

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 ST. 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;">2017</td> </tr> </tbody> </table>	Plan number	Plan year ending -			MM	DD	YYYY	001	9	30	2017
Plan number	Plan year ending -											
	MM	DD	YYYY									
001	9	30	2017									

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 07/16/2018 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 _____ 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** ▶ _____

**Annual Registration Statement Identifying Separated
Participants With Deferred Vested Benefits**

This form is required to be filed under section 6057 of the Internal Revenue Code.

Information about Form 8955-SSA and its instructions is at www.irs.gov/form8955ssa.

This Form is NOT Open
to Public Inspection

PART I Annual Statement Identification Information

For the plan year beginning 10/01/2016, and ending 09/30/2017

A Check here if plan is a government, church, or other plan that elects to voluntarily file Form 8955-SSA. (See instructions.)

B Check here if this is an amended registration statement.

C Check the appropriate box if filing under: Form 5558 Automatic extension
 Special extension (enter description)

PART II Basic Plan Information - enter all requested information

1a Name of plan
NEW ORLEANS EMPLOYERS-INTERNATIONAL LONGSHOREMEN'S ASSOCIATION,

1b Plan Number (PN)
001

Plan Sponsor Information

2a Plan sponsor's name
BOARD OF TRUSTEES, NEW ORLEANS EMPLOYERS - INTERNATIONAL

2b Employer Identification Number (EIN)
72-6023317

2c Trade name (if different from plan sponsor name)
PENSION FUND

2d Plan sponsor's phone number
504-525-0309

2e In care of name

2f Mailing address (room, apt., suite no. and street, or P.O. Box)
721 RICHARD ST. SUITE B

2g City
NEW ORLEANS

2h State
LA

2i ZIP code
70130-4505

2j Foreign province (or state)

2k Foreign country

2l Foreign postal code

Plan Administrator Information

3a Plan administrator's name (if other than plan sponsor)
SAME

3b Employer Identification Number (EIN)

3c In care of name

3d Plan administrator's phone number

3e Mailing address (room, apt., suite no. and street, or P.O. Box)

3f City

3g State

3h ZIP code

3i Foreign province (or state)

3j Foreign country

3k Foreign postal code

4 If the name or EIN of the **plan administrator** has changed since the last return filed for this plan, enter the name and EIN from the last filed return:
Plan administrator's name

EIN

5 If the name or EIN of the **plan sponsor** has changed since the last return filed for this plan, enter the name, EIN, and plan number from that return:
Plan sponsor's name

EIN

Plan Number (PN)


6a Participants who separated with a deferred vested benefit required to be reported on this Form 8955-SSA **6a** **20**

b Participants who separated with a deferred vested benefit voluntarily reported on this Form 8955-SSA
in the same year as the separation occurred **6b**

7 Total number of participants reported on lines 6a and 6b **7** **20**

8 Did the plan administrator provide an individual statement to each participant required to receive a statement? Yes No

Under penalties of perjury, I declare that I have examined this statement, and to the best of my knowledge and belief, it is true, correct, and complete.

Sign Here 	Signature of plan sponsor	Date signed	Signature of plan administrator	Date signed

Name of plan NEW ORLEANS EMPLOYERS-INTERNATIONAL LONGSHOREMEN'S ASSOCIATION AFL-CIO, PENSION P	Plan Number 001	EIN 72-6023317
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PART III Participant Information - enter all requested information

9 Enter one of the following Entry Codes in column (a) for each separated participant with deferred vested benefits who:

- Code A** - has not previously been reported.
- Code B** - has previously been reported under the above plan number, but whose previously reported information requires revisions.
- Code C** - has previously been reported under another plan, but who will be receiving benefits from the plan listed above instead.
- Code D** - has previously been reported under the above plan number, but whose benefits have been paid out or who is no longer entitled to those deferred vested benefits.

Use with entry code "A", "B", "C", or "D"					Use with entry code "A" or "B"				Entry code "C" only	
(a) Entry Code	(b) Social Security Number (or FOREIGN)	(c) Name of Participant			Enter code for nature and form of benefit		Amount of vested benefit		(h) Previous sponsor's EIN	(i) Previous plan number
		First name	M.I.	Last name	(d) Type of annuity	(e) Payment frequency	(f) Defined benefit plan - periodic payment	(g) Defined contribution plan - total value of account		
A	439-49-2592	CORNELL	A	AUGUSTINE	G	E	560	0		
B	023-52-3745	JOSEPH	J	BERRIO	G	E	350	0		
A	439-53-3342	QUINCY		BESSIE	G	E	250	0		
A	436-96-2159	DARYL		BILLINGTON	G	E	648	0		
B	435-67-8265	SHANE		CASTRO	G	E	312	0		
A	438-98-4143	LOUIS	A	CHARLES, JR.	G	E	1,248	0		
B	439-69-5735	ANDRE		CLAIBORNE	G	E	810	0		
A	439-25-6157	SHELDON		COLE	G	E	810	0		
A	435-41-6640	EDWARD		DENNIS	G	E	406	0		
A	438-67-8976	KENDRICK	J	DORSEY	G	E	406	0		

Name of plan NEW ORLEANS EMPLOYERS-INTERNATIONAL LONGSHOREMEN'S ASSOCIATION AFL-CIO PENSION P	Plan Number 001	EIN 72-6023317
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PART III Participant Information - enter all requested information

9 Enter one of the following Entry Codes in column (a) for each separated participant with deferred vested benefits who:

- Code A** - has not previously been reported.
- Code B** - has previously been reported under the above plan number, but whose previously reported information requires revisions.
- Code C** - has previously been reported under another plan, but who will be receiving benefits from the plan listed above instead.
- Code D** - has previously been reported under the above plan number, but whose benefits have been paid out or who is no longer entitled to those deferred vested benefits.

Use with entry code "A", "B", "C", or "D"					Use with entry code "A" or "B"				Entry code "C" only	
(a) Entry Code	(b) Social Security Number (or FOREIGN)	(c) Name of Participant			Enter code for nature and form of benefit		Amount of vested benefit		(h) Previous sponsor's EIN	(i) Previous plan number
		First name	M.I.	Last name	(d) Type of annuity	(e) Payment frequency	(f) Defined benefit plan - periodic payment	(g) Defined contribution plan - total value of account		
A	439-27-5385	JULIAN	C	EARL	G	E	270	0		
A	433-39-1166	GARREN		FRANKLIN	G	E	260	0		
A	435-29-9383	TRACY	E	MARTIN	G	E	1,040	0		
A	439-81-4055	MICHAEL		MILLER	G	E	250	0		
A	435-57-1074	HARDY		MONTGOMERY, JR.	G	E	550	0		
A	433-51-6947	JOSEPH	C	MUSCO	G	E	550	0		
A	458-15-5159	RONALD	D	SINGLETON	G	E	1,036	0		
A	525-89-3545	ROBERTO		TALAVERA	G	E	260	0		
A	422-27-9999	BRIAN	E	TERREBONNE	G	E	594	0		
A	435-79-3197	CHASE	R	THOMAS	G	E	384	0		

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 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**2016****This Form is Open to Public Inspection****Part I Annual Report Identification Information**For calendar plan year 2016 or fiscal plan year beginning **10/01/2016** and ending **09/30/2017**

- A** This return/report is for: a multiemployer plan a multiple-employer plan (Filers checking this box must attach a list of participating employer information in accordance with the form instr.)
- 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 ST. 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			THOMAS R DANIEL
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			THOMAS R DANIEL
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE
Preparer's name (including firm name, if applicable) and address (include room or suite number)			Preparer's telephone number

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

Form 5500 (2016)
v. 160205

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	3184
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)	600
a (2) Total number of active participants at the end of the plan year	6a(2)	562
b Retired or separated participants receiving benefits	6b	1387
c Other retired or separated participants entitled to future benefits	6c	207
d Subtotal. Add lines 6a(2) , 6b , and 6c	6d	2156
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits	6e	925
f Total. Add lines 6d and 6e	6f	3081
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)

<p>a Pension Schedules</p> <p>(1) <input checked="" type="checkbox"/> R (Retirement Plan Information)</p> <p>(2) <input checked="" type="checkbox"/> MB (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary</p> <p>(3) <input type="checkbox"/> SB (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary</p>	<p>b General Schedules</p> <p>(1) <input checked="" type="checkbox"/> H (Financial Information)</p> <p>(2) <input type="checkbox"/> I (Financial Information - Small Plan)</p> <p>(3) <input checked="" type="checkbox"/> <u>1</u> A (Insurance Information)</p> <p>(4) <input checked="" type="checkbox"/> C (Service Provider Information)</p> <p>(5) <input checked="" type="checkbox"/> D (DFE/Participating Plan Information)</p> <p>(6) <input type="checkbox"/> G (Financial Transaction Schedules)</p>
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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 2016 Form M-1 annual report. If the plan was not required to file the 2016 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 2016 This Form is Open to Public Inspection
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For calendar plan year 2016 or fiscal plan year beginning **10/01/2016** and ending **09/30/2017**

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	3081	10/01/2016	09/30/2017

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	

(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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(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	5876004

6 Contracts With Allocated Funds:

a State the basis of premium rates ▶

b Premiums paid to carrier

c Premiums due but unpaid at the end of the year

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

Specify nature of costs ▶

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

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

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

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

b Balance at the end of the previous year	7b	
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 <hr/> Department of Labor Employee Benefits Security Administration <hr/> 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
		2016
		This Form is Open to Public Inspection.

For calendar plan year 2016 or fiscal plan year beginning 10/01/2016 and ending 09/30/2017	
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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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 1, complete as many entries as needed to list each person receiving, directly or indirectly, \$5,000 or more in total compensation (i.e., money or anything else of value) in connection with services rendered to the plan or their position with the plan during the plan year. (See instructions).

(a) Enter name and EIN or address (see instructions)						SEE STATEMENT 1
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	205123.	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 68	NONE	129597.	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	123750.	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 1, complete as many entries as needed to list each person receiving, directly or indirectly, \$5,000 or more in total compensation (i.e., money or anything else of value) in connection with services rendered to the plan or their position with the plan during the plan year. (See instructions).

(a) Enter name and EIN or address (see instructions)	SEE STATEMENT 1
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	99994.	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)	56-1557450
WEDGE CAPITAL MANAGEMENT	
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	95122.	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)	13-2619259
THE SEGAL COMPANY (EASTERN STATES)	
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	85410.	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 1, complete as many entries as needed to list each person receiving, directly or indirectly, \$5,000 or more in total compensation (i.e., money or anything else of value) in connection with services rendered to the plan or their position with the plan during the plan year. (See instructions).

(a) Enter name and EIN or address (see instructions)	SEE STATEMENT 1
LOOMIS SAYLES TRUST CO ONE FINANCIAL CENTER BOSTON MA 02111	20-8080381

(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	77584.	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 147 CARONDELET ST STE 300 NEW ORLEANS LA 70130	72-0502386

(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	62589.	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)	
ROTHSCHILD ASSET MANAGEMENT 1251 AVENUES OF THE AMERICAS NEW YORK NY 10020	13-2544634

(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	58741.	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 1, complete as many entries as needed to list each person receiving, directly or indirectly, \$5,000 or more in total compensation (i.e., money or anything else of value) in connection with services rendered to the plan or their position with the plan during the plan year. (See instructions).

(a) Enter name and EIN or address (see instructions) **SEE STATEMENT 1**

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	51123.	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)

EARNST 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	49037.	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	35535.	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 1, complete as many entries as needed to list each person receiving, directly or indirectly, \$5,000 or more in total compensation (i.e., money or anything else of value) in connection with services rendered to the plan or their position with the plan during the plan year. (See instructions).

(a) Enter name and EIN or address (see instructions)	SEE STATEMENT 1
AMALGAMATED BANK 275 7TH AVE NEW YORK NY 10001	13-4920330

(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	31479.	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 400 HOWARD STREET SAN FRANCISCO CA 94105	94-3112180

(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	30034.	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 1615 POYDRAS ST, STE 2100 NEW ORLEANS LA 70112	72-0567396

(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 1, complete as many entries as needed to list each person receiving, directly or indirectly, \$5,000 or more in total compensation (i.e., money or anything else of value) in connection with services rendered to the plan or their position with the plan during the plan year. (See instructions).

(a) Enter name and EIN or address (see instructions)						SEE STATEMENT 1
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	25265.	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)						
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	17687.	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)						
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	13500.	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 1, complete as many entries as needed to list each person receiving, directly or indirectly, \$5,000 or more in total compensation (i.e., money or anything else of value) in connection with services rendered to the plan or their position with the plan during the plan year. (See instructions).

(a) Enter name and EIN or address (see instructions)	SEE STATEMENT 1
C.S. MCKEE, L.P. 1 GATEWAY CENTER, 8TH FLOOR PITTSBURGH PA 15222	25-1900687

(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	12173.	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)	
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(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)	
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(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 2016 This Form is Open to Public Inspection.
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For calendar plan year 2016 or fiscal plan year beginning **10/01/2016** and ending **09/30/2017**

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)	5876004.
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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)	5843320.
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a Name of MTIA, CCT, PSA, or 103-12 IE: **ASB ALLEGIANCE 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)	8048559.
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a Name of MTIA, CCT, PSA, or 103-12 IE: **NEW TOWER MULTI-EMPLOYER PROP 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)	2913696.
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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)	3086461.
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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): **LOOMIS SAYLES TRUST COMPANY**

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)	17037768.
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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)	2006583.
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a Name of MTIA, CCT, PSA, or 103-12 IE: AFL-CIO EQUITY INDEX FUND		
b Name of sponsor of entity listed in (a): CHEVY CHASE TRUST COMPANY		
c EIN-PN 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) 1934352.
a Name of MTIA, CCT, PSA, or 103-12 IE: INTERNATIONAL EQUITY 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) 21416871.
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) 4844180.
a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

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

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

SCHEDULE H (Form 5500) Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Financial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110 2016 This Form is Open to Public Inspection
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For calendar plan year 2016 or fiscal plan year beginning 10/01/2016 and ending 09/30/2017	
A Name of plan	B Three-digit plan number (PN) ▶ 001
NEW ORLEANS EMPLOYERS-INTERNATIONAL LONGSHOREMEN'S	
C Plan sponsor's name as shown on line 2a of Form 5500	D Employer Identification Number (EIN)
BOARD OF TRUSTEES, NEW ORLEANS EMPLOYERS INTERNATIO	72-6023317

Part I Asset and Liability Statement

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

Assets	(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a 2174827	2059898
b Receivables (less allowance for doubtful accounts):		
(1) Employer contributions	1b(1) 843343	980827
(2) Participant contributions	1b(2)	
(3) Other SEE STATEMENT 2	1b(3) 5774468	5122032
c General investments:		
(1) Interest-bearing cash (incl. money market accounts & certificates of deposit) ...	1c(1) 3621604	5027263
(2) U.S. Government securities	1c(2) 1914444	1372377
(3) Corporate debt instruments (other than employer securities):		
(A) Preferred	1c(3)(A)	
(B) All other	1c(3)(B) 3633538	2674762
(4) Corporate stocks (other than employer securities):		
(A) Preferred	1c(4)(A)	
(B) Common	1c(4)(B) 42074529	44660085
(5) Partnership/joint venture interests	1c(5) 11813102	11303053
(6) Real estate (other than employer real property)	1c(6)	
(7) Loans (other than to participants)	1c(7)	
(8) Participant loans	1c(8)	
(9) Value of interest in common/collective trusts	1c(9) 46519674	45714919
(10) Value of interest in pooled separate accounts	1c(10) 6730187	5876004
(11) Value of interest in master trust investment accounts	1c(11)	
(12) Value of interest in 103-12 investment entities	1c(12) 18966327	21416871
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	72334
(14) Value of funds held in insurance co. general account (unallocated contracts) ...	1c(14)	
(15) Other SEE STATEMENT 3	1c(15) 1097549	638946

		(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	145163592 146919371
Liabilities			
g	Benefit claims payable	1g	
h	Operating payables	1h	904927 888226
i	Acquisition indebtedness	1i	
j	Other liabilities SEE STATEMENT 4	1j	1053680 593364
k	Total liabilities (add all amounts in lines 1g through 1j)	1k	1958607 1481590
Net Assets			
l	Net assets (subtract line 1k from line 1f)	1l	143204985 145437781

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)	9856876
	(B) Participants	2a(1)(B)	
	(C) Others (including rollovers)	2a(1)(C)	1456
	(2) Noncash contributions	2a(2)	
	(3) Total contributions. Add lines 2a(1)(A), (B), (C), and line 2a(2)	2a(3)	9858332
b	Earnings on investments:		
	(1) Interest:		
	(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	23311
	(B) U.S. Government securities	2b(1)(B)	30070
	(C) Corporate debt instruments	2b(1)(C)	95438
	(D) Loans (other than to participants)	2b(1)(D)	
	(E) Participant loans	2b(1)(E)	
	(F) Other	2b(1)(F)	133173
	(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)	281992
	(2) Dividends: (A) Preferred stock	2b(2)(A)	
	(B) Common stock	2b(2)(B)	1229899
	(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)	1229899
	(3) Rents	2b(3)	
	(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds ...	2b(4)(A)	130827039
	(B) Aggregate carrying amount (see instructions)	2b(4)(B)	121901950
	(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result ...	2b(4)(C)	8925089
	(5) Unrealized appreciation (depreciation) of assets: (A) Real estate ...	2b(5)(A)	
	(B) Other	2b(5)(B)	-906770
	(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)	-906770

	(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)	4397953
(7) Net investment gain (loss) from pooled separate accounts	2b(7)	525862
(8) Net investment gain (loss) from master trust investment accounts	2b(8)	
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)	4205404
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)	
c Other income SEE STATEMENT 5	2c	35130
d Total income. Add all income amounts in column (b) and enter total	2d	28552891

Expenses

e Benefit payment and payments to provide benefits:		
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	24522265
(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)	24522265
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)	162117
(2) Contract administrator fees	2i(2)	
(3) Investment advisory and management fees	2i(3)	940581
(4) Other SEE STATEMENT 6	2i(4)	695132
(5) Total administrative expenses. Add lines 2i(1) through (4)	2i(5)	1797830
j Total expenses. Add all expense amounts in column (b) and enter total	2j	26320095

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k	2232796
l Transfers of assets:		
(1) To this plan	2l(1)	
(2) From this plan	2l(2)	

Part III Accountant's Opinion

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

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

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

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

d The opinion of an independent qualified public accountant is **not attached** because:
(1) This form is filed for a CCT, PSA, or MTIA. **(2)** It will be attached to the next Form 5500 pursuant to 29 CFR 2520.104-50.

Part IV Compliance Questions

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

During the plan year:

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

	Yes	No	Amount
c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
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.)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
e Was this plan covered by a fidelity bond?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	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?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
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?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
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?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
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.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
l Has the plan failed to provide any benefit when due under the plan?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
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	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
o Defined Benefit Plan or Money Purchase Pension Plan Only: Were any distributions made during the plan year to an employee who attained age 62 and had not separated from service?	<input type="checkbox"/>	<input type="checkbox"/>	

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
If "Yes" is checked, enter the My PAA confirmation number from the PBGC premium filing for this plan year . (See instr.)

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

For calendar plan year 2016 or fiscal plan year beginning 10/01/2016, and ending 09/30/2017,

▶ **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 2016

b Assets		
(1) Current value of assets	1b(1)	137927138
(2) Actuarial value of assets for funding standard account	1b(2)	136777228
c (1) Accrued liability for plan using immediate gain methods	1c(1)	226155266
(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)	226155266
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)	355723781
(b) Expected increase in current liability due to benefits accruing during the plan year	1d(2)(b)	3780468
(c) Expected release from "RPA '94" current liability for the plan year	1d(2)(c)	24875340
(3) Expected plan disbursements for the plan year	1d(3)	25650340

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	Date
JEFFREY S. WILLIAMS, ASA, MAAA	1707009
Type or print name of actuary	Most recent enrollment number
SEGAL CONSULTING	678-306-3100
Firm name	Telephone number (including area code)
2018 POWERS FERRY ROAD, SUITE 850	
ATLANTA GA 30339-7200	
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	143204985
b "RPA '94" current liability/participant count breakdown:	(1) Number of participants	(2) Current liability
(1) For retired participants and beneficiaries receiving payment	2376	273065991
(2) For terminated vested participants	208	13896880
(3) For active participants:		
(a) Non-vested benefits		6127940
(b) Vested benefits		62632970
(c) Total active	600	68760910
(4) Total	3184	355723781
c If the percentage resulting from dividing line 2a by line 2b(4), column (2), is less than 70%, enter such percentage	2c	40.2600 %

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
04-15-2017	10869797	0			
Totals ▶			3(b)	10869797	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	60.50 %
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"/> Other (specify): | | | |

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

6 Checklist of certain actuarial assumptions:											
a Interest rate for "RPA '94" current liability							6a	3.08	%		
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	<input checked="" type="checkbox"/> N/A					
c Mortality table code for valuation purposes:											
(1) Males	6c(1)	A					A				
(2) Females	6c(2)	A					A				
d Valuation liability interest rate	6d	7.50					%				
e Expense loading	6e	46.8	%				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	11.3	%		
h Estimated investment return on current value of assets for year ending on the valuation date							6h	9.3	%		

7 New amortization bases established in the current plan year:		
(1) Type of base	(2) Initial balance	(3) Amortization Charge/Credit
1	-5189826	-546922

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							<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
b (2) Is the plan required to provide a Schedule of Active Participant Data? (See the instructions.) If "Yes," attach a schedule							<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
c Are any of the plan's amortization bases operating under an extension of time under section 412(e) (as in effect prior to 2008) or section 431(d) of the Code?							<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
d If line c is "Yes," provide the following additional information:									
(1) Was an extension granted automatic approval under section 431(d)(1) of the Code?							<input type="checkbox"/> Yes	<input type="checkbox"/> No	
(2) If line 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?							<input type="checkbox"/> Yes	<input type="checkbox"/> 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?							<input type="checkbox"/> Yes	<input type="checkbox"/> No	
e If box 5h is checked or line 8c is "Yes," enter the difference between the minimum required contribution for the year and the minimum that would have been required without using the shortfall method or extending the amortization base(s)							8e		

9 Funding standard account statement for this plan year:										
Charges to funding standard account:										
a Prior year funding deficiency, if any							9a	40310581		
b Employer's normal cost for plan year as of valuation date							9b	2337177		
c Amortization charges as of valuation date:										
(1) All bases except funding waivers and certain bases for which the amortization period has been extended	9c(1)	93677697					19076049			
(2) Funding waivers	9c(2)									
(3) Certain bases for which the amortization period has been extended	9c(3)									
d Interest as applicable on lines 9a, 9b, and 9c							9d	4629286		
e Total charges. Add lines 9a through 9d							9e	66353093		

Credits to funding standard account:			
f	Prior year credit balance, if any	9f	
g	Employer contributions. Total from column (b) of line 3	9g	10869797
		Outstanding balance	
h	Amortization credits as of valuation date	9h	44610240
i	Interest as applicable to end of plan year on lines 9f, 9g, and 9h	9i	5795052
			808278
j	Full funding limitation (FFL) and credits:		
(1)	ERISA FFL (accrued liability FFL)	9j(1)	98593586
(2)	"RPA '94" override (90% current liability FFL)	9j(2)	190360642
(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	17473127
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	48879966
9o	Current year's accumulated reconciliation account:		
(1)	Due to waived funding deficiency accumulated prior to the 2016 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	48879966
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 sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code).

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

For calendar plan year 2016 or fiscal plan year beginning **10/01/2016** and ending **09/30/2017**

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 **5257704.**

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 **3836687.**

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	97.50
b The corresponding number for the second preceding plan year	15b	95.30

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	3
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	5863726

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

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

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

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

a Enter the percentage of plan assets held as:
 Stock: 52.6 % Investment-Grade Debt: 1.9 % High-Yield Debt: 12.2 % Real Estate: 14.2 % Other: 19.1 %

b Provide the average duration of the combined investment-grade and high-yield debt:
 0-3 years 3-6 years 6-9 years 9-12 years 12-15 years 15-18 years 18-21 years 21 years or more

c What duration measure was used to calculate line 19(b)?
 Effective duration Macaulay duration Modified duration Other (specify):

Part VII IRS Compliance Questions

20a Is the plan a 401(k) plan? If "No," skip b Yes No

20b How did the plan satisfy the nondiscrimination requirements for employee deferrals under section 401(k)(3) for the plan year? Check all that apply:

<input type="checkbox"/> Design-based safe harbor	<input type="checkbox"/> "Prior year" ADP test
<input type="checkbox"/> "Current year" ADP test	<input type="checkbox"/> N/A

21a What testing method was used to satisfy the coverage requirements under section 410(b) for the plan year? Check all that apply:

<input type="checkbox"/> Ratio percentage test	<input type="checkbox"/> Average benefit test	<input type="checkbox"/> N/A
--	---	------------------------------

21b Did the plan satisfy the coverage and nondiscrimination requirements of sections 410(b) and 401(a)(4) for the plan year by combining this plan with any other plan under the permissive aggregation rules? ... Yes No

22a If the plan is a master and prototype plan (M&P) or volume submitter plan that received a favorable IRS opinion letter or advisory letter, enter the date of the letter _____ and the serial number _____.

22b If the plan is an individually-designed plan that received a favorable determination letter from the IRS, enter the date of the most recent determination letter _____.

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	5774468.	5122032.
TOTAL TO SCHEDULE H, LINE 1B(3)	5774468.	5122032.

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

DESCRIPTION	BEGINNING	ENDING
PREPAID INSURANCE, TAXES AND OTHER A COLLATERAL HELD UNDER SECURITIES LEN	43869. 1053680.	45582. 593364.
TOTAL TO SCHEDULE H, LINE 1C(15)	1097549.	638946.

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

DESCRIPTION	BEGINNING	ENDING
OBLIGATIONS UNDER SECURITIES LENDING	1053680.	593364.
TOTAL TO SCHEDULE H, LINE 1J	1053680.	593364.

SCHEDULE H	OTHER INCOME	STATEMENT	5
DESCRIPTION		AMOUNT	
COMMISSIONS RECAPTURE		2936.	
SECURITIES LENDING		1071.	
LITIGATION INCOME		31123.	
TOTAL TO SCHEDULE H, LINE 2C		35130.	

SCHEDULE H	OTHER ADMINISTRATIVE EXPENSES	STATEMENT	6
DESCRIPTION		AMOUNT	
OTHER ADMINISTRATIVE EXPENSES		695132.	
TOTAL TO SCHEDULE H, LINE 2I(4)		695132.	

R E P O R T

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

SEPTEMBER 30, 2017 AND 2016

NEW ORLEANS EMPLOYERS -
INTERNATIONAL LONGSHOREMEN'S ASSOCIATION, AFL-CIO
PENSION FUND
SEPTEMBER 30, 2017 AND 2016

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Duplantier
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INDEPENDENT AUDITOR'S REPORT

April 16, 2018

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We have audited the accompanying financial statements of the New Orleans - Employers International Longshoremen's Association, AFL-CIO Pension Fund (the Fund), which comprise the statements of net assets available for benefits as of September 30, 2017 and 2016, 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 Fund'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 Fund'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, 2017 and 2016, 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 32, schedule of assets by fund on pages 33 – 36 are presented for the purpose of additional analysis and are not a required part of the basic financial statements. The schedule of assets (held at end of year) on pages 37 – 49 and the schedule of assets (acquired and disposed of within year) on page 50, are also 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 Fund'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, 2017 AND 2016

	<u>2017</u>	<u>2016</u>
ASSETS:		
Cash and cash equivalents	\$ <u>7,087,161</u>	\$ <u>5,796,431</u>
Investments, at fair value:		
U.S. Government securities	1,372,377	1,914,444
Foreign securities	167,193	209,220
Common collective trusts	45,714,919	46,519,674
Corporate bonds, notes, and debentures	2,674,762	3,633,538
Common stock	44,492,892	41,865,309
Limited partnerships	11,303,053	11,813,102
Mutual funds	72,334	-
Pooled investment funds	5,876,004	6,730,187
103-12 investment entities	<u>21,416,871</u>	<u>18,966,327</u>
	<u>133,090,405</u>	<u>131,651,801</u>
Receivables:		
Interest	25,980	37,523
Dividends	24,867	26,308
Employer contributions	980,827	843,343
Employer withdrawal liability	4,266,392	5,277,847
Accounts receivable - other	27,827	21,192
Due from brokers for sales of securities	649,946	336,589
Due from other funds	<u>127,020</u>	<u>75,009</u>
	<u>6,102,859</u>	<u>6,617,811</u>
OTHER:		
Collateral held under securities lending program	593,364	1,053,680
Prepaid insurance, taxes, and other assets	<u>45,582</u>	<u>43,869</u>
	<u>638,946</u>	<u>1,097,549</u>
Total assets	<u>146,919,371</u>	<u>145,163,592</u>
LIABILITIES:		
Obligations under securities lending program	593,364	1,053,680
Due to other funds	80,320	18,157
Due to MILA	466,726	442,004
Accounts payable	201,984	190,906
Due to brokers for purchase of securities	<u>139,196</u>	<u>253,860</u>
Total liabilities	<u>1,481,590</u>	<u>1,958,607</u>
NET ASSETS AVAILABLE FOR BENEFITS	<u>\$ <u>145,437,781</u></u>	<u>\$ <u>143,204,985</u></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, 2017 AND 2016

	<u>2017</u>	<u>2016</u>
Additions to plan net assets:		
Employer contributions - regular	\$ 9,856,876	\$ 10,128,543
Penalty and interest income	1,456	12,577
Employer contributions - withdrawal liability - ADM/MSI	-	2,894,942
Employer contributions - withdrawal liability - RH Keen	-	23,700
Total contributions	9,858,332	13,059,762
Investment income:		
Net appreciation (depreciation) in fair value of investments:		
U.S. Government securities	4,424,892	(4,365,611)
Foreign securities	137	16,352
Common collective trusts	4,277,338	4,336,094
Corporate bonds, notes, and debentures	(41,266)	415,084
Common stock	3,504,594	8,766,756
Limited partnerships	865,952	619,474
Mutual funds	903	-
Pooled investment funds	525,817	627,267
103-12 investment entities	3,589,171	1,351,665
Interest	281,992	274,387
Dividends	1,229,899	1,270,643
Commissions recapture	2,936	4,299
Securities lending	1,071	25,403
Litigation income	31,123	13,237
	18,694,559	13,355,050
Less: Investment expenses	940,581	925,932
Net investment gain	17,753,978	12,429,118
Total additions	27,612,310	25,488,880
Deductions from plan net assets:		
Pension benefit payments to participants	24,522,265	25,341,207
Administrative expenses	857,249	820,770
Total deductions	25,379,514	26,161,977
CHANGE IN NET ASSETS	2,232,796	(673,097)
NET ASSETS AVAILABLE FOR BENEFITS:		
Beginning of year	143,204,985	143,878,082
END OF YEAR	\$ 145,437,781	\$ 143,204,985

See accompanying notes.

NEW ORLEANS EMPLOYERS -
INTERNATIONAL LONGSHOREMEN'S ASSOCIATION, AFL-CIO
PENSION FUND
NOTES TO FINANCIAL STATEMENTS
SEPTEMBER 30, 2017 AND 2016

1. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES:

Basis of Accounting:

The financial statements of the Pension Fund (the Fund) have been prepared on the accrual basis. The financial operations of the Fund 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 Fund), 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 Fund benefits based on the benefit schedule, which was in effect at September 30, 2017 and 2016, respectively. Benefits are payable under all circumstances; retirement, death and disability, and are included in accumulated Fund benefits, to the extent they are deemed attributable to employee services rendered to the valuation date.

Contributions:

The Fund 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 Fund 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 2017 and 2016, \$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, 2017 AND 2016

1. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES: (Continued)

Contributions: (Continued)

In 2017, contributions from 3 of 17 total employers accounted for approximately 92% of total contributions to the Funds. In 2016 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 51% and 44% of total contributions to the Funds in 2017 and 2016, respectively.

All hourly contributions were allocated to the Pension Fund in accordance with Schedule B of the Rehabilitation Plan by the Board in 2017 and 2016, 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:

Fund participants vest after five years of creditable employment.

Expenses:

Indirect expenses incurred in the administration of the Fund 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 \$940,581 and \$925,932 in 2017 and 2016, 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 \$523,881 and \$509,820 for the years ended September 30, 2017 and 2016, 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, 2017 AND 2016

2. FUND DESCRIPTION:

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

The Fund 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 Fund is administered by the Board which also administers a Welfare Fund and a Vacation and Holiday Fund, which were also created under the agreement identified above.

The Fund is a noncontributory defined benefit plan which provides normal retirement, disability and early retirement pension benefits. The Fund 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 Fund 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 Fund 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 Fund are contained therein. If the Fund is not extended, the Board shall continue to perform and carry out the provisions of the Fund on the basis that all employees who become thereafter eligible to receive benefits in accordance with the provisions of the Fund shall receive such benefits as if the Fund were extended until the total assets of the Fund are disbursed.

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

Participants in the Fund as of the date of the actuarial valuations October 1, 2016 and 2015 were as follows:

	<u>2016</u>	<u>2015</u>
Current retirees and beneficiaries	2,376	2,446
Inactive participants with vested rights	208	198
Active participants	<u>600</u>	<u>624</u>
Total participants as of the valuation date	<u>3,184</u>	<u>3,268</u>

NEW ORLEANS EMPLOYERS -
INTERNATIONAL LONGSHOREMEN'S ASSOCIATION, AFL-CIO
PENSION FUND
NOTES TO FINANCIAL STATEMENTS
SEPTEMBER 30, 2017 AND 2016

3. ACCUMULATED FUND BENEFITS:

The actuarial present value of accumulated Fund benefits was determined by consulting actuaries The Segal Company as of October 1, 2016 and 2015, the most recent valuation dates. Such amounts result from applying actuarial assumptions to adjust the accumulated Fund 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 Fund benefits at October 1, 2016 and 2015, and the most recent valuation dates, were as follows:

	<u>2016</u>	<u>2015</u>
Actuarial present value of accumulated Fund benefits:		
Vested benefits:		
Participants currently receiving benefits	\$ 187,273,372	\$ 196,439,354
Other participants	<u>36,376,688</u>	<u>34,474,481</u>
	223,650,060	230,913,835
Non-vested benefits	<u>2,505,206</u>	<u>2,547,148</u>
Total actuarial present value of accumulated Fund benefits	<u>\$ 226,155,266</u>	<u>\$ 233,460,983</u>

Changes in accumulated Fund benefits during 2016 and 2015, the most recent actuarial valuation dates, and their effect on accumulated Fund benefits are as follows:

	<u>2016</u>	<u>2015</u>
Actuarial present value of accumulated Fund benefits, beginning of year	\$ <u>233,460,983</u>	\$ <u>231,413,183</u>
Increase (decrease) during the year attributable to:		
Benefits paid	(25,341,207)	(26,021,330)
Interest	16,559,278	16,380,189
Increase during the period attributable to latest participant data and experience	1,476,212	2,634,529
Increase in benefits attributable to changes in actuarial assumptions	<u>-</u>	<u>9,054,412</u>
Net change	<u>(7,305,717)</u>	<u>2,047,800</u>
Actuarial present value of accumulated Fund benefits, end of year	<u>\$ 226,155,266</u>	<u>\$ 233,460,983</u>

NEW ORLEANS EMPLOYERS -
INTERNATIONAL LONGSHOREMEN'S ASSOCIATION, AFL-CIO
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3. ACCUMULATED FUND BENEFITS: (Continued)

	<u>Net Assets Available for Benefits</u>	
	<u>September 30, 2016</u>	<u>September 30, 2015</u>
Investments	\$ 137,448,232	\$ 140,433,478
Receivables	6,617,811	4,903,173
Other	43,869	42,955
Liabilities	<u>(904,927)</u>	<u>(1,501,524)</u>
Net Assets	<u>\$ 143,204,985</u>	<u>\$ 143,878,082</u>

	<u>Changes in</u> <u>Net Assets Available for Benefits</u>	
	<u>September 30, 2016</u>	<u>September 30, 2015</u>
Contributions (net)	\$ 13,059,762	\$ 14,183,071
Investment gain (loss), net	12,429,118	2,153,894
Other expenses:		
Benefits paid	(25,341,207)	(26,021,330)
Administrative expenses	<u>(820,770)</u>	<u>(716,001)</u>
Change in net assets	(673,097)	(10,400,366)
Net assets:		
Beginning	<u>143,878,082</u>	<u>154,278,448</u>
Ending	<u>\$ 143,204,985</u>	<u>\$ 143,878,082</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, 2016 was as follows:

Actuarial Cost Method	Unit Credit Actuarial Cost Method
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Significant actuarial assumptions:

Interest Rates (Net Investment Return)	7.5%, net of expenses
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NEW ORLEANS EMPLOYERS -
INTERNATIONAL LONGSHOREMEN'S ASSOCIATION, AFL-CIO
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3. ACCUMULATED FUND BENEFITS: (Continued)

Significant actuarial assumptions: (Continued)

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	<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 three 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 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.
 Healthy: RP-2014 Healthy Blue Collar Healthy Annuitants: set forward three years for males and two years for females, with 75% of the MP 2015 projection scale applied.
 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.

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

NEW ORLEANS EMPLOYERS -
INTERNATIONAL LONGSHOREMEN'S ASSOCIATION, AFL-CIO
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3. ACCUMULATED FUND BENEFITS: (Continued)

The following Fund changes were included in the Preferred Schedule of the Rehabilitation Plan Eighth Amendment and Update adopted on September 19, 2017:

- 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, 2016 and 2015 as follows:

	<u>2016</u>	<u>2015</u>
Present value of all future benefits	\$ <u>226,155,266</u>	\$ <u>233,460,983</u>
Present value of benefits to be funded by future contributions	\$ <u>89,378,038</u>	\$ <u>95,969,865</u>

As of October 1, 2016 and 2015, using The Segal Company's mortality assumptions, the actuarial present value of vested Fund benefits for withdrawal liability purposes is as follows:

	<u>2016</u>	<u>2015</u>
Withdrawal liability	\$ 277,382,160	\$ 277,068,365
Market value of assets	<u>(143,204,985)</u>	<u>(143,878,365)</u>
Unfunded present value of vested benefits	\$ <u>134,177,175</u>	\$ <u>133,190,000</u>

NEW ORLEANS EMPLOYERS -
INTERNATIONAL LONGSHOREMEN'S ASSOCIATION, AFL-CIO
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3. ACCUMULATED FUND BENEFITS: (Continued)

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

Interest:	For liabilities up to market value of assets, 2.50% for 20 years and 2.85% beyond. For liabilities in excess of market value of assets, same as used for Fund 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 Fund funding as of October 1, 2016 (the corresponding mortality rates as of a year earlier were used for the prior year's value).
Retirement Rates:	Same as used for Fund funding as of October 1, 2016 (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 Fund.

4. FUND TERMINATION:

In the event the Fund terminates, the net assets of the Fund will be allocated, as prescribed by ERISA and its related regulations. Certain benefits under the Fund are insured by the PBGC if the Fund terminates. Only vested benefits are guaranteed. Specifically, the PBGC guarantees a monthly benefit payment equal to 100% of the first \$11 of the Fund's monthly benefit accrual rate, plus 75% of the next \$33 of the accrual rate, times each year of credited service. At September 30, 2017, the maximum guaranteed benefits insured by PBGC for multi-employer plans was \$35.75 per month times the participant's years of credited service.

Federal law has a number of special rules that apply to financially troubled multi-employer plans. Under so-called "plan reorganization rules," a plan with adverse financial experience may need to increase required contributions and may, under certain circumstances, reduce benefits that are not eligible for the PBGC's guarantee. If the Fund 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.

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4. FUND TERMINATION: (Continued)

An insolvent fund must reduce benefit payments to the highest level that can be paid from the fund'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, 2017 and 2016:

	<u>2017</u>	<u>2016</u>
Demand deposits (book balances)	\$ <u>2,059,898</u>	\$ <u>2,174,827</u>
Cash equivalents:		
Collective short-term investments	4,913,711	3,431,058
Interest in securities held by an agent of the Fund in the name of the agent	-	190,546
Money market mutual funds	<u>113,552</u>	<u>-</u>
Total cash equivalents	<u>5,027,263</u>	<u>3,621,604</u>
Total cash and cash equivalents	<u>\$ 7,087,161</u>	<u>\$ 5,796,431</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, 2017. 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:

During the year ended September 30, 2017 the Fund, specifically the NOE-ILA Unallocated Contribution Account, entered into a Sweep Vehicle Authorization Agreement with Whitney Bank Trust (the Bank). The agreement allows the Bank to transfer excess cash balances to a money market mutual fund – Federated Government Obligations Plan (GOSXX). A sweep of the excess cash allows the Fund to earn interest on the funds while retaining the flexibility to quickly access that cash to purchase securities or withdraw it. Money market mutual funds are treated as securities and are registered with the Securities and Exchange Commission, pursuant to the Investment Company Act of 1940. Shares in a money market fund are not FDIC-insured, not guaranteed by the Federal Government, and are not deposits or obligations of any bank or guaranteed by the bank. Federated Government Obligations money market mutual fund is on the

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5. CASH AND CASH EQUIVALENTS: (Continued)

Cash Equivalents: (Continued)

National Association of Insurance Commissioner's list as a U.S. Direct Obligations/Full Faith & Credit listing. This designation denotes that the funds meets certain quality and pricing guidelines, such as: a rating of AAAM by a Nationally Recognized Statistical Rating Organization (NRSRO), maintain a constant NAV \$1.00 at all times, allow a maximum seven-day redemption of proceeds, and invest 100% in U.S. Government securities. Money market funds are designed to maintain a \$1 share price at all times, but there can be no assurance that a money market fund will be able to maintain a stable net asset value of \$1 per share. Federated Government Obligations Fund is rated AAAM by Standard & Poor's after evaluating a number of factors, including credit quality, market price, exposure and management. Whitney Bank may receive a fee from the mutual fund, its advisor, or distributor for providing various administrative and ministerial services up to .5% from the overall fund expense ratio of the fund.

During the year ended September 30, 2011 the Fund, specifically the NOE-ILA Unallocated Contribution Account, entered into a Repurchase Agreement with Whitney Bank (the Bank). The agreement allows the Bank, on a daily basis, to automatically transfer and invest excess funds from a specified account maintained by the Fund with the Bank to a certain sale and repurchase transaction, having a one-day maturity, involving the Bank's interest in certain securities (the Securities) issued by the United States Government or agencies thereof. The Bank is a custodian of the Fund and at all times maintains possession of the underlying investments. The repurchase transaction is not insured by the FDIC, is not a deposit of the bank and is subject to investment risk including possible loss of the principal amount invested. Should the Bank refuse, decline or otherwise fail to repurchase those Securities, such default will give rise to an immediate cause of action in favor of the Plan 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, 2017, the Fund'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, 2017 and 2016.

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6. INVESTMENTS: (Continued)

	<u>2017</u>		<u>2016</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	\$ 1,382,682	\$ 1,372,377	\$ 1,902,864	\$ 1,914,444
Foreign securities	166,887	167,193	209,050	209,220
Common collective trusts	24,113,975	45,714,919	25,532,803	46,519,674
Corporate bonds, notes, and debentures	2,689,997	2,674,762	3,607,507	3,633,538
Common stock	34,559,607	44,492,892	35,436,618	41,865,309
Limited partnership	8,301,322	11,303,053	9,677,322	11,813,102
Mutual funds	71,431	72,334	-	-
Pooled investment funds	859,425	5,876,004	2,239,425	6,730,187
103-12 investment entities	<u>19,298,205</u>	<u>21,416,871</u>	<u>19,621,785</u>	<u>18,966,327</u>
	<u>\$ 91,443,531</u>	<u>\$ 133,090,405</u>	<u>\$ 98,227,374</u>	<u>\$ 131,651,801</u>

The above table includes investments classified as securities on loan at September 30, 2017 and 2016. These investments are described in footnote 11.

The fair value of individual investments that represent 5% or more of the Fund's net assets as of September 30, 2017 and 2016 are as follows:

	<u>2017</u>	<u>2016</u>
Common collective trusts:		
ASB Capital Real Estate Fund	\$ 8,048,559	\$ 9,886,347
Loomis High Yield Conservative Trust	17,037,768	13,790,310
103-12 investment entities:		
RBC Global Asset Management	21,416,871	18,966,327

Net appreciation in the fair value of investments during the years ended September 30, 2017 and 2016, (including investments bought and sold, as well as those held at the end of the year) is summarized as follows:

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6. INVESTMENTS: (Continued)

	<u>2017</u>	<u>2016</u>
Net appreciation (depreciation) in fair value of investments, as determined by quoted market price:		
U.S. Government securities	\$ (21,886)	\$ 111,811
Common collective trusts	614,074	2,025,176
Corporate bonds, notes, and debentures	(41,266)	415,084
Common stock	3,504,594	8,766,756
Foreign stock	137	16,352
Limited partnerships	865,952	619,474
Mutual funds	903	-
Pooled investment funds	525,817	627,267
103-12 investment entities	<u>2,774,124</u>	<u>1,113,681</u>
	8,222,449	13,695,601
Net realized gains (losses)	<u>8,925,089</u>	<u>(1,928,520)</u>
Net appreciation in fair value of investments	<u>\$ 17,147,538</u>	<u>\$ 11,767,081</u>

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

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

Common Collective Trusts:

Amalgamated Bank – Longview Ultra Construction Loan Investment Fund

The Longview Ultra Construction Loan Investment Fund (the Fund) was established to invest the pooled contributions of eligible trusts principally in real estate construction loans which are secured by properties constructed with union labor. All loans made by the Fund have an initially approved exit strategy.

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6. INVESTMENTS: (Continued)

Common Collective Trusts: (Continued)

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

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 Pension Fund requested a complete withdrawal on February 24, 2010 and has been receiving partial distributions of cash on a consistent basis since that time.

The Fund experienced a net gain for the years ended September 30, 2017 and 2016 in the amount of \$163,791 and \$249,918, respectively.

The fair market value of the Fund was \$3,086,461 and \$3,213,470 at September 30, 2017 and 2016, 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, 2017 and 2016 in the amount of \$310,210 and \$1,059,070, respectively.

The fair market value of the Fund was \$8,048,559 and \$9,886,347 at September 30, 2017 and 2016, 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 Trust experienced a net gain for the years ended September 30, 2017 and 2016 in the amount of \$1,355,458 and \$1,177,117, respectively.

The fair market value of the Trust was \$17,037,768 and \$13,790,310 at September 30, 2017 and 2016, respectively.

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NOTES TO FINANCIAL STATEMENTS
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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 Trust experienced a net gain for the years ended September 30, 2017 and 2016 in the amount of \$170,078 and \$343,430, respectively.

The fair market value of the Trust was \$2,913,696 and \$3,607,092 at September 30, 2017 and 2016, 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

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6. INVESTMENTS: (Continued)

Common Collective Trusts: (Continued)

Rothschild Small-Cap Trust (Continued)

redemption, the capital account of such beneficial owner will, immediately following such redemption equal at least \$1,000,000. Payment of the redemption price shall be made in cash or, if so directed by the Investment Manager, other property.

The Trust experienced a net gain for the years ended September 30, 2017 and 2016 in the amount of \$1,085,290 and \$515,915, respectively.

The fair market value of the Trust was \$5,843,320 and \$5,813,849 at September 30, 2017 and 2016, 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.

NEW ORLEANS EMPLOYERS -
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6. INVESTMENTS: (Continued)

Common Collective Trusts: (Continued)

Wellington – CIP Opportunistic Investment Allocation Portfolio (Continued)

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

The Fund experienced a net gain for the years ended September 30, 2017 and 2016 in the amount of \$251,898 and \$179,311, respectively.

The fair market value of the Fund was \$2,006,583 and \$2,522,687 at September 30, 2017 and 2016, respectively.

AFL-CIO Equity Index Fund

The AFL-CIO Equity Index Fund (the 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 & Poor's 500 Index, by the purchase and sale of such equities which compose the S&P 500 Index.

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6. INVESTMENTS: (Continued)

Common Collective Trusts: (Continued)

AFL-CIO Equity Index Fund (Continued)

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

The Fund experienced a net gain for the years ended September 30, 2017 and 2016 in the amount of \$377,541 and \$397,741, respectively.

The fair market value of the fund was \$1,934,352 and \$2,432,811 at September 30, 2017 and 2016, 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 for the years ended September 30, 2017 and 2016 in the amount of \$563,072 and \$413,592, respectively.

The fair market value of the Fund was \$4,844,180 and \$5,253,108 at September 30, 2017 and 2016, respectively.

NEW ORLEANS EMPLOYERS -
INTERNATIONAL LONGSHOREMEN'S ASSOCIATION, AFL-CIO
PENSION FUND
NOTES TO FINANCIAL STATEMENTS
SEPTEMBER 30, 2017 AND 2016

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 for 2017 and 2016 was \$505,108 and \$633,588, respectively, and is included in net appreciation.

The fair market value of the Fund was \$5,432,948 and \$4,875,840 at September 30, 2017 and 2016, 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.

NEW ORLEANS EMPLOYERS -
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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 2017 and 2016 was \$360,844 and \$(14,114), respectively, and is included in net appreciation.

The fair market value of the Fund was \$5,870,105 and \$6,937,262 at September 30, 2017 and 2016, 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, 2017.

The Fund experienced a net gain for the years ended September 30, 2017 and 2016 in the amount of \$525,817 and \$627,267, respectively.

The fair market value of the Fund was \$5,876,004 and \$6,730,187 at September 30, 2017 and 2016, respectively.

NEW ORLEANS EMPLOYERS -
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NOTES TO FINANCIAL STATEMENTS
SEPTEMBER 30, 2017 AND 2016

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 for the years ended September 30, 2017 and 2016 in the amount of \$3,589,171 and \$1,351,665, respectively.

The fair market value of the Fund was \$21,416,871 and \$18,966,327 at September 30, 2017 and 2016, respectively.

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

NEW ORLEANS EMPLOYERS -
INTERNATIONAL LONGSHOREMEN'S ASSOCIATION, AFL-CIO
PENSION FUND
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SEPTEMBER 30, 2017 AND 2016

7. FAIR VALUE MEASUREMENTS:

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 Fund 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, 2017 and 2016 using the market approach.

NEW ORLEANS EMPLOYERS -
INTERNATIONAL LONGSHOREMEN'S ASSOCIATION, AFL-CIO
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SEPTEMBER 30, 2017 AND 2016

7. FAIR VALUE MEASUREMENTS: (Continued)

<u>2017</u>	<u>Fair Value</u>	Quoted Prices in Active Markets for Identical Assets/Liabilities <u>(Level 1)</u>	Significant Other Observable Inputs <u>(Level 2)</u>	Significant Unobservable Inputs <u>(Level 3)</u>
U.S. Government				
Securities	\$ 1,372,377	\$ 1,361,542	\$ 10,835	\$ -
Foreign Securities	167,193	167,193	-	-
Common Collective				
Trusts	45,714,919	10,538,875	20,990,360	14,185,684
Corporate bonds, notes, and debentures	2,674,762	2,403,988	270,774	-
Common stock	44,492,892	44,492,892	-	-
Limited partnerships	11,303,053	5,032,540	400,408	5,870,105
Mutual funds	72,334	72,334	-	-
Pooled investment funds	5,876,004	-	220,350	5,655,654
103-12 investment entities	21,416,871	21,416,871	-	-
Total	<u>\$ 133,090,405</u>	<u>\$ 85,486,235</u>	<u>\$ 21,892,727</u>	<u>\$ 25,711,443</u>
<u>2016</u>	<u>Fair Value</u>	Quoted Prices in Active Markets for Identical Assets/Liabilities <u>(Level 1)</u>	Significant Other Observable Inputs <u>(Level 2)</u>	Significant Unobservable Inputs <u>(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>

NEW ORLEANS EMPLOYERS -
INTERNATIONAL LONGSHOREMEN'S ASSOCIATION, AFL-CIO
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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, 2017 and 2016:

	<u>2017</u>	<u>2016</u>
Beginning Balance	\$ 30,335,078	\$ 25,436,491
Realized and unrealized gain/loss on investments:		
Net realized loss	2,020,113	1,685,567
Unrealized gain	(869,059)	66,993
Funds reclassified as Level 3 due to changes in valuation methodology	(70,882)	8,766,672
Purchases, sales, issuances, and settlements	<u>(5,703,807)</u>	<u>(5,620,645)</u>
Ending Balance	<u>\$ 25,711,443</u>	<u>\$ 30,335,078</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 Fund 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 Fund qualifies under Section 501 of the Internal Revenue Code and is, therefore, not subject to tax under present federal income tax laws. The Fund has been amended since this ruling. However, the Fund's management believes that the Fund is designed and is currently being operated in compliance with the applicable provisions of the Internal Revenue Code.

The Fund's Federal Annual Return/Report of Employee Benefit Plan Tax Returns (Form 5500) for 2017, 2016, 2015, and 2014 are subject to examination by the IRS, generally for three years after they were filed.

NEW ORLEANS EMPLOYERS -
INTERNATIONAL LONGSHOREMEN'S ASSOCIATION, AFL-CIO
PENSION FUND
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SEPTEMBER 30, 2017 AND 2016

9. CONTINGENCY:

The Fund 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 Fund's financial position.

10. OTHER FUNDS:

Amounts due from and to other funds at September 30, 2017 and 2016 were as follows:

	<u>2017</u>	<u>2016</u>
Due from other funds:		
Director's Operating Account	\$ 75,000	\$ 75,000
Penalty and Interest Account	-	9
	<u>\$ 75,000</u>	<u>\$ 75,009</u>
Due to other funds:		
Director's Operating Account	\$ 80,320	\$ 18,157
	<u>\$ 80,320</u>	<u>\$ 18,157</u>

The Fund transferred \$728,370 and \$809,593 to the Director's Operating Account for reimbursement of expenses paid on behalf of the Fund for the years ended September 30, 2017 and 2016, respectively.

The Director's Operating Account paid expenses in the amount of \$790,533 and \$756,816 on behalf of the Pension Fund for the years ended September 30, 2017 and 2016, respectively.

11. SECURITIES LENDING AGREEMENTS:

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

NEW ORLEANS EMPLOYERS -
INTERNATIONAL LONGSHOREMEN'S ASSOCIATION, AFL-CIO
PENSION FUND
NOTES TO FINANCIAL STATEMENTS
SEPTEMBER 30, 2017 AND 2016

11. SECURITIES LENDING AGREEMENTS: (Continued)

The Fund had the following securities on loan:

	September 30, 2017 Market (<u>Carrying Value</u>)	September 30, 2016 Market (<u>Carrying Value</u>)
Corporate Bonds	\$ <u>579,934</u>	\$ <u>1,033,963</u>
Total	\$ <u>579,934</u>	\$ <u>1,033,963</u>

The collateral held relating to the above investments totaled \$593,364, and \$1,053,680 as of September 30, 2017 and 2016, 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, 2017 and 2016.

12. PENSION PROTECTION ACT:

The Pension Protection Act of 2006 requires the Fund's actuary to certify whether or not a plan is either "Endangered" (Yellow Zone) or "Critical" (Red Zone). As of October 1, 2017 and 2016 the Fund was in critical status (Red Zone). Funds in the Red Zone are required to follow a set rehabilitation schedule which can be accelerated but not delayed.

On April 22, 2009 the Fund 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; September 12, 2016; and September 19, 2017; however, no changes were made to the employer contribution rate increases in the Preferred and Default Schedules.

NEW ORLEANS EMPLOYERS -
INTERNATIONAL LONGSHOREMEN'S ASSOCIATION, AFL-CIO
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NOTES TO FINANCIAL STATEMENTS
SEPTEMBER 30, 2017 AND 2016

13. SUBSEQUENT EVENTS:

Management has evaluated subsequent events through the date that the financial statements were available to be issued on April 16, 2018 and determined that no events occurred that required disclosure. No subsequent events occurring after this date have been evaluated for inclusion in these financial statements.

NEW ORLEANS EMPLOYERS -
INTERNATIONAL LONGSHOREMEN'S ASSOCIATION, AFL-CIO
PENSION FUND
SUPPLEMENTARY INFORMATION
SCHEDULE OF CASH RECEIPTS AND DISBURSEMENTS
SEPTEMBER 30, 2017

RECEIPTS:

Proceeds from sales of investments	\$ 130,827,039
Income from investments	1,528,882
Contributions	10,705,014
Other income	24,488
	<u>143,085,423</u>

DISBURSEMENTS:

Purchases of investments	115,546,126
Pension benefit payments to participants	24,522,265
Administrative and investment expenses	1,726,302
	<u>141,794,693</u>

NET CHANGE IN CASH AND CASH EQUIVALENTS	\$ <u><u>1,290,730</u></u>
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NEW ORLEANS EMPLOYERS -
INTERNATIONAL LONGSHOREMEN'S ASSOCIATION, AFL-CIO
PENSION FUND
SUPPLEMENTARY INFORMATION
SCHEDULE OF ASSETS BY FUND
SEPTEMBER 30, 2017

	U. S. Bank <u>Account</u>	New Tower Trust Company <u>Account</u>	Whitney <u>Account</u>	Principal U.S. Property <u>Account</u>
Investments, as reported by custodian banks:				
Cash and cash equivalents	\$ 3,262,548	\$ 106	\$ 2,059,898	\$ 60
Fixed income securities:				
U.S. Government securities	1,372,377	-	-	-
Corporate	2,674,762	-	-	-
Foreign	167,193	-	-	-
Common collective trusts	-	2,913,696	-	-
Common stock	44,492,892	-	-	-
Limited partnerships	-	-	-	-
Mutual funds	72,334	-	-	-
Pooled investment funds	-	-	-	5,876,004
103-12 investment entities	-	-	-	-
	<u>\$ 52,042,106</u>	<u>\$ 2,913,802</u>	<u>\$ 2,059,898</u>	<u>\$ 5,876,064</u>

NEW ORLEANS EMPLOYERS -
INTERNATIONAL LONGSHOREMEN'S ASSOCIATION, AFL-CIO
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SUPPLEMENTARY INFORMATION
SCHEDULE OF ASSETS BY FUND
SEPTEMBER 30, 2017

	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:				
Cash and cash equivalents	\$ 8	\$ 105	\$ 2,050	\$ 174
Fixed income securities:				
U.S. Government securities	-	-	-	-
Corporate	-	-	-	-
Foreign	-	-	-	-
Common collective trusts	3,086,461	-	8,048,559	17,037,768
Common stock	-	-	-	-
Mutual funds	-	5,870,105	-	-
Limited partnerships	-	-	-	-
Pooled investment funds	-	-	-	-
103-12 investment entities	-	-	-	-
	<u>\$ 3,086,469</u>	<u>\$ 5,870,210</u>	<u>\$ 8,050,609</u>	<u>\$ 17,037,942</u>

NEW ORLEANS EMPLOYERS -
INTERNATIONAL LONGSHOREMEN'S ASSOCIATION, AFL-CIO
PENSION FUND
SUPPLEMENTARY INFORMATION
SCHEDULE OF ASSETS BY FUND
SEPTEMBER 30, 2017

	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	\$ 425	\$ 53	\$ 533	\$ 1,300,394
Fixed income securities:				
U.S. Government securities	-	-	-	-
Corporate	-	-	-	-
Foreign	-	-	-	-
Common collective trusts	5,843,320	4,844,180	-	2,006,583
Common stock	-	-	-	-
Limited partnerships	-	-	5,432,948	-
Mutual funds	-	-	-	-
Pooled investment funds	-	-	-	-
103-12 investment entities	-	-	-	-
	<u>\$ 5,843,745</u>	<u>\$ 4,844,233</u>	<u>\$ 5,433,481</u>	<u>\$ 3,306,977</u>

NEW ORLEANS EMPLOYERS -
INTERNATIONAL LONGSHOREMEN'S ASSOCIATION, AFL-CIO
PENSION FUND
SUPPLEMENTARY INFORMATION
SCHEDULE OF ASSETS BY FUND
SEPTEMBER 30, 2017

	Whitney 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	\$ 113,552	\$ 41	\$ 347,214	\$ 7,087,161
Fixed income securities:				
U.S. Government securities	-	-	-	1,372,377
Corporate	-	-	-	2,674,762
Foreign	-	-	-	167,193
Common collective trusts	-	1,934,352	-	45,714,919
Common stock	-	-	-	44,492,892
Limited partnerships	-	-	-	11,303,053
Mutual funds	-	-	-	72,334
Pooled investment funds	-	-	-	5,876,004
103-12 investment entities	-	-	21,416,871	21,416,871
	<u>\$ 113,552</u>	<u>\$ 1,934,393</u>	<u>\$ 21,764,085</u>	<u>\$ 140,177,566</u>

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, 2017

Party in Interest (a)	Identity of Issue, Borrower, Lessor, or Similar Party (b)	Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value (c)			Cost of Asset (d)	Current Value (e)	
U.S. Government Securities							
	F H L B DEB	U.S. Government Securities	04/03/2024	2.780 %	8,333.330 \$	8,335.83 \$	8,333.33
	F F C B DEB	U.S. Government Securities	04/05/2027	3.140 %	43,000.000	43,000.00	42,817.25
	F F C B DEB	U.S. Government Securities	11/17/2025	2.960 %	23,000.000	23,034.50	23,004.14
	F F C B DEB	U.S. Government Securities	11/30/2023	2.500 %	51,000.000	51,012.75	50,654.73
	F F C B DEB	U.S. Government Securities	12/19/2024	2.700 %	47,000.000	46,978.85	46,356.57
	U S TREASURY NOTE	U.S. Government Securities	01/31/2019	1.500 %	80,000.000	80,438.40	80,084.80
	U S TREASURY NOTE	U.S. Government Securities	12/31/2019	1.625 %	214,000.000	217,106.39	214,477.22
	U S TREASURY NOTE	U.S. Government Securities	04/15/2020	0.125 %	40,767.090	41,453.79	40,967.26
	U S TREASURY NOTE	U.S. Government Securities	08/15/2025	2.000 %	40,000.000	39,545.94	39,315.60
	U S TREASURY NOTE	U.S. Government Securities	08/31/2020	1.375 %	109,000.000	108,666.60	108,251.17
	U S TREASURY NOTE	U.S. Government Securities	10/31/2020	1.375 %	73,000.000	72,247.99	72,395.56
	U S TREASURY NOTE	U.S. Government Securities	01/15/2026	0.625 %	48,420.340	49,450.43	49,074.98
	U S TREASURY NOTE	U.S. Government Securities	02/28/2023	1.500 %	31,000.000	29,944.23	30,207.95
	U S TREASURY NOTE	U.S. Government Securities	07/15/2021	0.625 %	22,808.310	23,607.23	23,442.84
	U S TREASURY NOTE	U.S. Government Securities	05/15/2026	1.625 %	23,000.000	23,033.63	21,815.96
	U S TREASURY NOTE	U.S. Government Securities	09/30/2023	1.375 %	12,000.000	11,630.63	11,537.40
	U S TREASURY NOTE	U.S. Government Securities	08/15/2023	2.500 %	68,000.000	69,995.51	69,753.04
	U S TREASURY NOTE	U.S. Government Securities	01/15/2027	0.375 %	84,110.540	83,911.82	83,097.01
	U S TREASURY NOTE	U.S. Government Securities	05/31/2021	2.000 %	164,000.000	166,814.47	165,461.24
	U S TREASURY NOTE	U.S. Government Securities	06/30/2022	1.750 %	30,000.000	29,773.35	29,781.00
	U S TREASURY NOTE	U.S. Government Securities	06/30/2024	2.000 %	7,000.000	6,939.99	6,937.14
	U S TREASURY NOTE	U.S. Government Securities	05/15/2027	2.375 %	50,000.000	50,776.31	50,207.00
	U S TREASURY NOTE	U.S. Government Securities	07/15/2027	0.375 %	21,014.910	20,800.68	20,813.59
	U S TREASURY NOTE	U.S. Government Securities	07/31/2022	1.875 %	35,000.000	35,024.57	34,923.35
	U S TREASURY NOTE	U.S. Government Securities	08/15/2027	2.250 %	49,000.000	49,158.36	48,666.80
Corporate Bonds, Notes, and Debentures							
	AT&T INC	Corporate bonds, notes and debentures	05/15/2025	3.400 %	32,000.000	31,733.52	31,564.80
	AT&T INC	Corporate bonds, notes and debentures	03/01/2027	4.250 %	3,000.000	3,093.03	3,087.84
	ALLY AUTO	Corporate bonds, notes and debentures	08/16/2021	1.780 %	23,000.000	22,997.29	22,988.27
	AMERICAN AIRLINES	Corporate bonds, notes and debentures	10/15/2028	3.200 %	12,000.000	12,000.00	11,910.00
	AMERICAN EXPRESS MTN	Corporate bonds, notes and debentures	09/14/2020	2.600 %	25,000.000	25,126.33	25,380.50
	AMERICAN EXPRESS BANK CD	Corporate bonds, notes and debentures	05/24/2021	2.250 %	74,000.000	73,648.50	74,213.12
	AMEX CENTURION CD	Corporate bonds, notes and debentures	04/05/2021	2.300 %	75,000.000	74,643.75	75,393.00

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Corporate Bonds, Notes, and Debentures (Continued)							
	AMERICREDIT	Corporate bonds, notes and debentures	09/18/2020	1.790 %	37,000.000 \$	36,998.85 \$	36,988.90
	AMGEN INC	Corporate bonds, notes and debentures	08/19/2023	2.250 %	22,000.000	21,944.78	21,379.60
	AHNEUSER BUSCH	Corporate bonds, notes and debentures	01/15/2019	7.750 %	14,000.000	17,267.22	15,032.78
	AHNEUSER BUSCH	Corporate bonds, notes and debentures	02/01/2026	3.650 %	16,000.000	16,734.24	16,552.16
	APPLE INC	Corporate bonds, notes and debentures	05/03/2023	2.400 %	34,000.000	32,368.34	33,935.40
	BNSF RAILWAY CO	Corporate bonds, notes and debentures	06/16/2028	3.442 %	18,495.490	19,553.44	18,909.60
	BANK OF AMERICA	Corporate bonds, notes and debentures	06/01/2019	7.625 %	25,000.000	27,370.00	27,282.75
	BANK OF AMERICA MTN	Corporate bonds, notes and debentures	07/21/2021	2.369 %	10,000.000	10,000.00	10,000.70
	BANK OF NEW YORK MTN	Corporate bonds, notes and debentures	01/15/2019	2.100 %	26,000.000	25,925.64	26,102.44
	BARCLAYS CD	Corporate bonds, notes and debentures	03/26/2018	2.369 %	46,000.000	46,000.00	45,218.00
	BERKSHIRE HATHAWAY	Corporate bonds, notes and debentures	03/15/2023	2.750 %	20,000.000	19,971.44	20,331.80
	BURLINGTN NO SF 00 1 TR	Corporate bonds, notes and debentures	01/15/2021	8.251 %	18,065.820	22,243.53	19,285.62
	CSX TRANSPORTATION INC	Corporate bonds, notes and debentures	01/15/2023	6.251 %	10,657.430	13,015.38	12,182.51
	CAPITAL AUTO	Corporate bonds, notes and debentures	06/20/2020	1.460 %	27,000.000	26,997.77	26,968.95
	CAPITAL ONE	Corporate bonds, notes and debentures	05/12/2020	2.500 %	8,000.000	7,987.36	8,037.28
	CAPITAL ONE NATIONAL CD	Corporate bonds, notes and debentures	10/07/2019	2.000 %	106,000.000	105,470.00	106,620.10
	CAPITAL ONE BANK CD	Corporate bonds, notes and debentures	09/28/2021	1.700 %	100,000.000	99,375.00	97,995.00
	CAPITAL ONE BANK CD	Corporate bonds, notes and debentures	04/19/2021	2.250 %	4,000.000	3,981.00	4,041.60
	CARMAX AUTO OWNER	Corporate bonds, notes and debentures	06/15/2020	1.630 %	44,000.000	43,995.23	44,003.52
	DUKE ENERGY PROGRESS	Corporate bonds, notes and debentures	01/15/2019	5.300 %	37,000.000	42,369.59	38,734.93
	CATERPILLAR INC	Corporate bonds, notes and debentures	12/15/2018	7.900 %	28,000.000	34,068.42	30,057.44
	CHEVRON CORP	Corporate bonds, notes and debentures	12/05/2022	2.355 %	44,000.000	43,487.05	44,056.32
	CISCO SYSTEMS INC	Corporate bonds, notes and debentures	02/28/2021	2.200 %	20,000.000	19,961.60	20,116.00
	COMCAST CORP	Corporate bonds, notes and debentures	03/01/2024	3.600 %	37,000.000	38,186.59	39,027.60
	JOHN DEERE MTN	Corporate bonds, notes and debentures	12/13/2018	1.950 %	25,000.000	24,978.15	25,091.00
	DISCOVER BANK	Corporate bonds, notes and debentures	09/13/2022	2.350 %	23,000.000	22,856.25	23,083.03
	WALT DISNEY COMPANY	Corporate bonds, notes and debentures	06/15/2027	2.950 %	27,000.000	26,899.83	26,979.21
	DUPONT EI NEMOUR	Corporate bonds, notes and debentures	07/15/2018	6.000 %	15,000.000	16,624.65	15,509.70
	E I DU POINT DE	Corporate bonds, notes and debentures	03/15/2019	5.750 %	5,000.000	5,327.30	5,268.35
	E I DU POINT DE	Corporate bonds, notes and debentures	05/01/2020	2.200 %	7,000.000	6,992.30	7,045.08
	DUKE ENERGY	Corporate bonds, notes and debentures	12/01/2026	2.950 %	44,000.000	43,893.52	43,798.48
	EXXON MOBIL	Corporate bonds, notes and debentures	03/01/2021	2.222 %	20,000.000	20,337.00	20,151.00
	FEDEX 1998 TRUST	Corporate bonds, notes and debentures	01/15/2022	6.720 %	38,130.730	46,173.58	41,801.19
	FLORIDA POWER LIGHT CO	Corporate bonds, notes and debentures	06/01/2024	3.250 %	51,000.000	51,413.25	52,589.67

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Corporate Bonds, Notes, and Debentures (Continued)							
	FORD MOTOR COMPANY	Corporate bonds, notes and debentures	12/08/2026	4.346 %	22,000.000 \$	22,000.00 \$	22,870.76
	GM FINANCIAL	Corporate bonds, notes and debentures	05/20/2020	1.780 %	39,000.000	38,963.44	38,921.22
	GENERAL ELECTRIC CO	Corporate bonds, notes and debentures	10/09/2022	2.700 %	21,000.000	21,426.51	21,378.84
	GENERAL MOTORS FINL	Corporate bonds, notes and debentures	07/06/2021	3.200 %	40,000.000	40,155.77	40,703.20
	GENERAL MOTORS FINL	Corporate bonds, notes and debentures	01/17/2027	4.350 %	6,000.000	6,161.10	6,165.60
	GEORGE WASHINGTON UNIVERSITY	Corporate bonds, notes and debentures	09/15/2021	4.452 %	9,000.000	9,659.70	9,586.44
	GOLDMAN SACHS GROUP	Corporate bonds, notes and debentures	03/03/2024	4.000 %	45,000.000	46,867.09	47,514.15
	GOLDMAN SACHS	Corporate bonds, notes and debentures	04/25/2019	2.000 %	15,000.000	14,958.30	14,997.75
	GOLDMAN SACHS BANK USA	Corporate bonds, notes and debentures	09/30/2020	2.250 %	104,000.000	103,350.00	105,035.84
	HSBC BANK USA CD	Corporate bonds, notes and debentures	12/09/2020	1.625 %	24,000.000	23,910.00	23,961.36
	HOME DEPOT INC	Corporate bonds, notes and debentures	06/01/2022	2.625 %	18,000.000	18,232.74	18,286.02
	HONDA AUTO	Corporate bonds, notes and debentures	08/15/2022	1.620 %	44,000.000	43,903.75	43,820.92
	HONEYWELL	Corporate bonds, notes and debentures	11/01/2026	2.500 %	29,000.000	27,678.85	27,800.56
	JPMORGAN CHASE CO	Corporate bonds, notes and debentures	07/22/2020	4.400 %	21,000.000	22,953.94	22,303.26
	JPMORGAN CHASE CO	Corporate bonds, notes and debentures	09/23/2022	3.250 %	48,000.000	49,142.40	49,623.36
	JPMORGAN CHASE CO	Corporate bonds, notes and debentures	06/23/2020	2.750 %	56,000.000	56,128.06	57,056.72
	KRAFT HEINZ FOODS CO	Corporate bonds, notes and debentures	07/02/2020	2.800 %	23,000.000	23,407.79	23,415.61
	KROGER CO	Corporate bonds, notes and debentures	01/15/2021	3.300 %	31,000.000	31,863.56	31,778.41
	LOCKHEED MARTIN CORP	Corporate bonds, notes and debentures	01/15/2026	3.550 %	30,000.000	30,390.82	30,964.50
	LOYOLA UNIV CHICAGO	Corporate bonds, notes and debentures	07/01/2022	3.199 %	31,000.000	28,879.60	31,079.05
	MICROSOFT CORP	Corporate bonds, notes and debentures	02/06/2024	2.875 %	51,000.000	51,688.81	52,117.92
	MID AMERICA	Corporate bonds, notes and debentures	06/01/2027	3.600 %	5,000.000	4,979.00	5,020.80
	MORGAN STANLEY	Corporate bonds, notes and debentures	04/29/2024	3.875 %	21,000.000	21,922.97	21,976.71
	MORGAN STANLEY MTN	Corporate bonds, notes and debentures	04/21/2021	2.500 %	37,000.000	36,870.63	37,119.88
	NATIONAL RURAL UTIL COOP	Corporate bonds, notes and debentures	11/01/2018	10.375 %	25,000.000	36,406.11	27,303.75
	OCCIDENTAL PETROLEUM	Corporate bonds, notes and debentures	06/15/2025	3.500 %	25,000.000	25,548.75	25,586.25
	ORACLE CORPORATION	Corporate bonds, notes and debentures	09/15/2023	2.400 %	24,000.000	23,995.92	23,864.16
	PNC FUNDING CORP	Corporate bonds, notes and debentures	03/08/2022	3.300 %	18,000.000	18,227.07	18,649.44
	PACIFICORP	Corporate bonds, notes and debentures	02/01/2022	2.950 %	23,000.000	24,309.39	23,571.32
	PHILIP MORRIS INTL	Corporate bonds, notes and debentures	02/21/2020	2.000 %	33,000.000	32,798.04	33,039.60
	PHILIP MORRIS INTL	Corporate bonds, notes and debentures	08/17/2022	2.375 %	19,000.000	18,912.03	18,910.70
	PRICELINE GROUP	Corporate bonds, notes and debentures	03/15/2023	2.750 %	9,000.000	8,986.86	8,990.82
	STATE STREET CORP	Corporate bonds, notes and debentures	12/16/2024	3.300 %	30,000.000	30,403.50	30,995.70
	STATE STREET CORP	Corporate bonds, notes and debentures	05/15/2023	2.653 %	7,000.000	7,000.00	7,038.85

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Corporate Bonds, Notes, and Debentures (Continued)							
	SUNTRUST BANK MTN	Corporate bonds, notes and debentures	01/31/2020	2.250 %	31,000.000	\$ 30,988.22	\$ 31,146.01
	TIME WARNER INC	Corporate bonds, notes and debentures	07/15/2025	3.600 %	32,000.000	31,923.20	32,114.24
	TOYOTA MOTOR MTN	Corporate bonds, notes and debentures	07/18/2019	2.125 %	31,000.000	30,943.12	31,216.69
	TOYOTA MOTOR MTN	Corporate bonds, notes and debentures	04/08/2021	1.900 %	21,000.000	20,927.54	20,824.86
	21ST CENTURY FOX AMERICA	Corporate bonds, notes and debentures	02/15/2021	4.500 %	39,000.000	42,127.02	41,737.80
	UBS COML MTG TR	Corporate bonds, notes and debentures	06/15/2050	1.887 %	9,624.230	9,624.00	9,574.86
	UNITED AIR	Corporate bonds, notes and debentures	01/07/2030	3.100 %	23,000.000	23,033.75	22,967.11
	US BANCORP MTN	Corporate bonds, notes and debentures	03/15/2022	3.000 %	26,600.000	26,640.55	26,796.12
	US BANCORP MTN	Corporate bonds, notes and debentures	09/11/2024	3.600 %	33,000.000	33,857.67	34,328.25
	VERIZON	Corporate bonds, notes and debentures	09/15/2023	5.150 %	29,000.000	32,414.46	32,508.13
	WELLS FARGO MTN	Corporate bonds, notes and debentures	01/30/2020	2.150 %	26,000.000	25,964.64	26,070.46
	WELLS FARGO	Corporate bonds, notes and debentures	07/26/2021	2.100 %	19,000.000	18,724.50	18,839.64
	WELLS FARGO BANK CD	Corporate bonds, notes and debentures	06/17/2021	1.750 %	53,000.000	52,801.25	52,324.25
	WELLS FARGO BANK CD	Corporate bonds, notes and debentures	03/29/2021	2.250 %	24,000.000	23,934.00	24,149.28
Foreign Securities							
	BB CAPITAL PLC	Foreign Securities	05/10/2023	2.750 %	28,000.000	28,600.36	28,093.80
	BANK MONTREAL MTN	Foreign Securities	07/31/2018	1.800 %	22,000.000	21,969.86	22,041.14
	BANK OF MONTREAL MTN	Foreign Securities	09/11/2022	2.350 %	14,000.000	13,886.18	13,859.30
	BANK OF NOVA SCOTIA	Foreign Securities	06/14/2019	1.650 %	15,000.000	14,999.10	14,959.50
	BANK OF NOVA	Foreign Securities	03/07/2022	2.700 %	17,000.000	16,969.23	17,169.32
	ONTARIO PROVINCE OF	Foreign Securities	02/08/2022	2.400 %	17,000.000	16,957.84	17,140.25
	SHELL INTERNATIONAL	Foreign Securities	05/11/2025	3.250 %	32,000.000	32,749.79	32,754.88
	STATOIL ASA	Foreign Securities	01/17/2023	2.450 %	12,000.000	11,771.52	11,978.04
	TOTAL CAPITAL INTL	Foreign Securities	06/19/2021	2.750 %	9,000.000	8,982.99	9,196.92
Common Stock							
	3 M CO	Common Stock		2.240 %	500.000	73,101.20	104,950.00
	ACADIA PHARMACEUTICALS	Common Stock		0.000 %	1,199.000	37,059.84	45,166.33
	ACTIVISION BLIZZARD INC	Common Stock		0.470 %	427.000	17,109.91	27,545.77
	ACTIVISION BLIZZARD INC	Common Stock		0.470 %	2,046.000	26,115.14	131,987.46
	ADOBE SYS INC	Common Stock		0.000 %	1,229.000	109,230.75	183,342.22
	AETNA INC	Common Stock		1.260 %	2,184.000	285,176.91	347,277.84
	AETNA INC	Common Stock		1.260 %	1,500.000	124,115.89	238,515.00

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Common Stock (Continued)				
	AGCO CORPORATION	Common Stock 0.760 %	1,500.000 \$	110,655.00 \$
	AGILENT TECHNOLOGIES INC	Common Stock 0.820 %	1,438.000	92,319.60
	AIR PODS CHENICALS INC	Common Stock 2.510 %	1,414.000	213,825.08
	AIR PODS CHENICALS INC	Common Stock 2.510 %	300.000	45,366.00
	AKAMAI TECHNOLOGIES INC	Common Stock 0.000 %	1,356.000	66,064.32
	ALASKA AIR GROUP INC	Common Stock 1.570 %	1,500.000	114,405.00
	ALBEMARLE CORPORATION	Common Stock 0.940 %	300.000	40,893.00
	ALLEGHENY TECHNOLOGIES INC	Common Stock 0.000 %	3,248.000	77,627.20
	ALPHABET INC	Common Stock 0.000 %	1,053.000	1,009,942.83
	AMAZON COM INC	Common Stock 0.000 %	1,055.000	1,014,224.25
	AMEREN CORPORATION	Common Stock 3.160 %	1,100.000	63,624.00
	AMERICAN ELECTRIC POWER	Common Stock 3.530 %	1,000.000	70,240.00
	AMERICAN INTERNATIONAL GROUP	Common Stock 2.090 %	2,900.000	178,031.00
	AMERIPRISE FINANCIAL INC	Common Stock 2.240 %	1,300.000	193,063.00
	AMERISOURCEBERGEN CORP	Common Stock 1.760 %	860.000	71,165.00
	AMERISOURCEBERGEN CORP	Common Stock 1.760 %	2,700.000	223,425.00
	AMGEN INC	Common Stock 2.470 %	1,200.000	223,740.00
	AMPHENOL CORP CL A	Common Stock 0.900 %	3,400.000	287,776.00
	ANSYS INC	Common Stock 0.000 %	664.000	81,492.72
	ANTHEM INC	Common Stock 1.470 %	1,100.000	208,868.00
	APPLE INC	Common Stock 1.640 %	8,377.000	1,291,063.24
	APPLE INC	Common Stock 1.640 %	1,700.000	262,004.00
	APPLIED MATERIALS INC	Common Stock 0.770 %	4,823.000	251,230.07
	ARROW ELECTRS INC	Common Stock 0.000 %	899.000	72,288.59
	ARCHER DANIELS MIDLAND CO	Common Stock 3.010 %	1,000.000	42,510.00
	AUTODESK INC	Common Stock 0.000 %	1,681.000	188,709.06
	AUTODESK INC	Common Stock 0.000 %	1,181.000	132,579.06
	AUTOLIV INC	Common Stock 1.940 %	900.000	111,240.00
	BALL CORPORATION	Common Stock 0.970 %	1,200.000	49,560.00
	BANK OF AMERICA CORP	Common Stock 1.890 %	10,539.000	267,058.26
	BANK OF AMERICA CORP	Common Stock 1.890 %	7,400.000	187,516.00
	BEST BUY CO INC	Common Stock 2.390 %	3,300.000	187,968.00
	BIO RAD LABS INC	Common Stock 0.000 %	317.000	70,443.74
	BIOGEN INC	Common Stock 0.000 %	700.000	219,184.00

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Common Stock (Continued)				
	BIOMARIN PHARMACEUTICAL	Common Stock 0.000 % 1,070.000	\$ 96,676.00	\$ 99,584.90
	BLACK KNIGHT FINANCIAL	Common Stock 0.000 % 1,761.000	60,780.32	75,811.05
	BOEING CO	Common Stock 2.230 % 1,100.000	261,185.43	279,631.00
	BORG WARNER INC	Common Stock 1.090 % 1,414.000	23,079.18	72,439.22
	BOSTON SCIENTIFIC CORP	Common Stock 0.000 % 5,652.000	129,565.51	164,868.84
	BRISTOL MEYERS	Common Stock 2.450 % 1,104.000	61,035.60	70,368.96
	CABOT CORPORATION	Common Stock 2.260 % 732.000	30,892.41	40,845.60
	CAPTIAL ONE FINANCIAL CORP	Common Stock 1.890 % 2,200.000	156,890.92	186,252.00
	CARLISLE COS INC	Common Stock 1.480 % 1,100.000	108,279.04	110,319.00
	CAVIUM INC	Common Stock 0.000 % 1,548.000	91,388.06	102,075.12
	CBRE GROUP INC	Common Stock 0.000 % 4,677.000	116,807.78	177,164.76
	CBS CORP	Common Stock 1.240 % 4,837.000	277,004.90	280,546.00
	CELANESE CORPORATION	Common Stock 1.760 % 390.000	24,373.93	40,665.30
	CELGENE CORP	Common Stock 0.000 % 2,965.000	348,070.39	432,356.30
	CENTENE CORP	Common Stock 0.000 % 2,400.000	181,827.60	232,248.00
	CENTERPOINT ENERGY INC	Common Stock 3.660 % 2,300.000	43,486.72	67,183.00
	CHARTER COMMUNICATIONS INC	Common Stock 0.000 % 233.000	83,450.06	84,676.86
	CHEVRON CORPORATION	Common Stock 3.680 % 700.000	63,488.34	82,250.00
	CIMAREX ENERGY CO	Common Stock 0.280 % 479.000	46,533.62	54,447.93
	CITIGROUP INC	Common Stock 1.760 % 2,600.000	148,997.09	189,124.00
	CLEVELAND CLIFFS INC	Common Stock 0.000 % 100.000	2,321.63	715.00
	CLOVIS ONCOLOGY INC	Common Stock 0.000 % 563.000	50,034.11	46,391.20
	COGNIZANT TECH SOLUTIONS CL A	Common Stock 0.830 % 3,032.000	187,861.52	219,941.28
	COMCAST CORPORATION	Common Stock 1.640 % 6,440.000	201,062.23	247,811.20
	COMCAST CORPORATION	Common Stock 1.640 % 4,500.000	178,923.88	173,160.00
	CONOCOPHILLIPS	Common Stock 2.120 % 1,700.000	78,112.42	85,085.00
	CONTINENTAL RESOURCES INC	Common Stock 0.000 % 1,653.000	47,192.32	63,822.33
	CR BARD INC	Common Stock 0.320 % 321.000	28,693.41	102,880.50
	CROWN CASTLE INTL CORPORATION	Common Stock 4.200 % 1,595.000	146,746.60	159,468.10
	CROWN HOLDINGS	Common Stock 0.000 % 700.000	34,523.47	41,804.00
	CSX CORPORATION	Common Stock 1.470 % 1,919.000	35,475.11	104,124.94
	CUMMINS INC	Common Stock 2.570 % 594.000	33,696.78	99,809.82
	CUMMINS INC	Common Stock 2.570 % 600.000	60,511.35	100,818.00
	D R HORTON INC	Common Stock 1.000 % 2,947.000	33,423.28	117,673.71

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, 2017

Party in Interest (a)	Identity of Issue, Borrower, Lessor, or Similar Party (b)	Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value (c)			Cost of Asset (d)	Current Value (e)
Common Stock (Continued)						
	D R HORTON INC	Common Stock	1.000 %	4,600.000	\$ 166,087.49	\$ 183,678.00
	DANAHER CORP	Common Stock	0.650 %	2,056.000	164,433.56	176,363.68
	DANAHER CORP	Common Stock	0.650 %	2,600.000	208,618.24	223,028.00
	DARDEN RESTAURANTS INC	Common Stock	3.200 %	941.000	31,757.41	74,131.98
	DELTA AIRLINES INC	Common Stock	2.530 %	2,200.000	101,620.93	106,084.00
	DENTSPLY INTL INC NEW	Common Stock	0.590 %	1,090.000	58,375.22	65,192.90
	DISCOVER FINL SVCS	Common Stock	2.170 %	3,000.000	118,122.21	193,440.00
	DOVER CORPORATION	Common Stock	2.060 %	894.000	74,457.66	81,702.66
	DOVER CORPORATION	Common Stock	2.060 %	1,200.000	92,250.03	109,668.00
	DOWDUPONT INC	Common Stock	2.200 %	1,355.000	84,550.58	93,806.65
	DR PEPPER SNAPPLE GROUP	Common Stock	2.620 %	2,300.000	144,671.71	203,481.00
	EASTMAN CHEM CO	Common Stock	2.250 %	1,042.000	31,089.77	94,290.58
	EASTMAN CHEM CO	Common Stock	2.250 %	500.000	32,308.76	45,245.00
	EATON VANCE CORPORATION	Common Stock	2.510 %	1,591.000	48,769.14	78,547.67
	ECHOSTAR CORPORATION A	Common Stock	0.000 %	1,071.000	40,891.11	61,293.33
	EDISON INTERNATIONAL	Common Stock	2.810 %	900.000	49,642.84	69,453.00
	ELECTRONIC ARTS INC	Common Stock	0.000 %	1,781.000	152,250.83	210,264.86
	ELECTRONIC ARTS INC	Common Stock	0.000 %	1,500.000	125,134.25	177,090.00
	EMERSON ELECTRIC CO	Common Stock	3.060 %	1,700.000	89,147.29	106,828.00
	ENTERGY CORPORATION	Common Stock	4.660 %	900.000	65,088.85	68,724.00
	EQUINIX INC	Common Stock	1.790 %	611.000	251,479.94	272,689.30
	EVERSOURCE ENERGY	Common Stock	3.140 %	1,100.000	65,135.05	66,484.00
	EXACT SCIENCES CORP	Common Stock	0.000 %	2,914.000	101,653.64	137,307.68
	EXELON CORPORATION	Common Stock	3.480 %	1,800.000	60,564.30	67,806.00
	EXPEDIA INC	Common Stock	0.830 %	849.000	126,403.36	122,205.06
	EXPRESS SCRIPTS HOLDINGS	Common Stock	0.000 %	3,400.000	250,055.10	215,288.00
	EXXON MOBIL CORPORATION	Common Stock	3.760 %	1,000.000	82,318.12	81,980.00
	FACEBOOK INC	Common Stock	0.000 %	5,892.000	584,792.61	1,006,766.04
	FIRST ENERGY CORPORATION	Common Stock	4.670 %	2,100.000	73,922.88	64,743.00
	FISERV INC	Common Stock	0.000 %	2,200.000	208,129.50	283,712.00
	FORTUNE BRANDS HOME & SECURITY	Common Stock	1.070 %	1,229.000	71,869.74	82,625.67
	FRANKLIN RES INC	Common Stock	1.800 %	4,100.000	153,925.78	182,491.00
	G A T X CORPORATION	Common Stock	2.730 %	1,148.000	47,592.08	70,670.88
	GENERAL DYNAMICS CORP	Common Stock	1.630 %	394.000	75,549.41	80,998.52

NEW ORLEANS EMPLOYERS -
INTERNATIONAL LONGSHOREMEN'S ASSOCIATION, AFL-CIO
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SUPPLEMENTARY INFORMATION
SCHEDULE H, LINE 4i
#72.6023317 PLAN 001
SCHEDULE OF ASSETS (HELD AT END OF YEAR)
SEPTEMBER 30, 2017

Party in Interest (a)	Identity of Issue, Borrower, Lessor, or Similar Party (b)	Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value (c)	Cost of Asset (d)	Current Value (e)	
Common Stock (Continued)					
	GENERAL DYNAMICS CORP	Common Stock 1.630 %	495.000 \$	39,391.35 \$	101,762.10
	GENERAL DYNAMICS CORP	Common Stock 1.630 %	1,400.000	175,512.05	287,812.00
	GENTEX CORP	Common Stock 2.020 %	5,500.000	95,283.58	108,900.00
	GILEAD SCIENCES INC	Common Stock 2.570 %	2,800.000	196,808.36	226,856.00
	GLOBAL PAYMENTS INC	Common Stock 0.040 %	1,408.000	30,692.45	133,802.24
	GLOBAL PAYMENTS INC	Common Stock 0.040 %	2,900.000	215,010.69	275,587.00
	GOLDMAN SACHS GROUP INC	Common Stock 1.260 %	800.000	141,991.15	189,752.00
	HALLIBURTON CO	Common Stock 1.560 %	2,303.000	104,996.65	106,007.09
	HARTFORD FINANCIAL SRVC	Common Stock 1.800 %	3,200.000	99,423.72	177,376.00
	HASBRO INC	Common Stock 2.330 %	1,900.000	186,289.34	185,573.00
	HD SUPPLY HOLDINGS	Common Stock 0.000 %	2,428.000	75,202.21	87,577.96
	HESS CORPORATION	Common Stock 2.130 %	1,900.000	112,977.05	89,091.00
	HOLOGIC INC	Common Stock 0.000 %	5,600.000	198,426.80	205,464.00
	HOME DEPOT INC	Common Stock 2.180 %	2,118.000	288,530.14	346,420.08
	HOME DEPOT INC	Common Stock 2.180 %	1,200.000	140,338.71	196,272.00
	HONEYWELL INTL INC	Common Stock 2.100 %	3,843.000	406,619.11	544,706.82
	HUMANA INC	Common Stock 0.660 %	375.000	74,932.55	91,361.25
	HUNTSMAN CORP	Common Stock 1.820 %	1,500.000	36,668.59	41,130.00
	ILLUMINA INC	Common Stock 0.000 %	602.000	110,381.46	119,918.40
	INCYTE CORPORATION	Common Stock 0.000 %	703.000	69,325.19	82,068.22
	INGREDION INC	Common Stock 1.990 %	400.000	39,785.06	48,256.00
	INTEL CORPORATION	Common Stock 2.860 %	7,800.000	283,300.35	297,024.00
	INTERNATIONAL EXCHANGE	Common Stock 1.160 %	4,406.000	249,955.51	302,692.20
	INTERNATIONAL EXCHANGE	Common Stock 1.160 %	2,698.000	59,384.08	185,352.60
	INTERNATIONAL PAPER CO	Common Stock 3.340 %	700.000	28,122.73	39,774.00
	INTUIT INC	Common Stock 1.100 %	925.000	25,641.23	131,479.50
	J P MORGAN CHASE CO	Common Stock 2.350 %	646.000	56,777.48	61,699.46
	J P MORGAN CHASE CO	Common Stock 2.350 %	1,900.000	85,490.51	181,469.00
	JABIL INC	Common Stock 1.120 %	2,751.000	71,798.91	78,541.05
	JACOBS ENGR GROUP	Common Stock 1.030 %	1,800.000	80,050.89	104,886.00
	JOHNSON JOHNSON	Common Stock 2.580 %	1,600.000	155,487.94	208,016.00
	KEYCORP	Common Stock 2.020 %	4,289.000	35,466.63	80,718.98
	KEYSIGHT TECHNOLOGIES INC	Common Stock 0.000 %	1,884.000	60,998.07	78,487.44
	L 3 TECHNOLOGIES INC	Common Stock 1.590 %	1,500.000	204,653.68	282,645.00

NEW ORLEANS EMPLOYERS -
INTERNATIONAL LONGSHOREMEN'S ASSOCIATION, AFL-CIO
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SEPTEMBER 30, 2017

Party in Interest (a)	Identity of Issue, Borrower, Lessor, or Similar Party (b)	Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value (c)	Cost of Asset (d)	Current Value (e)
Common Stock (Continued)				
	LABORATORY CORP OF AMERICA	Common Stock 0.000 % 494.000	\$ 86,471.64	\$ 74,579.18
	LAM RESEARCH CORPORATION	Common Stock 0.970 % 1,700.000	168,255.16	314,568.00
	LAUDER ESTEE COS INC	Common Stock 1.410 % 827.000	79,248.34	89,183.68
	LEAR CORP	Common Stock 1.160 % 600.000	67,901.12	103,848.00
	LENNOX INTERNATIONAL INC	Common Stock 1.140 % 355.000	61,449.70	63,534.35
	LINCOLN NATIONAL CORPORATION	Common Stock 1.800 % 2,600.000	103,063.26	191,048.00
	LOCKHEED MARTIN CORP	Common Stock 2.580 % 900.000	217,343.50	279,261.00
	MANPOWERGROUP INC	Common Stock 1.580 % 1,500.000	148,676.46	176,730.00
	MARATHON OIL CORPORATION	Common Stock 1.470 % 6,500.000	88,631.30	88,140.00
	MARRIOTT INTERNATIONAL INC	Common Stock 1.200 % 182.000	14,641.84	20,067.32
	MASCO CORPORATION	Common Stock 1.080 % 2,765.000	50,327.90	107,862.65
	MCDONALDS CORP	Common Stock 2.580 % 1,832.000	272,344.64	287,037.76
	MCDONALDS CORP	Common Stock 2.580 % 1,100.000	157,559.05	172,348.00
	MCKESSON CORPORATION	Common Stock 0.890 % 1,400.000	220,447.24	215,054.00
	MEDNAX INC	Common Stock 0.000 % 815.000	28,392.76	35,142.80
	MERCK CO INC	Common Stock 2.940 % 3,300.000	194,968.66	211,299.00
	METLIFE INC	Common Stock 3.080 % 3,700.000	150,223.82	192,215.00
	MICROHIP TECHNOLOGY INC	Common Stock 1.610 % 3,547.000	272,894.95	318,449.66
	MICRON TECHNOLOGY INC	Common Stock 0.000 % 3,486.000	81,387.33	137,104.38
	MICROSOFT CORPORATION	Common Stock 2.260 % 13,539.000	716,785.58	1,008,520.11
	MOHAWK INDUSTRIES INC	Common Stock 0.000 % 700.000	139,499.92	173,257.00
	MOLSON COORS BREWING CO	Common Stock 2.010 % 768.000	69,227.15	62,699.52
	MORGAN STANELY	Common Stock 2.080 % 3,894.000	139,067.44	187,573.98
	MORGAN STANELY	Common Stock 2.080 % 3,800.000	138,485.41	183,046.00
	MOSAIC CO THE	Common Stock 0.460 % 2,300.000	67,201.00	49,657.00
	MOTOROLA SOLUTIONS INC	Common Stock 2.220 % 3,100.000	234,781.85	263,097.00
	MURPHY OIL CORPORATION	Common Stock 3.770 % 3,100.000	99,147.99	82,336.00
	NATIONAL OILWELL VARCO INC	Common Stock 0.560 % 2,300.000	73,521.20	82,179.00
	NETFLIX COM INC	Common Stock 0.000 % 1,102.000	155,371.19	199,847.70
	NEWELL BRANDS INC	Common Stock 2.160 % 3,586.000	173,829.44	153,014.62
	NEWFIELD EXPL CO	Common Stock 0.000 % 1,606.000	64,083.65	47,650.02
	NIKE INC	Common Stock 1.390 % 458.000	24,595.40	23,747.30
	NORTHROP GRUMMAN CORP	Common Stock 1.390 % 1,000.000	253,400.01	287,720.00
	NRG ENERGY INC	Common Stock 0.470 % 2,700.000	42,562.33	69,093.00

NEW ORLEANS EMPLOYERS -
INTERNATIONAL LONGSHOREMEN'S ASSOCIATION, AFL-CIO
PENSION FUND
SUPPLEMENTARY INFORMATION
SCHEDULE H, LINE 4i
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SEPTEMBER 30, 2017

Party in Interest (a)	Identity of Issue, Borrower, Lessor, or Similar Party (b)	Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value (c)	Cost of Asset (d)	Current Value (e)
Common Stock (Continued)				
	NVIDIA CORPORATION	Common Stock 0.310 %	456.000 \$ 71,478.15	\$ 81,519.12
	OGE ENERGY CORPORATION	Common Stock 3.690 %	1,900.000 49,752.57	68,457.00
	ORACLE CORPORATION	Common Stock 1.570 %	2,326.000 112,817.08	112,462.10
	ORACLE CORPORATION	Common Stock 1.570 %	5,600.000 282,328.48	270,760.00
	OWENS III INC	Common Stock 0.000 %	1,900.000 36,657.89	47,804.00
	PACKAGING CORP AMERICA	Common Stock 2.200 %	811.000 56,915.70	93,005.48
	PACKAGING CORP AMERICA	Common Stock 2.200 %	400.000 28,764.44	45,872.00
	PALO ALTO NETWORKS INC	Common Stock 0.000 %	361.000 50,395.10	52,020.10
	PARKER HANNIFIN CORPORATION	Common Stock 1.510 %	600.000 52,418.25	105,012.00
	PEPSICO INC	Common Stock 2.890 %	834.000 82,097.98	92,932.62
	PERFORMANCE FOOD GROUP CO	Common Stock 0.000 %	1,743.000 40,767.79	49,239.75
	PHILLIP MORRIS INTL	Common Stock 3.860 %	1,419.000 145,897.45	157,523.19
	PIONEER NAT RES CO	Common Stock 0.050 %	1,180.000 199,458.38	174,097.20
	PITNEY BOWES INC	Common Stock 5.350 %	8,200.000 144,028.00	114,882.00
	PRINCIPAL FINANCIAL GROUP	Common Stock 3.050 %	2,800.000 115,944.24	180,152.00
	PROGRESSIVE CORPORATION	Common Stock 1.410 %	1,877.000 38,913.74	90,884.34
	PRUDENTIAL FINANCIAL INC	Common Stock 2.820 %	1,700.000 108,246.45	180,744.00
	PUBLIC SERVICES ENTERPRISE	Common Stock 3.720 %	1,500.000 49,144.90	69,375.00
	PULTE GROUP	Common Stock 1.320 %	7,100.000 165,329.94	194,043.00
	PVH CORP	Common Stock 0.120 %	1,052.000 106,880.24	132,615.12
	PVH CORP	Common Stock 0.120 %	1,300.000 167,164.45	163,878.00
	RAYMOND JAMES FINL INC	Common Stock 1.040 %	1,388.000 38,957.91	117,050.04
	RED HAT INC	Common Stock 0.000 %	998.000 92,971.31	110,638.28
	REGIONS FINANCIAL CORPORATION	Common Stock 2.360 %	12,300.000 100,873.73	187,329.00
	REINSURANCE GROUP AMERICA	Common Stock 1.430 %	707.000 33,352.96	98,647.71
	RELIANCE STEEL ALUMINIUM	Common Stock 2.360 %	600.000 36,221.68	45,702.00
	REPUBLIC SERVICES	Common Stock 2.090 %	2,053.000 58,130.91	135,621.18
	SALESFORCE COM INC	Common Stock 0.000 %	4,157.000 312,523.10	388,346.94
	SAREPTA THERAPEUTICS INC	Common Stock 0.000 %	1,150.000 43,817.76	52,164.00
	SBA COMMUNICATIONS CORP	Common Stock 0.000 %	280.000 37,901.92	40,334.00
	SCANA CORPORATION	Common Stock 5.050 %	1,100.000 67,326.60	53,339.00
	SEALED AIR CORPORATION	Common Stock 1.500 %	1,960.000 32,988.27	83,731.20
	SERVICENOW INC	Common Stock 0.000 %	1,058.000 87,238.67	124,346.74
	SHERWIN WILLIAMS CO	Common Stock 0.950 %	446.000 156,022.39	159,685.84

NEW ORLEANS EMPLOYERS -
INTERNATIONAL LONGSHOREMEN'S ASSOCIATION, AFL-CIO
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SCHEDULE H, LINE 4i
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SEPTEMBER 30, 2017

Party in Interest (a)	Identity of Issue, Borrower, Lessor, or Similar Party (b)	Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value (c)	Cost of Asset (d)	Current Value (e)	
Common Stock (Continued)					
	SNAP ON INC	Common Stock 1.910 %	679.000 \$	30,892.01 \$	101,177.79
	SOUTHWESTERN ENERGY CO	Common Stock 0.000 %	13,000.000	102,113.49	79,430.00
	SP GLOBAL INC	Common Stock 1.050 %	668.000	82,080.83	104,415.08
	SP GLOBAL INC	Common Stock 1.050 %	1,200.000	163,845.72	187,572.00
	SPIRIT AEROSYSTEMS HOLD CL A	Common Stock 0.510 %	3,600.000	258,066.58	279,792.00
	STANLEY BLACK DECKER INC	Common Stock 1.670 %	1,564.000	217,328.97	236,117.08
	STANLEY BLACK DECKER INC	Common Stock 1.670 %	1,100.000	151,458.45	166,067.00
	STERICYCLE INC	Common Stock 0.000 %	2,900.000	234,349.64	207,698.00
	STIFEL FINANCIAL CORPORATION	Common Stock 0.750 %	1,298.000	54,416.23	69,391.08
	SUNTRUST BKS INC	Common Stock 2.680 %	3,200.000	109,776.47	191,264.00
	SYNCHRONY FINANCIAL	Common Stock 1.930 %	2,576.000	72,403.41	79,984.80
	SYNOPSIS INC	Common Stock 0.000 %	1,199.000	37,966.63	96,555.47
	T MOBILE US INC	Common Stock 0.000 %	1,848.000	115,697.01	113,947.68
	T MOBILE US INC	Common Stock 0.000 %	1,100.000	51,043.82	67,826.00
	TAKE-TWO INTERACTIVE SOFTWARE INC	Common Stock 0.000 %	1,600.000	98,083.22	163,568.00
	TESARO INC	Common Stock 0.000 %	266.000	45,750.30	34,340.60
	TEXAS INSTRUMENTS INC	Common Stock 2.770 %	3,400.000	221,063.86	304,776.00
	THE PRICELINE GROUP	Common Stock 0.000 %	36.000	73,333.49	65,909.52
	THE SCOTTS MIRACLE GRO CO	Common Stock 2.180 %	737.000	22,252.22	71,739.59
	THERMO FISHER SCIENTIFIC INC	Common Stock 0.320 %	587.000	103,890.70	111,060.40
	TIME WARNER INC	Common Stock 1.570 %	1,022.000	91,204.74	104,703.90
	TJX COMPANIES INC	Common Stock 1.700 %	1,448.000	24,621.02	106,761.04
	TOLL BROS INC	Common Stock 0.770 %	4,300.000	170,775.36	178,321.00
	TOTAL SYSTEM SERVICES INC	Common Stock 0.790 %	1,550.000	75,331.29	101,525.00
	TYSON FOODS INC	Common Stock 1.280 %	3,400.000	220,010.34	239,530.00
	UNION PACIFIC CORPORATION	Common Stock 2.090 %	909.000	90,164.72	105,416.73
	UNITED CONTINENTAL HLDGS	Common Stock 0.000 %	1,800.000	85,897.24	109,584.00
	UNITED HEALTH GROUP	Common Stock 1.530 %	2,725.000	354,342.55	533,691.25
	UNITED HEALTH GROUP	Common Stock 1.530 %	1,100.000	117,111.45	215,435.00
	UNITES RENTALS INC	Common Stock 0.000 %	661.000	78,333.74	91,707.14
	UNITES RENTALS INC	Common Stock 0.000 %	1,500.000	127,033.36	208,110.00
	UNUM GROUP	Common Stock 1.800 %	3,600.000	102,226.26	184,068.00
	VERIZON COMMUNICATIONS INC	Common Stock 4.770 %	1,400.000	72,334.27	69,286.00
	VERTEX PHARMACEUTICALS	Common Stock 0.000 %	1,764.000	195,415.85	268,198.56

NEW ORLEANS EMPLOYERS -
INTERNATIONAL LONGSHOREMEN'S ASSOCIATION, AFL-CIO
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Common Stock (Continued)				
	VISA INC	Common Stock 0.740 %	7,416.000 \$	780,459.84 \$
	VULCAN MATERIALS	Common Stock 0.840 %	1,049.000	125,460.40
	VWR CORP	Common Stock 0.000 %	2,438.000	80,722.18
	WALMART STORES INC	Common Stock 2.610 %	1,594.000	124,555.16
	WAYFAIR INC	Common Stock 0.000 %	911.000	61,401.40
	WEC ENERGY GROUP INC	Common Stock 3.310 %	1,012.000	63,533.36
	WESTERN DIGITAL CORPORATION	Common Stock 2.310 %	2,203.000	190,339.20
	WESTERN UNION CORP	Common Stock 3.650 %	11,000.000	211,200.00
	WESTLAKE CHEMICAL CORP	Common Stock 1.010 %	500.000	41,545.00
	WISDOMTREE INVTs	Common Stock 3.140 %	4,506.000	45,871.08
	WOODWARD INC	Common Stock 0.640 %	978.000	75,902.58
	XCEL ENERGY INC	Common Stock 3.040 %	1,400.000	66,248.00
	XILINX INC	Common Stock 1.980 %	1,475.000	104,474.24
	ALIBABA GROUP HOLDING LTD	Common Stock 0.000 %	3,528.000	609,320.88
	ALLERGAN PLC	Common Stock 1.370 %	390.000	79,930.50
	BP PLC SPONS A D R	Common Stock 6.190 %	2,100.000	80,703.00
	BROADCOM LTD	Common Stock 1.680 %	2,396.000	581,125.84
	CARNIVAL CORP	Common Stock 2.790 %	2,600.000	167,882.00
	DELPHI AUTOMOTIVE PLC	Common Stock 1.180 %	1,088.000	107,059.20
	DELPHI AUTOMOTIVE PLC	Common Stock 1.180 %	1,200.000	118,080.00
	E N I SPA A D R	Common Stock 3.970 %	2,250.000	74,407.50
	JOHNSON CTLS INTL PLC	Common Stock 2.480 %	2,387.000	96,172.23
	LYONDELLBASELL INDUSTRIES	Common Stock 3.630 %	400.000	39,620.00
	MEDTRONIC PLC	Common Stock 2.370 %	1,733.000	134,775.41
	NARBOS INDUSTRIES LTD	Common Stock 2.970 %	10,700.000	86,349.00
	NORTEL NETWORKS CORPORATION	Common Stock 0.000 %	12.000	0.01
	NORWEGIAN CRUISE LINE HOLDINGS	Common Stock 0.000 %	3,174.000	171,554.70
	RENAISSANCE RE HOLDINGS LTD	Common Stock 0.950 %	508.000	68,651.12
	ROYAL CARIBBEAN CRUISES LTD	Common Stock 2.020 %	1,500.000	177,810.00
	ROYAL DUTCH SHELL PLC A D R	Common Stock 5.280 %	1,300.000	78,754.00
	TE CONNECTIVITY LTD	Common Stock 1.930 %	3,500.000	290,710.00
	TOTAL SA SPON A D R	Common Stock 4.280 %	1,400.000	74,928.00
	TRANSOCEAN LTD	Common Stock 0.000 %	7,900.000	85,004.00
	WEATHERFORD INTERNATIONAL PL	Common Stock 0.000 %	18,000.000	82,440.00

NEW ORLEANS EMPLOYERS -
INTERNATIONAL LONGSHOREMEN'S ASSOCIATION, AFL-CIO
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<u>Party in Interest</u> (a)	<u>Identity of Issue, Borrower, Lessor, or Similar Party</u> (b)	<u>Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value</u> (c)	<u>Cost of Asset</u> (d)	<u>Current Value</u> (e)
Common Collective Trusts				
	LS HIGH YIELD CONSERVATIVE CLASS B	Common Collective Trusts	760,120.614	\$ 4,606,950.00
	BLACKROCK GLOBAL ALLOCATION	Common Collective Trusts	370,461.410	\$ 4,844,180.00
	LONGVIEW ULTRA CONSTRUCTION LN FD	Common Collective Trusts	2,032.130	3,086,461.00
	MULTI-EMPLOYER PROPERTY TRUST	Common Collective Trusts	275.550	2,913,696.00
	AFL-CIO EQUITY INDEX FUND	Common Collective Trusts	89,193.249	1,934,352.00
	ASB ALLEGIANCE RE FUND	Common Collective Trusts	5,697.318	8,048,559.00
	WTC-CIF OPP INVEST ALLOC	Common Collective Trusts	138,863.863	2,006,583.00
	ROTHSCHILD SMALL CAP TRUST	Common Collective Trusts	5,843,320.000	5,843,320.00
Limited Partnerships				
	GROSVENOR INSTITUTIONAL PARTNERS	Limited Partnerships	5,585,000.000	5,870,105.00
	FIRST EAGLE GLOBAL VALUE FUND	Limited Partnerships	2,334.463	5,432,948.00
Mutual Funds				
	ALTBABA INC	Mutual Funds	1,092.000	72,334.00
Pooled Investment Fund				
	PRINCIPAL REAL ESTATE INV US	Pooled Investment Fund	120,540.274	5,876,004.00
103-12 Investment Entities				
	RBC GAM INTERNATIONAL FUND	103-12 Investment Entities	362,645.000	21,416,871.00
			<u>\$ 91,443,531.22</u>	<u>\$ 133,090,405.42</u>

NEW ORLEANS EMPLOYERS -
INTERNATIONAL LONGSHOREMEN'S ASSOCIATION, AFL-CIO
PENSION FUND
SUPPLEMENTARY INFORMATION
SCHEDULE H, LINE 4i
#72-6023317 PLAN 001
SCHEDULE OF ASSETS (ACQUIRED AND DISPOSED OF WITHIN YEAR)
SEPTEMBER 30, 2017

(a) Identity of Issue, <u>borrower, lender or</u> <u>similar party</u>	(b) Description of Assets (Including interest rate and maturity <u>in case of loan</u>)	(c) Cost of <u>Acquisitions</u>	(d) Proceeds of <u>Dispositions</u>
US Government securities	U S Treasury I P S 0.250% 1/15/25	\$ 54,096.75	\$ 54,213.24
Corporate bonds, notes, and debentures	American Express Mtn 2.700% 3/03/22	10,975.47	10,976.02
Corporate bonds, notes, and debentures	Amgen Inc 2.650% 5/11/22	5,987.16	5,991.66
Corporate bonds, notes, and debentures	Apple Inc 2.850% 5/11/24	6,993.35	7,007.91
Corporate bonds, notes, and debentures	Att Inc 3.800% 3/01/24	12,991.68	13,087.62
Corporate bonds, notes, and debentures	Bank of NY Mtn 2.600% 2/07/22	38,916.54	39,126.48
Corporate bonds, notes, and debentures	Citigroup Inc 3.200% 10/21/26	24,985.25	23,903.21
Corporate bonds, notes, and debentures	Comcast Corp 3.300% 2/01/27	11,976.36	12,031.92
Corporate bonds, notes, and debentures	General Motors Finl 3.950% 4/13/24	14,974.50	15,294.12
Corporate bonds, notes, and debentures	Godman Sachs 2.908% 6/05/23	13,000.00	12,944.49
Corporate bonds, notes, and debentures	JP Morgan Chase Co 2.950% 10/01/26	14,186.12	14,550.21
Corporate bonds, notes, and debentures	Microsoft Corp 3.125% 11/03/25	58,719.20	58,933.62
Corporate bonds, notes, and debentures	Occidental Petroleum 3.000% 2/15/27	23,898.96	24,054.00
Corporate bonds, notes, and debentures	Pfizer Inc 2.200% 12/15/21	35,967.24	35,858.88
Corporate bonds, notes, and debentures	Procter Gamble Co 1.700% 11/03/21	17,963.10	18,015.48
Corporate bonds, notes, and debentures	Verizon 3.376% 2/15/25	32,748.66	29,909.87
Corporate bonds, notes, and debentures	21st Century Fox 3.000% 9/15/22	64,622.92	65,476.50
Foreign securities	BP Capital Markets 3.216% 11/28/23	16,000.00	16,059.68
Foreign securities	BP Capital Markets 3.224% 4/14/24	38,961.18	38,927.27
Common stock	Adient Ltd	11,567.06	12,265.11