

Application for Extension of Time To File Certain Employee Plan Returns

OMB No. 1545-0212

▶ For Privacy Act and Paperwork Reduction Act Notice, see instructions.
 ▶ Information about Form 5558 and its instructions is at www.irs.gov/form5558

File With IRS Only

Part I Identification

<p>A Name of filer, plan administrator, or plan sponsor (see instructions) BOARD OF TRUSTEES, NEW ORLEANS EMPLOYERS INTERNATIONAL LONGSHOREMEN'S ASSOC</p> <p>Number, street, and room or suite no. (If a P.O. box, see instructions) 721 RICHARD STREET, SUITE B</p> <p>City or town, state, and ZIP code NEW ORLEANS, LA 70130-4505</p>	<p>B Filer's identifying number (see instr)</p> <p>Employer identification number (EIN) (9 digits XX-XXXXXXX) 72-6023317</p> <hr/> <p>Social security number (SSN) (9 digits XXX-XX-XXXX)</p>											
<p>C Plan name</p> <p style="text-align: center;">NEW ORLEANS EMPLOYERS-INTERNATIONAL LONGSHORE</p>	<table border="1" style="margin-left: auto; margin-right: auto;"> <thead> <tr> <th rowspan="2">Plan number</th> <th colspan="3">Plan year ending -</th> </tr> <tr> <th>MM</th> <th>DD</th> <th>YYYY</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">001</td> <td style="text-align: center;">9</td> <td style="text-align: center;">30</td> <td style="text-align: center;">2016</td> </tr> </tbody> </table>	Plan number	Plan year ending -			MM	DD	YYYY	001	9	30	2016
Plan number	Plan year ending -											
	MM	DD	YYYY									
001	9	30	2016									

Part II Extension of Time To File Form 5500 Series, and/or Form 8955-SSA

- 1** Check this box if you are requesting an extension of time on line 2 to file the first Form 5500 series return/report for the plan listed in Part 1, C above.
- 2** I request an extension of time until 07/17/2017 to file Form 5500 series (see instructions).
Note. A signature IS NOT required if you are requesting an extension to file Form 5500 series.
- 3** I request an extension of time until 07/17/2017 to file Form 8955-SSA (see instructions).
Note. A signature IS NOT required if you are requesting an extension to file Form 8955-SSA.
- The application is **automatically approved** to the date shown on line 2 and/or line 3 (above) if: **(a)** the Form 5558 is filed on or before the normal due date of Form 5500 series, and/or Form 8955-SSA for which this extension is requested, and **(b)** the date on line 2 and/or line 3 (above) is not later than the 15th day of the third month after the normal due date.

Part III Extension of Time To File Form 5330 (see instructions)

- 4** I request an extension of time until _____ to file Form 5330.
 You may be approved for up to a 6 month extension to file Form 5330, after the normal due date of Form 5330.
- | | | | |
|---|---|----------|--|
| a Enter the Code section(s) imposing the tax | ▶ | a | |
| b Enter the payment amount attached | ▶ | b | |
| c For excise taxes under section 4980 or 4980F of the Code, enter the reversion/amendment date | ▶ | c | |
- 5 State in detail why you need the extension:**
- _____
- _____
- _____
- _____
- _____
- _____
- _____
- _____
- _____
- _____

Under penalties of perjury, I declare that to the best of my knowledge and belief, the statements made on this form are true, correct, and complete, and that I am authorized to prepare this application.

Signature ▶ _____ **Date** ▶ _____

Form 5500Department of the Treasury
Internal Revenue ServiceDepartment 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**2015****This Form is Open to Public Inspection****Part I Annual Report Identification Information**For calendar plan year 2015 or fiscal plan year beginning **10/01/2015** and ending **09/30/2016**

- A** This return/report is for: a multiemployer plan; a multiple-employer plan (filers checking this box must attach a list of participating employer information in accordance with the forms instr.); or
- B** This return/report is: a single-employer plan; a DFE (specify) _____
 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 (employer, if for a single-employer plan) Mailing address (include room, apt., suite no. and street, or P.O. Box) City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions) BOARD OF TRUSTEES, NEW ORLEANS EMPLOYERS INTERNATIO PENSION FUND 721 RICHARD STREET, SUITE B NEW ORLEANS LA 70130-4505		2b Employer Identification Number (EIN) 72-6023317
		2c Plan 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		07/07/2017	THOMAS R DANIEL
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE		07/07/2017	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)			Preparer's telephone number

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

Form 5500 (2015)
v. 150123

3a Plan administrator's name and address <input checked="" type="checkbox"/> Same as Plan Sponsor	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	3 268
6 Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines 6a(1) , 6a(2) , 6b , 6c , and 6d).		
a (1) Total number of active participants at the beginning of the plan year	6a(1)	6 24
a (2) Total number of active participants at the end of the plan year	6a(2)	6 00
b Retired or separated participants receiving benefits	6b	1 431
c Other retired or separated participants entitled to future benefits	6c	2 08
d Subtotal. Add lines 6a(2) , 6b , and 6c	6d	2 239
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits	6e	9 45
f Total. Add lines 6d and 6e	6f	3 184
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	15

8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions:
1B

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

9a Plan funding arrangement (check all that apply)	9b Plan benefit arrangement (check all that apply)
(1) <input checked="" type="checkbox"/> Insurance	(1) <input type="checkbox"/> Insurance
(2) <input type="checkbox"/> Code section 412(e)(3) insurance contracts	(2) <input type="checkbox"/> Code section 412(e)(3) insurance contracts
(3) <input checked="" type="checkbox"/> Trust	(3) <input checked="" type="checkbox"/> Trust
(4) <input type="checkbox"/> General assets of the sponsor	(4) <input type="checkbox"/> General assets of the sponsor

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

a Pension Schedules	b General Schedules
(1) <input checked="" type="checkbox"/> R (Retirement Plan Information)	(1) <input checked="" type="checkbox"/> H (Financial Information)
(2) <input checked="" type="checkbox"/> MB (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary	(2) <input type="checkbox"/> I (Financial Information - Small Plan)
(3) <input type="checkbox"/> SB (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary	(3) <input checked="" type="checkbox"/> 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)

Part III Form M-1 Compliance Information (to be completed by welfare benefit plans)

11a If the plan provides welfare benefits, was the plan subject to the Form M-1 filing requirements during the plan year? (See instructions and 29 CFR 2520.101-2.) Yes No
If "Yes" is checked, complete lines 11b and 11c.

11b Is the plan currently in compliance with the Form M-1 filing requirements? (See instructions and 29 CFR 2520.101-2.) Yes No

11c Enter the Receipt Confirmation Code for the 2015 Form M-1 annual report. If the plan was not required to file the 2015 Form M-1 annual report, enter the Receipt Confirmation Code for the most recent Form M-1 that was required to be filed under the Form M-1 filing requirements. (Failure to enter a valid Receipt Confirmation Code will subject the Form 5500 filing to rejection as incomplete.)

Receipt Confirmation Code _____

SCHEDULE A (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Insurance Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ► File as an attachment to Form 5500. ► Insurance companies are required to provide the information pursuant to ERISA section 103(a)(2).	OMB No. 1210-0110 2015 This Form is Open to Public Inspection
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For calendar plan year 2015 or fiscal plan year beginning **10/01/2015** and ending **09/30/2016**

A Name of plan NEW ORLEANS EMPLOYERS-INTERNATIONAL LONGSHOREMEN'S	B Three-digit plan number (PN) ►	001
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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
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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	3184	10/01/2015	09/30/2016

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	(b) Total amount of fees paid
0	0

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	

(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	

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	(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 6730187
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) <input type="checkbox"/> individual policies (2) <input type="checkbox"/> group deferred annuity (3) <input type="checkbox"/> other (specify) ▶	
f	If contract purchased, in whole or in part, to distribute benefits from a terminating plan, check here <input type="checkbox"/>	
7	Contracts With Unallocated Funds (Do not include portions of these contracts maintained in separate accounts)	
a	Type of contract: (1) <input type="checkbox"/> deposit administration (2) <input type="checkbox"/> immediate participation guarantee (3) <input type="checkbox"/> guaranteed investment (4) <input type="checkbox"/> other ▶	
b	Balance at the end of the previous year	7b
c	Additions: (1) Contributions deposited during the year	7c(1)
	(2) Dividends and credits	7c(2)
	(3) Interest credited during the year	7c(3)
	(4) Transferred from separate account	7c(4)
	(5) Other (specify below)	7c(5)
	▶	
	(6) Total additions	7c(6) 0
d	Total of balance and additions (add lines 7b and 7c(6))	7d
e	Deductions:	
	(1) Disbursed from fund to pay benefits or purchase annuities during year	7e(1)
	(2) Administration charge made by carrier	7e(2)
	(3) Transferred to separate account	7e(3)
	(4) Other (specify below)	7e(4)
	▶	
	(5) Total deductions	7e(5) 0
f	Balance at the end of the current year (subtract line 7e(5) from line 7d)	7f

Part III Welfare Benefit Contract Information
 If more than one contract covers the same group of employees of the same employer(s) or members of the same employee 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
		2015
		This Form is Open to Public Inspection.

For calendar plan year 2015 or fiscal plan year beginning 10/01/2015 and ending 09/30/2016	
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 30-0872552
7315 WISCONSIN AVENUE, SUITE 350W
BETHESDA MD 20814

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

CHEVY CHASE TRUST COMPANY 52-2037618
7501 WISCONSIN AVE, STE 1500 WEST
BETHESDA MD 20814

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

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

2. Information on Other Service Providers Receiving Direct or Indirect Compensation. Except for those persons for whom you answered "Yes" to line 1a 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	181786.	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	123056.	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 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	118750.	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	117047.	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)

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	94009.	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)

THE SEGAL COMPANY (EASTERN STATES) **13-2619259**
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?
11	NONE	84875.	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)

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	64293.	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)

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	60890.	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	50726.	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)

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	46556.	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)

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	45054.	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	34751.	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)

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	31761.	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)

BLACKROCK INSTITUTIONAL 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?
51 28 24	NONE	29280.	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)

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"/>

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 **04-2755549**
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	25366.	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	25118.	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)

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	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)

US BANK NA 31-0841368
 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	13653.	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"/>

(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"/>

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 2015 This Form is Open to Public Inspection.
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For calendar plan year 2015 or fiscal plan year beginning **10/01/2015** and ending **09/30/2016**

A Name of plan NEW ORLEANS EMPLOYERS-INTERNATIONAL LONGSHOREMEN'S	B Three-digit plan number (PN) ►	001
C Plan or DFE 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 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: **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) 6730187.
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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 13-2544634 001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 5813849.
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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 52-6257033 006	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 9886347.
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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 52-6218800 004	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 3607092.
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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 13-4920330 006	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 3213470.
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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 84-6391546 000	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 13790310.
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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 04-2755549 000	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 2522687.
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For Paperwork Reduction Act Notice and OMB Control Numbers, see the instructions for Form 5500. Schedule D (Form 5500) 2015 v. 150123

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 52-6257033 006	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 2432811.
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 E	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 18966327.
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) 5253108.
a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

Part II	Information on Participating Plans (to be completed by DFEs) (Complete as many entries as needed to report all participating plans)
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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

SCHEDULE H (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	Financial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ► File as an attachment to Form 5500.	OMB No. 1210-0110 2015 This Form is Open to Public Inspection
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For calendar plan year 2015 or fiscal plan year beginning **10/01/2015** and ending **09/30/2016**

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	2315869	2174827
b Receivables (less allowance for doubtful accounts):		
(1) Employer contributions	907014	843343
(2) Participant contributions		
(3) Other SEE STATEMENT 2	3996159	5774468
c General investments:		
(1) Interest-bearing cash (incl. money market accounts & certificates of deposit) ...	4454436	3621604
(2) U.S. Government securities	2170968	1914444
(3) Corporate debt instruments (other than employer securities):		
(A) Preferred		
(B) All other	4529455	3633538
(4) Corporate stocks (other than employer securities):		
(A) Preferred		
(B) Common	42957070	42074529
(5) Partnership/joint venture interests	11913327	11813102
(6) Real estate (other than employer real property)		
(7) Loans (other than to participants)		
(8) Participant loans		
(9) Value of interest in common/collective trusts	44677078	46519674
(10) Value of interest in pooled separate accounts	7482920	6730187
(11) Value of interest in master trust investment accounts		
(12) Value of interest in 103-12 investment entities	19932355	18966327
(13) Value of interest in registered investment companies (e.g., mutual funds)		
(14) Value of funds held in insurance co. general account (unallocated contracts) ...		
(15) Other SEE STATEMENT 3	13982424	1097549

		(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	159319075 145163592
Liabilities			
g	Benefit claims payable	1g	
h	Operating payables	1h	1501524 904927
i	Acquisition indebtedness	1i	
j	Other liabilities SEE STATEMENT 4	1j	13939469 1053680
k	Total liabilities (add all amounts in lines 1g through 1j)	1k	15440993 1958607
Net Assets			
l	Net assets (subtract line 1k from line 1f)	1l	143878082 143204985

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)	13059762
	(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)	13059762
b	Earnings on investments:		
	(1) Interest:		
	(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	7354
	(B) U.S. Government securities	2b(1)(B)	38582
	(C) Corporate debt instruments	2b(1)(C)	130641
	(D) Loans (other than to participants)	2b(1)(D)	
	(E) Participant loans	2b(1)(E)	
	(F) Other	2b(1)(F)	97811
	(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)	274388
	(2) Dividends: (A) Preferred stock	2b(2)(A)	
	(B) Common stock	2b(2)(B)	1270643
	(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)	1270643
	(3) Rents	2b(3)	
	(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds ...	2b(4)(A)	148269969
	(B) Aggregate carrying amount (see instructions)	2b(4)(B)	150198489
	(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result ...	2b(4)(C)	-1928520
	(5) Unrealized appreciation (depreciation) of assets: (A) Real estate ...	2b(5)(A)	
	(B) Other	2b(5)(B)	6689538
	(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)	6689538

	(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)	4464718
(7) Net investment gain (loss) from pooled separate accounts	2b(7)	627281
(8) Net investment gain (loss) from master trust investment accounts	2b(8)	
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)	1914063
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)	
c Other income SEE STATEMENT 5	2c	42939
d Total income. Add all income amounts in column (b) and enter total	2d	26414812

Expenses

e Benefit payment and payments to provide benefits:		
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	25341207
(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)	25341207
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)	140186
(2) Contract administrator fees	2i(2)	
(3) Investment advisory and management fees	2i(3)	925932
(4) Other SEE STATEMENT 6	2i(4)	680584
(5) Total administrative expenses. Add lines 2i(1) through (4)	2i(5)	1746702
j Total expenses. Add all expense amounts in column (b) and enter total	2j	27087909

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k	-673097
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	N/A	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	N/A	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			5000000
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		
o Did the plan trust incur unrelated business taxable income?	4o				
p Were in-service distributions made during the plan year?	4p				

5a 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:

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

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

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

Part V Trust Information

6a Name of trust **6b** Trust's EIN

6c Name of trustee or custodian **6d** Trustee's or custodian's telephone number

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 2015 This Form is Open to Public Inspection
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For calendar plan year 2015 or fiscal plan year beginning 10/01/2015, and ending 09/30/2016,

► **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)	
BOARD OF TRUSTEES, NEW ORLEANS EMPLOYERS INTERNATIO	72-6023317	

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

1 a Enter the valuation date: Month 10 Day 01 Year 2015

b Assets		
(1) Current value of assets	1b(1)	140932998
(2) Actuarial value of assets for funding standard account	1b(2)	137491118
c (1) Accrued liability for plan using immediate gain methods	1c(1)	233460983
(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)	233460983
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)	359045349
(b) Expected increase in current liability due to benefits accruing during the plan year	1d(2)(b)	3706246
(c) Expected release from "RPA '94" current liability for the plan year	1d(2)(c)	25695277
(3) Expected plan disbursements for the plan year	1d(3)	26420277

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 JEFFREY S. WILLIAMS, ASA, MAAA	Date 1707009
Type or print name of actuary SEGAL CONSULTING	Most recent enrollment number 678-306-3100
Firm name 2018 POWERS FERRY ROAD, SUITE 850 ATLANTA GA 30339-7200	Telephone number (including area code)
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	143878082
b "RPA '94" current liability/participant count breakdown:	(1) Number of participants	(2) Current liability
(1) For retired participants and beneficiaries receiving payment	2446	282534284
(2) For terminated vested participants	198	12514025
(3) For active participants:		
(a) Non-vested benefits		6024476
(b) Vested benefits		57972564
(c) Total active	624	63997040
(4) Total	3268	359045349
c If the percentage resulting from dividing line 2a by line 2b(4), column (2), is less than 70%, enter such percentage	2c	40.0700 %

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
04/15/2016	10726999	0			
Totals ▶			3(b)	10726999	3(c)
					0

4 Information on plan status:

a Funded percentage for monitoring plan's status (line 1b(2) divided by line 1c(3))	4a	58.90 %
b Enter code to indicate plan's status (see instructions for attachment of supporting evidence of plan's status). If code is "N," go to line 5	4b	C
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 or critical and declining status, were any benefits reduced (see instructions)?		<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 benefits (see instructions), measured as of the valuation date	4e	
f If the rehabilitation plan projects emergence from critical status or critical and declining status, enter the plan year in which it is projected to emerge. If the rehabilitation plan is based on forestalling possible insolvency, enter the plan year in which insolvency is expected and check here	4f	2032

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

a <input type="checkbox"/>	Attained age normal	b <input type="checkbox"/>	Entry age normal	c <input checked="" type="checkbox"/>	Accrued benefit (unit credit)	d <input type="checkbox"/>	Aggregate	
e <input type="checkbox"/>	Frozen initial liability	f <input type="checkbox"/>	Individual level premium	g <input type="checkbox"/>	Individual aggregate	h <input type="checkbox"/>	Shortfall	
i <input type="checkbox"/>	Reorganization	j <input type="checkbox"/>	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	3.30 %			
b Rates specified in insurance or annuity contracts	Pre-retirement		Post-retirement		
	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> N/A	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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	42.9 %	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		10.2 %
h Estimated investment return on current value of assets for year ending on the valuation date	6h		1.5 %

7 New amortization bases established in the current plan year:

(1) Type of base	(2) Initial balance	(3) Amortization Charge/Credit
1	-2428429	-255916
4	9054412	954185

8 Miscellaneous information:

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

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

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

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

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

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

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

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

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

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

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

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

9 Funding standard account statement for this plan year:

Charges to funding standard account:

a Prior year funding deficiency, if any	9a	31670056
b Employer's normal cost for plan year as of valuation date	9b	2321860
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)	106218093
(2) Funding waivers	9c(2)	
(3) Certain bases for which the amortization period has been extended	9c(3)	19076049
d Interest as applicable on lines 9a, 9b, and 9c	9d	3980097
e Total charges. Add lines 9a through 9d	9e	57048062
Credits to funding standard account:		
f Prior year credit balance, if any	9f	
g Employer contributions. Total from column (b) of line 3	9g	10726999
Outstanding balance		
h Amortization credits as of valuation date	9h	41918284
i Interest as applicable to end of plan year on lines 9f, 9g, and 9h	9i	762351

j Full funding limitation (FFL) and credits:			
(1) ERISA FFL (accrued liability FFL)	9j(1)	105663604	
(2) "RPA '94" override (90% current liability FFL)	9j(2)	193348328	
(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	16737481
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	40310581
9o Current year's accumulated reconciliation account:			
(1) Due to waived funding deficiency accumulated prior to the 2015 plan year		9o(1)	
(2) Due to amortization bases extended and amortized using the interest rate under section 6621(b) of the Code:			
(a) Reconciliation outstanding balance as of valuation date		9o(2)(a)	
(b) Reconciliation amount (line 9c(3) balance minus line 9o(2)(a))		9o(2)(b)	
(3) Total as of valuation date		9o(3)	
10 Contribution necessary to avoid an accumulated funding deficiency. (See instructions.)		10	40310581
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

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.**

For calendar plan year 2015 or fiscal plan year beginning **10/01/2015** and ending **09/30/2016**

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

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 **4688671.**

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 **CERES GULF, INC**

b EIN **72-0953072** **c** Dollar amount contributed by employer **4635496.**

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): _____

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	97.70
b	The corresponding number for the second preceding plan year	15b	95.50
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. <input type="checkbox"/>		

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 <input type="checkbox"/>		
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: <u>50.3</u> % Investment-Grade Debt: <u>2.3</u> % High-Yield Debt: <u>10.0</u> % Real Estate: <u>17.0</u> % Other: <u>20.4</u> %		
b	Provide the average duration of the combined investment-grade and high-yield debt: <input type="checkbox"/> 0-3 years <input checked="" type="checkbox"/> 3-6 years <input type="checkbox"/> 6-9 years <input type="checkbox"/> 9-12 years <input type="checkbox"/> 12-15 years <input type="checkbox"/> 15-18 years <input type="checkbox"/> 18-21 years <input type="checkbox"/> 21 years or more		
c	What duration measure was used to calculate line 19(b)? <input checked="" type="checkbox"/> Effective duration <input type="checkbox"/> Macaulay duration <input type="checkbox"/> Modified duration <input type="checkbox"/> Other (specify):		

Part VII IRS Compliance Questions

20a	Is the plan a 401(k) plan?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
20b	If "Yes," how does the 401(k) plan satisfy the nondiscrimination requirements for employee deferrals and employer matching contributions (as applicable) under sections 401(k)(3) and 401(m)(2)?	<input type="checkbox"/>	Design-based safe harbor method	<input type="checkbox"/>	ADP/ACP test
20c	If the ADP/ACP test is used, did the 401(k) plan perform ADP/ACP testing for the plan year using the "current year testing method" for nonhighly compensated employees (Treas. Reg sections 1.401(k)-2(a)(2)(ii) and 1.401(m)-2(a)(2)(ii)?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
21a	Check the box to indicate the method used by the plan to satisfy the coverage requirements under section 410(b):	<input type="checkbox"/>	Ratio percentage test	<input type="checkbox"/>	Average benefit test
21b	Does the plan satisfy the coverage and nondiscrimination tests of sections 410(b) and 401(a)(4) by combining this plan with any other plans under the permissive aggregation rules?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
22a	Has the plan been timely amended for all required tax law changes?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No <input type="checkbox"/> N/A
22b	Date the last plan amendment/restatement for the required tax law changes was adopted _____. Enter the applicable code _____ (See instructions for tax law changes and codes).				
22c	If the plan sponsor is an adopter of a pre-approved master and prototype (M&P) or volume submitter plan that is subject to a favorable IRS opinion or advisory letter, enter the date of that favorable letter _____ and the letter's serial number _____.				
22d	If the plan is an individually-designed plan and received a favorable determination letter from the IRS, enter the date of the plan's last favorable determination letter _____.				
23	Is the Plan maintained in a U.S. territory (i.e., Puerto Rico (if no election under ERISA section 1022(i)(2) has been made), American Samoa, Guam, the Commonwealth of the Northern Mariana Islands or the U.S. Virgin Islands)?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No

SCHEDULE C	OTHER SERVICE PROVIDER SERVICE CODES	STATEMENT	1
------------	--------------------------------------	-----------	---

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

CODES TO SCHEDULE C, LINE 2(B)

SCHEDULE H	OTHER RECEIVABLES	STATEMENT	2
------------	-------------------	-----------	---

DESCRIPTION	BEGINNING	ENDING
RECEIVABLES	3996159.	5774468.
TOTAL TO SCHEDULE H, LINE 1B(3)	3996159.	5774468.

SCHEDULE H	OTHER GENERAL INVESTMENTS	STATEMENT	3
------------	---------------------------	-----------	---

DESCRIPTION	BEGINNING	ENDING
PREPAID INSURANCE, TAXES AND OTHER A COLLATERAL HELD UNDER SECURITIES LEN	42955. 13939469.	43869. 1053680.
TOTAL TO SCHEDULE H, LINE 1C(15)	13982424.	1097549.

SCHEDULE H	OTHER PLAN LIABILITIES	STATEMENT	4
------------	------------------------	-----------	---

DESCRIPTION	BEGINNING	ENDING
OBLIGATIONS UNDER SECURITIES LENDING	13939469.	1053680.
TOTAL TO SCHEDULE H, LINE 1J	13939469.	1053680.

SCHEDULE H	OTHER INCOME	STATEMENT	5
DESCRIPTION		AMOUNT	
COMMISSIONS RECAPTURE		4299.	
SECURITIES LENDING		25403.	
LITIGATION INCOME		13237.	
TOTAL TO SCHEDULE H, LINE 2C		42939.	

SCHEDULE H	OTHER ADMINISTRATIVE EXPENSES	STATEMENT	6
DESCRIPTION		AMOUNT	
OTHER ADMINISTRATIVE EXPENSES		680584.	
TOTAL TO SCHEDULE H, LINE 2I(4)		680584.	

R E P O R T

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

SEPTEMBER 30, 2016 AND 2015

NEW ORLEANS EMPLOYERS -
INTERNATIONAL LONGSHOREMEN'S ASSOCIATION, AFL-CIO
PENSION FUND
SEPTEMBER 30, 2016 AND 2015

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March 15, 2017

Board of Trustees
New Orleans Employers -
International Longshoremens Association - Pension Fund
New Orleans, Louisiana

We have audited the accompanying financial statements of the New Orleans Employers – International Longshoremens Association, AFL-CIO Pension Fund (the Fund), which comprise the statements of net assets available for benefits as of September 30, 2016 and 2015, 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.

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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 net assets available for benefits of the New Orleans Employers - International Longshoremen's Association, AFL-CIO Pension Fund as of September 30, 2016 and 2015, and the changes in net assets available for benefits 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 schedule of cash receipts and disbursements on page 31, schedule of assets by fund on pages 32 - 35, schedule of assets (held at end of year) on pages 36 - 48, and the schedule of assets (acquired and disposed of within year) on page 49, together referred to as "supplementary information", are presented for the purpose of additional analysis and are not a required part of the financial statements but are 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 audits of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the information is fairly stated in all material respects in relation to the financial statements as a whole.

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, 2016 AND 2015

	<u>2016</u>	<u>2015</u> <u>(Restated)</u>
ASSETS:		
Cash and cash equivalents	\$ 5,796,431	\$ 6,770,305
Investments, at fair value:		
U.S. Government securities	1,914,444	2,170,968
Foreign securities	209,220	196,647
Common collective trusts	46,519,674	44,677,078
Corporate bonds, notes, and debentures	3,633,538	4,529,455
Common stock	41,865,309	42,760,423
Limited partnerships	11,813,102	11,913,327
Pooled investment funds	6,730,187	7,482,920
103-12 investment entities	18,966,327	19,932,355
	<u>131,651,801</u>	<u>133,663,173</u>
Receivables:		
Interest	37,523	48,244
Dividends	26,308	37,964
Employer contributions	843,343	907,014
Employer withdrawal liability	5,277,847	2,945,084
Accounts receivable - other	21,192	-
Due from brokers for sales of securities	336,589	889,858
Due from other funds	75,009	75,009
	<u>6,617,811</u>	<u>4,903,173</u>
OTHER:		
Collateral held under securities lending program	1,053,680	13,939,469
Prepaid insurance, taxes, and other assets	43,869	42,955
	<u>1,097,549</u>	<u>13,982,424</u>
Total assets	<u>145,163,592</u>	<u>159,319,075</u>
LIABILITIES:		
Obligations under securities lending program	1,053,680	13,939,469
Due to other funds	18,157	70,934
Due to MILA	442,004	459,888
Accounts payable	190,906	183,893
Due to brokers for purchase of securities	253,860	786,809
Total liabilities	<u>1,958,607</u>	<u>15,440,993</u>
NET ASSETS AVAILABLE FOR BENEFITS	\$ <u>143,204,985</u>	\$ <u>143,878,082</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, 2016 AND 2015

	<u>2016</u>	<u>2015</u> <u>(Restated)</u>
Employer contributions - regular	\$ 10,128,543	\$ 11,237,423
Penalty and interest income	12,577	564
Employer contributions - withdrawal liability - SSA Gulf	-	2,945,084
Employer contributions - withdrawal liability - ADM/MSI	2,894,942	-
Employer contributions - withdrawal liability - RH Keen	23,700	-
Total contributions	<u>13,059,762</u>	<u>14,183,071</u>
Investment income:		
Net appreciation (depreciation) in fair value of investments:		
U.S. Government securities	(4,365,611)	2,955,584
Foreign securities	16,352	(16,182)
Common collective trusts	4,336,094	2,147,732
Corporate bonds, notes, and debentures	415,084	(389,053)
Common stock	8,766,756	(2,338,065)
Limited partnerships	619,474	(157,221)
Pooled investment funds	627,267	1,072,758
103-12 investment entities	1,351,665	(1,846,430)
Interest	274,387	354,628
Dividends	1,270,643	1,319,945
Commissions recapture	4,299	6,405
Securities lending	25,403	14,699
Litigation income	13,237	27,981
	<u>13,355,050</u>	<u>3,152,781</u>
Less: Investment expenses	925,932	998,887
Net investment gain	<u>12,429,118</u>	<u>2,153,894</u>
Total	<u>25,488,880</u>	<u>16,336,965</u>
Pension benefit payments to participants	25,341,207	26,021,330
Administrative expenses	820,770	716,001
Total	<u>26,161,977</u>	<u>26,737,331</u>
CHANGE IN NET ASSETS	(673,097)	(10,400,366)
NET ASSETS AVAILABLE FOR BENEFITS:		
Beginning of year	143,878,082	154,278,448
END OF YEAR	<u>\$ 143,204,985</u>	<u>\$ 143,878,082</u>

See accompanying notes.

NEW ORLEANS EMPLOYERS -
INTERNATIONAL LONGSHOREMEN'S ASSOCIATION, AFL-CIO
PENSION FUND
NOTES TO FINANCIAL STATEMENTS
SEPTEMBER 30, 2016 AND 2015

1. 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, 2016 and 2015, 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 are determined in accordance with Preferred Schedule B of the Rehabilitation Plan which the Plan entered into on April 22, 2009 (see Note 12 – Pension Protection Act). The Rehabilitation Plan was adopted by the employers and unions. Any remaining contributions received are allocated between the eligible Funds (Welfare and Vacation and Holiday) at the discretion of the Board of Trustees (the Board), pursuant to the collective bargaining agreements. In 2016 and 2015, \$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, 2016 AND 2015

1. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES: (Continued)

Contributions: (Continued)

In 2016 and 2015, contributions from 3 of 19 total employers accounted for approximately 91% of total contributions to the Funds. Contributions from the single largest contributing employer accounted for approximately 44% of total contributions to the Funds in 2016 and 2015.

All hourly contributions were allocated to the Pension Fund in accordance with Schedule B of the Rehabilitation Plan by the Board in 2016 and 2015, 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 \$925,932 and \$998,887 in 2016 and 2015, 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 \$509,820 and \$473,888 for the years ended September 30, 2016 and 2015, 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, 2016 AND 2015

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, 2015 and 2014 were as follows:

	<u>2015</u>	<u>2014</u>
Current retirees and beneficiaries	2,446	2,498
Inactive participants with vested rights	198	209
Active participants	<u>624</u>	<u>591</u>
Total participants as of the valuation date	<u>3,268</u>	<u>3,298</u>

NEW ORLEANS EMPLOYERS -
INTERNATIONAL LONGSHOREMEN'S ASSOCIATION, AFL-CIO
PENSION FUND
NOTES TO FINANCIAL STATEMENTS
SEPTEMBER 30, 2016 AND 2015

3. ACCUMULATED PLAN BENEFITS:

The actuarial present value of accumulated plan benefits was determined by consulting actuaries The Segal Company as of October 1, 2015 and 2014, 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, 2015 and 2014, and the most recent valuation dates, were as follows:

	<u>2015</u>	<u>2014</u>
Actuarial present value of accumulated plan benefits:		
Vested benefits:		
Participants currently receiving benefits	\$ 196,439,354	\$ 197,075,524
Other participants	<u>34,474,481</u>	<u>33,419,654</u>
	230,913,835	230,495,178
Non-vested benefits	<u>2,547,148</u>	<u>918,005</u>
Total actuarial present value of accumulated plan benefits	<u>\$ 233,460,983</u>	<u>\$ 231,413,183</u>

Changes in accumulated plan benefits during 2015 and 2014, the most recent actuarial valuation dates, and their effect on accumulated plan benefits are as follows:

	<u>2015</u>	<u>2014</u>
Actuarial present value of accumulated plan benefits, beginning of year	\$ <u>231,413,183</u>	\$ <u>239,356,230</u>
Increase (decrease) during the year attributable to:		
Benefits paid	(26,021,330)	(26,816,535)
Interest	16,380,189	16,862,296
Increase during the period attributable to latest participant data and experience	2,634,529	2,760,015
Increase in benefits attributable to changes in actuarial assumptions	<u>9,054,412</u>	<u>(748,823)</u>
Net change	<u>2,047,800</u>	<u>(7,943,047)</u>
Actuarial present value of accumulated plan benefits, end of year	<u>\$ 233,460,983</u>	<u>\$ 231,413,183</u>

NEW ORLEANS EMPLOYERS -
INTERNATIONAL LONGSHOREMEN'S ASSOCIATION, AFL-CIO
PENSION FUND
NOTES TO FINANCIAL STATEMENTS
SEPTEMBER 30, 2016 AND 2015

3. ACCUMULATED PLAN BENEFITS: (Continued)

	<u>Net Assets Available for Benefits</u>	
	<u>September 30, 2015</u>	<u>September 30, 2014</u>
Investments	\$ 140,433,478	\$ 153,773,705
Receivables	4,903,173	1,536,632
Other	42,955	43,065
Liabilities	<u>(1,501,524)</u>	<u>(1,074,954)</u>
Net Assets	<u>\$ 143,878,082</u>	<u>\$ 154,278,448</u>
	<u>Changes in</u> <u>Net Assets Available for Benefits</u>	
	<u>September 30, 2015</u>	<u>September 30, 2014</u>
Contributions (net)	\$ 14,183,071	\$ 8,999,644
Investment gain (loss), net	2,153,894	17,748,822
Other expenses:		
Benefits paid	(26,021,330)	(26,816,535)
Administrative expenses	<u>(716,001)</u>	<u>(723,067)</u>
Change in net assets	(10,400,366)	(791,136)
Net assets:		
Beginning	<u>154,278,448</u>	<u>155,069,584</u>
Ending	<u>\$ 143,878,082</u>	<u>\$ 154,278,448</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, 2015 was as follows:

NEW ORLEANS EMPLOYERS -
INTERNATIONAL LONGSHOREMEN'S ASSOCIATION, AFL-CIO
PENSION FUND
NOTES TO FINANCIAL STATEMENTS
SEPTEMBER 30, 2016 AND 2015

3. ACCUMULATED PLAN BENEFITS: (Continued)

Significant actuarial assumptions:

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 equal to the difference between the actual market return and the projected market return 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	<table border="0" style="margin-left: 40px;"> <thead> <tr> <th style="text-align: center;"><u>Age</u></th> <th style="text-align: center;"><u>Retirement Rates</u></th> <th style="text-align: center;"><u>Age</u></th> <th style="text-align: center;"><u>Retirement Rates</u></th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">55-59</td> <td style="text-align: center;">2%</td> <td style="text-align: center;">63-64</td> <td style="text-align: center;">15%</td> </tr> <tr> <td style="text-align: center;">60</td> <td style="text-align: center;">8%</td> <td style="text-align: center;">65-70</td> <td style="text-align: center;">50%</td> </tr> <tr> <td style="text-align: center;">61</td> <td style="text-align: center;">13%</td> <td style="text-align: center;">71</td> <td style="text-align: center;">100%</td> </tr> <tr> <td style="text-align: center;">62</td> <td style="text-align: center;">35%</td> <td></td> <td></td> </tr> </tbody> </table>	<u>Age</u>	<u>Retirement Rates</u>	<u>Age</u>	<u>Retirement Rates</u>	55-59	2%	63-64	15%	60	8%	65-70	50%	61	13%	71	100%	62	35%		
<u>Age</u>	<u>Retirement Rates</u>	<u>Age</u>	<u>Retirement Rates</u>																		
55-59	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	<p>Pre-retirement: RP-2014 Blue Collar Employees, set forward three years for males and two years for females, with 75% of the MP2015 projection scale applied.</p> <p>Healthy: RP-2014 Healthy Blue Collar Health Annuitants: set forward three years for males and two years for females, with 75% of the MP 2015 projection scale applied.</p> <p>Disabled: RP-2014 Disabled Retiree, set forward three years for males and two years for females, with 75% of the MP 2015 projection scale applied.</p>																				

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3. ACCUMULATED PLAN BENEFITS: (Continued)

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.

The following plan changes were included in the Preferred Schedule of the Rehabilitation Plan Fifth Amendment and Update adopted on September 24, 2015:

- 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, 2015 and 2014 as follows:

	<u>2015</u>	<u>2014</u>
Present value of all future benefits	\$ <u>233,460,983</u>	\$ <u>231,413,183</u>
Present value of benefits to be funded by future contributions	\$ <u>95,969,865</u>	\$ <u>91,834,412</u>

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3. ACCUMULATED PLAN BENEFITS: (Continued)

As of October 1, 2015 and 2014, using The Segal Company's mortality assumptions, the actuarial present value of vested Plan benefits for withdrawal liability purposes is as follows:

	<u>2015</u>	<u>2014</u>
Withdrawal liability	\$ 277,068,365	\$ 274,252,459
Market value of assets	<u>(143,878,365)</u>	<u>(154,278,448)</u>
Unfunded present value of vested benefits	\$ <u>133,190,000</u>	\$ <u>119,974,011</u>

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, 2.32% for 20 years and 2.37% 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 as of September 30, 2015 (the corresponding mortality rates as of a year earlier were used for the prior year's value).
Retirement Rates:	Same as used for Plan funding as of September 30, 2015 (the corresponding retirement rates as of a year earlier were used for the prior year's value).

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, 2016, the maximum guaranteed benefits insured by PBGC for multi-employer plans was \$35.75 per month times the participant's years of credited service.

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4. PLAN TERMINATION: (Continued)

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.

5. CASH AND CASH EQUIVALENTS:

The following is a detail of the Fund's deposits and cash equivalents as of September 30, 2016 and 2015:

	<u>2016</u>	<u>2015</u>
Demand deposits (book balances)	\$ <u>2,174,827</u>	\$ <u>2,315,869</u>
Cash equivalents:		
Collective short-term investments	3,431,058	4,268,191
Interest in securities held by an agent of the Fund in the name of the agent	<u>190,546</u>	<u>186,245</u>
Total cash equivalents	<u>3,621,604</u>	<u>4,454,436</u>
Total cash and cash equivalents	\$ <u>5,796,431</u>	\$ <u>6,770,305</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 September 30, 2016. 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-

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5. CASH AND CASH EQUIVALENTS: (Continued)

Cash Equivalents: (Continued)

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.

6. INVESTMENTS:

As of September 30, 2016, the Plan's investments are held in thirteen 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, 2016 and 2015.

	<u>2016</u>		<u>2015</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	\$ 1,902,864	\$ 1,914,444	\$ 2,168,945	\$ 2,170,968
Foreign securities	209,050	209,220	197,353	196,647
Common collective trusts	25,532,803	46,519,674	25,715,384	44,677,078
Corporate bonds, notes and debentures	3,607,507	3,633,538	4,563,552	4,529,455
Common stock	35,436,618	41,865,309	39,180,602	42,760,423
Limited partnership	9,677,322	11,813,102	10,399,322	11,913,327
Pooled investment funds	2,239,425	6,730,187	3,619,425	7,482,920
103-12 investment entities	<u>19,621,785</u>	<u>18,966,327</u>	<u>21,701,493</u>	<u>19,932,355</u>
	<u>\$ 98,227,374</u>	<u>\$ 131,651,801</u>	<u>\$ 107,546,076</u>	<u>\$ 133,663,173</u>

The above table includes investments classified as securities on loan at September 30, 2016 and 2015. 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, 2016 and 2015 are as follows:

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6. INVESTMENTS: (Continued)

	<u>2016</u>	<u>2015</u>
Common collective trusts:		
ASB Capital Real Estate Fund	\$ 9,886,347	\$ 10,975,277
Grosvenor Institutional Partners, L.P.	-	8,142,376
Loomis High Yield Conservative Trust	13,790,310	11,471,193
Principal	-	7,482,920
103-12 investment entities:		
RBC Global Asset Management	18,966,327	19,932,355

Net appreciation in the fair value of investments during the years ended September 30, 2016 and 2015, (including investments bought and sold, as well as those held at the end of the year) is summarized as follows:

	<u>2016</u>	<u>2015</u>
Net appreciation (depreciation) in fair value of investments, as determined by quoted market price:		
U.S. Government securities	\$ 111,811	\$ (378,389)
Common collective trusts	2,025,176	(286,678)
Corporate bonds, notes, and debentures	415,084	(389,053)
Common stock	8,766,756	(2,338,065)
Foreign stock	16,352	(16,182)
Limited partnerships	619,474	(157,221)
Pooled investment funds	627,267	1,072,758
103-12 investment entities	<u>1,113,681</u>	<u>(2,506,388)</u>
	13,695,601	(4,999,218)
Net realized gains (losses)	<u>(1,928,520)</u>	<u>6,428,341</u>
Net appreciation in fair value of investments	<u>\$ 11,767,081</u>	<u>\$ 1,429,123</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.

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6. INVESTMENTS: (Continued)

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.

No participation shall be withdrawn from the LongView ULTRA Construction Loan Investment Fund (the Fund), in whole or in part, unless an irrevocable written request for or notice of intention of taking such action have been given the trustee one year prior to the valuation date upon which any such partial or complete withdrawal is to be effected and entered in the records of the trustee and approved by the trustee. No withdrawal shall be made which would cause a participation to be less than \$2,000,000 (other than the withdrawal of a participation in full). Amalgamated Bank shall seek to make cash distributions as soon as practicable after the effective date of withdrawal but is not required to liquidate or encumber assets or defer investments in order to effect withdrawals. Any withdrawal from the Fund may, at the option of the trustee, be made in cash or in kind, or partly in cash and partly in kind.

The fund experienced a net gain for the years ended September 30, 2016 and 2015 in the amount of \$249,918 and \$225,409, respectively.

The fair market value of the fund was \$3,213,470 and \$2,995,140 at September 30, 2016 and 2015, 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.

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6. INVESTMENTS: (Continued)

Common Collective Trusts: (Continued)

ASB – Allegiance Real Estate Fund (Continued)

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, 2016 and 2015 in the amount of \$1,059,070 and \$1,546,053, respectively.

The fair market value of the fund was \$9,886,347 and \$10,975,277 at September 30, 2016 and 2015, respectively.

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 collective trusts, 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 total investment return through investment in fixed income securities, and to outperform the Barclays Capital U.S. Corporate High Yield Index.

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 (loss) for the years ended September 30, 2016 and 2015 in the amount of \$1,177,117 and \$(217,637), respectively.

The fair market value of the fund was \$13,790,310 and \$11,471,193 at September 30, 2016 and 2015, respectively.

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6. INVESTMENTS: (Continued)

Common Collective Trusts: (Continued)

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, 2016 and 2015 in the amount of \$343,430 and \$493,565, respectively.

The fair market value of the fund was \$3,607,092 and \$4,119,495 at September 30, 2016 and 2015, respectively.

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.

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6. INVESTMENTS: (Continued)

Common Collective Trusts: (Continued)

Rothschild Small-Cap Trust (Continued)

The fund experienced a net gain for the years ended September 30, 2016 and 2015 in the amount of \$515,915 and \$317,975, respectively.

The fair market value of the fund was \$5,813,849 and \$4,749,833 at September 30, 2016 and 2015, 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.

Investments in Underlying Funds are governed by the investment guidelines for that fund. At August 31, 2015, the Fund invested in the CIF Opportunistic Equity Portfolio, CTF Opportunistic Fixed Income Allocation Portfolio, and the CTF Short-Term Government Portfolio. The investment objective of the CIF Opportunistic Equity Portfolio is an unconstrained, nonbenchmark oriented investment approach. The investment objective of the CTF Opportunistic Fixed Income Allocation Portfolio is an unconstrained, non-benchmark oriented investment approach. Barclays Capital US Aggregate Bond Index will be used as the primary reference benchmark. The investment objective of the CTF Short-Term Government Portfolio is to provide safety and liquidity of principal while striving to attain a competitive yield versus other short-term investment vehicles, and versus the Barclays 1-Month T-Bill Index.

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,

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6. INVESTMENTS: (Continued)

Common Collective Trusts: (Continued)

Wellington – CIP Opportunistic Investment Allocation Portfolio (Continued)

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 (loss) for the years ended September 30, 2016 and 2015 in the amount of \$179,311 and \$(115,923), respectively.

The fair market value of the fund was \$2,522,687 and \$3,091,255 at September 30, 2016 and 2015, respectively.

AFL-CIO Equity Index Fund

The AFL-CIO Equity Index Fund is established and maintained exclusively for the collective investment and reinvestment of moneys contributed thereto by Chevy Chase Trust Company, Bethesda, Maryland acting in its fiduciary capacity as an investment management and custodian to the Fund. 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; or (iv) certain government plans. Chevy Chase Trust Company and ASB Capital Management, LLC are the sole trustee ("Trustee") and the investment adviser of the Fund, respectively. The Chevy Chase Trust Company has chosen to administer the fund in accordance with federal rules and regulations related to a collective investment of trust funds by national banking associations. The Fund invests in a variety of securities to the extent permitted by its investment objectives and policies. The Fund's investment objective is to as nearly as practical replicate the performance of the Standard and Poor's 500 Index, by the purchase and sale of such equities which compose the S&P 500 Index.

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.

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6. INVESTMENTS: (Continued)

Common Collective Trusts: (Continued)

AFL-CIO Equity Index Fund (Continued)

The fund experienced a net gain for the years ended September 30, 2016 and 2015 in the amount of \$397,741 and \$49,356, respectively.

The fair market value of the fund was \$2,432,811 and \$2,911,070 at September 30, 2016 and 2015, respectively.

BlackRock Institutional Trust Company, N.A.

BlackRock Institutional Trust Company ("BTC") invests in securities and enters into transactions where risks exist due to fluctuations in the market or failure of the issuer of a security to meet all of its obligations. The value of securities held by the Fund may decline in response to certain events, including those directly involving the issuers whose securities are owned by the Fund. BTC monitors and manages the Fund's exposure to market risks through such practices as reviewing trading strategies, setting market risk limits or targets, and maintaining otherwise diversified positions.

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 (loss) for the years ended September 30, 2016 and 2015 in the amount of \$413,592 and \$(154,439), respectively.

The fair market value of the Fund was \$5,253,108 and \$4,363,815 at September 30, 2016 and 2015, respectively.

NEW ORLEANS EMPLOYERS -
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6. INVESTMENTS: (Continued)

Limited Partnerships:

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 (loss) for 2016 and 2015 was \$633,588 and \$(176,264), respectively, and is included in net appreciation.

The fair market value of the fund was \$4,875,840 and \$3,770,951 at September 30, 2016 and 2015, 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)

Limited Partnerships: (Continued)

Grosvenor Institutional Partners, L.P. (Continued)

In the event that the Master Series holds illiquid investments 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. 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.

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 (loss) for 2016 and 2015 was \$(14,114) and \$19,043, respectively, and is included in net appreciation.

The fair market value of the fund was \$6,937,262 and \$8,142,376 at September 30, 2016 and 2015, 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 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 has the ability to apply a contractual limitation which delays the payment of withdrawal requests (a "Withdrawal Limitation"). If the Withdrawal Limitation were applied, withdrawal requests included within the Withdrawal Limitation would be paid on a pro rata basis as cash becomes available for distribution, as determined by Principal Life. The Withdrawal Limitation was not applied as of and for the year ended December 31, 2015.

The fund experienced a net gain for the years ended September 30, 2016 and 2015 in the amount of \$627,267 and \$1,072,758, respectively.

The fair market value of the fund was \$6,730,187 and \$7,482,920 at September 30, 2016 and 2015, respectively.

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6. INVESTMENTS: (Continued)

103-12 Investment Entities:

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

The International Equity Fund (the "Fund") was formed under an agreement of trust. Effective May 31, 2015, the Fund changed its name from RBC GAM International Fund to International Equity Fund. State Street Bank and Trust Company ("State Street Bank") is trustee, custodian, and record-keeper of the Fund. RBC Global Asset Management (U.S.) Inc. is the Fund's investment manager. Polaris Capital Management, Inc., is the Fund's subadvisor. The investment objective of the Fund is to seek long term growth of capital, primarily through a diversified portfolio of non-U.S. equity securities that the subadvisor believes to be undervalued. There can be no assurance that the Fund will achieve its investment objective.

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.

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 (loss) for the years ended September 30, 2016 and 2015 in the amount of \$1,351,665 and \$(1,846,430), respectively.

The fair market value of the Fund was \$18,966,327 and \$19,932,355 at September 30, 2016 and 2015, 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, 2016 and 2015 using the market approach.

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7. FAIR VALUE MEASUREMENTS: (Continued)

<u>2016</u>	<u>Fair Value</u>	Quoted Prices in Active Markets for Identical Assets/Liabilities <u>(Level 1)</u>	Significant Other Observable <u>Inputs (Level 2)</u>	Significant Unobservable <u>Inputs (Level 3)</u>
U.S. Government Securities	\$ 1,914,444	\$ 939,989	\$ 974,455	\$ -
Foreign Securities	209,220	209,220	-	-
Common Collective Trusts	46,519,674	24,926,179	4,834,055	16,759,440
Corporate bonds, notes, and debentures	3,633,538	3,229,648	403,890	-
Common stock	41,865,309	41,865,309	-	-
Limited partnerships	11,813,102	4,483,303	392,537	6,937,262
Pooled investment funds	6,730,187	-	91,811	6,638,376
103-12 investment entities	18,966,327	-	18,966,327	-
Total	<u>\$ 131,651,801</u>	<u>\$ 75,653,648</u>	<u>\$ 25,663,075</u>	<u>\$ 30,335,078</u>

<u>2015</u>	<u>Fair Value</u>	Quoted Prices in Active Markets for Identical Assets/Liabilities <u>(Level 1)</u>	Significant Other Observable <u>Inputs (Level 2)</u>	Significant Unobservable <u>Inputs (Level 3)</u>
U.S. Government Securities	\$ 2,170,968	\$ 462,655	\$ 1,708,313	\$ -
Foreign Securities	196,647	196,647	-	-
Common Collective Trusts	44,677,078	21,619,471	4,948,365	18,109,242
Corporate bonds, notes, and debentures	4,529,455	4,355,381	174,074	-
Common stock	42,760,423	42,760,423	-	-
Limited partnerships	11,913,327	3,737,257	8,176,070	-
Pooled investment funds	7,482,920	-	155,671	7,327,249
103-12 investment entities	19,932,355	-	19,932,355	-
Total	<u>\$ 133,663,173</u>	<u>\$ 73,131,834</u>	<u>\$ 35,094,848</u>	<u>\$ 25,436,491</u>

During 2015, the Financial Accounting Standards Board issued Account Standards Update No. 2015-07.

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7. FAIR VALUE MEASUREMENTS: (Continued)

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, 2016 and 2015:

	<u>2016</u>	<u>2015</u>
Beginning Balance	\$ 25,436,491	\$ 27,157,670
Realized and Unrealized gain/loss on investments:		
Net realized loss	1,685,567	1,039,941
Unrealized gain	66,993	1,401,731
Funds reclassified as level 3 due to changes in valuation methodology	8,766,672	(471,692)
Purchases, sales, issuances and settlements	<u>(5,620,645)</u>	<u>(3,691,159)</u>
Ending Balance	<u>\$ 30,335,078</u>	<u>\$ 25,436,491</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 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.

The Plan's federal Annual Return/Report of Employee Benefit Plan Tax Returns (Form 5500) for 2016, 2015, 2014 and 2013 are subject to examination by the IRS, generally for three years after they were filed.

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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, 2016 and 2015 were as follows:

	<u>2016</u>	<u>2015</u>
Due from other funds:		
Director's Operating Account	\$ 75,000	\$ 75,000
Penalty and Interest Account	<u>9</u>	<u>9</u>
	<u>\$ 75,009</u>	<u>\$ 75,009</u>
Due to other funds:		
Director's Operating Account	\$ <u>18,157</u>	\$ <u>70,934</u>
	<u>\$ 18,157</u>	<u>\$ 70,934</u>

The Fund transferred \$809,593 and \$637,835 to the Director's Operating Account for reimbursement of expenses paid on behalf of the fund for the years ended September 30, 2016 and 2015, respectively.

The Director's Operating Account paid expenses in the amount of \$756,816 and \$652,669 on behalf of the Pension Fund for the years ended September 30, 2016 and 2015, 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.

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11. SECURITIES LENDING AGREEMENTS: (Continued)

The Plan had the following securities on loan:

	September 30, 2016 Market (Carrying Value)	September 30, 2015 Market (Carrying Value)
Corporate Bonds	\$ <u>1,033,963</u>	\$ <u>13,813,320</u>
Total	\$ <u>1,033,963</u>	\$ <u>13,813,320</u>

The collateral held relating to the above investments totaled \$1,053,680, and \$13,939,469 as of September 30, 2016 and 2015, 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, 2016 and 2015.

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, 2016 and 2015 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; September 17, 2014; September 24, 2015; and September 12, 2016; however, no changes were made to the employer contribution rate increases in the Preferred and Default Schedules.

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13. SUBSEQUENT EVENTS:

Management has evaluated subsequent events through the date that the financial statements were available to be issued on March 15, 2017 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.

14. RECLASSIFICATIONS:

The Fund restated its historical financial statements for the year ended September 30, 2015. This restatement and resulting revisions related to the recording of a withdrawal liability of SSA Gulf which occurred on September 30, 2015. The effect of recording of the withdrawal liability was to increase employer contributions - withdrawal liability - SSA Gulf and to increase receivables - employer withdrawal liability by \$2,945,084 for the year ended September 30, 2015. The cumulative effect of recording the withdrawal liability was to increase the net assets available for benefits for the year ended September 30, 2015 by \$2,945,084.

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SEPTEMBER 30, 2016

RECEIPTS:

Proceeds from sales of investments	\$ 148,269,969
Income from investments	1,597,109
Contributions	10,772,786
Other income	(7,955)
	<u>160,631,909</u>

DISBURSEMENTS:

Purchases of investments	134,471,196
Pension benefit payments to participants	25,341,207
Administrative and investment expenses	1,793,380
	<u>161,605,783</u>

NET CHANGE IN CASH AND CASH EQUIVALENTS \$ (973,874)

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SEPTEMBER 30, 2016

	U. S. Bank <u>Account</u>	New Tower Trust Company <u>Account</u>	FNBC <u>Account</u>	Principal U.S. Property <u>Account</u>
Investments, as reported by custodian banks:				
Cash and cash equivalents	\$ 3,083,464	\$ 526	\$ 2,174,827	\$ 15
Fixed income securities:				
U.S. Government securities	1,914,444	-	-	-
Corporate	3,633,538	-	-	-
Foreign	209,220	-	-	-
Common collective trusts	-	3,607,092	-	-
Common stock	41,865,309	-	-	-
Limited partnerships	-	-	-	-
Pooled investment funds	-	-	-	6,730,187
103-12 investment entities	-	-	-	-
	<u>\$ 50,705,975</u>	<u>\$ 3,607,618</u>	<u>\$ 2,174,827</u>	<u>\$ 6,730,202</u>

NEW ORLEANS EMPLOYERS -
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	Amalgamated Bank <u>Account</u>	Grosvenor <u>Account</u>	Chevy Chase Trust <u>Account</u>	Loomis Sayles High Yield Conservative Trust <u>Account</u>
Investments, as reported				
by custodian banks:	\$ 5	\$ 22	\$ 1,666	\$ 34
Cash and cash equivalents				
Fixed income securities:	-	-	-	-
U.S. Government securities	-	-	-	-
Corporate	-	-	-	-
Foreign	3,213,470	-	9,886,347	13,790,310
Common collective trusts	-	-	-	-
Common stock	-	6,937,262	-	-
Limited partnerships	-	-	-	-
Pooled investment funds	-	-	-	-
103-12 investment entities	<u>3,213,475</u>	<u>6,937,284</u>	<u>9,888,013</u>	<u>13,790,344</u>
	\$	\$	\$	\$

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	Rothschild Small - Cap Trust <u>Account</u>	BlackRock <u>Account</u>	First Eagle Trust <u>Account</u>	Wellington Trust <u>Account</u>
Investments, as reported by custodian banks:				
Cash and cash equivalents	\$ 78	\$ 31	\$ 200	\$ 7
Fixed income securities:				
U.S. Government securities	-	-	-	-
Corporate	-	-	-	-
Foreign	-	-	-	-
Common collective trusts	5,813,849	5,253,108	-	2,522,687
Common stock	-	-	-	-
Limited partnerships	-	-	4,875,840	-
Pooled investment funds	-	-	-	-
103-12 investment entities	-	-	-	-
	<u>5,813,927</u>	<u>5,253,139</u>	<u>4,876,040</u>	<u>2,522,694</u>
	\$	\$	\$	\$

NEW ORLEANS EMPLOYERS -
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	First NBC Bank (Unallocated Contribution <u>Account</u>)	AFL-CIO Equity Index Chevy Chase <u>Account</u>	RBC Global Asset Management <u>Account</u>	<u>Total</u>
Investments, as reported by custodian banks:				
Cash and cash equivalents	\$ 190,546	\$ 10	\$ 345,000	\$ 5,796,431
Fixed income securities:				
U.S. Government securities	-	-	-	1,914,444
Corporate	-	-	-	3,633,538
Foreign	-	-	-	209,220
Common collective trusts	-	2,432,811	-	46,519,674
Common stock	-	-	-	41,865,309
Limited partnerships	-	-	-	11,813,102
Pooled investment funds	-	-	-	6,730,187
103-12 investment entities	-	-	18,966,327	18,966,327
	<u>\$ 190,546</u>	<u>\$ 2,432,821</u>	<u>\$ 19,311,327</u>	<u>\$ 137,448,232</u>

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SCHEDULE H, LINE 4i
#72.6023317 Plan 001
SCHEDULE OF ASSETS (HELD AT END OF YEAR)
SEPTEMBER 30, 2016

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)	
U.S. Government Securities							
	FFCBDEB	U.S. Government Securities	10/05/2026	2.500 %	85,000.000 \$	84,957.50 \$	85,000.85
	FHLMCMTN	U.S. Government Securities	01/29/2019	1.250 %	59,000.000	59,029.50	59,020.65
	FNMA	U.S. Government Securities	05/10/2019	1.625 %	32,000.000	32,075.20	32,025.60
	FNMA MTN	U.S. Government Securities	07/28/2021	1.000 %	133,000.000	132,966.75	132,938.82
	FNMA MTN	U.S. Government Securities	04/11/2019	1.375 %	55,000.000	55,060.45	54,988.45
	FNMA MTN	U.S. Government Securities	04/26/2019	2.000 %	57,000.000	57,179.55	57,049.59
	FNMA MTN	U.S. Government Securities	12/13/2019	1.750 %	97,000.000	97,344.35	97,043.65
	US TREASURY NOTE	U.S. Government Securities	12/31/2018	1.500 %	102,000.000	102,921.33	103,525.92
	US TREASURY NOTE	U.S. Government Securities	12/31/2019	1.625 %	141,000.000	143,285.75	144,034.32
	US TREASURY NOTE	U.S. Government Securities	08/15/2025	2.000 %	80,000.000	81,574.00	82,787.20
	US TREASURY NOTE	U.S. Government Securities	08/31/2020	1.375 %	174,000.000	173,467.74	176,134.98
	US TREASURY NOTE	U.S. Government Securities	10/31/2020	1.375 %	97,000.000	96,000.79	98,132.96
	US TREASURY NOTE	U.S. Government Securities	11/30/2017	2.250 %	92,000.000	94,238.30	93,631.16
	US TREASURY NOTE	U.S. Government Securities	02/28/2023	1.500 %	29,000.000	28,463.05	29,225.33
	US TREASURY NOTE	U.S. Government Securities	08/15/2021	2.125 %	27,000.000	27,452.76	28,196.10
	US TREASURY NOTE	U.S. Government Securities	05/15/2026	1.625 %	62,000.000	62,090.63	62,082.46
	US TREASURY NOTE	U.S. Government Securities	07/15/2026	0.125 %	29,116.000	29,398.09	29,434.24
	US TREASURY IPS	U.S. Government Securities	12/31/2017	0.750 %	133,000.000	133,031.17	133,057.19
	US TREASURY NOTE	U.S. Government Securities	08/15/2023	2.500 %	67,000.000	70,252.25	71,776.43
	US TREASURY NOTE	U.S. Government Securities	05/31/2021	2.000 %	119,000.000	120,981.27	123,527.95
	US TREASURY NOTE	U.S. Government Securities	08/15/2026	1.500 %	223,000.000	221,093.34	220,830.21
Corporate bonds, notes and debentures							
	AT&T INC	Corporate bonds, notes and debentures	05/15/2022	3.400 %	41,000.000	40,699.06	42,123.81
	ABBVIE INC	Corporate bonds, notes and debentures	05/14/2020	2.500 %	32,000.000	31,868.80	32,623.04
	AMERICAN AIRLINES	Corporate bonds, notes and debentures	03/22/2029	3.560 %	28,314.050	28,314.05	30,012.89
	AMERICAN AIRLINES	Corporate bonds, notes and debentures	10/15/2028	3.000 %	12,000.000	12,000.00	12,041.76
	AMERICAN EXPRESS MTN	Corporate bonds, notes and debentures	09/14/2020	2.600 %	43,000.000	43,217.28	44,250.87
	AMERICAN EXPRESS CD	Corporate bonds, notes and debentures	10/07/2020	2.350 %	210,000.000	208,687.50	218,547.00
	AMGEN INC	Corporate bonds, notes and debentures	08/19/2023	2.250 %	35,000.000	34,912.15	34,860.70
	AHNEUSER BUSCH	Corporate bonds, notes and debentures	01/15/2019	7.750 %	29,000.000	35,767.82	32,990.40
	AHNEUSER BUSCH	Corporate bonds, notes and debentures	02/01/2023	3.300 %	43,000.000	43,252.12	45,386.93
	APPLE INC	Corporate bonds, notes and debentures	05/03/2023	2.400 %	58,000.000	55,216.58	59,052.70
	BBT CORPORATION	Corporate bonds, notes and debentures	03/22/2017	2.150 %	22,000.000	22,639.98	22,084.92

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#72.6023317 Plan 001
SCHEDULE OF ASSETS (HELD AT END OF YEAR)
SEPTEMBER 30, 2016

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)
Corporate bonds, notes and debentures (Continued)						
BANK OF AMERICA	Corporate bonds, notes and debentures	05/01/2018	5.650 %	50,000.000	\$ 55,440.00	\$ 53,038.50
BANK OF NEW YORK	Corporate bonds, notes and debentures	01/15/2019	2.100 %	48,000.000	47,862.72	48,802.56
BARCLAYS CD	Corporate bonds, notes and debentures	03/26/2018	1.512 %	75,000.000	75,000.00	74,175.00
BARCLAYS BANK DELAWARE	Corporate bonds, notes and debentures	11/26/2019	2.100 %	50,000.000	50,000.00	51,733.00
BERKSHIRE HATHAWAY	Corporate bonds, notes and debentures	03/15/2023	2.750 %	20,000.000	19,971.44	20,783.80
BURLINGTN NO SF 00 1 TR	Corporate bonds, notes and debentures	01/15/2021	8.251 %	23,356.820	28,758.08	26,261.94
CSX TRANSPORTATION INC	Corporate bonds, notes and debentures	02/01/2019	7.375 %	15,000.000	17,442.75	16,978.50
CSX TRANSPORTATION INC	Corporate bonds, notes and debentures	01/15/2023	6.251 %	11,609.930	14,178.62	13,639.00
CAPITAL AUTO	Corporate bonds, notes and debentures	06/20/2020	1.460 %	27,000.000	26,997.77	26,994.06
CAPITAL ONE NATIONAL CD	Corporate bonds, notes and debentures	10/07/2019	2.000 %	140,000.000	139,300.00	143,826.20
CAPITAL ONE BANK	Corporate bonds, notes and debentures	09/28/2021	1.700 %	100,000.000	99,375.00	99,768.00
DUKE ENERGY PROGRESS	Corporate bonds, notes and debentures	01/15/2019	5.300 %	37,000.000	42,369.59	40,389.57
CATERPILLAR INC	Corporate bonds, notes and debentures	12/15/2018	7.900 %	36,000.000	43,802.25	41,055.12
CHEVRON CORP	Corporate bonds, notes and debentures	12/05/2022	2.355 %	48,000.000	47,440.42	48,869.28
CHEVRON CORP	Corporate bonds, notes and debentures	05/16/2021	2.100 %	29,000.000	29,000.00	29,479.66
CISCO SYSTEMS INC	Corporate bonds, notes and debentures	02/28/2021	2.200 %	20,000.000	19,961.60	20,463.60
CITIGROUP INC	Corporate bonds, notes and debentures	08/02/2021	2.350 %	52,000.000	51,963.60	52,202.28
COMCAST CORP	Corporate bonds, notes and debentures	11/15/2017	6.300 %	30,000.000	35,594.85	31,670.70
COMCAST CORP	Corporate bonds, notes and debentures	03/01/2023	2.750 %	36,000.000	35,944.92	37,302.84
CONOCOPHILLIPS STANDARD & POORS	Corporate bonds, notes and debentures	12/15/2022	2.400 %	59,000.000	56,651.58	58,505.58
JOHN DEERE CAPITAL CORP	Corporate bonds, notes and debentures	12/13/2018	1.950 %	51,000.000	50,955.42	51,864.45
WALT DISNEY COMPANY	Corporate bonds, notes and debentures	06/01/2021	3.750 %	64,000.000	66,512.37	70,237.44
WALT DISNEY COMPANY	Corporate bonds, notes and debentures	07/30/2026	1.850 %	9,000.000	8,810.73	8,590.50
DUPONT EI	Corporate bonds, notes and debentures	07/15/2018	6.000 %	20,000.000	22,166.20	21,611.80
FEDEX CORP 1998 PASS TST	Corporate bonds, notes and debentures	01/15/2022	6.720 %	61,772.460	74,802.02	69,277.81
FLORIDA POWER LIGHT CO	Corporate bonds, notes and debentures	06/01/2024	3.250 %	51,000.000	51,413.25	54,641.40
GENERAL ELECTRIC CO	Corporate bonds, notes and debentures	10/09/2022	2.700 %	48,000.000	48,974.90	50,016.96
GENERAL MOTORS FINL	Corporate bonds, notes and debentures	11/24/2020	3.700 %	31,000.000	30,982.32	32,259.53
GENERAL MOTORS FINL	Corporate bonds, notes and debentures	07/06/2021	3.200 %	9,000.000	8,983.53	9,110.52
GEORGE WASHINGTON UNIVERSITY	Corporate bonds, notes and debentures	09/15/2021	4.452 %	9,000.000	9,659.70	10,102.05
GEORGE WASHINGTON UNIVERSITY	Corporate bonds, notes and debentures	09/15/2017	1.827 %	72,000.000	73,432.21	72,444.24
GLAXOSMITHKLINE CAP	Corporate bonds, notes and debentures	05/15/2018	5.650 %	29,000.000	32,184.14	31,001.29
GOLDMAN SACHS MTN	Corporate bonds, notes and debentures	02/15/2019	7.500 %	34,000.000	40,599.40	38,429.18
GOLDMAN SACHS GROUP	Corporate bonds, notes and debentures	03/03/2024	4.000 %	9,000.000	9,593.01	9,664.11

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Corporate bonds, notes and debentures (Continued)						
GOLDMAN SACHS	Corporate bonds, notes and debentures	04/25/2019	2.000 %	15,000.000	\$ 14,958.30	\$ 15,099.90
GOLDMAN SACHS BANK USA	Corporate bonds, notes and debentures	09/30/2020	2.250 %	199,000.000	197,756.25	206,313.25
HSBC BANK USA CD	Corporate bonds, notes and debentures	12/09/2020	1.625 %	34,000.000	33,872.50	34,091.12
HOME DEPOT INC	Corporate bonds, notes and debentures	06/01/2022	2.625 %	29,000.000	29,374.97	30,114.18
JPMORGAN CHASE CO	Corporate bonds, notes and debentures	07/22/2020	4.400 %	36,000.000	39,349.61	39,223.44
JPMORGAN CHASE CO	Corporate bonds, notes and debentures	09/23/2022	3.250 %	48,000.000	49,142.40	50,346.24
JPMORGAN CHASE CO	Corporate bonds, notes and debentures	06/23/2020	2.750 %	59,000.000	59,059.43	60,713.95
JPMORGAN CHASE CO	Corporate bonds, notes and debentures	02/19/2020	1.000 %	79,000.000	78,605.00	79,073.47
LOCKHEED MARTIN CORP	Corporate bonds, notes and debentures	01/15/2026	3.550 %	44,000.000	44,573.20	47,545.96
LOYOLA UNIV CHICAGO	Corporate bonds, notes and debentures	07/01/2022	3.199 %	31,000.000	28,879.60	31,904.89
MICROSOFT CORP	Corporate bonds, notes and debentures	08/08/2026	2.400 %	58,000.000	57,881.62	58,049.30
MORGAN STANLEY	Corporate bonds, notes and debentures	04/25/2018	2.125 %	61,000.000	61,333.53	61,513.01
MORGAN STANLEY	Corporate bonds, notes and debentures	04/29/2024	3.875 %	52,000.000	54,285.44	55,613.48
MORGAN STANLEY	Corporate bonds, notes and debentures	06/16/2020	2.800 %	33,000.000	33,626.34	33,853.71
NATIONAL RURAL UTIL COOP	Corporate bonds, notes and debentures	11/01/2018	10.375 %	31,000.000	45,143.57	36,656.26
OCCIDENTAL PETE	Corporate bonds, notes and debentures	02/15/2022	3.125 %	32,000.000	31,926.40	33,585.92
ORACLE CORPORATION	Corporate bonds, notes and debentures	05/15/2022	2.500 %	34,000.000	33,880.32	34,900.32
ORACLE CORPORATION	Corporate bonds, notes and debentures	09/15/2023	2.400 %	24,000.000	23,995.92	24,192.48
PNC FUNDING	Corporate bonds, notes and debentures	03/08/2022	3.300 %	38,000.000	38,479.38	40,348.40
PACIFICORP	Corporate bonds, notes and debentures	02/01/2022	2.950 %	23,000.000	24,309.39	24,247.75
PEPSICO INC	Corporate bonds, notes and debentures	11/01/2018	7.900 %	41,000.000	52,519.91	46,503.43
PFIZER INC	Corporate bonds, notes and debentures	03/15/2019	6.200 %	30,000.000	36,033.30	33,410.70
PHILIP MORRIS INTL INC	Corporate bonds, notes and debentures	05/16/2018	5.650 %	42,000.000	46,869.00	44,916.06
STATE STREET CORP	Corporate bonds, notes and debentures	12/16/2024	3.300 %	35,000.000	35,872.90	37,360.40
TIME WARNER INC	Corporate bonds, notes and debentures	07/15/2025	3.600 %	32,000.000	31,923.20	34,038.40
TOYOTA MOTOR CREDIT CORP	Corporate bonds, notes and debentures	07/18/2019	2.125 %	31,000.000	30,943.12	31,572.88
TOYOTA MOTOR CREDIT CORP	Corporate bonds, notes and debentures	04/08/2021	1.900 %	41,000.000	40,858.54	41,343.17
UNITED AIR	Corporate bonds, notes and debentures	01/07/1930	3.100 %	23,000.000	23,033.75	23,561.66
US BANCORP	Corporate bonds, notes and debentures	09/11/2024	3.600 %	33,000.000	33,857.67	35,367.75
US BANCORP	Corporate bonds, notes and debentures	01/29/2021	2.350 %	48,000.000	47,993.28	49,387.68
WALMART STORES	Corporate bonds, notes and debentures	07/08/2020	3.625 %	87,000.000	96,997.16	94,207.08
WELLS FARGO	Corporate bonds, notes and debentures	01/30/2020	2.150 %	36,000.000	35,951.04	36,262.08
WELLS FARGO	Corporate bonds, notes and debentures	12/11/2017	5.625 %	34,000.000	38,719.58	35,676.20
WELLS FARGO	Corporate bonds, notes and debentures	06/17/2021	1.750 %	53,000.000	52,801.25	53,377.89

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Foreign Securities							
	BB CAPITAL MARKETS PLC	Foreign Securities	05/10/2023	2.750 %	28,000.000 \$	28,600.36 \$	28,467.88
	BANK MONTREAL	Foreign Securities	07/31/2018	1.800 %	22,000.000	21,969.86	22,163.68
	BANK OF MONTREAL	Foreign Securities	08/27/2021	1.900 %	14,000.000	13,973.54	13,926.92
	BANK OF NOVA SCOTIA	Foreign Securities	06/14/2019	1.650 %	29,000.000	28,998.26	29,051.33
	DIAGEO CAPITAL PLC	Foreign Securities	10/23/2017	5.750 %	27,000.000	32,281.74	28,257.93
	SHELL INTERNATIONAL FIN	Foreign Securities	01/06/2023	2.250 %	38,000.000	35,324.04	37,893.22
	TORONTO DOMINION	Foreign Securities	07/13/2021	1.800 %	14,000.000	13,966.68	13,947.64
	TOTAL CAPITAL INTL SA	Foreign Securities	06/19/2021	2.750 %	34,000.000	33,935.74	35,511.30
Common Stock							
	3 M CO	Common Stock		2.520 %	152.000	24,586.57	26,786.96
	3 M CO	Common Stock		2.520 %	600.000	70,757.00	105,738.00
	ACADIA PHARMACEUTICALS	Common Stock		0.000 %	1,348.000	42,054.17	42,879.88
	ACTIVISION BLIZZARD INC	Common Stock		0.590 %	3,402.000	131,444.46	150,708.60
	ACTIVISION BLIZZARD INC	Common Stock		0.590 %	3,620.000	46,205.69	160,366.00
	ACTIVISION BLIZZARD INC	Common Stock		0.590 %	8,000.000	263,259.13	354,400.00
	ADOBE SYS INC	Common Stock		0.000 %	1,766.000	138,785.38	191,681.64
	AETNA INC	Common Stock		0.870 %	305.000	35,461.59	35,212.25
	AETNA INC	Common Stock		0.870 %	2,400.000	162,046.02	277,080.00
	AGCO CORPORATION	Common Stock		1.050 %	2,500.000	132,236.51	123,300.00
	AGILENT TECHNOLOGIES INC	Common Stock		1.120 %	1,063.000	23,768.59	50,056.67
	AIR PODS CHENICALS INC	Common Stock		2.290 %	940.000	135,596.70	141,319.60
	AIR PODS CHENICALS INC	Common Stock		2.290 %	300.000	37,800.16	45,102.00
	AKAMAI TECHNOLOGIES INC	Common Stock		0.000 %	1,695.000	48,719.88	89,818.05
	ALBEMARLE CORPORATION	Common Stock		1.430 %	500.000	28,842.28	42,745.00
	ALLEGHENY TECHNOLOGIES INC	Common Stock		1.770 %	1,756.000	48,521.29	31,730.92
	ALEXION PHARMACEUTICALS INC	Common Stock		0.000 %	492.000	66,005.64	60,289.68
	ALPHABET INC	Common Stock		0.000 %	1,216.000	737,926.29	945,184.64
	AMAZON COM INC	Common Stock		0.000 %	1,114.000	537,158.15	932,763.34
	AMEREN CORPORATION	Common Stock		3.580 %	1,400.000	47,492.03	68,852.00
	AMERICAN EAGLE OUTFITTERS	Common Stock		2.800 %	19,500.000	358,542.29	348,270.00
	AMERICAN ELECTRIC POWER	Common Stock		3.680 %	1,100.000	50,720.59	70,631.00
	AMERICAN INTERNATIONAL GROUP	Common Stock		2.160 %	2,500.000	131,629.62	148,350.00
	AMERIPRISE FINANCIAL INC	Common Stock		3.010 %	1,500.000	80,508.83	149,655.00

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Common Stock (Continued)						
	AMERISOURCEBERGEN CORP	Common Stock	1.810 %	1,072.000	\$ 51,727.48	\$ 86,596.16
	AMGEN INC	Common Stock	2.760 %	1,600.000	251,108.22	266,896.00
	AMSURG CORP	Common Stock	0.000 %	1,348.000	95,367.56	90,383.40
	ANADARKO PETROLEUM CORP	Common Stock	32.000 %	2,174.000	110,714.88	137,744.64
	ANSYS INC	Common Stock	0.000 %	824.000	33,882.59	76,310.64
	ANTHEM INC	Common Stock	2.070 %	2,100.000	215,942.51	263,151.00
	APPLE INC	Common Stock	2.020 %	9,073.000	829,429.14	1,025,702.65
	ARCHER DANIELS MIDLAND CO	Common Stock	2.850 %	1,000.000	37,129.32	42,170.00
	AT&T INC	Common Stock	4.830 %	2,013.000	75,866.65	81,747.93
	AUTODESK INC	Common Stock	0.000 %	1,468.000	37,526.27	106,180.44
	AUTOLIV INC	Common Stock	2.170 %	1,000.000	77,916.02	106,800.00
	BAKER HUGHES INC	Common Stock	1.350 %	1,600.000	79,596.00	80,752.00
	BALL CORPORATION	Common Stock	0.630 %	1,018.000	73,127.74	83,425.10
	BALL CORPORATION	Common Stock	0.630 %	500.000	23,345.73	40,975.00
	BANK OF AMERICA CORP	Common Stock	1.920 %	2,456.000	35,253.96	38,436.40
	BANK OF AMERICA CORP	Common Stock	1.920 %	8,800.000	157,250.72	137,720.00
	BIO RAD LABS INC	Common Stock	0.000 %	387.000	32,006.96	63,394.47
	BIOGEN INC	Common Stock	0.000 %	448.000	129,419.84	140,237.44
	BIOGEN INC	Common Stock	0.000 %	900.000	211,725.09	281,727.00
	BIOMARIN PHARMACEUTICAL	Common Stock	0.000 %	1,471.000	132,259.46	136,096.92
	BLACK KNIGHT FINANCIAL	Common Stock	0.000 %	2,189.000	75,552.59	89,530.10
	BLACKSTONE MORTGAGE	Common Stock	8.420 %	3,209.000	92,413.94	94,505.05
	BORG WARNER INC	Common Stock	1.590 %	1,758.000	28,693.94	61,846.44
	BOSTON SCIENTIFIC CORP	Common Stock	0.000 %	4,887.000	92,254.49	116,310.60
	BOSTON SCIENTIFIC CORP	Common Stock	0.000 %	11,500.000	205,890.59	273,700.00
	BRISTOL MEYERS	Common Stock	2.890 %	2,175.000	143,918.33	117,276.00
	CA INC	Common Stock	3.080 %	7,000.000	229,785.61	231,560.00
	CABOT CORPORATION	Common Stock	2.290 %	917.000	38,699.92	48,059.97
	CAPITAL ONE	Common Stock	2.230 %	2,100.000	147,119.08	150,843.00
	CARDINAL HEALTH INC	Common Stock	2.310 %	3,600.000	294,003.35	279,720.00
	CATERPILLAR INC	Common Stock	3.470 %	1,500.000	116,654.40	133,155.00
	CAVIUM INC	Common Stock	0.000 %	2,138.000	118,848.72	124,431.60
	CBRE GROUP INC	Common Stock	0.000 %	4,823.000	112,430.78	134,947.54
	CBS CORP	Common Stock	1.320 %	5,101.000	261,089.88	279,228.74

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Common Stock (Continued)						
	CELANESE CORPORATION	Common Stock	2.160 %	690.000 \$	37,122.80 \$	45,926.40
	CELGENE CORP	Common Stock	0.000 %	1,963.000	222,567.09	205,192.39
	CENTENE CORP	Common Stock	0.000 %	1,370.000	93,996.82	91,735.20
	CENTERPOINT ENERGY INC	Common Stock	4.430 %	3,300.000	62,393.99	76,659.00
	CF INDUSTRIES HOLDINGS INC	Common Stock	4.930 %	1,800.000	74,801.46	43,830.00
	CHEVRON CORPORATION	Common Stock	4.200 %	800.000	70,320.18	82,336.00
	CIMAREX ENERGY CO	Common Stock	0.240 %	602.000	58,482.73	80,890.74
	CISCO SYSTEMS INC	Common Stock	3.280 %	7,600.000	192,014.38	241,072.00
	CITIGROUP INC	Common Stock	1.360 %	3,200.000	183,381.04	151,136.00
	CLIFFS NATURAL RESOURCES INC	Common Stock	0.000 %	100.000	2,321.63	585.00
	COMCAST CORPORATION	Common Stock	1.660 %	6,508.000	386,928.40	431,740.72
	COMSCORE INC	Common Stock	0.000 %	1,097.000	37,227.89	33,634.02
	CONOCOPHILLIPS	Common Stock	2.300 %	2,200.000	102,038.98	95,634.00
	CONSOLIDATED EDISON INC	Common Stock	3.560 %	1,000.000	59,066.58	75,300.00
	COSTCO WHOLESALE CORP	Common Stock	1.180 %	615.000	95,228.09	93,793.65
	CONTINENTAL RESOURCES INC	Common Stock	0.000 %	2,057.000	58,726.32	106,881.72
	CR BRAND INC	Common Stock	0.460 %	403.000	36,023.21	90,384.84
	CROWN CASTLE INTL CORPORATION	Common Stock	4.030 %	1,855.000	160,328.39	174,759.55
	CROWN HOLDINGS	Common Stock	0.000 %	800.000	36,554.63	45,672.00
	CSX CORPORATION	Common Stock	2.360 %	3,165.000	58,508.99	96,532.50
	CUMMINS INC	Common Stock	3.200 %	744.000	42,206.09	95,343.60
	CUMMINS INC	Common Stock	3.200 %	1,000.000	95,250.40	128,150.00
	CVS HEALTH CORPORATION	Common Stock	2.250 %	1,274.000	112,739.38	113,373.26
	D R HORTON INC	Common Stock	1.320 %	3,672.000	41,645.85	110,894.40
	DARDEN RESTAURANTS INC	Common Stock	3.650 %	1,176.000	39,688.31	72,112.32
	DELTA AIRLINES INC	Common Stock	2.060 %	2,800.000	128,819.84	110,208.00
	DENTSPLY INTL INC NEW	Common Stock	0.520 %	1,351.000	72,353.16	80,289.93
	DEXCOM INC	Common Stock	0.000 %	1,481.000	112,895.72	129,824.46
	DICKS SPORTING GOODS INC	Common Stock	1.070 %	398.000	17,824.92	22,574.56
	DICKS SPORTING GOODS INC	Common Stock	1.070 %	5,800.000	348,506.66	328,976.00
	DISCOVER	Common Stock	2.120 %	2,400.000	82,589.16	135,720.00
	DOLLAR TREE INC	Common Stock	0.000 %	732.000	58,448.10	57,776.76
	DOVER CORPORATION	Common Stock	2.390 %	750.000	66,636.02	55,230.00
	DOVER CORPORATION	Common Stock	2.390 %	1,700.000	129,773.61	125,188.00

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Common Stock (Continued)					
	DR PEPPER SNAPPLE GROUP	Common Stock	2.320 %	3,000.000	\$ 184,975.24
	E O G RES INC	Common Stock	0.690 %	421.000	\$ 32,119.02
	EASTMAN CHEM CO	Common Stock	3.010 %	1,296.000	38,668.28
	EASTMAN CHEM CO	Common Stock	3.010 %	700.000	43,327.79
	EATON VANCE CORPORATION	Common Stock	2.870 %	1,975.000	60,539.93
	EHOSTAR CORPORATION A	Common Stock	0.000 %	1,327.000	50,665.30
	EDISON INTERNATIONAL	Common Stock	3.000 %	1,000.000	46,665.99
	EDWARDS LIFESCIENCES CORP	Common Stock	0.000 %	1,432.000	118,047.16
	ELECTRONIC ARTS INC	Common Stock	0.000 %	2,972.000	208,606.67
	ELI LILLY CO	Common Stock	2.590 %	2,126.000	172,916.10
	EMERSON ELECTRIC CO	Common Stock	3.520 %	2,100.000	108,642.00
	ENTERGY CORPORATION	Common Stock	4.540 %	900.000	63,518.89
	EXELON CORPORATION	Common Stock	3.820 %	2,100.000	70,100.60
	EXPRESS SCRIPTS HOLDINGS	Common Stock	0.000 %	4,100.000	306,430.70
	EXXON MOBIL CORPORATION	Common Stock	3.440 %	1,000.000	83,192.67
	FACEBOOK INC	Common Stock	0.000 %	7,349.000	611,490.64
	FIRST ENERGY CORPORATION	Common Stock	4.350 %	2,200.000	79,076.68
	FISERV INC	Common Stock	0.000 %	2,300.000	196,435.35
	FLEETCOR TECHNOLOGIES INC	Common Stock	0.000 %	1,400.000	231,519.32
	FLUOR CORPORATION	Common Stock	1.640 %	2,200.000	143,815.32
	FRANKLIN RES INC	Common Stock	2.250 %	3,900.000	142,575.85
	G A T X CORPORATION	Common Stock	3.590 %	1,427.000	59,158.45
	GENERAL DYNAMICS CORP	Common Stock	1.960 %	618.000	49,179.47
	GENERAL DYNAMICS CORP	Common Stock	1.960 %	1,600.000	170,787.44
	GENERAL ELECTRIC CO	Common Stock	3.240 %	2,681.000	82,164.72
	GILEAD SCIENCES INC	Common Stock	2.380 %	1,281.000	98,750.53
	GLOBAL PAYMENTS INC	Common Stock	0.050 %	1,751.000	38,169.39
	GLOBAL PAYMENTS INC	Common Stock	0.050 %	3,100.000	218,689.29
	GOLDMAN SACHS GROUP INC	Common Stock	1.610 %	290.000	46,858.60
	GOLDMAN SACHS GROUP INC	Common Stock	1.610 %	800.000	124,199.76
	GOODYEAR TIRE RUBBER CO	Common Stock	1.240 %	11,100.000	321,542.41
	GRUBHUB INC	Common Stock	0.000 %	1,653.000	66,279.36
	HALLIBURTON CO	Common Stock	1.600 %	1,816.000	75,256.39
	HANERSBRANDS INC	Common Stock	1.740 %	2,248.000	58,376.62

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Common Stock (Continued)						
	HARTFORD FINANCIAL SRVC	Common Stock	2.150 %	3,300.000	\$ 92,669.70	\$ 141,306.00
	HCA HOLDINGS INC	Common Stock	0.000 %	890.000	63,611.59	67,310.70
	HD SUPPLY HOLDINGS	Common Stock	0.000 %	4,529.000	134,083.86	144,837.42
	HESS CORPORATION	Common Stock	1.860 %	1,600.000	106,670.70	85,792.00
	HOLOGIC INC	Common Stock	0.000 %	7,100.000	242,499.18	275,693.00
	HOME DEPOT INC	Common Stock	2.140 %	2,227.000	291,870.68	286,570.36
	HOME DEPOT INC	Common Stock	2.140 %	2,800.000	308,764.20	360,304.00
	HONEYWELL INTL INC	Common Stock	2.280 %	5,955.000	606,238.68	694,293.45
	HUMANA INC	Common Stock	0.660 %	162.000	29,089.52	28,656.18
	INCYTE CORPORATION	Common Stock	0.000 %	436.000	38,679.81	41,110.44
	INGREDION INC	Common Stock	1.500 %	300.000	21,554.50	39,918.00
	INTEL CORPORATION	Common Stock	2.750 %	6,500.000	236,569.45	245,375.00
	INTERNATIONAL EXCHANGE	Common Stock	0.250 %	637.000	70,103.14	171,582.32
	INTERNATIONAL PAPER CO	Common Stock	3.860 %	900.000	33,309.02	43,182.00
	INTUIT INC	Common Stock	1.240 %	1,375.000	38,115.34	151,263.75
	J P MORGAN CHASE CO	Common Stock	2.880 %	2,200.000	93,279.15	146,498.00
	JACOBS ENGR GROUP	Common Stock	0.000 %	2,200.000	95,152.74	113,784.00
	JOHNSON JOHNSON	Common Stock	2.710 %	2,400.000	221,430.05	283,512.00
	JOY GLOBAL INC	Common Stock	0.140 %	1,249.000	53,937.28	34,647.26
	KEYCORP	Common Stock	2.790 %	5,337.000	44,132.77	64,951.29
	KEYCORP	Common Stock	2.790 %	11,900.000	117,467.30	144,823.00
	KEYSIGHT TECHNOLOGIES INC	Common Stock	0.000 %	1,328.000	37,874.86	42,084.32
	L 3 COMMUNICATIONS HLDGS	Common Stock	1.860 %	1,600.000	198,913.32	241,168.00
	LABORATORY CORP OF AMERICA	Common Stock	0.000 %	616.000	107,827.01	84,687.68
	LAM RESEARCH CORPORATION	Common Stock	1.900 %	2,500.000	231,509.85	236,775.00
	LEAR CORP	Common Stock	0.990 %	443.000	49,151.24	53,700.46
	LEAR CORP	Common Stock	0.990 %	1,000.000	103,580.04	121,220.00
	LEVEL 3 COMMUNICATIONS INC	Common Stock	0.000 %	972.000	48,599.84	45,081.36
	LINCOLN NATIONAL CORPORATION	Common Stock	2.470 %	3,000.000	99,377.00	140,940.00
	LKQ CORP	Common Stock	0.000 %	10,100.000	338,656.47	358,146.00
	LOCKHEED MARTIN CORP	Common Stock	3.040 %	550.000	121,889.81	131,846.00
	LOCKHEED MARTIN CORP	Common Stock	3.040 %	1,100.000	239,477.77	263,692.00
	LOWES CO INC	Common Stock	1.940 %	772.000	56,151.32	55,746.12
	MASCO CORPORATION	Common Stock	1.170 %	3,435.000	62,523.11	117,854.85

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, 2016

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)	
Common Stock (Continued)						
	MATTEL INC	Common Stock	5.010 %	1,028.000 \$	32,760.58 \$	31,127.84
	MEDNAX INC	Common Stock	0.000 %	1,013.000	35,290.67	67,111.25
	MERCK AND CO INC	Common Stock	3.010 %	4,500.000	264,068.13	280,845.00
	METLIFE INC	Common Stock	3.600 %	3,200.000	121,866.48	142,176.00
	MICROSEMI CORPORATION	Common Stock	0.000 %	1,850.000	64,641.10	77,663.00
	MICROSOFT CORPORATION	Common Stock	2.710 %	16,385.000	815,112.56	943,776.00
	MOHAWK INDUSTRIES INC	Common Stock	0.000 %	1,700.000	323,580.45	340,578.00
	MOLSON COORS BREWING CO	Common Stock	1.490 %	2,953.000	263,312.98	324,239.40
	MONSANTO CO	Common Stock	2.110 %	433.000	48,037.54	44,252.60
	MORGAN STANELY	Common Stock	2.500 %	4,696.000	134,985.54	150,553.76
	MORGAN STANELY	Common Stock	2.500 %	4,600.000	166,466.80	147,476.00
	MOTOROLA SOLUTIONS INC	Common Stock	2.460 %	3,400.000	241,643.81	259,352.00
	MURPHY OIL CORPORATION	Common Stock	3.290 %	3,200.000	109,753.30	97,280.00
	NETFLIX COM INC	Common Stock	0.000 %	310.000	30,066.58	30,550.50
	NEWELL BRANDS INC	Common Stock	1.440 %	6,393.000	303,259.97	336,655.38
	NEWELL BRANDS INC	Common Stock	1.440 %	6,900.000	336,069.83	363,354.00
	NEWFIELD EXPL CO	Common Stock	0.000 %	1,995.000	79,605.77	86,702.70
	NIKE INC	Common Stock	1.370 %	1,619.000	86,356.91	85,240.35
	NORTHROP GRUMMAN CORP	Common Stock	1.680 %	1,200.000	147,603.66	256,740.00
	NRG ENERGY INC	Common Stock	1.070 %	5,900.000	95,565.67	66,139.00
	NVIDIA CORPORATION	Common Stock	0.820 %	3,800.000	89,716.62	260,376.00
	OGE ENERGY CORPORATION	Common Stock	3.830 %	2,400.000	62,845.35	75,888.00
	OWENS III INC	Common Stock	0.000 %	2,400.000	46,304.71	44,136.00
	P P G INDS INC	Common Stock	1.550 %	400.000	29,101.50	41,344.00
	PACKAGING CORP AMERICA	Common Stock	3.100 %	1,007.000	70,670.88	81,828.82
	PACKAGING CORP AMERICA	Common Stock	3.100 %	500.000	33,326.30	40,630.00
	PALO ALTO NETWORKS INC	Common Stock	0.000 %	148.000	19,938.82	23,580.84
	PARKER HANNIFIN CORPORATION	Common Stock	2.010 %	1,000.000	87,363.76	125,530.00
	PATTERSON UTI ENERGY INC	Common Stock	0.360 %	4,500.000	92,277.00	100,665.00
	PEPSICO INC	Common Stock	2.770 %	2,987.000	289,888.49	324,895.99
	PFIZER INC	Common Stock	3.780 %	8,400.000	231,614.06	284,508.00
	PHILLIP MORRIS INTL	Common Stock	4.280 %	2,501.000	248,118.19	243,147.22
	PINNACLE FOODS INC	Common Stock	2.270 %	1,358.000	60,541.00	68,130.86
	PINNACLE WEST CAP CORP	Common Stock	3.450 %	1,000.000	53,950.02	75,990.00

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, 2016

<u>Party in Interest</u> (a)	<u>Description</u> (b)	<u>Description of Investment</u> <u>Including Maturity Date, Collateral, Par or Market Value</u> (c)		<u>Cost of Asset</u> (d)	<u>Current Value</u> (e)	
Common Stock (Continued)						
	PIONEER NAT RES CO	Common Stock	0.040 %	305.000 \$	49,389.72 \$	56,623.25
	PITNEY BOWES INC	Common Stock	4.130 %	6,500.000	133,287.81	118,040.00
	PRINCIPAL FINANCIAL GROUP	Common Stock	3.340 %	2,800.000	99,799.54	144,228.00
	PROGRESSIVE CORPORATION	Common Stock	2.820 %	2,341.000	48,533.37	73,741.50
	PRUDENTIAL FINANCIAL INC	Common Stock	3.430 %	1,800.000	105,356.46	146,970.00
	PUBLIC SERVICES ENTERPRISE	Common Stock	3.920 %	1,700.000	55,697.55	71,179.00
	PVH CORP	Common Stock	0.140 %	1,068.000	104,566.38	118,014.00
	QUALCOMM INC	Common Stock	3.090 %	700.000	48,809.53	47,950.00
	RAYMOND JAMES	Common Stock	1.510 %	1,731.000	48,585.12	100,761.51
	RAYTHEON COMPANY	Common Stock	2.150 %	1,800.000	196,108.79	245,034.00
	REGIONS FINANCIAL CORPORATION	Common Stock	2.630 %	14,200.000	108,047.07	140,154.00
	REINSURANCE GROUP AMERICA	Common Stock	1.520 %	879.000	41,467.12	94,879.26
	RELIANCE STEEL ALUMINIUM	Common Stock	2.360 %	600.000	30,952.15	43,218.00
	REPUBLIC SERVICES	Common Stock	2.540 %	2,557.000	72,401.69	129,000.65
	SABRE CORP COM	Common Stock	1.850 %	2,214.000	63,894.28	62,390.52
	SALESFORCE COM INC	Common Stock	0.000 %	2,746.000	177,878.18	195,872.18
	SBA COMMUNICATIONS CORP	Common Stock	0.000 %	1,420.000	104,754.16	159,267.20
	SEALED AIR CORPORATION	Common Stock	1.400 %	2,435.000	40,982.87	111,571.70
	SERVICEMASTER GLOBAL HOLDING	Common Stock	0.000 %	2,333.000	80,458.45	78,575.44
	SERVICENOW INC	Common Stock	0.000 %	1,894.000	130,661.32	149,910.10
	SHERWIN WILLIAMS CO	Common Stock	1.210 %	162.000	41,154.92	44,818.92
	SNAP ON INC	Common Stock	1.870 %	1,028.000	46,770.24	156,214.88
	SOUTHWEST AIRLINES CO	Common Stock	1.030 %	1,771.000	79,375.11	68,874.19
	SP GLOBAL INC	Common Stock	1.140 %	167.000	16,342.84	21,135.52
	STAMPS COM INC	Common Stock	0.000 %	610.000	53,755.16	57,651.10
	STARBUCKS CORPORATION	Common Stock	1.850 %	1,584.000	77,825.47	85,757.76
	STERICYCLE INC	Common Stock	0.000 %	333.000	36,891.87	26,686.62
	STIFEL FINANCIAL CORPOTATION	Common Stock	0.000 %	1,614.000	67,663.94	62,058.30
	SUNTRUST BKS INC	Common Stock	2.370 %	3,100.000	96,711.88	135,780.00
	SUPERIOR ENERGY SERVICES INC	Common Stock	1.790 %	5,100.000	101,158.47	91,290.00
	SYNCHRONY FINANCIAL	Common Stock	1.860 %	3,210.000	90,223.20	89,880.00
	SYNOPSIS INC	Common Stock	0.000 %	1,486.000	47,054.55	88,194.10
	T MOBILE US INC	Common Stock	0.000 %	1,600.000	64,749.60	74,752.00
	TEXAS INSTRUMENTS INC	Common Stock	2.850 %	3,600.000	207,081.18	252,648.00

NEW ORLEANS EMPLOYERS -
INTERNATIONAL LONGSHOREMEN'S ASSOCIATION, AFL-CIO
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SCHEDULE H, LINE 4i
#72.6023317 Plan 001
SCHEDULE OF ASSETS (HELD AT END OF YEAR)
SEPTEMBER 30, 2016

<u>Party in Interest</u> (a)	<u>Description</u> (b)	<u>Description of Investment</u> <u>Including Maturity Date, Collateral, Par or Market Value</u> (c)			<u>Cost of Asset</u> (d)	<u>Current Value</u> (e)
Common Stock (Continued)						
	THE SCOTTS MIRACLE GRO CO	Common Stock	2.400 %	924.000	\$ 27,898.30	\$ 76,941.48
	THERMO FISHER SCIENTIFIC INC	Common Stock	0.380 %	2,160.000	261,977.07	343,569.60
	TIME WARNER	Common Stock	2.020 %	471.000	35,950.81	37,496.31
	TJX COMPANIES	Common Stock	1.390 %	797.000	59,683.54	59,599.66
	TJX COMPANIES	Common Stock	1.390 %	1,796.000	30,538.21	134,304.88
	TOTAL SYSTEM SERVICES INC	Common Stock	0.850 %	1,930.000	93,799.61	90,999.50
	UGI CORPORATION	Common Stock	2.100 %	1,500.000	59,817.16	67,860.00
	UNION PACIFIC CORPORATION	Common Stock	2.480 %	984.000	90,190.17	95,969.52
	UNITED CONTINENTAL HLDGS	Common Stock	0.000 %	2,200.000	103,072.64	115,434.00
	UNITED HEALTH GROUP	Common Stock	1.790 %	2,993.000	361,447.06	419,020.00
	UNITED HEALTH GROUP	Common Stock	1.790 %	2,000.000	195,080.50	280,000.00
	UNITES RENTALS INC	Common Stock	0.000 %	1,800.000	141,811.08	141,282.00
	UNIVERSAL HEALTH SVCS INC	Common Stock	0.320 %	309.000	41,922.92	38,074.98
	UNIVERSAL HEALTH SVCS INC	Common Stock	0.200 %	2,100.000	255,909.18	258,762.00
	UNUM GROUP	Common Stock	2.270 %	4,300.000	106,003.90	151,833.00
	VALSPAR CORPORATION	Common Stock	1.400 %	900.000	26,000.77	95,463.00
	VERISK ANALYTICS INC	Common Stock	0.000 %	1,018.000	73,834.69	82,743.04
	VERIZON COMMUNICATIONS INC	Common Stock	4.440 %	1,500.000	80,517.90	77,970.00
	VERTEX PHARMACEUTICALS	Common Stock	0.000 %	1,579.000	167,894.89	137,704.59
	VISA INC	Common Stock	0.800 %	8,060.000	517,829.13	666,562.00
	VWR CORP	Common Stock	0.000 %	2,545.000	77,148.07	72,176.20
	WEC ENERGY GROUP INC	Common Stock	3.310 %	1,263.000	53,762.16	75,628.44
	WESTERN DIGITAL CORPORATION	Common Stock	3.420 %	824.000	37,258.59	48,179.28
	WESTLAKE CHEMICAL CORP	Common Stock	1.420 %	800.000	46,410.35	42,800.00
	WHITEWAVE FOODS CO	Common Stock	0.000 %	1,107.000	41,470.14	60,254.01
	WOODWARD INC	Common Stock	0.700 %	1,212.000	58,900.34	75,725.76
	XILINX INC	Common Stock	2.430 %	1,838.000	48,557.21	99,876.92
	YAHOO INC	Common Stock	0.000 %	5,203.000	185,705.43	224,249.30
	ZAYO GROUP HOLDINGS INC	Common Stock	0.000 %	1,990.000	57,255.08	59,122.90
	ACCENTURE PLC	Common Stock	1.980 %	2,100.000	212,800.39	256,557.00
	ALIBABA GROUP HOLDING LTD	Common Stock	0.000 %	1,576.000	127,660.21	166,725.04
	ALLERGAN PLC	Common Stock	1.220 %	2,253.000	576,658.39	518,888.43
	ASML HOLDING	Common Stock	0.940 %	1,410.000	142,567.96	154,507.80
	ASTRAZENECA P L C	Common Stock	4.170 %	8,300.000	283,510.60	272,738.00

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, 2016

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)
Common Stock (Continued)				
	BP PLC SPONS A D R	Common Stock 6.770 %	2,400.000 \$	114,869.67 \$
	BROADCOM LTD	Common Stock 2.360 %	2,427.000	427,364.55
	CHUBB LTD	Common Stock 2.200 %	1,100.000	115,746.11
	CTRIIP COM INTERNATIONAL A D R	Common Stock 0.000 %	1,307.000	59,912.18
	DELPHI AUTOMOTIVE PLC	Common Stock 1.630 %	1,745.000	118,978.65
	EATON CORPORATION PLC	Common Stock 3.470 %	610.000	33,997.97
	E N I SPA A D R	Common Stock 4.450 %	2,850.000	122,965.31
	JOHNSON CTLS INTL PLC	Common Stock 2.150 %	2,483.775	97,691.85
	LYONDELLBASELL INDUSTRIES	Common Stock 4.220 %	500.000	43,686.24
	MEDTRONIC PLC	Common Stock 1.990 %	1,471.000	118,899.01
	NARBOS INDUSTRIES LTD	Common Stock 1.970 %	8,300.000	98,607.23
	NORTEL NETWORKS CORPORATION	Common Stock 0.000 %	12.000	0.00
	NORWEGIAN CRUISE LINE HOLDINGS	Common Stock 0.000 %	2,179.000	110,060.99
	NXP SEMICONDUCTORS NV	Common Stock 0.000 %	2,175.000	176,282.74
	RENAISSANCE RE HOLDINGS LTD	Common Stock 1.030 %	633.000	58,486.50
	ROYAL CARIBBEAN CRUISES LTD	Common Stock 2.560 %	396.000	29,359.95
	ROYAL DUTCH SHELL PLC A D R	Common Stock 6.380 %	1,800.000	110,429.08
	SHOPIFY INC	Common Stock 0.000 %	538.000	20,702.72
	SIGNET JEWELERS LTD	Common Stock 1.400 %	736.000	83,489.40
	STERIS PLC	Common Stock 1.530 %	1,358.000	98,760.63
	TOTAL SA SPON A D R	Common Stock 4.790 %	1,700.000	92,436.41
	TRANSOCEAN LTD	Common Stock 0.000 %	9,100.000	161,286.62
	WEATHERFORD INTERNATIONAL PL	Common Stock 0.000 %	14,700.000	134,731.46
Common Collective Trusts				
	LS HIGH YIELD CONSERVATIVE CLASS B	Common Collective Trusts	662,677.066	8,863,894.75
	BLACKROCK GLOBAL ALLOCATION	Common Collective Trusts	449,682.150	4,929,570.06
	LONGVIEW ULTRA CONSTRUCTION LN FD	Common Collective Trusts	2,227.420	3,573,767.84
	MULTI-EMPLOYER PROPERTY TRUST	Common Collective Trusts	360.000	1,976,550.94
	AFL-CIO EQUITY INDEX FUND	Common Collective Trusts	133,010.984	1,338,236.79
	ASB ALLEGIANCE RE FUND	Common Collective Trusts	7,250.704	3,591,836.64
	WTC-CIF OPP INVEST ALLOC	Common Collective Trusts	196,318.023	2,344,942.22
	ROTHSCHILD SMALL CAP TRUST	Common Collective Trusts	5,813,849.000	5,681,368.65

NEW ORLEANS EMPLOYERS -
INTERNATIONAL LONGSHOREMEN'S ASSOCIATION, AFL-CIO
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SCHEDULE H, LINE 4i
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SEPTEMBER 30, 2016

<u>Party in Interest</u> (a)	<u>Description</u> (b)	<u>Description of Investment</u> <u>Including Maturity Date, Collateral, Par or Market Value</u> (c)	<u>Cost of Asset</u> (d)	<u>Current Value</u> (e)
Limited Partnerships				
	GROSVENOR INSTITUTIONAL PARTNERS	Limited Partnerships	7,013,000.000	\$ 7,013,000.00
	FIRST EAGLE GLOBAL VALUE FUND	Limited Partnerships	2,293.952	\$ 3,738,489.03
Pooled investment fund				
	PRINCIPAL REAL ESTATE INV US	Pooled investment fund	149,985.810	4,090,365.90
103-12 Investment Entities				
	RBC GAM INTERNATIONAL FUND	103-12 Investment Entities	393,767.249	17,207,855.75
			<u>\$ 105,505,917.57</u>	<u>\$ 131,651,801.35</u>

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 (ACQUIRED AND DISPOSED OF WITHIN YEAR)
SEPTEMBER 30, 2016

(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>)	Cost of <u>Acquisitions</u>	Proceeds of <u>Dispositions</u>
US Government Securities	U S Treasury I P S 0.125% 4/15/17	\$ 202,912.53	\$ 203,674.06
US Government Securities	U S Treasury I P S 0.375% 7/15/25	33,082.42	34,833.41
US Government Securities	U S Treasury I P S 0.625% 1/15/26	49,158.12	49,473.57
Corporate bonds, notes, and debentures	Bank of NY Mellon Mtn 3.250% 9/11/24	35,780.15	35,693.35
Corporate bonds, notes, and debentures	Caterpillar Inc. 3.400% 5/15/24	21,627.69	21,967.77
Corporate bonds, notes, and debentures	Citigroup Inc. 2.650% 10/26/20	17,979.84	17,914.14
Corporate bonds, notes, and debentures	Goldman Sachs 2.750% 9/15/20	31,105.71	31,038.13
Corporate bonds, notes, and debentures	Home Depot Inc 2.000% 4/01/21	13,950.16	13,993.00
Corporate bonds, notes, and debentures	McDonalds Corp Mtn 3.700% 1/30/26	12,957.88	13,061.10
Corporate bonds, notes, and debentures	Microsoft Corp Mtn 3.125% 11/03/25	44,988.30	47,617.80
Corporate bonds, notes, and debentures	Morgan Stanley Mth 2.450% 2/01/19	32,977.89	33,510.18
Corporate bonds, notes, and debentures	Priceline Group Inc 3.600% 6/01/26	20,959.47	20,977.11
Corporate bonds, notes, and debentures	Visa Inc 2.800% 12/14/22	15,977.76	16,119.20
Corporate bonds, notes, and debentures	21st Century Fox 3.700% 10/15/25	8,978.49	9,047.16
Corporate bonds, notes, and debentures	21st Century Fox 3.700% 10/15/25	28,753.50	29,236.06
Foreign Securities	Bank Nova Scotia 2.800% 7/21/21	11,253.88	11,363.12
Foreign Securities	Bank of Nova Scotia 2.450% 3/22/21	10,977.34	11,104.39
Common Stock	Arris International Plc	72,955.97	53,865.83
Common Stock	Schlumberger Ltd	91,023.51	92,027.46