2014 and 2013, respectively.

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6. INVESTMENTS: (Continued)

Loomis Sayles High Yield Conservative Trust

The Loomis Sayles Trust Company, LLC Collective Trust for Employee Benefit Plans (the "Collective Trust") is divided into separate investment portfolios, one of which is the Loomis Sayles High Yield Conservative Trust (the "Trust"). The Trust is a separate pool of assets constituting, in effect, a separate trust with its own investment objective and policies. Loomis Sayles & Company, L.P. is the sole member of Loomis Sayles Trust Company, LLC (the "Trustee"). The Trust's investment objective is high total investment return through investment in fixed income securities.

Unless otherwise requested by a Participating Trust or otherwise required by the circumstances, the Trustee shall use reasonable efforts to effect withdrawals in cash. Notwithstanding the foregoing, the Trustee, in its sole discretion, may (i) effect withdrawals in cash, ratably in kind, a combination of cash and ratably in kind, or in any other manner as the Trustee shall determine to be appropriate and in the best interest of the Participating Trusts and consistent with applicable law, and (ii) determine that distributions to different Participating Trusts as of the same Valuation Date may be composed of different proportions of cash and non-cash assets.

The fund experienced a net gain for the years ended September 30, 2014 and 2013 in the amount of \$1,427,021 and \$1,379,505 respectively.

The fair market value of the fund was \$15,241,834 and \$15,862,814 at September 30, 2014 and 2013, respectively.

New Tower Trust Company Multi-Employer Property Trust

The New Tower Trust Company Multi-Employer Property Trust (the Trust) is an open-ended, comingled real estate fund, established as a means for the collective investment in real estate loans and properties by funds of retirement, pension, profit sharing, and other organizations that are exempt from federal taxes. The Trust is managed by New Tower Trust Company.

No participant shall be withdrawn from the Trust, in whole or in part, unless an irrevocable written request for or notice of intention of taking such action shall have been given the trustee one year prior to the valuation date upon which any such partial or complete withdrawal is to be effected. Participations withdrawn in whole or in part may, at the discretion of the trustee, be satisfied by distribution from the Trust in cash or ratably in kind, or partly in cash and partly ratably in kind.

The fund experienced a net gain for the years ended September 30, 2014 and 2013 in the amount of \$531,040 and \$392,952, respectively.

The fair market value of the fund was \$4,498,624 and \$4,831,583 at September 30, 2014 and 2013, respectively.

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6. INVESTMENTS: (Continued)

Rothschild Small-Cap Trust

The Rothschild Small-Cap Trust's (the Trust) investment objective is to achieve long-term capital appreciation by investing in a portfolio of small-capitalization companies, defined as companies whose market capitalizations fall within the range of the Russell 2000® index at the time of purchase. The Trust invests at least 95% of its assets in equities and the remainder may be invested in fixed income securities, repurchase agreements, exchange-traded funds, and money market securities.

The Trust shall be required at such times as may be permitted by The Northern Trust Company (the Custodial Trustee) at the direction of Rothschild Asset Management, Inc. (the Investment Manager) to redeem, effective as of the last day of any given month, all or any part of the Capital Account of each Beneficial Owner as such Beneficial Owner shall request in writing not less than 10 business days prior to the end of any month, less reserves determined in good faith by the Investment Manager; provided that, if the redemption is not a complete redemption, the Capital Account of such Beneficial Owner will, immediately following such redemption equal at least \$1,000,000. Payment of the redemption price shall be made in cash or, if so directed by the Investment Manager, other property.

The fund experienced a net gain for the years ended September 30, 2014 and 2013 in the amount of \$491,903 and \$1,414,209, respectively.

The fair market value of the fund was \$5,473,435 and \$6,056,361 at September 30, 2014 and 2013, respectively.

Wellington – CIP Opportunistic Investment Allocation Portfolio

The Wellington Trust Company, National Association ("Wellington Trust" or "Management"), CIF Opportunistic Investment Allocation Portfolio (the "Fund") is an unconstrained, non-benchmark oriented investment approach. A benchmark consisting of 65% MSCI All Country World Index/35% Barclays Capital Aggregate Index will be used as the primary reference benchmark.

The Fund may invest in other Wellington Trust Collective Investment Funds and Common Trust Funds (the "Underlying Funds") if consistent with the Fund's investment objective and policies. In some cases, investment by the Fund into an Underlying Fund is an inherent part of the structure of the investment approach. At other times, a portfolio manager may invest in an Underlying Fund to achieve a particular investment exposure.

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6. INVESTMENTS: (Continued)

Wellington – CIP Opportunistic Investment Allocation Portfolio (Continued)

Investments in Underlying Funds are governed by the investment guidelines for that fund. At August 31, 2010, the Fund invested in the CIF Opportunistic Equity Portfolio. The investment objective of the CIF Opportunistic Equity Portfolio is an unconstrained, nonbenchmark oriented investment approach. 65% MSCI All Country World Index/35% Barclay's Capital Aggregate Index will be used as the primary reference benchmark.

Some Wellington Trust commingled funds accept regular contributions and withdrawals only on the first business day of each month or quarter, while others process these transactions daily. For monthly valued funds, notification of a contribution or withdrawal must generally be received by the 22nd calendar day of the preceding month, though some funds require up to 90 days' prior notice. For funds that accept contributions and withdrawals only quarterly, notification of a contribution or withdrawal must generally be received at least 45 calendar days prior to the relevant calendar quarter-end. Wellington Trust may require a longer notice period or delay payment of a withdrawal request for any commingled fund if they determine that these actions are in the best interest of the fund.

The fund experienced a net gain for the years ended September 30, 2014 and 2013 in the amount of \$181,643 and \$210,033, respectively.

The fair market value of the fund was \$3,945,424 and \$3,015,025 at September 30, 2014 and 2013, respectively.

AFL-CIO Equity Index Fund

The AFL-CIO Equity Index Fund is a collective investment fund for qualifying employee benefit plans. More specifically, the Fund was established solely for the benefit of certain plans, which cover: (i) members of unions and other organizations that are affiliated with the AFL-CIO; (ii) members of other labor organizations; or (iii) employees of all these entities. Chevy Chase Trust Company and ASB Capital Management, LLC are the sole trustee ("Trustee") and the investment adviser of the Fund, respectively. It is the investment objective of the Index Fund to as nearly as practical replicate the performance of the Standard and Poor's 500 Index, a widely recognized index of common stocks, by the purchase and sale of such equities which compose the S&P 500 Index.

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6. INVESTMENTS: (Continued)

AFL-CIO Equity Index Fund (Continued)

Purchases and redemptions of units are transacted at the net asset value per unit determined as of each daily valuation date. Admissions and withdrawals shall be effected upon the written request to the Trustee by the Trustees of a Participating Trust or a duly authorized TPA pursuant to the Investment Manager's Participation Agreement with a Participating Trust. Such admission or withdrawal shall take place on the same day as the request or on the next following Valuation Date unless a later Valuation Date is requested in writing by the Participating Trust.

The fund experienced a net gain for the years ended September 30, 2014 and 2013 in the amount of \$855,503 and \$1,033,117, respectively.

The fair market value of the fund was \$4,232,714 and \$4,793,211 at September 30, 2014 and 2013, respectively.

RBC Global Asset Management (U.S.) Inc. Group Trust

RBC GAM International Fund (the "Fund") is a separate investment fund established as a separate trust under the trust, a group trust sponsored by the Investment Manager pursuant to the Trust Agreement. The Trust, RBC Global Asset Management (U.S.) Inc. Group Trust, is a tax exempt group trust designed to permit qualified employee benefit plans and certain governmental plans to commingle a portion of their assets for investment.

RBC Global Asset Management (U.S.) Inc. serves as Investment Manager to the fund. The investment objective of the Fund is to seek to achieve long-term growth of capital primarily through a diversified portfolio of non-U.S. equity securities that the Sub-Advisor believes to be undervalued. The Fund will seek to achieve its investment objective by investing in companies (wherever organized) which does business primarily outside the United States.

The Fund may invest without limitation in securities of non-U.S. companies primarily by direct investment in overseas markets and, from time to time, also in the form of American Depository Receipts, European Depository Receipts or similar securities representing interests in the securities of non-U.S. companies.

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6. INVESTMENTS: (Continued)

RBC Global Asset Management (U.S.) Inc. Group Trust (Continued)

In order to withdraw all or part of its interest in the Fund, a Participating Trust must notify the Investment Manager at least five business days' prior to the relevant monthly Valuation Date. Any withdrawal will be as of the Valuation Date coincident with or next succeeding the expiration of the notice period. Payments of proceeds upon withdrawal will be net of any fees and expenses and will be made as soon as practical after the Valuation Date, but may be delayed if the Trustee determines it cannot reasonably make such distribution on account of any legal impediment or any other cause reasonably beyond its control.

The fund experienced a net gain for the years ended September 30, 2014 and 2013 in the amount of \$1,263,762 and \$560,671, respectively.

The fair market value of the Fund was \$18,787,355 and \$18,731,575 at September 30, 2014 and 2013, respectively.

BlackRock Institutional Trust Company, N.A.

BlackRock Institutional Trust Company, N.A. ("BTC") is a national banking association organized under the laws of the United States. National banks are permitted to pool client assets for collective management. Pooling of assets reduces investment costs by taking advantage of economies of scale and other efficiencies. BTC operates as a limited purpose trust company and is trustee of each of the Collective Funds, and holds legal title to each of the trust's assets for the exclusive benefit of the trust's beneficial owners. Clients of BTC who invest in a Collective Fund are that trust's beneficial owners.

Contributions and withdrawals may only be made on Fund business days. A Fund business day shall mean a day on which BTC is open for business, including receiving requests for, or notices of, contribution to or withdrawal from the Funds. BTC does not allow "late trading," which would occur if an order is received after the time as of which a Fund's net asset value is determined on a given business day and processed at that net asset value. Orders received after the time as of which a Fund's net asset value is determined on a given business day will be processed at the Fund's net asset value determined on the next business day.

The fund experienced a net gain in the amount of \$275,340 and a fair market value of \$4,120,883 for the year ended September 30, 2014. The fund changed the type of investment manager in January 2014 from mutual fund to common collective therefore; it did not have an investment in BlackRock Institutional Trust Company, N.A. as of September 30, 2013.

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6. INVESTMENTS: (Continued)

Limited Partnerships:

Arden ERISA Fund, Ltd.

The objective of the Arden ERISA Fund, Ltd. (the "Fund") is to achieve capital appreciation through the allocation of its assets among a select group of money managers, limited partnerships and investment funds (collectively, "investment funds"), each of which employs a variety of investment strategies. Arden Asset Management LLC (the "Investment Manager"), a limited liability company organized under the laws of the State of Delaware, is responsible for the investment decisions of the Fund.

Upon giving written notice to the Fund that is received by 5:00 p.m. local time in New York City on the day that is at least 65 days prior to the last calendar day of the quarter in which the redemption is to be effective, a Shareholder may redeem all or any portion of its Class A, Class B, Class C, Class D, Class E-2 or Class F-2 Common Shares as of the last day of each calendar quarter.

Upon giving written notice to the Fund that is received by 5:00 p.m. local time in New York City on the day that is at least 95 days prior to the last day of the calendar quarter in which the redemption is to be effective, a Shareholder may redeem all or any portion of its Class E-1 or Class F-1 Common Shares as of the last day of each calendar quarter; provided, however, that a Shareholder may not redeem any particular Class E-1 or Class F-1 Common Shares before the end of the second full calendar quarter after the purchase of such Class E-1 or Class F-1 Common Shares (the "Initial Redemption Date") and thereafter may only redeem such Class E-1 or Class F-1 Common Shares on each two-quarter anniversary of the Initial Redemption Date.

Payment in U.S. dollars of the Redemption Price will be made as soon as practicable to a bank account registered in the name of the Shareholder. The redeeming Shareholder will generally receive at least 90% of the Redemption Price no later than thirty days following the effective date of redemption. Redemption payments may also be delayed in the event of certain extraordinary circumstances, including, but not limited to, an inability to liquidate existing positions, or the default or delay in payments due the Fund from brokers, banks or other persons, including money managers.

Net income or loss of the Fund is allocated on an annual basis to the capital accounts of the partners in proportion to their capital commitments. The Plan's share of Fund gain for 2014 and 2013 was \$43,381 and \$146,904, respectively, and is included in net appreciation income.

As of September 30, 2014, the fund no longer has an investment in Arden.

The fair market value of the fund was \$0 and \$1,636,654 at September 30, 2014 and 2013, respectively.

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6. INVESTMENTS: (Continued)

Attalus Multi-Strategy Fund, Ltd.

The investment objective of Attalus Multi-Strategy Fund, Ltd. (the "Fund"), a Cayman Islands exempted company, is to generate capital appreciation while endeavoring to minimize the corresponding levels of risks and volatility. The Fund seeks to generate total return in excess of the yields on short-term U.S. Treasury securities, irrespective of the performance of any particular sector of the global capital markets. The Fund seeks to achieve its objective by capitalizing on inefficiencies in the global capital markets through an allocation of the Fund's capital to various alternative investment strategies.

The investment objective presents substantial investment risks and could in certain circumstances magnify the impact of any market or investment developments. Attalus Capital, L.P. is the investment manager (the "Investment Manager") of the Fund and is primarily responsible for the monitoring and management of the Fund's investments. SEI Global Services, Inc. is the Fund's administrator. The Fund invests in Attalus Long-Short Equity Fund, Ltd., an affiliate of the Investment Manager, as well as other investment companies that are managed by external unaffiliated investment managers.

Class B Shareholders and Class C Shareholders of the Fund may redeem all or a portion of their Shares as of the close of business on any Redemption Date of a Shareholder's investment upon at least ninety-two (92) days' prior written notice. The Fund will charge a two percent (2%) Redemption Fee on any Class C Shares that are redeemed within twenty-four (24) months of their issuance. The Redemption Fee will be calculated by multiplying the Class C Shareholder's NAV at the redemption date by two percent (2%). Any Redemption Fee charged to a Class C Shareholder's redemption shall remain in the Fund. Distributions may be made in-kind, though the Fund's Board of Directors will use reasonable efforts to make distributions in cash.

The Fund's Board of Directors, by written notice to the shareholders, may suspend redemption rights or the reporting of NAV for any reason, without limitation. The Board of Directors also may compulsorily redeem all or any portion of a Shareholder's holding of Shares at any time and for any reason upon ten days' prior written notice. A request for full redemption was submitted by the Board of Trustees effective December 31, 2012.

Net income or loss of the Fund is allocated on an annual basis to the capital accounts of the partners in proportion to their capital commitments. The Plan's share of Fund gain for 2014 and 2013 was \$37,279 and \$40,918, respectively, and is included in net appreciation.

As of September 30, 2014, the fund no longer has an investment in Attalus.

The fair market value of the fund was \$0 and \$934,198 at September 30, 2014 and 2013, respectively.

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6. INVESTMENTS: (Continued)

First Eagle Global Value Fund

First Eagle Global Value Fund, LP (the "Partnership") is a Delaware limited partnership. The Partnership's investment objective is to seek capital appreciation by investing primarily in equity securities (and securities convertible into equity securities) issued by both U.S. and non-U.S. issuers. The investment philosophy and strategy of the Partnership can be broadly characterized as a value approach.

In general, a Limited Partner may, upon at least 10 days' prior written notice, request the redemption of some or all of the Units held by such Limited Partner as of the last day of each month, subject to the discretion of the General Partner to waive or modify any terms related to redemptions for any Limited Partner.

Net income or loss of the Fund is allocated on an annual basis to the capital accounts of the partners in proportion to their capital commitments. The Plan's share of Fund gain for 2014 and 2013 was \$468,493 and \$719,464, respectively, and is included in net appreciation.

The fair market value of the fund was \$5,291,221 and \$6,166,727 at September 30, 2014 and 2013, respectively.

Grosvenor Institutional Partners, L.P.

Grosvenor Capital Management, L.P. (the "General Partner" or "Grosvenor") sponsored the formation of the Grosvenor Institutional Partners, L.P. (the Fund), and manages its portfolio, on a discretionary basis, by investing in Portfolio Funds (i.e., offshore investment funds, investment partnerships, and pool investment vehicles) in the hedge fund industry. The Portfolio Funds generally implement "non-traditional" or "alternative" investment strategies.

A Limited Partner may withdraw, as of the end of any calendar quarter, all or any portion of its Capital Account by giving not less than 70 days' prior written notice to Grosvenor. Grosvenor may at any time require any Limited Partner to: (a) withdraw all or any portion of its Capital Account as of any month end by giving not less than five days' prior written notice to such Limited Partner; or (b) withdraw as a Limited Partner as of any month end by giving not less than five days' prior written notice to such Limited Partner.

The Master Series (a separate and distinct investment portfolio of Grosvenor Institutional Partners, L.P.) has the authority, under certain limited circumstances, to compel a Limited Partner (including a former Limited Partner) to return to the Master Series amounts previously distributed to such Limited Partner by the Master Series.

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6. INVESTMENTS: (Continued)

Grosvenor Institutional Partners, L.P. (Continued)

Net income or loss of the partnership is allocated on an annual basis to the capital accounts of the partners in proportion to their capital commitments. The Plan's share of partnership gain for 2014 and 2013 was \$170,694 and \$285,384, respectively, and is included in net appreciation.

In the event that the Master Series holds illiquid investments (i.e., investments that the Master Series is unable to value or withdraw/redeem from the Portfolio Funds) as of the effective date of any permitted or required withdrawal by a Limited Partner, Grosvenor may elect to defer valuation of such Limited Partner's interest in such illiquid investments until the corresponding funds are received by the Master Series and available for distribution to such Limited Partner. Such Limited Partner will be treated as having a continuing interest in such illiquid investments. As soon as the Master Series liquidates its interest in, or receives any distributions with respect to, such illiquid investments, the Master Series will promptly remit to such Limited Partner the amounts allocable to such Limited Partner.

The fair market value of the fund was \$7,453,334 and \$2,265,639 at September 30, 2014 and 2013, respectively.

Pooled Investment Funds:

Principal Commingled Real Estate Account

The Principal Commingled Real Estate Account is an open-end commingled real estate account and a pooled separate account of Principal Life Insurance Company. The Account is a diversified real estate equity account consisting primarily of high quality, well-leased real estate properties in the multifamily, industrial, office, retail and hotel sectors.

Principal Life applied a contractual limitation which delays the payment of withdrawal requests and provides for payment of such request on a pro rata basis as cash becomes available for distribution, as determined by Principal Life. As of December 31, 2010, payments to completely satisfy all outstanding requests were made available to investors subject to the withdrawal limitation.

The fund experienced a net gain for the years ended September 30, 2014 and 2013 in the amount of \$866,441 and \$932,451, respectively.

The fair market value of the fund was \$7,790,162 and \$8,300,721 at September 30, 2014 and 2013, respectively.

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7. FAIR VALUE MEASUREMENTS:

Effective October 1, 2008, the Pension Fund adopted Statement of Financial Accounting Standards for Fair Value Measurements FASB ASC 820-10, which provides a framework for measuring fair value under generally accepted accounting principles. FASB ASC 820-10 defines fair value as the exchange price that would be received for an asset or paid to transfer a liability (an exit price) in the principal or most advantageous market for the asset or liability in an orderly transaction between market participants on the measurement date. FASB ASC 820-10 requires that valuation techniques maximize the use of observable inputs and minimize the use of unobservable inputs. FASB ASC 820-10 also establishes a fair value hierarchy, which prioritizes the valuation inputs into three broad levels as follows:

Level 1: Inputs that reflect unadjusted quoted prices in active markets for identical assets or liabilities that the Plan has the ability to access at the measurement date.

Level 2: Inputs other than quoted prices that is observable for the asset or liability either directly or indirectly, including inputs in the markets that are not considered to be active;

Level 3: Inputs that are unobservable (i.e., supported by little or no market activity)

FASB ASC 820-10 also denotes three general valuation techniques that may be used to measure fair value, as described below:

Market approach – Uses prices and other relevant information generated by market transactions involving identical or comparable assets or liabilities. Prices may be indicated by pricing guides, sale transactions, market trades or other sources;

Cost approach – Based on the amount that currently would be required to replace the service capacity of an asset (replacement cost); and

Income approach – Uses valuation techniques to convert future amounts to a single present amount based on current market expectations about the future amounts (includes present value techniques and option-pricing models). Net present value is an income approach where a stream of expected cash flows is discounted at an appropriate market interest rate.

Assets and liabilities itemized below were measured at fair value during the year ended September 30, 2014 and 2013 using the market approach.

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7. FAIR VALUE MEASUREMENTS: (Continued)2014:

	<u>Fair Value</u>	Quoted Prices in Active Markets for Identical Assets/Liabilities (Level 1)	Significant Other Observable Inputs (Level 2)	Significant Unobservable Inputs (Level 3)
U.S. Government Securities	\$ 2,807,100	\$ 805,381	\$ 2,001,719	\$ --
Foreign Securities	438,593	438,593	--	--
Common Collective Trusts	69,473,083	27,741,696	22,200,760	19,530,627
Corporate bonds, notes and debentures	4,829,729	4,690,947	138,782	--
Common stock	47,931,156	47,931,156	--	--
Mutual fund	--	--	--	--
Limited partnerships	12,744,549	5,289,694	7,454,855	--
Pooled investment funds	<u>7,790,161</u>	<u>--</u>	<u>163,118</u>	<u>7,627,043</u>
Total	<u>\$ 146,014,371</u>	<u>\$ 86,897,467</u>	<u>\$ 31,959,234</u>	<u>\$ 27,157,670</u>

2013:

	<u>Fair Value</u>	Quoted Prices in Active Markets for Identical Assets/Liabilities (Level 1)	Significant Other Observable Inputs (Level 2)	Significant Unobservable Inputs (Level 3)
U.S. Government Securities	\$ 2,795,205	\$ 749,325	\$ 2,045,970	\$ --
Foreign Securities	529,757	34,838	--	--
Common Collective Trusts	68,822,110	26,689,280	21,390,625	20,742,205
Corporate bonds, notes and debentures	5,791,659	5,040,788	1,245,790	--
Common stock	47,733,430	47,521,427	--	--
Mutual fund	3,352,659	3,352,659	--	--
Limited partnerships	10,814,562	6,910,092	3,170,258	734,212
Pooled investment funds	<u>8,300,720</u>	<u>--</u>	<u>442,554</u>	<u>7,858,166</u>
Total	<u>\$ 148,140,102</u>	<u>\$ 90,298,319</u>	<u>\$ 28,295,197</u>	<u>\$ 29,334,583</u>

NEW ORLEANS EMPLOYERS -
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7. FAIR VALUE MEASUREMENTS: (Continued)

During 2010, the Financial Accounting Standards Board issued Account Standards Update No. 2009-12.

The following table presents the Pension Fund's Level 3 investments measured at fair value on the recurring basis as defined in FASB ASC 820-10 for the period from October 1 through September 30, 2014 and 2013:

	<u>2014</u>	<u>2013</u>
Beginning Balance	\$ 29,334,583	\$ 28,557,482
Realized and Unrealized gain/loss on investments:		
Net realized loss	1,322,506	812,236
Unrealized gain (loss)	998,111	2,499,429
Funds reclassified as level 1 and level 2 due to accounting standards update	--	--
Funds reclassified as level 3 due to changes in valuation methodology	151,111	40,191
Purchases, sales, issuances and settlements	<u>(4,648,641)</u>	<u>(2,574,755)</u>
Ending Balance	<u>\$ 27,157,670</u>	<u>\$ 29,334,583</u>

Financial instruments are considered Level 3 when their values are determined using pricing models, discounted cash flow methodologies or similar techniques and at least one significant model assumption or input is unobservable. Level 3 financial instruments also include those for which the determination of fair value requires significant management judgment or estimation. A brief description of the valuation techniques used for our Level 3 assets and liabilities is provided above.

Considerable judgment is required in interpreting market data to develop the fair value estimates. Accordingly, the estimates presented therein herein may not be indicative of the amounts that the Plan could realize in a current market exchange. The use of different market assumptions or valuation methodologies may have a material effect on the estimates.

8. INCOME TAX STATUS:

The Internal Revenue Service has ruled that the Plan qualifies under Section 501 of the Internal Revenue Code and is, therefore, not subject to tax under present federal income tax laws. The Plan has been amended since this ruling. However, the Plan's management believes that the Plan is designed and is currently being operated in compliance with the applicable provisions of the Internal Revenue Code.

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8. INCOME TAX STATUS: (Continued)

The Plan's federal Annual Return/Report of Employee Benefit Plan Tax Returns (Form 5500) for 2014, 2013, 2012 and 2011 are subject to examination by the IRS, generally for three years after they were filed.

9. CONTINGENCY:

The Plan is involved in various claims and legal actions arising in the ordinary course of business. In the opinion of management, the ultimate disposition of these matters will not have a material adverse effect on the Plan's financial position.

10. OTHER FUNDS:

Amounts due from and to other funds at September 30, 2014 and 2013 were as follows:

	<u>2014</u>	<u>2013</u>
Due from other funds:		
Director's Operating Account	\$ 75,000	\$ 75,000
Penalty and Interest Account	-	108
	<u>\$ 75,000</u>	<u>\$ 75,108</u>
Due to other funds:		
Director's Operating Account	\$ 56,100	\$ 56,328
Welfare Fund	8,901	-
	<u>\$ 65,001</u>	<u>\$ 56,328</u>

The Fund transferred \$656,111 and \$687,385 to the Director's Operating Account for reimbursement of expenses paid on behalf of the fund for the years ended September 30, 2014 and 2013, respectively.

The Director's Operating Account paid expenses in the amount of \$655,883 and \$683,440 on behalf of the Pension Fund for the years ended September 30, 2014 and 2013, respectively.

11. SECURITIES LENDING AGREEMENTS:

Effective January 21, 2004, the Board of Trustees authorized the Plan to lend its securities to broker-dealers and other entities with a simultaneous agreement to return the collateral for the same securities in the future. The Plan has entered into a contract with a company, which acts as their third party securities lending agent. The lending agent has access to the Plan's lendable portfolio of available assets, such as U.S. and non U.S. equities, corporate bonds, government bonds and government agency bonds. The lending agent continually reviews credit worthiness of potential borrowers through adequate analysis of all material provided to them. All loans were fully collateralized with cash, government securities or irrevocable letters of credit.

NEW ORLEANS EMPLOYERS -
INTERNATIONAL LONGSHOREMEN'S ASSOCIATION, AFL-CIO
PENSION FUND
NOTES TO FINANCIAL STATEMENTS
SEPTEMBER 30, 2014 AND 2013

11. SECURITIES LENDING AGREEMENTS: (Continued)

The Plan had the following securities on loan:

	September 30, 2014 Market (Carrying Value)	September 30, 2013 Market (Carrying Value)
Corporate Bonds	\$ <u>3,685,741</u>	\$ <u>11,586,984</u>
Total	\$ <u>3,685,741</u>	\$ <u>11,586,984</u>

The collateral held relating to the above investments totaled \$3,824,011, and \$11,955,779 as of September 30, 2014 and 2013, respectively.

The term to maturity of the securities loaned is matched with the term to maturity of the investment of the cash collateral. Such matching existed at September 30, 2014 and 2013.

12. PENSION PROTECTION ACT:

The Pension Protection Act of 2006 requires the Plan's actuary to certify whether or not a plan is either "Endangered," (Yellow Zone) or "Critical," (Red Zone). As of October 1, 2014 and 2013 the Fund was in critical status (Red Zone). Plans in the Red Zone are required to follow a set rehabilitation schedule which can be accelerated but not delayed.

On April 22, 2009 the Plan entered into a Rehabilitation Plan which commenced on October 1, 2010 and will last thirteen years as permitted by Section 205 of the Worker, Retiree, and Employer Recovery Act of 2008 (WRERA). The Rehabilitation Plan requires increases in the employer contribution rate and benefit reductions. Participants who retired on or prior to October 1, 2009 were not affected by the Rehabilitation Plan. The Rehabilitation Plan was amended on September 22, 2010 to extend the Rehabilitation period by an additional 15 years to September 30, 2039. The Rehabilitation Plan was further amended on September 23, 2011 to change the employer contribution rate increase in the Preferred Schedule of the Plan such that contributions will remain fairly level through October 1, 2014 and then increase by inflation. The Rehabilitation Plan was amended again on September 18, 2012, September 25, 2013 and September 17, 2014 however no changes were made to the employer contribution rate increases in the Preferred and Default Schedules.

NEW ORLEANS EMPLOYERS -
INTERNATIONAL LONGSHOREMEN'S ASSOCIATION, AFL-CIO
PENSION FUND
NOTES TO FINANCIAL STATEMENTS
SEPTEMBER 30, 2014 AND 2013

13. RECLASSIFICATIONS:

Certain reclassifications have been made to the 2013 comparative information to conform to the 2014 presentation. Such reclassifications had no effect on the change in net assets.

14. SUBSEQUENT EVENTS:

Management has evaluated subsequent events through the date that the financial statements were available to be issued on March 20, 2015 and determined that no events occurred that required disclosure. No subsequent events occurring after this date have been evaluated for inclusion in these financial statements.

NEW ORLEANS EMPLOYERS -
INTERNATIONAL LONGSHOREMEN'S ASSOCIATION, AFL-CIO,
PENSION FUND
SUPPLEMENTARY INFORMATION
SCHEDULE OF ASSETS BY FUND
SEPTEMBER 30, 2014

	U. S. Bank <u>Account</u>	New Tower Trust Company <u>Account</u>	Capital One <u>Account</u>
Investments, as reported by custodian banks:			
Cash and cash equivalents	\$ 3,330,166	\$ 4,765	\$ 2,295,670
Fixed income securities:			
U.S. Government securities	2,807,100	-	-
Corporate	4,829,729	-	-
Foreign	438,593	-	-
Common collective trusts	-	4,493,859	-
Common stock	47,931,156	-	-
Limited partnerships	-	-	-
Pooled investment funds	-	-	-
	<u>\$ 59,336,744</u>	<u>\$ 4,498,624</u>	<u>\$ 2,295,670</u>

(Continued)

Principal U.S. Property <u>Account</u>	Amalgamated Bank <u>Account</u>	Grosvenor <u>Account</u>	Chevy Chase Trust <u>Account</u>
\$ 1	\$ 5	\$ 1	\$ 1,660
-	-	-	-
-	-	-	-
-	-	-	-
-	3,468,375	-	11,577,223
-	-	-	-
-	-	7,453,333	-
<u>7,790,161</u>	<u>-</u>	<u>-</u>	<u>-</u>
<u>\$ 7,790,162</u>	<u>\$ 3,468,380</u>	<u>\$ 7,453,334</u>	<u>\$ 11,578,883</u>

NEW ORLEANS EMPLOYERS -
INTERNATIONAL LONGSHOREMEN'S ASSOCIATION, AFL-CIO,
PENSION FUND
SUPPLEMENTARY INFORMATION
SCHEDULE OF ASSETS BY FUND
SEPTEMBER 30, 2014

	Loomis Sayles High Yield Conservative Trust <u>Account</u>	Rothschild Small - Cap Trust <u>Account</u>	BlackRock <u>Account</u>
Investments, as reported by custodian banks:			
Cash and cash equivalents	\$ 4	\$ -	\$ 2
Fixed income securities:			
U.S. Government securities	-	-	-
Foreign	-	-	-
Common collective trusts	15,241,830	5,473,435	4,120,881
Common stock	-	-	-
Limited partnerships	-	-	-
Pooled investment funds	-	-	-
	<u>\$ 15,241,834</u>	<u>\$ 5,473,435</u>	<u>\$ 4,120,883</u>

(Continued)

<u>First Eagle Trust Account</u>	<u>Wellington Trust Account</u>	<u>First NBC Bank (Unallocated Contribution Account)</u>	<u>AFL-CIO Equity Index Chevy Chase Account</u>	<u>RBC Global Asset Management Account</u>	<u>Total</u>
\$ 5	\$ 1,500,007	\$ 259,042	\$ -	\$ 368,006	\$ 7,759,334
-	-	-	-	-	2,807,100
-	-	-	-	-	4,829,729
-	-	-	-	-	438,593
-	2,445,417	-	4,232,714	18,419,349	69,473,083
-	-	-	-	-	47,931,156
5,291,216	-	-	-	-	12,744,549
-	-	-	-	-	7,790,161
<u>\$ 5,291,221</u>	<u>\$ 3,945,424</u>	<u>\$ 259,042</u>	<u>\$ 4,232,714</u>	<u>\$ 18,787,355</u>	<u>\$ 153,773,705</u>

SECTION 4: Certificate of Actuarial Valuation as of October 1, 2013 for the New Orleans Employers - International Longshoremen's Association, AFL-CIO Pension Plan

EIN 72-6023317/ PN 001

**EXHIBIT III
Schedule of Active Participant Data
(Schedule MB, line 8b)**

The participant data is for the year ended September 30, 2013.

Age	Years of Creditable Employment										
	Total	1-4	5-9	10-14	15 - 19	20 - 24	25 - 29	30 - 34	35 - 39	40 & over	
Under 25	14	12	2	--	--	--	--	--	--	--	--
25 - 29	40	22	18	--	--	--	--	--	--	--	--
30 - 34	35	14	15	5	1	--	--	--	--	--	--
35 - 39	63	27	17	8	11	--	--	--	--	--	--
40 - 44	77	12	12	15	26	12	--	--	--	--	--
45 - 49	88	19	13	11	30	12	3	--	--	--	--
50 - 54	93	13	13	11	28	12	9	7	--	--	--
55 - 59	121	15	18	19	16	20	17	13	3	--	--
60 - 64	57	5	8	3	10	6	12	9	2	2	2
65 & over	18	2	3	1	3	1	3	2	2	2	1
Unknown	2	2	--	--	--	--	--	--	--	--	--
Total	608	143	119	73	125	63	44	31	7	3	3

Note: Excludes 27 participants with less than one year of creditable employment.

NEW ORLEANS EMPLOYERS -
INTERNATIONAL LONGSHOREMEN'S ASSOCIATION, AFL-CIO,
PENSION FUND
SUPPLEMENTARY INFORMATION
SCHEDULE H, LINE 4i
#72-6023317 PLAN 001
SCHEDULE OF ASSETS (ACQUIRED AND DISPOSED OF WITHIN YEAR)
SEPTEMBER 30, 2014

(a)	(b)	(c)	(d)
Identity of Issue, <u>borrower, lender or</u> <u>similar party</u>	Description of Assets (Including interest rate and maturity <u>in case of loan</u>)	<u>Cost of</u> <u>Acquisitions</u>	<u>Proceeds of</u> <u>Dispositions</u>
US Government Issues	U S Treasury I P S 0.125% 4/15/19	34,567.81	34,741.50
US Government Issues	U S Treasury I P S 0.625% 1/15/24	40,248.23	40,119.66
Corporate Issues	American Express Cre 2.250% 8/15/19	49,969.50	50,058.00
Corporate Issues	Anheuser Busch Inbev 3.700% 2/01/24	42,989.25	45,170.21
Corporate Issues	ATT Inc 3.000% 2/15/22	24,581.70	24,420.50
Corporate Issues	Bank of Ny Mello Mtn 1.350% 3/06/18	47,338.56	47,332.32
Corporate Issues	Berkshire Hathaway 2.100% 8/14/19	25,997.66	25,980.24
Corporate Issues	Chevron Corp 3.191% 6/24/23	29,987.85	30,251.66
Corporate Issues	Exxon Mobil Corp 1.819% 3/15/19	50,000.00	50,315.34
Corporate Issues	Jpmorgan Chase Mtn 2.350% 1/28/19	84,960.05	85,961.85
Corporate Issues	Merck Co Inc 1.300% 5/18/18	47,284.71	47,454.72
Corporate Issues	Microsoft Corp 3.625% 12/15/23	26,867.16	26,751.33
Corporate Issues	Morgan Stanley Mtn 2.125% 4/25/18	41,465.76	41,717.76
Corporate Issues	Texas Instruments 2.750% 3/12/21	20,851.74	21,093.66
Corporate Issues	Toyota Motor Mtn 2.750% 5/17/21	22,000.00	22,075.90
Corporate Issues	Verizon Comm 3.450% 3/15/21	44,051.48	45,266.76
Corporate Issues	Yale University Mtn 2.086% 4/15/19	19,000.00	19,131.86
Foreign Stocks	Allegion Plc	-	34,155.00
Foreign Stocks	King Digital Entertainment	47,570.52	34,717.52
Foreign Stocks	Perrigo Co Ltd	76,228.90	68,977.44
Foreign Stocks	Potash Corp of Saskatchewan	119,608.55	122,335.98
Foreign Stocks	Seagate Technology	296,129.99	303,663.38
Foreign Stocks	Sina Corp	44,711.01	36,676.52

SCHEDULE MB (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation</small>	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 2013 This Form Is Open to Public Inspection
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For calendar plan year 2013 or fiscal plan year beginning 10/01/2013 and ending 09/30/2014

▶ 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.

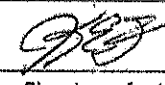
A Name of plan New Orleans Employers International Longshoremens Association, AFL-CIO Pension Plan	B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF Board Of Trustees, New Orleans Empl International Longshoremen Associa	D Employer Identification Number (EIN) 72-6023317

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

1a Enter the valuation date: Month 10 Day 01 Year 2013

b Assets		
(1) Current value of assets	1b(1)	155069584
(2) Actuarial value of assets for funding standard account.....	1b(2)	143448231
c (1) Accrued liability for plan using immediate gain methods	1c(1)	239356230
(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)	239356230
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)	371070001
(b) Expected increase in current liability due to benefits accruing during the plan year.....	1d(2)(b)	3012980
(c) Expected release from "RPA '94" current liability for the plan year.....	1d(2)(c)	26980096
(3) Expected plan disbursements for the plan year.....	1d(3)	27730096

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

SIGN HERE	 Signature of actuary	<u>03/26/2015</u> Date
	K. Eric Freden, FSA Type or print name of actuary	<u>1400553</u> Most recent enrollment number
	The Segal Company Firm name	<u>678-306-3100</u> Telephone number (including area code)
	<u>2018 Powers Ferry Road, Suite 850</u> Address of the firm	
	<u>Atlanta GA 30339-7200</u> Address of the firm	

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

2 Operational information as of beginning of this plan year:

a Current value of assets (see instructions)	2a	155069584
b "RPA '94" current liability/participant count breakdown:	(1) Number of participants	(2) Current liability
(1) For retired participants and beneficiaries receiving payment	2558	298250177
(2) For terminated vested participants	209	12424492
(3) For active participants:		
(a) Non-vested benefits		2474312
(b) Vested benefits		57921020
(c) Total active	608	60395332
(4) Total	3375	371070001
c If the percentage resulting from dividing line 2a by line 2b(4), column (2), is less than 70%, enter such percentage	2c	41.78%

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

(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees
04/15/2014	8999644	0			
Totals ▶			3(b)	8999644	3(c) 0

4 Information on plan status:

a Enter code to indicate plan's status (see instructions for attachment of supporting evidence of plan's status). If code is "N," go to Item 5.....	4a	C
b Funded percentage for monitoring plan's status (line 1b(2) divided by line 1c(3))	4b	59.9%
c Is the plan making the scheduled progress under any applicable funding improvement or rehabilitation plan?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
d If the plan is in critical status, were any adjustable benefits reduced?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
e If line d is "Yes," enter the reduction in liability resulting from the reduction in adjustable benefits, measured as of the valuation date	4e	

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** Reorganization
- j** Other (specify):

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

6 Checklist of certain actuarial assumptions:

a Interest rate for "RPA '94" current liability.....			6a	3.62%	
b Rates specified in insurance or annuity contracts.....	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A		Pre-retirement <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A Post-retirement <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> 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	54.5%	<input type="checkbox"/> N/A	0.0%	<input type="checkbox"/> N/A
f Salary scale.....	6f	%	<input checked="" type="checkbox"/> N/A		
g Estimated investment return on actuarial value of assets for year ending on the valuation date.....			6g	4.3%	
h Estimated investment return on current value of assets for year ending on the valuation date.....			6h	14.2%	

7 New amortization bases established in the current plan year:

(1) Type of base	(2) Initial balance	(3) Amortization Charge/Credit
1	5118199	539374
4	-4622756	-487162

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 Is the plan required to provide a Schedule of Active Participant Data? (See the instructions.) If "Yes," attach schedule.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> 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?.....	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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?.....	<input type="checkbox"/> Yes <input type="checkbox"/> No	
(2) If line (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?.....	<input type="checkbox"/> Yes <input type="checkbox"/> No	
(4) If line (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 (3) is "Yes," enter the date of the ruling letter approving the extension.....	8d(5)	
(6) If line (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?.....	<input type="checkbox"/> Yes <input type="checkbox"/> 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		16353449
b Employer's normal cost for plan year as of valuation date.....	9b		2045134
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)	119058317	18121867
(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		2739034
e Total charges. Add lines 9a through 9d.....	9e		39259484

Credits to funding standard account:

f Prior year credit balance, if any.....	9f		0
g Employer contributions. Total from column (b) of line 3.....	9g		8999644
h Amortization credits as of valuation date.....	Outstanding balance		
	9h	39503767	4554219
i Interest as applicable to end of plan year on lines 9f, 9g, and 9h.....	9i		650929
j Full funding limitation (FFL) and credits:			
(1) ERISA FFL (accrued liability FFL).....	9j(1)	105299618	
(2) "RPA '94" override (90% current liability FFL).....	9j(2)	198701160	
(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		14204792
m Credit balance: If line 9l is greater than line 9e, enter the difference.....	9m		
n Funding deficiency: If line 9e is greater than line 9l, enter the difference.....	9n		25054692
o Current year's accumulated reconciliation account:			
(1) Due to waived funding deficiency accumulated prior to the 2011 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)		0
(3) Total as of valuation date.....	9o(3)		0

10 Contribution necessary to avoid an accumulated funding deficiency. (See Instructions.)..... **10** 25054692

11 Has a change been made in the actuarial assumptions for the current plan year? If "Yes," see instructions. Yes No

SECTION 4: Certificate of Actuarial Valuation as of October 1, 2013 for the New Orleans Employers - International Longshoremen's Association, AFL-CIO Pension Plan

EIN 72-6023317/ PN 001

EXHIBIT VIII

**Summary of Plan Provisions
(Schedule MB, line 6)**

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

Plan Year: October 1 through September 30
Pension Credit Year: October 1 through September 30
Plan Status: Ongoing Plan

Normal Retirement:

<i>Eligibility Amount</i>	<i>Average Hours per Year of Creditable Employment</i>	<i>Monthly Benefit Formula</i>
	Age 62	
	800 – 899	A x \$50.00
	900 – 999	A x \$52.00
	1,000 – 1,099	A x \$54.00
	1,100 – 1,199	A x \$56.00
	1,200 – 1,299	A x \$58.00
	1,300 – 1,399	A x \$60.00
	1,400 – 1,499	A x \$62.00
	1,500 – 1,599	A x \$64.00
	1,600 – 1,699	A x \$66.00
	1,700 – 1,799	A x \$68.00
	1,800 – 1,899	A x \$70.00
	1,900 – 1,999	A x \$72.00
	2,000 and over	A x \$74.00

A = Years of Creditable Employment

SECTION 4: Certificate of Actuarial Valuation as of October 1, 2013 for the New Orleans Employers - International Longshoremen's Association, AFL-CIO Pension Plan

EIN 72-6023317/ PN 001

Service Pension:

Service Requirement 30 years of Creditable Employment
Amount Normal retirement benefit with a 4% per year early retirement reduction for each year the participant is below age 62

Early Retirement:

Eligibility Age 51 with 10 years of Creditable Employment
Amount Normal retirement benefit reduced by 6% per year below age 62

Disability:

Eligibility Fifteen consecutive plan years averaging at least 800 hours of employment per year and unable to work in the industry
Amount 70% of normal retirement benefit

Vesting:

Eligibility 5 Years of Creditable Employment
Amount Accrued benefit, payable at 62
Normal Retirement Age 62

Spouse's Pre-Retirement Death Benefit:

Eligibility Available to the spouse of a married participant with 5 Years of Creditable Employment
Amount 50% of the benefit that would have been payable to participant, payable at the participant's earliest retirement age. The death benefit for active participants is based on a subsidized 50% joint and survivor annuity. The death benefit for deferred vested inactive participants is based on an actuarially reduced 50% joint and survivor annuity. If the participant had at least 15 Years of Creditable Employment, the benefit may be actuarially reduced and paid immediately.

SECTION 4: Certificate of Actuarial Valuation as of October 1, 2013 for the New Orleans Employers - International Longshoremen's Association, AFL-CIO Pension Plan

EIN 72-6023317/ PN 001

Pre-Retirement Death Benefit for Non-Married Participants (if payable to a non-spouse beneficiary):

Eligibility

Available to the beneficiary of a non-married participant with 5 years of Creditable Employment

Amount

120 equal monthly benefit payments equal to the amount that would have been payable to the participant had he retired immediately prior to death, elected a 10 Year Certain and Life Thereafter Annuity, and then died prior to receiving any benefits

Pre-Retirement Death Benefit for Non-Married Participants (if payable to participant's estate):

Eligibility

Available to the estate of a non-married participant with 5 years of Creditable Employment

Amount

Lump sum payment equal to the present value of the 120 equal monthly benefit payments that would be paid to a non-spousal beneficiary under the 10 Year Certain and Life Thereafter Annuity option, limited to the amount that may be distributed without consent under IRC § 411(a)(11).

Post-Retirement Death Benefit:

Husband and Wife

If married, pension benefits are paid in the form of an actuarially reduced 50% joint and survivor annuity unless this form is rejected by the participant and spouse. If not married, benefits are payable for the life of the participant.

Optional Forms of Payment:

Straight Life Annuity, 10-year Certain and Life Annuity, 50% Joint and Survivor Annuity; 75% Joint and Survivor Annuity, 100% Joint and Survivor Annuity. The Joint and Survivor Annuities are available both with and without "pop-up."

Participation:

After completion of 800 hours of employment in a Plan year

SECTION 4: Certificate of Actuarial Valuation as of October 1, 2013 for the New Orleans Employers - International Longshoremen's Association, AFL-CIO Pension Plan

EIN 72-6023317/ PN 001

Years of Creditable Employment: One year of Creditable Employment is granted for each Plan Year with at least 800 hours of employment. One year of Creditable Employment is granted for each Plan Year with between 500-799 hours of employment, provided the Employee has an average of at least 800 hours of employment per Plan Year.

Changes in Plan Provisions: There were no changes in plan provisions reflected in this actuarial valuation.

8022771v1/05773.005

NEW ORLEANS EMPLOYERS -
INTERNATIONAL LONGSHOREMEN'S ASSOCIATION, AFL-CIO
PENSION FUND
SUPPLEMENTARY INFORMATION
SCHEDULE H, LINE 4i
#72.6023317 Plan 001
SCHEDULE OF ASSETS (HELD AT END OF YEAR,
SEPTEMBER 30, 2014)

Party in Interest	Description	Description of Investment		Current Value
(a)	(b)	Including Maturity Date	Collateral Par or Market Value	(c)
				(d)
US Government Issues				
FEDERAL HOME LOAN BKS		09/30/2019	\$ 190,000.00	\$ 189,905.00
FEDERAL HOME LOAN BKS		08/14/2024	70,000.00	62,895.00
FEDERAL HOME LOAN BKS		09/05/2025	66,666.67	61,000.00
FEDERAL HOME LOAN BKS		05/15/2023	305,000.00	304,695.00
F L M C M T N		09/30/2024	2,000.00	1,999.50
F N M A DEB		12/14/2022	163,000.00	155,679.77
F N M A PARTN CERT		12/01/2035	3,017.72	3,296.88
F L M C MULTICLASS MTG PARTN		08/15/2027	3,268.44	3,386.92
F N M A PARTN CERT		08/01/2040	14,176.57	14,822.26
U S TREASURY NOTE		11/30/2020	60,000.00	58,883.58
U S TREASURY NOTE		12/31/2018	166,000.00	164,071.69
U S TREASURY NOTE		01/31/2019	315,000.00	314,096.78
U S TREASURY NOTE		02/28/2019	183,000.00	182,613.54
U S TREASURY NOTE		04/30/2019	360,000.00	358,446.65
U S TREASURY		04/15/2015	247,365.00	256,109.93
U S TREASURY		04/15/2016	243,942.15	250,340.47
U S TREASURY NOTE		08/15/2022	43,000.00	40,134.45
U S TREASURY		04/15/2018	57,718.11	58,379.69
U S TREASURY NOTE		05/15/2017	248,000.00	248,144.17
U S TREASURY		07/15/2024	87,295.80	83,277.73
Corporate Issues				
AT&T INC		02/15/2017	101,000.00	101,815.01
AMAZON COM INC		11/29/2017	72,000.00	71,007.84
AMAZON COM INC		11/27/2015	26,000.00	26,005.98
AMERICAN EXPR CENTURION		07/26/2017	200,000.00	198,250.00
AMERICAN EXPRESS CREDIT		09/19/2016	73,000.00	76,197.63
AMERICAN HONDA FINANCE		08/11/2015	67,000.00	66,859.97
AMGEN INC		05/22/2019	58,000.00	57,888.06
ANHEUSER BUSCH INBEV WOR		01/15/2019	29,000.00	36,828.55
BBT CORPORATION		03/22/2017	38,000.00	39,105.42
BMW BANK OF NORTH AMERICA		09/21/2015	202,000.00	200,990.00
BANC OF AMERICA COMMERCIAL MORTGAGE		07/10/2045	20,000.00	21,228.91

NEW ORLEANS EMPLOYERS -
INTERNATIONAL LONGSHOREMEN'S ASSOCIATION, AFL-CIO
PENSION FUND

SUPPLEMENTARY INFORMATION

SCHEDULE H, LINE 4i
#72.6023317 Plan 001

SCHEDULE OF ASSETS (HELD AT END OF YEAR,
SEPTEMBER 30, 2014)

Party in Interest (a)	Description (b)	Description of Investment (c)		Cost of Asset (d)	Current Value (e)
		Including Maturity Date, Collateral, Par or Market Value			
				\$	\$
Corporate Issues (Continued)					
BANK OF AMERICA CORP	Corporate Issues	01/15/2019	2.5617 %	76,000.00	75,851.80
BANK OF NEW YORK MELLON	Corporate Issues	01/15/2019	2.0698 %	48,000.00	47,749.92
BARCLAYS BANK DELAWARE	Corporate Issues	03/26/2018	1.2624 %	75,000.00	73,650.00
BURLINGTON NO SF 001 TR	Corporate Issues	01/15/2021	6.9914 %	32,683.57	38,380.64
CSX TRANSPORTATION INC	Corporate Issues	01/15/2023	5.3916 %	13,392.92	15,695.70
CAN NAT RAIL PASS THRU	Corporate Issues	01/02/2016	6.9269 %	14,481.55	15,201.86
PROGRESS ENERGY CAROLINA	Corporate Issues	01/15/2019	4.6812 %	37,000.00	41,832.20
CATERPILLAR INC	Corporate Issues	12/15/2018	6.4467 %	49,000.00	60,169.06
CHEVRON CORP	Corporate Issues	12/05/2022	2.3690 %	52,000.00	49,519.60
CITIGROUP INC	Corporate Issues	01/10/2017	4.2008 %	69,000.00	73,517.43
COCA COLA CO THE	Corporate Issues	11/15/2020	2.9556 %	48,000.00	51,682.74
COMCAST CORP	Corporate Issues	11/15/2017	5.5496 %	76,000.00	90,173.61
JOHN DEERE CAPITAL CORP	Corporate Issues	12/13/2018	1.9238 %	44,000.00	43,906.28
DISCOVER BANK	Corporate Issues	05/02/2017	1.7375 %	114,000.00	115,197.00
DISCOVER BANK	Corporate Issues	05/09/2017	1.7298 %	131,000.00	129,853.75
WALT DISNEY COMPANY THE	Corporate Issues	06/01/2021	3.4071 %	42,000.00	44,835.42
WALT DISNEY COMPANY	Corporate Issues	02/11/2015	0.2621 %	34,000.00	34,004.42
FEDEX CORP 1998 PASS TST	Corporate Issues	01/15/2022	5.7931 %	70,669.73	81,976.89
FLORIDA POWER LIGHT CO	Corporate Issues	06/01/2024	3.0694 %	35,000.00	35,265.65
GE CAPITAL RETAIL BANK	Corporate Issues	04/27/2017	1.8413 %	240,000.00	242,080.80
GE CAPITAL FINANCIAL INC	Corporate Issues	05/04/2017	1.7337 %	245,000.00	248,385.90
GENERAL DYNAMICS CORP	Corporate Issues	11/15/2017	1.0005 %	52,000.00	51,400.96
GEN ELEC CAP CRP	Corporate Issues	09/15/2017	5.0648 %	78,000.00	87,180.60
GENERAL ELEC CAP CORP	Corporate Issues	01/07/2021	4.1093 %	74,000.00	81,556.88
GEORGE WASHINGTON UNIVERSITY	Corporate Issues	09/15/2021	4.0110 %	9,000.00	9,671.13
GEORGE WASHINGTON UNIVER	Corporate Issues	09/15/2017	1.8140 %	111,000.00	112,128.87
GOLDMAN SACHS GROUP INC	Corporate Issues	01/22/2018	2.3376 %	70,000.00	70,726.60
GOLDMAN SACHS BANK USA	Corporate Issues	05/02/2017	1.8400 %	223,000.00	224,897.73
GOLDMAN SACHS GROUP INC FLTG	Corporate Issues	05/09/2017	1.8251 %	17,000.00	17,298.01
GOLDMAN SACHS GROUP INC FLTG	Corporate Issues	08/22/2017	1.7816 %	5,000.00	5,065.45
IBM CORP	Corporate Issues	09/14/2017	5.1006 %	100,000.00	112,052.00
JPMORGAN CHASE CO	Corporate Issues	07/22/2020	4.0194 %	76,000.00	81,886.20
JPMORGAN CHASE CO	Corporate Issues	07/05/2016	3.0611 %	104,000.00	107,634.80

NEW ORLEANS EMPLOYERS -
INTERNATIONAL LONGSHOREMEN'S ASSOCIATION, AFL-CIO
PENSION FUND
SUPPLEMENTARY INFORMATION
SCHEDULE H, LINE 4i
#72.6023317 Plan 001
SCHEDULE OF ASSETS (HELD AT END OF YEAR)
SEPTEMBER 30, 2014

Party in Interest (a)	Description (b)	Description of Investment		Cost of Asset (d)	Current Value (e)
	Including Maturity Date	Collateral	Par or Market Value		
	(c)				
JP MORGAN CHASE COMMERCIAL MORTGAGE	Corporate Issues	12/15/2044	5.1143 %	22,000.00	23,351.80
Corporate Issues (Continued)					
LB UBS COMMERCIAL MORTGAGE TRUST	Corporate Issues	02/15/2031	5.0419 %	12,000.00	13,404.38
LOCKHEED MARTIN CORP	Corporate Issues	05/01/2016	7.0372 %	40,000.00	44,375.60
LOYOLA UNIV CHICAGO	Corporate Issues	07/01/2022	3.1686 %	57,000.00	55,035.21
MORGAN STANLEY	Corporate Issues	03/22/2017	4.4498 %	57,000.00	62,380.44
NATIONAL RURAL UTIL COOP	Corporate Issues	11/01/2018	7.9205 %	31,000.00	45,143.57
PNC FUNDING CORP	Corporate Issues	09/19/2016	2.6277 %	128,000.00	135,215.36
PNC FUNDING CORP	Corporate Issues	03/08/2022	3.1586 %	32,000.00	32,327.04
PACIFICORP	Corporate Issues	06/15/2021	3.5222 %	62,000.00	65,203.73
PEPSICO INC	Corporate Issues	11/01/2018	6.4614 %	65,000.00	84,602.53
PFIZER INC	Corporate Issues	03/15/2019	5.2666 %	48,000.00	57,653.28
PHILIP MORRIS INTL INC	Corporate Issues	05/16/2018	4.9820 %	62,000.00	69,187.55
STATE STREET CORP	Corporate Issues	03/07/2016	2.8039 %	72,000.00	76,644.00
TOYOTA MOTOR CREDIT CORP	Corporate Issues	05/16/2017	0.0000 %	47,000.00	47,000.00
TOYOTA MOTOR CREDIT CORP	Corporate Issues	07/18/2019	2.0962 %	24,000.00	23,934.48
UBS COMMERCIAL MORTGAGE TRUST	Corporate Issues	05/10/2045	2.1436 %	12,000.00	12,179.99
UBS BARCLAYS COMMERCIAL MORTGAGE TR	Corporate Issues	12/10/2045	2.5129 %	21,000.00	21,524.95
US BANCORP	Corporate Issues	05/15/2017	1.6294 %	70,000.00	70,637.00
US BANCORP	Corporate Issues	09/11/2024	3.4480 %	63,000.00	62,257.86
VERIZON COMMUNICATIONS	Corporate Issues	09/15/2023	4.5412 %	80,000.00	88,890.68
WF RBS COMMERCIAL MORTGAGE TRUST	Corporate Issues	02/15/2044	4.2969 %	25,000.00	29,558.59
WAL MART STORES INC	Corporate Issues	07/08/2020	3.3342 %	124,000.00	138,248.83
WELLS FARGO CO	Corporate Issues	12/11/2017	5.0345 %	85,000.00	96,798.95
Foreign Issues					
BHP BILLITON FIN USA LTD	Foreign Issues	11/21/2016	1.8440 %	30,000.00	30,610.80
BP CAPITAL MARKETS PLC	Foreign Issues	03/11/2016	3.1188 %	84,000.00	86,997.96
DIAGEO CAPITAL PLC	Foreign Issues	10/23/2017	5.1457 %	27,000.00	32,281.74
GLAXOSMITHKLINE CAPITAL	Foreign Issues	05/08/2017	1.4846 %	70,000.00	70,474.60

NEW ORLEANS EMPLOYERS -
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SCHEDULE H, LINE 4i
#72.6023317 Plan 001
SCHEDULE OF ASSETS (HELD AT END OF YEAR,
SEPTEMBER 30, 2014)

Party in Interest (a)	Description (b)	Description of Investment		Current Value (e)	
	Including Maturity Date, Collateral, Par or Market Value	Cost of Asset (d)	Current Value (e)		
	PROVINCE OF QUEBEC	Foreign Issues	02/13/2023 2.5531 %	78,000.00	76,468.08
	ROYAL BANK OF CANADA	Foreign Issues	03/15/2019 2.1109 %	53,000.00	53,129.32
	SHELL INTERNATIONAL FIN	Foreign Issues	01/06/2023 2.2907 %	38,000.00	35,853.76
	TOTAL CAPITAL INTL SA	Foreign Issues	06/19/2021 2.6915 %	55,000.00	54,725.00
	Municipal Issues				
	FLORIDA ST HURRICANE	Municipal Issues	07/01/2016 1.2887 %	\$ 35,000.00	\$ 35,302.75
	CATASTROPHE				
	Common Stock				
	ABBVIE INC	Common Stock	3.1395 %	4,260.00	246,057.60
	ADOBE SYS INC	Common Stock	0.0000 %	325.00	22,473.85
	AETNA INC	Common Stock	1.0584 %	3,830.00	282,073.33
	AFFILIATED MANAGERS GROUP INC	Common Stock	0.0000 %	1,470.00	298,206.47
	AIR PRODS CHEMICALS INC	Common Stock	2.1469 %	1,150.00	155,223.69
	ALLIANCE DATA SYSTEMS CORP	Common Stock	0.0000 %	980.00	226,527.04
	AMAZON COM INC	Common Stock	0.0000 %	1,000.00	267,394.61
	AMERICAN EXPRESS CO	Common Stock	1.2362 %	2,090.00	170,989.38
	AMERICAN INTERNATIONAL GROUP	Common Stock	0.9707 %	1,195.00	64,780.66
	AMGEN INC	Common Stock	1.9773 %	685.00	81,477.50
	ANADARKO PETROLEUM CORP	Common Stock	1.3261 %	2,175.00	182,955.76
	APPLE INC	Common Stock	1.6640 %	13,240.00	911,518.65
	BIODIEM INC	Common Stock	0.0000 %	660.00	163,452.58
	BOEING CO	Common Stock	2.7039 %	1,485.00	169,745.96
	BROADCOM CORP CL A	Common Stock	1.1439 %	305.00	11,685.59
	CBS CORP CLASS B NON VOTING	Common Stock	1.0737 %	2,293.00	119,631.10
	CVS HEALTH CORPORATION	Common Stock	1.3914 %	5,590.00	295,861.64
	CBS OUTDOOR AMERICAS INC	Common Stock	5.3047 %	861.00	18,507.87
	CELGENE CORP	Common Stock	0.0000 %	1,780.00	131,385.84
	CHENIERE ENERGY INC	Common Stock	0.0000 %	1,920.00	127,766.73
	CITIGROUP INC	Common Stock	0.0823 %	1,375.00	66,705.44
	COGNIZANT TECH SOLUTIONS CL A	Common Stock	0.0000 %	2,015.00	90,647.33
	COMCAST CORP CL A	Common Stock	1.5983 %	8,230.00	407,597.72
	CORNERSTONE ONDEMAND INC	Common Stock	0.0000 %	1,590.00	60,532.95
	COSTAR GROUP INC	Common Stock	0.0000 %	480.00	77,256.02

NEW ORLEANS EMPLOYERS -
INTERNATIONAL LONGSHOREMEN'S ASSOCIATION, AFL-CIO
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#72.6023317 Plan 001
SCHEDULE OF ASSETS (HELD AT END OF YEAR,
SEPTEMBER 30, 2014)

Party in Interest	Description	Including Maturity Date, Collateral, Par or Market Value	Description of Investment	Cost of Asset	Current Value
(a)	(b)	(c)	(d)	(e)	(f)
	DANAHER CORP		0.4754 %	2,590.00	187,364.56
	DELTA AIR LINES INC		0.7120 %	2,425.00	59,338.94
	DEMANDWARE INC		0.0000 %	590.00	31,363.02
	DEVON ENERGY CORPORATION		1.5957 %	2,905.00	214,085.97
	DISCOVER FINL SVCS		1.6967 %	1,745.00	96,004.78
	DISH NETWORK CORP CL A		0.0000 %	1,410.00	57,208.16
	Common Stock (Continued)				
	DOW CHEM CO		3.7694 %	1,305.00	63,920.88
	EAGLE MATERIALS INC		0.5595 %	820.00	61,600.62
	FACEBOOK INC A		0.0000 %	12,865.00	637,985.76
	FISERV INC		0.0000 %	2,815.00	170,731.91
	FORTUNE BRANDS HOME & SECURI		1.2486 %	1,170.00	46,275.36
	GENERAL ELECTRIC CO		3.7582 %	1,765.00	41,252.07
	GILEAD SCIENCES INC		0.0000 %	5,565.00	268,895.01
	GOOGLE INC CL A		0.0000 %	380.00	143,304.19
	GOOGLE INC CL C		0.0000 %	1,375.00	650,893.70
	HCA HOLDINGS INC		0.0000 %	6,625.00	324,558.07
	HD SUPPLY HOLDINGS INC		0.0000 %	5,130.00	129,699.53
	HALLIBURTON CO		1.7565 %	1,459.00	75,954.02
	HARTFORD FINANCIAL SERVICES GRP INC		1.7937 %	6,135.00	228,537.59
	HILTON WORLDWIDE HOLDINGS IN		0.0000 %	8,415.00	188,586.99
	HOME DEPOT INC		1.7842 %	6,275.00	483,357.00
	HONEYWELL INTERNATIONAL INC		2.0195 %	5,202.00	413,066.33
	INSULET CORP		0.0000 %	1,715.00	37,523.91
	INTERCEPT PHARMACEUTICALS IN		0.0000 %	60.00	16,558.45
	INTERNATIONAL BUSINESS MACHINES CORP		2.8229 %	565.00	105,298.55
	J P MORGAN CHASE CO		2.8229 %	1,245.00	70,845.78
	JARDEN CORP		0.0000 %	985.00	48,613.81
	L BRANDS INC		1.6028 %	2,120.00	119,213.14
	LAM RESEARCH CORP		0.8953 %	1,575.00	68,620.17
	LAMAR ADVERTISING CO A		6.2161 %	1,505.00	72,664.78
	LEVEL 3 COMMUNICATIONS INC		0.0000 %	1,805.00	79,966.72
	LINCOLN NAIL CORP INC		1.5334 %	865.00	43,075.01
	LINKEDIN CORP A		0.0000 %	520.00	102,788.08
				\$	\$
				1,305.00	63,920.88
				820.00	61,600.62
				12,865.00	637,985.76
				2,815.00	170,731.91
				1,170.00	46,275.36
				1,765.00	41,252.07
				5,565.00	268,895.01
				380.00	143,304.19
				1,375.00	650,893.70
				6,625.00	324,558.07
				5,130.00	129,699.53
				1,459.00	75,954.02
				6,135.00	228,537.59
				8,415.00	188,586.99
				6,275.00	483,357.00
				5,202.00	413,066.33
				1,715.00	37,523.91
				60.00	16,558.45
				565.00	105,298.55
				1,245.00	70,845.78
				985.00	48,613.81
				2,120.00	119,213.14
				1,575.00	68,620.17
				1,505.00	72,664.78
				1,805.00	79,966.72
				865.00	43,075.01
				520.00	102,788.08
				\$	\$
				1,305.00	63,920.88
				820.00	61,600.62
				12,865.00	637,985.76
				2,815.00	170,731.91
				1,170.00	46,275.36
				1,765.00	41,252.07
				5,565.00	268,895.01
				380.00	143,304.19
				1,375.00	650,893.70
				6,625.00	324,558.07
				5,130.00	129,699.53
				1,459.00	75,954.02
				6,135.00	228,537.59
				8,415.00	188,586.99
				6,275.00	483,357.00
				5,202.00	413,066.33
				1,715.00	37,523.91
				60.00	16,558.45
				565.00	105,298.55
				1,245.00	70,845.78
				985.00	48,613.81
				2,120.00	119,213.14
				1,575.00	68,620.17
				1,505.00	72,664.78
				1,805.00	79,966.72
				865.00	43,075.01
				520.00	102,788.08
				\$	\$
				1,305.00	63,920.88
				820.00	61,600.62
				12,865.00	637,985.76
				2,815.00	170,731.91
				1,170.00	46,275.36
				1,765.00	41,252.07
				5,565.00	268,895.01
				380.00	143,304.19
				1,375.00	650,893.70
				6,625.00	324,558.07
				5,130.00	129,699.53
				1,459.00	75,954.02
				6,135.00	228,537.59
				8,415.00	188,586.99
				6,275.00	483,357.00
				5,202.00	413,066.33
				1,715.00	37,523.91
				60.00	16,558.45
				565.00	105,298.55
				1,245.00	70,845.78
				985.00	48,613.81
				2,120.00	119,213.14
				1,575.00	68,620.17
				1,505.00	72,664.78
				1,805.00	79,966.72
				865.00	43,075.01
				520.00	102,788.08
				\$	\$
				1,305.00	63,920.88
				820.00	61,600.62
				12,865.00	637,985.76
				2,815.00	170,731.91
				1,170.00	46,275.36
				1,765.00	41,252.07
				5,565.00	268,895.01
				380.00	143,304.19
				1,375.00	650,893.70
				6,625.00	324,558.07
				5,130.00	129,699.53
				1,459.00	75,954.02
				6,135.00	228,537.59
				8,415.00	188,586.99
				6,275.00	483,357.00
				5,202.00	413,066.33
				1,715.00	37,523.91
				60.00	16,558.45
				565.00	105,298.55
				1,245.00	70,845.78
				985.00	48,613.81
				2,120.00	119,213.14
				1,575.00	68,620.17
				1,505.00	72,664.78
				1,805.00	79,966.72
				865.00	43,075.01
				520.00	102,788.08
				\$	\$
				1,305.00	63,920.88
				820.00	61,600.62
				12,865.00	637,985.76
				2,815.00	170,731.91
				1,170.00	46,275.36
				1,765.00	41,252.07
				5,565.00	268,895.01
				380.00	143,304.19
				1,375.00	650,893.70
				6,625.00	324,558.07
				5,130.00	129,699.53
				1,459.00	75,954.02
				6,135.00	228,537.59
				8,415.00	188,586.99
				6,275.00	483,357.00
				5,202.00	413,066.33
				1,715.00	37,523.91
				60.00	16,558.45
				565.00	105,298.55
				1,245.00	70,845.78
				985.00	48,613.81
				2,120.00	119,213.14
				1,575.00	68,620.17

NEW ORLEANS EMPLOYERS -
INTERNATIONAL LONGSHOREMEN'S ASSOCIATION, AFL-CIO
PENSION FUND
SUPPLEMENTARY INFORMATION
SCHEDULE H, LINE 4i
#72.6023317 Plan 001
SCHEDULE OF ASSETS (HELD AT END OF YEAR,
SEPTEMBER 30, 2014)

Party in Interest (a)	Description (b)	Description of Investment Including Maturity Date, Collateral, Par or Market Value (c)	Cost of Asset (d)	Current Value (e)
	LORILLARD INC	Common Stock 3.7261 %	43,081.00	43,734.30
	MARTIN MARIETTA MATLS INC	Common Stock 1.4568 %	1,495.00	192,765.30
	MCGRAW HILL FINANCIAL INC	Common Stock 1.3069 %	310.00	26,179.50
	MICROSOFT CORP	Common Stock 2.6282 %	10,500.00	486,780.00
	MICRON TECHNOLOGY INC	Common Stock 0.0000 %	11,565.00	396,216.90
	MOLSON COORS BREWING CO CL B	Common Stock 1.8952 %	1,190.00	88,583.60
	MONSANTO CO	Common Stock 1.6547 %	1,040.00	117,010.40
	MORGAN STANLEY	Common Stock 1.1380 %	11,020.00	380,961.40
	Common Stock (Continued)			
	NATIONAL OIL WELL VARCO INC	Common Stock 3.2196 %	1,695.00	128,989.50
	NIKE INC	Common Stock 1.1647 %	2,215.00	197,578.00
	PVH CORP	Common Stock 0.1339 %	800.00	96,920.00
	PEPSICO INC	Common Stock 2.6591 %	2,200.00	204,798.00
	PHARMACYCLICS INC	Common Stock 0.0000 %	1,115.00	130,934.45
	PIONEER NAT RES CO	Common Stock 0.0523 %	110.00	21,666.70
	PRECISION CASTPARTS CORP	Common Stock 0.0577 %	1,215.00	287,809.20
	PRICELINE COM INC	Common Stock 0.0000 %	55.00	63,721.90
	PROCTER & GAMBLE CO	Common Stock 2.8575 %	780.00	65,317.20
	QUANTA SVCS INC	Common Stock 0.0000 %	1,870.00	67,862.30
	RALPH LAUREN CORP	Common Stock 1.0665 %	1,010.00	166,377.30
	ST JUDE MED INC	Common Stock 1.6618 %	3,095.00	186,102.35
	SALESFORCE COM INC	Common Stock 0.0000 %	5,400.00	310,662.00
	SANDISK CORP	Common Stock 1.5060 %	1,630.00	159,658.50
	SEMPRA ENERGY	Common Stock 2.2941 %	280.00	29,506.40
	STARBUCKS CORP	Common Stock 1.4509 %	3,180.00	239,962.80
	SUNEDISON INC	Common Stock 0.0000 %	7,470.00	141,033.60
	THERMO FISHER SCIENTIFIC INC	Common Stock 0.4805 %	3,430.00	417,431.00
	TIFFANY & CO	Common Stock 1.6689 %	360.00	34,671.60
	TIME WARNER CABLE INC	Common Stock 2.0810 %	1,110.00	159,273.90
	TRIPADVISOR INC	Common Stock 0.0000 %	435.00	39,767.70
	UNION PACIFIC CORP	Common Stock 1.6654 %	1,690.00	183,229.80
	UNITED RENTALS INC	Common Stock 0.0000 %	965.00	107,211.50
	VERTEX PHARMACEUTICALS INC	Common Stock 0.0000 %	460.00	51,662.60
	VISA INC	Common Stock 0.7434 %	2,125.00	453,411.25

NEW ORLEANS EMPLOYERS -
INTERNATIONAL LONGSHOREMEN'S ASSOCIATION, AFL-CIO
PENSION FUND
SUPPLEMENTARY INFORMATION
SCHEDULE H, LINE 4i
#72.6023317 Plan 001
SCHEDULE OF ASSETS (HELD AT END OF YEAR)
SEPTEMBER 30, 2014

Party in Interest	Description	Including Maturity Date, Collateral, Par or Market Value	Description of Investment	Cost of Asset	Current Value
(a)	(b)	(c)	(d)	(e)	(f)
	WABCO HLDGS INC	Common Stock	0.0000 %	52,795.26	71,395.75
	WALGREEN CO	Common Stock	1.8053 %	141,640.84	125,948.75
	WESTERN DIGITAL CORP	Common Stock	1.5080 %	40,282.46	51,579.60
	YAHOO INC	Common Stock	0.0000 %	179,912.91	226,570.00
	ACTIVISION BLIZZARD INC	Common Stock	0.9685 %	68,721.38	111,933.36
	AGILENT TECHNOLOGIES INC	Common Stock	1.0307 %	49,050.40	90,484.24
	AKAMAI TECHNOLOGIES INC	Common Stock	0.0000 %	72,318.12	150,456.80
	ALLEGHENY TECHNOLOGIES INC	Common Stock	2.6354 %	72,118.77	96,831.00
	AMERISOURCEBERGEN CORP	Common Stock	1.2245 %	77,205.25	123,680.00
	ANSYS INC	Common Stock	0.0000 %	50,412.68	92,771.42
	Common Stock (Continued)				
	AUTODESK INC	Common Stock	0.0000 %	2,185.00	120,393.50
	CR BARD INC	Common Stock	0.4938 %	602.00	85,911.42
	BIO RAD LABS INC	Common Stock	0.0000 %	577.00	65,431.80
	BORG WARNER INC	Common Stock	0.9493 %	2,620.00	137,838.20
	CBRE GROUP INC	Common Stock	0.0000 %	5,208.00	154,885.92
	CSX CORP	Common Stock	1.8567 %	4,716.00	151,194.96
	CABOT CORP	Common Stock	2.1328 %	1,365.00	69,301.05
	COVANCE INC	Common Stock	0.0000 %	1,261.00	99,240.70
	CUMMINS INC	Common Stock	2.1392 %	1,100.00	145,178.00
	D R HORTON INC	Common Stock	1.0823 %	7,491.00	153,715.32
	DARDEN RESTAURANTS INC	Common Stock	3.5936 %	1,755.00	90,312.30
	DOVER CORP	Common Stock	2.2936 %	1,119.00	89,889.27
	EASTMAN CHEM CO	Common Stock	2.3141 %	1,935.00	156,522.15
	EATON VANCE CORP	Common Stock	2.4931 %	2,941.00	110,963.93
	ECHOSTAR CORPORATION A	Common Stock	0.0000 %	1,980.00	96,544.80
	EXPRESS SCRIPTS HLDGS C	Common Stock	0.0000 %	1,740.00	122,896.20
	G A T X CORP	Common Stock	2.3150 %	2,129.00	124,269.73
	GENERAL DYNAMICS CORP	Common Stock	1.7549 %	923.00	117,304.07
	GLOBAL PAYMENTS INC	Common Stock	0.0906 %	1,300.00	90,844.00
	INTEGRYS ENERGY GROUP INC	Common Stock	3.3038 %	1,666.00	107,990.12
	INTERNATIONAL EXCHANGE IN	Common Stock	1.1998 %	748.00	145,897.40
	INTERNATIONAL GAME TECHNOLOGY	Common Stock	2.5943 %	3,993.00	67,361.91
	INTUIT INC	Common Stock	1.1183 %	2,375.00	208,168.75

NEW ORLEANS EMPLOYERS -
INTERNATIONAL LONGSHOREMEN'S ASSOCIATION, AFL-CIO
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SCHEDULE H, LINE 4i
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SCHEDULE OF ASSETS (HELD AT END OF YEAR,
SEPTEMBER 30, 2014)

Party in Interest (a)	Description (b)	Including Maturity Date, Collateral, Par or Market Value (c)	Description of Investment (d)	Cost of Asset (e)	Current Value (f)
	JOY GLOBAL INC	Common Stock	1.8540 %	1,866.00	101,771.64
	KEYCORP NEW	Common Stock	1.9593 %	7,945.00	105,906.85
	MASCO CORP	Common Stock	1.4604 %	5,111.00	122,255.12
	MEDNAX INC	Common Stock	0.0000 %	1,506.00	82,558.92
	MURPHY OIL CORP	Common Stock	3.0024 %	1,090.00	62,031.90
	NEWFIELD EXPL CO	Common Stock	0.0000 %	2,970.00	110,097.90
	PROGRESSIVE CORP	Common Stock	1.8611 %	3,489.00	88,201.92
	PROTECTIVE LIFE CORP	Common Stock	1.3724 %	1,273.00	88,358.93
	RAYMOND JAMES FINL INC	Common Stock	1.3686 %	2,580.00	138,236.40
	REINSURANCE GROUP AMERICA	Common Stock	1.5623 %	1,305.00	104,569.65
	REPUBLIC SVCS INC	Common Stock	2.7310 %	3,807.00	148,549.14
	SBA COMMUNICATIONS CORP CL A	Common Stock	0.0000 %	1,967.00	218,140.30
	Common Stock (Continued)				
	THE SCOTT'S MIRACLE GRO COMPANY	Common Stock	2.8280 %	1,373.00	75,515.00
	SEALED AIR CORP	Common Stock	1.2987 %	4,548.00	158,634.24
	SNAP ON INC	Common Stock	1.5781 %	1,530.00	185,252.40
	STIFEL FINL CORP	Common Stock	0.0000 %	2,400.00	112,536.00
	SYNOFYS INC	Common Stock	0.0000 %	2,212.00	87,805.34
	TIX COMPANIES INC	Common Stock	1.0350 %	3,543.00	209,639.31
	URS CORPORATION	Common Stock	1.6236 %	1,481.00	85,320.41
	VALSPAR CORP	Common Stock	1.3769 %	2,213.00	174,804.87
	WHITING PETROLEUM CORE	Common Stock	0.0000 %	1,441.00	111,749.55
	XILINX INC	Common Stock	2.9532 %	2,741.00	116,081.35
	AGCO CORP	Common Stock	1.0087 %	6,300.00	286,398.00
	ABBOTT LABORATORIES	Common Stock	2.1888 %	5,500.00	228,745.00
	ABBVIE INC	Common Stock	3.1395 %	4,000.00	231,040.00
	ACTIVISION BLIZZARD INC	Common Stock	0.9685 %	8,700.00	180,873.00
	ADVANCE AUTO PARTS INC	Common Stock	0.1541 %	1,400.00	182,420.00
	AETNA INC	Common Stock	1.0584 %	2,800.00	226,800.00
	AIR PRODS CHEMICALS INC	Common Stock	2.1469 %	300.00	39,054.00
	ALBEMARLE CORP	Common Stock	1.9353 %	700.00	41,230.00
	ALLSTATE CORP	Common Stock	1.5680 %	3,100.00	190,247.00
	AMEREN CORP	Common Stock	3.5398 %	3,200.00	122,656.00
	AMERICAN ELECTRIC POWER	Common Stock	3.2858 %	2,400.00	125,304.00

NEW ORLEANS EMPLOYERS -
INTERNATIONAL LONGSHOREMEN'S ASSOCIATION, AFL-CIO
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Party in Interest	Description	Including Maturity, Date, Collateral, Par or Market Value	Description of Investment	Cost of Asset (d)	Current Value (e)
	(b)	(c)			
	AMERICAN INTERNATIONAL GROUP	Common Stock	0.9707 %	178,259.78	183,668.00
	AMERIPRISE FINL INC	Common Stock	1.7918 %	70,469.65	197,408.00
	AMPHENOL CORP CL A	Common Stock	0.9106 %	146,198.11	289,594.00
	APACHE CORP	Common Stock	1.5903 %	104,343.99	103,257.00
	APPLE INC	Common Stock	1.6640 %	271,422.76	282,100.00
	ARCHER DANIELS MIDLAND CC	Common Stock	2.0054 %	26,332.14	45,990.00
	AUTOLIV INC	Common Stock	2.0928 %	211,122.09	275,760.00
	BALL CORP	Common Stock	0.8140 %	20,574.60	44,289.00
	BOEING CO	Common Stock	2.7039 %	200,693.37	280,236.00
	BROADCOM CORP CL A	Common Stock	1.1439 %	280,841.38	299,108.00
	CIGNA CORP	Common Stock	0.0364 %	175,846.39	226,725.00
	CAPITAL ONE FINANCIAL CORP	Common Stock	1.5464 %	165,197.67	195,888.00
	CELANESE CORP SER A	Common Stock	1.8639 %	29,547.08	46,230.80
	CHEVRON CORPORATION	Common Stock	4.0056 %	67,431.24	95,456.00
	Common Stock (Continued)				
	CISCO SYSTEMS INC	Common Stock	2.6941 %	273,076.16	281,904.00
	CLIFFS NATURAL RESOURCES INC	Common Stock	8.0107 %	74,292.30	33,216.00
	COMCAST CORP CL A	Common Stock	1.5983 %	134,519.73	172,096.00
	CONOCOPHILLIPS	Common Stock	4.5166 %	62,524.61	99,476.00
	CONSOLIDATED EDISON INC	Common Stock	3.6948 %	122,377.27	124,652.00
	CROWN HOLDINGS INC	Common Stock	0.0000 %	42,402.61	44,520.00
	CUMMINS INC	Common Stock	2.1392 %	182,436.77	277,158.00
	DIAMOND OFFSHORE DRILLING INC	Common Stock	1.5571 %	162,627.39	89,102.00
	DISCOVER FINL SVCS	Common Stock	1.6967 %	78,856.50	186,731.00
	DOW CHEM CO	Common Stock	3.7694 %	27,167.74	47,196.00
	DR PEPPER SNAPPLE GROUP	Common Stock	2.0889 %	157,784.86	231,516.00
	DU PONT E I DE NEMOURS & CO	Common Stock	2.5478 %	25,490.85	43,056.00
	EASTMAN CHEM CO	Common Stock	2.3141 %	32,138.35	48,534.00
	EDISON INTL	Common Stock	2.4419 %	98,799.91	123,024.00
	ELECTRONIC ARTS INC	Common Stock	0.0000 %	135,434.53	181,611.00
	ENERGY CORPORATION	Common Stock	3.7054 %	111,677.69	123,728.00
	EXELON CORPORATION	Common Stock	3.3182 %	120,452.63	119,315.00
	EXPEDIA INC	Common Stock	0.8234 %	184,108.55	192,764.00
	EXPRESS SCRIPTS HLDGS C	Common Stock	0.0000 %	238,366.10	218,953.00

NEW ORLEANS EMPLOYERS -
INTERNATIONAL LONGSHOREMEN'S ASSOCIATION, AFL-CIO
PENSION FUND
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SCHEDULE H, LINE 4i
#72.6023317 Plan 001
SCHEDULE OF ASSETS (HELD AT END OF YEAR,
SEPTEMBER 30, 2014)

Party in Interest	Description	Description of Investment		Cost of Asset	Current Value	
		Including Maturity Date, Collateral, Par or Market Value				
(a)	(b)	(c)	(d)	(e)		
EXXON MOBIL CORP		Common Stock	3.0366 %	1,100.00	90,986.16	103,455.00
FIRST ENERGY CORP		Common Stock	3.4926 %	3,500.00	130,677.51	117,495.00
FLEETCOR TECHNOLOGIES INC		Common Stock	0.0000 %	2,100.00	258,543.57	298,452.00
FLUOR CORP		Common Stock	1.5467 %	4,200.00	277,910.82	280,518.00
FOOT LOCKER INC		Common Stock	1.6464 %	3,200.00	148,340.28	178,080.00
FRANKLIN RES INC		Common Stock	1.1255 %	3,600.00	123,136.06	196,596.00
FREEMPORT MCMORAN INC		Common Stock	6.4969 %	1,400.00	50,293.42	45,710.00
GENERAL DYNAMICS CORP		Common Stock	1.7549 %	2,200.00	190,039.67	279,598.00
GOLDMAN SACHS GROUP INC		Common Stock	1.3297 %	1,100.00	163,747.31	201,927.00
HANESBRANDS INC		Common Stock	1.0485 %	1,700.00	146,552.85	182,648.00
HARTFORD FINANCIAL SERVICES GRP INC		Common Stock	1.7937 %	5,100.00	125,733.20	189,975.00
HASBRO INC		Common Stock	3.1307 %	3,400.00	186,273.59	186,983.00
HELMERICH PAYNE INC		Common Stock	4.3679 %	1,000.00	63,848.87	97,870.00
HESS CORP		Common Stock	1.4118 %	1,100.00	82,770.87	103,752.00
HEWLETT PACKARD CO		Common Stock	1.5968 %	8,200.00	309,650.18	290,854.00
HOME DEPOT INC		Common Stock	1.7842 %	1,900.00	122,631.54	174,306.00
Common Stock (Continued)						
INGREDION INC		Common Stock	1.9603 %	600.00	33,214.17	45,474.00
INTEL CORP		Common Stock	2.6341 %	8,100.00	217,096.20	282,042.00
INTERNATIONAL PAPER CO		Common Stock	2.9591 %	900.00	23,371.61	42,966.00
J P MORGAN CHASE CO		Common Stock	2.8229 %	3,200.00	129,797.67	192,768.00
JOHNSON JOHNSON		Common Stock	2.7397 %	2,200.00	155,257.19	234,498.00
KEYCORP NEW		Common Stock	1.9593 %	14,300.00	135,780.86	190,619.00
KIMBERLY CLARK CORP		Common Stock	3.0094 %	2,200.00	177,007.81	236,654.00
ELI LILLY CC		Common Stock	2.7728 %	3,500.00	153,893.89	226,975.00
LINCOLN NATL CORP INT.		Common Stock	1.5334 %	3,600.00	103,305.69	192,888.00
LOCKHEED MARTIN CORP		Common Stock	3.0389 %	1,700.00	179,221.09	310,726.00
MACYS INC		Common Stock	1.8988 %	3,000.00	164,479.25	174,540.00
MARATHON PETROLEUM CORP		Common Stock	2.2946 %	1,200.00	95,825.76	101,604.00
MEILIFE INC		Common Stock	2.8706 %	3,500.00	122,356.74	188,020.00
MOLSON COORS BREWING CO CL B		Common Stock	1.8952 %	3,184.00	216,345.40	237,016.96
NEWELL RUBBERMAID INC		Common Stock	1.8177 %	5,300.00	176,020.65	182,373.00
NORTROP GRUMMAN CORPORATION		Common Stock	1.7927 %	2,300.00	157,394.51	303,048.00
NVIDIA CORP		Common Stock	1.6417 %	15,700.00	301,980.79	289,665.00

NEW ORLEANS EMPLOYERS -
INTERNATIONAL LONGSHOREMEN'S ASSOCIATION, AFL-CIO
PENSION FUND
SUPPLEMENTARY INFORMATION
SCHEDULE H, LINE 4i
#72.6023317 Plan 001
SCHEDULE OF ASSETS (HELD AT END OF YEAR,
SEPTEMBER 30, 2014)

Party in Interest	Description	Description of Investment		Cost of Asset	Current Value
(a)	(b)	Including Maturity Date	Par or Market Value	(d)	(e)
	OCCIDENTAL PETROLEUM CORPORATION	Common Stock	3.6325 %	1,100.00	105,765.00
	P P G INDS INC	Common Stock	1.1764 %	200.00	39,348.00
	PARKER HANIFIN CORP	Common Stock	2.0661 %	2,500.00	285,375.00
	PATTERSON UT ENERGY INC	Common Stock	2.5221 %	3,200.00	104,096.00
	PFIZER INC	Common Stock	3.4515 %	7,700.00	227,689.00
	PHILIP MORRIS INTL	Common Stock	4.8298 %	2,800.00	233,520.00
	PINNACLE WEST CAP CORP	Common Stock	3.2937 %	2,100.00	114,744.00
	PITNEY BOWES INC	Common Stock	3.0877 %	11,400.00	284,886.00
	POLARIS INDS INC	Common Stock	1.4122 %	1,200.00	179,748.00
	PRICELINE COM INC	Common Stock	0.0000 %	200.00	231,716.00
	PRINCIPAL FINANCIAL GROUP INC	Common Stock	2.7892 %	3,500.00	183,645.00
	PRUDENTIAL FINANCIAL INC	Common Stock	2.8752 %	2,200.00	193,468.00
	PUBLIC SVC ENTERPRISE GROUP INC	Common Stock	3.3636 %	3,200.00	119,168.00
	REGIONS FINL CORP	Common Stock	2.2198 %	19,200.00	192,768.00
	RELIANCE STEEL ALUMINUM	Common Stock	2.6606 %	600.00	41,040.00
	ST JUDE MED INC	Common Stock	1.6618 %	3,600.00	216,468.00
	STRYKER CORP	Common Stock	1.4887 %	2,800.00	226,100.00
	SUNTRUST BKS INC	Common Stock	2.0279 %	4,800.00	182,544.00
	Common Stock (Continued)				
	SUPERIOR ENERGY SVCS INC	Common Stock	1.6360 %	3,200.00	105,184.00
	TEXAS INSTRUMENTS INC	Common Stock	2.4700 %	5,900.00	281,371.00
	3M CO	Common Stock	2.4997 %	2,000.00	283,360.00
	UNITED HEALTH GROUP INC	Common Stock	1.3393 %	2,600.00	224,250.00
	UNUM GROUP	Common Stock	2.0548 %	5,300.00	182,214.00
	WELLPOINT INC	Common Stock	1.3681 %	1,900.00	227,278.00
	WESTERN UNION CO	Common Stock	2.8393 %	13,600.00	218,144.00
	Foreign Stocks				
	ALIBABA GROUP HOLDING LTD A D F	Foreign Stocks	0.0000 %	440.00	39,094.00
	ANHEUSER BUSCH INBEV NV A D R	Foreign Stocks	2.2298 %	385.00	42,677.25
	CANADIAN NATL RY CC	Foreign Stocks	1.2667 %	1,100.00	78,056.00
	CTRP COM INTERNATIONAL A D R	Foreign Stocks	0.0000 %	1,300.00	73,788.00
	SAP SE SPONSORED A D R	Foreign Stocks	2.7635 %	1,465.00	105,714.40
	VALEANT PHARMACEUTICALS INTE	Foreign Stocks	0.0000 %	355.00	46,576.00

NEW ORLEANS EMPLOYERS -
INTERNATIONAL LONGSHOREMEN'S ASSOCIATION, AFL-CIO
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SCHEDULE H, LINE 4i
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SCHEDULE OF ASSETS (HELD AT END OF YEAR,
SEPTEMBER 30, 2014)

Party in Interest	Description (b)	Description of Investment		Current Value (e)
(a)	(b)	Including Maturity Date	Collateral, Par or Market Value	(d)
	ACTAVIS PLC	Foreign Stocks	0.0000 %	480,228.22
	DELPHI AUTOMOTIVE PLC	Foreign Stocks	1.4353 %	172,710.33
	EATON CORP PLC	Foreign Stocks	2.9249 %	77,207.79
	INGERSOLL RAND PLC	Foreign Stocks	1.5466 %	56,195.21
	WEATHERFORD INTERNATIONAL PL	Foreign Stocks	0.0000 %	322,548.02
	MICHAEL KORS HOLDINGS LLD	Foreign Stocks	0.0000 %	34,161.07
	SIGNET JEWELERS LTD	Foreign Stocks	0.5767 %	127,112.36
	TYCO INTERNATIONAL LTD	Foreign Stocks	1.6682 %	139,365.64
	NIELSEN NV	Foreign Stocks	2.2292 %	144,251.30
	NXP SEMICONDUCTORS NV	Foreign Stocks	0.0900 %	128,957.22
	ROYAL CARIBBEAN CRUISES LTI	Foreign Stocks	1.4200 %	217,381.10
	AVAGO TECHNOLOGIES	Foreign Stocks	1.3087 %	170,107.22
	NABORS INDUSTRIES LTD	Foreign Stocks	2.1583 %	99,831.53
	RENAISSANCE RE HOLDINGS LTI	Foreign Stocks	1.2041 %	86,852.00
	AGRIUM INC	Foreign Stocks	2.9854 %	44,845.66
	BP PLC SPONS A D R	Foreign Stocks	6.1697 %	113,193.53
	E N I SPA A D R	Foreign Stocks	6.6736 %	107,224.34
	NOVARTIS AG A D R	Foreign Stocks	2.4135 %	203,272.63
	ROYAL DUTCH SHELL PLC A D R	Foreign Stocks	4.9026 %	81,502.16
	TALISMAN ENERGY INC	Foreign Stocks	3.5762 %	163,805.69
				512,720.00
				214,690.00
				72,115.06
				55,232.80
				377,520.00
				30,340.75
				125,301.00
				204,576.30
				135,871.45
				197,762.70
				252,001.05
				204,885.00
				139,632.60
				93,990.60
				44,500.00
				96,690.00
				106,312.50
				244,738.00
				98,969.00
				90,825.00
				\$
				62,393.40
				90,735.24
				32,384.65
				246,024.00
				101,920.00
				97,868.00
				182,256.00
				188,766.00
				99,107.00
				43,464.00
				181,753.00
				181,683.00
				\$
				2,300.00
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				187,635.76
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NEW ORLEANS EMPLOYERS -
INTERNATIONAL LONGSHOREMEN'S ASSOCIATION, AFL-CIO
PENSION FUND
SUPPLEMENTARY INFORMATION
SCHEDULE H, LINE 4i
#72.6023317 Plan 001
SCHEDULE OF ASSETS (HELD AT END OF YEAR,
SEPTEMBER 30, 2014)

Party in Interest (a)	Description (b)	Including Maturity Date, Collateral, Par or Market Value (c)	Description of Investment (d)	Cost of Asset (d)	Current Value (e)
	Collective Investment Funds				
	LONGVIEW ULTRA CONSTRUCTION LOAN		Collective Investment Funds	2,815.71	3,468,374.18
	ASB ALLEGIANCE REAL ESTATE		Collective Investment Funds	10,809.20	11,577,222.85
	MULTI-EMPLOYER PROPERTY TRUST		Collective Investment Funds	552.00	4,493,858.94
	PRINCIPAL REAL ESTATE INV US		Collective Investment Funds	218,025.49	7,790,161.40
	CIF OPP INVEST ALLOCATION		Collective Investment Funds	195,789.96	2,445,416.65
	AFL-CIO EQUITY INDEX FUND		Collective Investment Funds	265,305.67	4,232,713.17
	BLACKROCK GLOBAL ALLOCATION		Collective Investment Funds	369,062.47	4,120,881.42
	Partnerships/Joint Ventures				
	ROTHSCHILD SMALL CAP TRUST		Partnerships/Joint Ventures	5,473,435.00	5,473,435.00
	FIRST EAGLE GLOBAL VALUE FUND		Partnerships/Joint Ventures	2,740.40	5,291,215.12
	GIPMS GROSVENOR INSTITUTIONAL		Partnerships/Joint Ventures	7,453,333.00	7,453,336.28
	LOOMIS HIGH YIELD CONSERVATIVE TR E		Partnerships/Joint Ventures	786,878.14	15,241,829.47
	RBC GAM INTERNATIONAL FUND		Partnerships/Joint Ventures	404,523.96	18,419,348.61
				<u>\$ 112,267,270.00</u>	<u>\$ 146,014,371.00</u>



December 27, 2013

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

To Whom It May Concern:

As required by ERISA Section 305 and the Internal Revenue Code (IRC) Section 432, we have completed the actuarial status certification as of October 1, 2013 for the following plan:

Name of Plan: New Orleans Employers - International Longshoremen's Association, AFL-CIO Pension Plan
Plan number: EIN 72-6023317/ PN 001
Plan sponsor: Board of Trustees, New Orleans Employers - International Longshoremen's Association, AFL-CIO Pension Plan

Address: 147 Carondelet Street, Suite 300, New Orleans, LA 70130-2501
Phone number: (504)525-0309

As of October 1, 2013, the Plan is in critical status.

This certification also notifies the IRS that the Plan is making the scheduled progress in meeting the requirements of its rehabilitation plan, based on the annual standards of the rehabilitation plan.

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

Segal Consulting
2018 Powers Ferry Road, Suite 850
Atlanta, GA 30339
Phone number: 678.306.3100

Sincerely,

A handwritten signature in black ink, appearing to read "K. Eric Fredén".

K. Eric Fredén, FSA, MAAA
Vice President & Consulting Actuary
Enrolled Actuary No. 11-0553

Actuarial Status Certification as of October 1, 2013 under IRC Section 432 for the New Orleans Employers - International Longshoremens Association, AFL-CIO Pension Plan

EIN 72-6023317/ PN 001

December 27, 2013

**Illustration Supporting Actuarial Certification of Status (Schedule MB, line 4a)
ACTUARIAL STATUS CERTIFICATION AS OF OCTOBER 1, 2013 UNDER IRC SECTION 432**

This is to certify that Segal Consulting, a Member of The Segal Group, Inc. ("Segal") has prepared an actuarial status certification under Internal Revenue Code Section 432 for the New Orleans Employers - International Longshoremens Association, AFL-CIO Pension Plan as of October 1, 2013 in accordance with generally accepted actuarial principles and practices. It has been prepared at the request of the Board of Trustees to assist in administering the Plan and meeting filing and compliance requirements under federal law. This certification may not otherwise be copied or reproduced in any form without the consent of the Board of Trustees and may only be provided to other parties in its entirety.

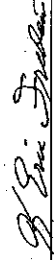
The measurements shown in this actuarial certification may not be applicable for other purposes. Future actuarial measurements may differ significantly from the current measurements presented in this report due to such factors as the following: plan experience differing from that anticipated by the economic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

This certification is based on the October 1, 2012 actuarial valuation, dated April 22, 2013. Additional assumptions required for the projections, and sources of financial information used are summarized in Exhibit V.

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

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

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



K. Eric Fredén, FSA, MAAA
Vice President & Consulting Actuary
Enrolled Actuary No. 11-0553

Actuarial Status Certification as of October 1, 2013 under IRC Section 432 for the New Orleans Employers - International
Longshoremen's Association, AFL-CIO Pension Plan

EIN 72-6023317/ PN 001

Certificate Contents

EXHIBIT I	Status Determination as of October 1, 2013
EXHIBIT II	Summary of Actuarial Valuation Projections
EXHIBIT III	Funding Standard Account Projections
EXHIBIT IV	Funding Standard Account – Projected Bases Assumed Established After October 1, 2012
EXHIBIT V	Actuarial Assumptions and Methodology

Actuarial Status Certification as of October 1, 2013 under IRC Section 432 for the New Orleans Employers - International Longshoremen's Association, AFL-CIO Pension Plan

EIN 72-6023317/ PN 001

EXHIBIT I

Status Determination as of October 1, 2013

Status	Condition	Test Component Result	Final Result
Critical Status			
1.	Funding deficiency projected in four years?		Yes
2.	Funding deficiency projected in five years AND present value of vested benefits for non-actives more than present value of vested benefits for actives AND normal cost plus interest on unfunded actuarial accrued liability (unit credit basis) greater than contributions for current year?	Yes Yes Yes	Yes Yes Yes
3.	Funding deficiency projected in five years	Yes	Yes
4.	AND funded percentage less than 65%? Funded percentage less than 65%	Yes Yes	Yes Yes
5.	AND assets plus contributions less than benefit payments and administrative expenses over seven years?	No	No
6.	Assets plus contributions less than benefit payments and administrative expenses over five years?	No	No
	In critical status for immediately preceding plan year and funding deficiency projected within ten years?		Yes
	In Critical Status?		Yes
Endangered Status			
1.	Funded percentage less than 80% AND not in Critical Status?	N/A N/A	N/A N/A
2.	Funding deficiency projected in seven years AND not in Critical Status?	N/A N/A	N/A N/A
	In Endangered Status?		No
	In Seriously Endangered Status?		No
	Neither Critical Status Nor Endangered Status		No
	Neither Critical nor Endangered Status?		No

This certification also notifies the IRS that the Plan is making the scheduled progress in meeting the requirements of its Rehabilitation Plan, based on the annual standards of the Rehabilitation Plan. The annual standards in the Rehabilitation Plan specify that the projected funding deficiency as of September 30, 2014 shall not exceed \$50,000,000. Since the projected deficiency is \$25,912,560, the annual standard for 2013 has been met.

**Actuarial Status Certification as of October 1, 2013 under IRC Section 432 for the New Orleans Employers - International
Longshoremen's Association, AFL-CIO Pension Plan**

EIN 72-6023317/ PN 001

**EXHIBIT II
Summary of Actuarial Valuation Projections**

The actuarial factors as of October 1, 2013 (based on projections from the October 1, 2012 valuation certificate):

	October 1, 2013
I. Asset and Contribution Information	
1. Market value of assets	\$154,886,115
2. Actuarial value of assets	143,365,911
3. Reasonably anticipated contributions	
a. Upcoming year	8,593,200
b. Present value for the next five years	35,962,217
c. Present value for the next seven years	47,079,324
II. Liabilities	
1. Present value of vested benefits for active participants	25,274,719
2. Present value of vested benefits for non-active participants	216,950,257
3. Total unit credit accrued liability	243,522,198
4. Present value of payments	
a. Next five years	\$108,663,657
b. Next seven years	138,595,758
5. Unit credit normal cost plus expenses	
III. Funded Percentage (I.2)/(II.3)	Total
IV. Funding Standard Account	
1. Credit Balance as of the end of prior year	\$112,080,310
2. Years to projected funding deficiency, if within ten years	143,187,220
	2,004,368
	58.9%
	-\$16,353,449
	0

**Actuarial Status Certification as of October 1, 2013 under IRC Section 432 for the New Orleans Employers - International
Longshoremen's Association, AFL-CIO Pension Plan**

EIN 72-6023317/ PN 001

**EXHIBIT III
Funding Standard Account Projections**

The table below presents the Funding Standard Account Projections for the Plan Years beginning October 1, 2012 through 2022.

	Year Beginning October 1,									
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Credit balance at beginning of year	-\$9,182,332	-\$16,353,449	-\$25,859,313	-\$35,747,946	-\$46,012,102	-\$56,494,379	-\$63,902,846	-\$70,479,015	-\$75,030,694	-\$78,585,926
2. Interest on (1)	-688,675	-1,226,509	-1,939,448	-2,681,096	-3,450,908	-4,237,078	-4,792,713	-5,285,926	-5,781,642	-6,285,926
3. Normal cost	1,355,071	1,211,852	1,211,852	1,211,852	1,211,852	1,211,852	1,211,852	1,211,852	1,211,852	1,211,852
4. Administrative expenses	721,344	742,984	765,274	788,232	811,879	836,235	861,322	887,162	913,000	938,837
5. Net amortization charges	12,289,059	14,015,346	13,685,921	13,322,382	12,785,534	9,170,499	7,854,312	5,486,422	3,118,537	785,926
6. Interest on (3), (4) and (5)	1,077,411	1,197,764	1,174,729	1,149,185	1,110,695	841,394	744,561	568,908	413,000	268,837
7. Expected contributions	8,662,664	8,593,200	8,593,200	8,593,200	8,593,200	8,593,200	8,593,200	8,593,200	8,593,200	8,593,200
8. Interest on (7)	297,779	295,391	295,391	295,391	295,391	295,391	295,391	295,391	295,391	295,391
9. Credit balance at end of year: (1) + (2) - (3) - (4) - (5) - (6) + (7) + (8)	-\$16,353,449	-\$25,859,313	-\$35,747,946	-\$46,012,102	-\$56,494,379	-\$63,902,846	-\$70,479,015	-\$75,030,694	-\$78,585,926	-\$82,141,752

Actuarial Status Certification as of October 1, 2013 under IRC Section 432 for the New Orleans Employers - International
 Longshoremen's Association, AFL-CIO Pension Plan

EIN 72-6023317/ PN 001

EXHIBIT III
Funding Standard Account Projections (continued)

	Year Beginning October 1,		
	2020	2021	2022
1. Credit balance at beginning of year	-\$75,030,694	-\$78,094,520	-\$81,807,080
2. Interest on (1)	-5,627,302	-5,857,089	-6,135,531
3. Normal cost	1,211,852	1,211,852	1,211,852
4. Administrative expenses	913,777	941,190	969,426
5. Net amortization charges	3,758,199	4,120,504	5,761,407
6. Interest on (3), (4) and (5)	441,287	470,516	595,701
7. Expected contributions	8,593,200	8,593,200	8,593,200
8. Interest on (7)	<u>295,391</u>	<u>295,391</u>	<u>295,391</u>
9. Credit balance at end of year: (1) + (2) - (3) - (4) - (5) - (6) + (7) + (8)	-\$78,094,520	-\$81,807,080	-\$87,592,406

Actuarial Status Certification as of October 1, 2013 under IRC Section 432 for the New Orleans Employers - International
 Longshoremen's Association, AFL-CIO Pension Plan

EIN 72-6023317/ PN 001

EXHIBIT IV
Funding Standard Account – Projected Bases Assumed Established After October 1, 2012

Schedule of Funding Standard Account Bases

Type of Base	Date Established	Base Established	Amortization Period	Amortization Payment
Experience loss	10/01/2013	\$4,743,731	15	\$499,911
Experience gain	10/01/2014	-3,125,967	15	-329,425
Experience gain	10/01/2015	-3,449,674	15	-363,539
Experience gain	10/01/2016	-5,094,233	15	-536,848
Experience gain	10/01/2017	-2,038,669	15	-214,842

Actuarial Status Certification as of October 1, 2013 under IRC Section 432 for the New Orleans Employers - International
Longshoremen's Association, AFL-CIO Pension Plan

EIN 72-6023317/ PN 001

EXHIBIT V

Actuarial Assumptions and Methodology

The actuarial assumptions and plan of benefits are as used in the October 1, 2012 actuarial valuation certificate, dated April 22, 2013, except as specifically described below. We also assumed that experience would emerge as projected, except as described below. The calculations are based on a current understanding of the requirements of ERISA Section 305 and IRC Section 432.

Contribution Rates:

Effective October 1, 2012, an average contribution rate of \$8.68 was assumed based on information provided by the plan sponsor.

Asset Information:

The financial information as of October 1, 2013 was based on an unaudited financial statement provided by the Fund Auditor.

For projections after that date, the assumed administrative expenses were increased by 3% per year and the benefit payments were projected based on the October 1, 2012 actuarial valuation. The projected net investment return was assumed to be 7.5% of the average market value of assets for the 2013 - 2022 Plan Years. Any resulting investment gains or losses due to the operation of the asset valuation method are amortized over 15 years in the Funding Standard Account.

Projected Industry Activity:

As required by Internal Revenue Code Section 432, assumptions with respect to projected industry activity are based on information provided by the plan sponsor. Based on this information, the number of active participants is assumed to decrease to 550 active participants with the October 1, 2013 valuation and then remain level, and, on the average, contributions will be made for each active for 1800 hours each year.

Future Normal Costs:

Based on the assumed industry activity and the unit credit cost method, we have assumed that the Normal Cost will decrease by the ratio of 550 active lives to last year's 615 active lives in the first year and then remain level.

Technical Issues

Segal Consulting ("Segal") does not practice law and, therefore, cannot and does not provide legal advice.

**Actuarial Status Certification as of October 1, 2013 under IRC Section 432 for the New Orleans Employers - International
Longshoremen's Association, AFL-CIO Pension Plan**

EIN 72-6023317/ PN 001

Any statutory interpretation on which the certification is based reflects Segal's understanding as an actuarial firm. Due to the complexity of the statute and the significance of its ramifications, Segal recommends that the Board of Trustees consult with legal counsel when making any decisions regarding compliance with ERISA and the Internal Revenue Code.

SECTION 4: Certificate of Actuarial Valuation as of October 1, 2013 for the New Orleans Employers - International Longshoremen's Association, AFL-CIO Pension Plan

EIN 72-6023317/ PN 001

EXHIBIT IV (continued)

Funding Standard Account

**Schedule of Funding Standard Account Bases (Charges)
(Schedule MB, line 9c)**

Type of Base	Date Established	Amortization Amount	Years Remaining	Outstanding Balance
Plan amendment	10/01/2002	\$129,333	19	\$1,384,639
UAL became positive - credit balance	10/01/2002	816,983	4	2,941,567
UAL became positive	10/01/2002	2,583,210	4	9,300,913
Plan amendment	10/01/2003	29,500	20	323,297
Experience loss	10/01/2003	1,316,188	5	5,724,529
Experience loss	10/01/2004	2,367,890	6	11,948,098
Experience loss	10/01/2005	1,728,223	7	9,840,239
Experience loss	10/01/2008	114,590	10	845,544
Experience loss	10/01/2009	3,387,363	11	26,638,496
Experience loss	10/01/2010	847,186	12	7,044,708
Change in actuarial assumptions	10/01/2011	879,723	13	7,684,629
Experience loss	10/01/2011	1,543,670	13	13,484,383
Experience loss	10/01/2012	1,838,634	14	16,779,076
Experience loss	10/01/2013	<u>539,374</u>	15	<u>5,118,199</u>
Total		\$18,121,867		\$119,058,317

SECTION 4: Certificate of Actuarial Valuation as of October 1, 2013 for the New Orleans Employers - International Longshoremen's Association, AFL-CIO Pension Plan

EIN 72-6023317/ PN 001

**EXHIBIT IV (continued)
Funding Standard Account**

**Schedule of Funding Standard Account Bases (Credits)
(Schedule MB, line 9h)**

Type of Base	Date Established	Amortization Amount	Years Remaining	Outstanding Balance
Change in actuarial assumptions	10/01/2003	\$1,649,386	20	\$18,075,749
Change in actuarial assumptions	10/01/2005	3,500	22	39,952
Experience gain	10/01/2006	362,305	8	2,281,292
Experience gain	10/01/2007	1,640,903	9	11,252,168
Plan amendment	10/01/2009	410,963	11	3,231,850
Change in actuarial assumptions	10/01/2013	<u>487,162</u>	15	<u>4,622,756</u>
Total		\$4,554,219		\$39,503,767

SECTION 4: Certificate of Actuarial Valuation as of October 1, 2013 for the New Orleans Employers - International Longshoremen's Association, AFL-CIO Pension Plan

EIN 72-6023317/ PN 001

Current Liability Assumptions:

Interest 3.62%
Mortality Mortality prescribed under IRS Regulation 1.431(c)(6)-1 and 1.430(h)(3)-1, using the static tables with separate tables for annuitants and non-annuitants (RP-2000 tables projected forward to the valuation year plus 7 years for annuitants and 15 year for non-annuitants)

Justification for Changes in

**Actuarial Assumptions
(Schedule MB, line 11):**

For purposes of determining current liability, the current liability interest rate was changed due to a change in the permissible range and recognizing that any rate within the permissible range satisfies the requirement of IRC Section 431(c)(6)(E) and the mortality tables were changed in accordance with IRS Regulations 1.431(c)(6)-1 and 1.430(h)(3)-1.

Based on past experience and future expectations, the following actuarial assumptions were changed as of October 1, 2013:

- Retirement rates were changed based on recent experience.

Estimated Rate of Investment Return:

*On actuarial value of assets
(Schedule MB, line 6g):* 4.3%, for the Plan Year ending September 30, 2013

*On current (market) value of assets
(Schedule MB, line 6h):* 14.2%, for the Plan Year ending September 30, 2013

Funding Standard Account

**Contribution Timing
(Schedule MB, line 3):**

Unless otherwise noted, contributions are paid periodically throughout the year pursuant to collective bargaining agreements. The interest credited in the Funding Standard Account is therefore assumed to be equivalent to an April 15 contribution date. Interest on withdrawal liability payments is credited based on the actual date made.

Actuarial Status Certification as of October 1, 2014 under IRC Section 432 for the New Orleans Employers - International Longshoremen's Association, AFL-CIO Pension Plan

EIN 72-6023317/ PN 001

EXHIBIT I

Status Determination as of October 1, 2014

Status	Condition	Test Component Result	Final Result
Critical Status			
1. Funding deficiency projected in four years?			Yes
2. Funding deficiency projected in five years		Yes	
AND present value of vested benefits for non-actives more than present value of vested benefits for actives		Yes	
AND normal cost plus interest on unfunded actuarial accrued liability (unit credit basis) greater than contributions for current year?		Yes	Yes
3. Funding deficiency projected in five years		Yes	
AND funded percentage less than 65%?		Yes	Yes
4. Funded percentage less than 65%		Yes	
AND assets plus contributions less than benefit payments and administrative expenses over seven years?		No	No
5. Assets plus contributions less than benefit payments and administrative expenses over five years?			No
6. In critical status for immediately preceding plan year and funding deficiency projected within ten years?			Yes
In Critical Status?			Yes
Endangered Status			
1. Funded percentage less than 80%		N/A	
AND not in Critical Status?		N/A	N/A
2. Funding deficiency projected in seven years		N/A	
AND not in Critical Status?		N/A	N/A
In Endangered Status?			No
In Seriously Endangered Status?			No
Neither Critical Status Nor Endangered Status			
Neither Critical nor Endangered Status?			No

This certification also notifies the IRS that the Plan is making the scheduled progress in meeting the requirements of its Rehabilitation Plan, based on the annual standards of the Rehabilitation Plan. The annual standards of the Rehabilitation Plan specify that the projected funding deficiency as of September 30, 2015 shall not exceed \$60,000,000. Since the projected funding deficiency is \$34,313,954, the annual standard for 2014 has been met.

Plan Name: New Orleans Employers – International Longshoremen’s Association, AFL-CIO Pension Plan

Sponsor Name: Board of Trustees, New Orleans Employers – International Longshoremen’s Association, AFL-CIO Pension Plan

EIN: 72-6023317 Plan Number: 001

Plan Year: 10/1/2013 – 9/30/2014

Schedule R, Line 13e Information on Contribution Rates and Base Units

Ports America Louisiana, LLC and Ceres Gulf, Inc.:

Contribution Rates: \$14.69 \$5.49 \$5.01 \$4.74 \$2.01 \$1.94

Base Unit Measure: Hourly Rates

Cooper T. Smith Stevedoring, Inc.:

Contribution Rates: \$5.49 \$.73

Base Unit Measure: Hourly Rates

Plan Name: New Orleans Employers – International Longshoremen’s Association, AFL-CIO Pension Plan

Sponsor Name: Board of Trustees, New Orleans Employers – International Longshoremen’s Association, AFL-CIO Pension Plan

EIN: 72-6023317 Plan Number: 001

Plan Year: 10/1/2013 – 9/30/2014

Schedule R Update of Rehabilitation Plan

The Rehabilitation Plan was amended and updated for the fourth time on September 25, 2013. The amended Rehabilitation Plan is attached. The section entitled Annual Standards for Meeting the Rehabilitation Requirements and Updating of Rehabilitation Plan was amended so that the Plan’s expected date of emergence from Critical Status was changed from October 1, 2035 to October 1, 2031. After October 1, 2012, the Trustees have determined that contribution rates will remain level through October 1, 2015 and then increase by inflation. Higher contribution rate increases at this time would adversely affect an already difficult labor market. Since much of the Plan’s liability constitutes inactive liability and projected assets, including scheduled increases in contributions, and show that the Plan is not insolvent, further benefit adjustments would be counterproductive for business reasons and workforce morale. The Trustees have further allocated all available contributions to fund the Plan. Reasonable long term investment return expectations and industry assumptions selected by the Trustees indicate that the Plan will remain solvent and emerge from Critical Status on October 1, 2031. The Trustees continue to believe they have exhausted all reasonable measures and that the current industry assumptions and long term investment return expectations are reasonable.

New Orleans Employers - ILA, AFL-CIO Pension Fund
Schedule R Worksheet
September 30, 2014

Line 15:	PARTICIPANTS		
	Deferred		
	<u>Vested</u>	<u>Retired</u>	<u>Total</u>
2013-2014	209	2498	2,707
2012-2013	209	2558	2,767
2011-2012	207	2637	2,844
Ratio - 2014 to 2013			97.8%
Ratio - 2014 to 2012			95.2%

SECTION 4: Certificate of Actuarial Valuation as of October 1, 2014 for the New Orleans Employers - International Longshoremens Association, AFL-CIO Pension Plan

EDN 72-6023317/ PN 001

EXHIBIT 1

Summary of Actuarial Valuation Results

The valuation was made with respect to the following data supplied to us by the Plan Administrator:

1	Pensioners as of the valuation date (including 959 beneficiaries in pay status)	2,498
2	Participants inactive during year ended September 30, 2014 with vested rights	209
3	Participants active during the year ended September 30, 2014 (including 8 participants with unknown age)	591
	Fully vested	466
	Not vested	125
4	Total participants	3,298

The actuarial factors as of the valuation date are as follows:

1	Normal cost, including administrative expenses	\$2,089,472
2	Actuarial present value of projected benefits	240,863,022
3	Present value of future normal costs	9,449,839
4	Actuarial accrued liability*	231,413,183
	Pensioners and beneficiaries	\$197,075,524
	Inactive participants with vested rights	5,666,209
	Active participants	28,671,450
5	Actuarial value of assets (\$154,278,448 at market value as reported by Duplantier, Hrapmann, Hogan & Maher, LLP)	139,578,771
6	Unfunded actuarial accrued liability	91,834,412

*Includes liabilities for 80 former spouses in pay status.

Tom Daniel

From: CCH-ReturnNotification@wolterskluwer.com
Sent: Wednesday, July 15, 2015 12:40 PM
To: Tom Daniel
Subject: 2013 5500 Electronic Return Accepted by the Department of Labor

BOARD OF TRUSTEES, NEW ORLEANS EMPLOYERS INTERNATIONAL
LONGSHOREMEN',

You are receiving this e-mail on behalf of DUPLANTIER HRAPMANN HOGAN MAHER
LLP.

Your electronically filed Amended Employee Benefit Plan for plan year 2013 has been
acknowledged as accepted for processing by the Department of Labor on 07/15/2015.

Your return was sent to EFAST2.

Your EIN is *****3317 for Plan No. 001.
Your Client ID is **66221** .

Please do not mail the paper copy of your return to the Department of Labor. It is for your
use only.

PLEASE DO NOT REPLY TO THIS E-MAIL.

We generate this e-mail automatically from your request to be notified when your return or
extension is accepted by the taxing authority. We do not monitor this e-mail address for
incoming e-mail traffic. If you need assistance or have a question, please contact the firm
preparing this return for you. Thank you.

Product: Employee Benefit Plan
**Name: NEW ORLEANS EMPLOYERS-
INTERNATIONAL LONG
ASSOCIATION,AFL-CIO,PENSION PLAN**

Category:

IRS Center: DOL
e-Postmark: 7/15/2015 12:10:51 PM

FEIN: ***3317**

Plan Number: 1

Notification: Email

Fiscal Year

Fiscal Year

eSigned:

Begin Date: 10/1/2013

End Date: 9/30/2014

Date	Type Of Activity	Submission ID	Refund/(Due)	Updated By	eSign Date
7/14/2015	Upload Started				
7/14/2015	Released for Transmission - Validation In Progress			System	
7/14/2015	Ready to transmit - Validation Complete				
7/14/2015	Transmitted to FD	726023317150714133809			
7/14/2015	Rejected by FD on 7/14/2015				
7/15/2015	Upload Started - Amended Return ←				
7/15/2015	Released for Transmission - Validation In Progress			System	
7/15/2015	Ready to transmit - Validation Complete				
7/15/2015	Transmitted to FD	726023317150715120947			
7/15/2015	Accepted by FD on 7/15/2015				

rejection notice stated to send again as "amended" return