Form 5500

Department of the Treasury Internal Revenue Service

Department of Labor Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Annual Return/Report of Employee Benefit Plan

This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6047(e), 6057(b), and 6058(a) of the Internal Revenue Code (the Code).

► Complete all entries in accordance with the instructions to the Form 5500.

OMB Nos. 1210-0110 1210-0089

2015

This Form is Open to Public Inspection

Part I		lentification Information				•		
For calendar plan year 2015 or fiscal plan year beginning 01/01/2015 and ending 12/31/2015								
A This return/report is for: a multiemployer plan; a multiple-employer plan (Filers checking this box must attach a list of participating employer information in accordance with the form instructions);						ons); or		
		a single-employer plan;	a DFE (specify)					
B This return/report is: the first return/report; the final return/report;				/report;				
an amended return/report; a short plan year return/report (less than 1					12 months).			
C If the	C If the plan is a collectively-bargained plan, check here							
D Chec	k box if filing under:	X Form 5558;	automatic exter	nsion;	the	e DFVC program;		
		special extension (enter description	n)					
Part	II Basic Plan Info	ormation—enter all requested inform	ation					
	ne of plan OAD EMPLOYEES NATIO	NAL HEALTH FLEXIBLE SPENDING A	ACCOUNT PLAN		1b	Three-digit plan number (PN) ▶	512	
					1c	Effective date of pl 01/01/2013	an	
		er, if for a single-employer plan)	\		2b	Employer Identifica	ation	
City	or town, state or province	, country, and ZIP or foreign postal cod		uctions)		52-1036399		
NATION	AL CARRIERS' CONFERE	ENCE COMMITTEE			2c	Plan Sponsor's telenumber	·	
						571-336-760		
	TH STREET SOUTH SUIT TON, VA 22202	E 750			2d Business code (see instructions) 482110		е	
Caution	: A penalty for the late o	r incomplete filing of this return/repo	ort will be assessed	unless reasonable cause is e	stablis	shed.		
		er penalties set forth in the instructions, ell as the electronic version of this retur						
SIGN HERE	Filed with authorized/valid	d electronic signature.	10/13/2016	A. K. GRADIA				
	Signature of plan admi	inistrator	Date	Enter name of individual sign	ing as	plan administrator		
CION								
SIGN HERE			_					
Signature of employer/plan sponsor Date Enter name of individual signing as employer or plan spon						onsor		
SIGN								
HERE	Cinnature of DEE		Dete	Foton manage of in dividual airca		DEE		
Preparei	Signature of DFE 's name (including firm na	ume_if applicable) and address (include	Date	Enter name of individual sign		telephone number		
Preparer's name (including firm name, if applicable) and address (include room or suite number) TIMOTHY A. HELLER, CPA						•		
TMDG, LLC.						443-743-1277		
	RATT ST STE 525 ORE, MD 21202							

Form 5500 (2015) Page **2**

3a	Plan administrator's name and address Same as Plan Sponsor			3b Administrator's EIN	
				3c Admini	strator's telephone er
4	If the name and/or EIN of the plan sponsor has changed since the last return. EIN and the plan number from the last return/report:	/report filed for	this plan, enter the name,	4b EIN	
а	Sponsor's name			4c PN	
5	Total number of participants at the beginning of the plan year			5	6526
6	Number of participants as of the end of the plan year unless otherwise stated 6a(2) , 6b , 6c , and 6d).	l (welfare plans	complete only lines 6a(1),		
a(1) Total number of active participants at the beginning of the plan year			. 6a(1)	6526
a(2	2) Total number of active participants at the end of the plan year			. 6a(2)	5938
b	Retired or separated participants receiving benefits			. 6b	
С	Other retired or separated participants entitled to future benefits			. 6c	
d	Subtotal. Add lines 6a(2), 6b, and 6c.			. 6d	5938
е	Deceased participants whose beneficiaries are receiving or are entitled to rec	. 6e			
f	Total. Add lines 6d and 6e			. 6f	0
g	Number of participants with account balances as of the end of the plan year (complete this item)			. 6g	
h	Number of participants that terminated employment during the plan year with less than 100% vested			. 6h	
7	Enter the total number of employers obligated to contribute to the plan (only r	<u> </u>	, , ,	. 7	26
b	If the plan provides pension benefits, enter the applicable pension feature could be plan provides welfare benefits, enter the applicable welfare feature code. A	es from the List	of Plan Characteristics Code	s in the instr	
эa	Plan funding arrangement (check all that apply) (1) Insurance	9b Plan ben	efit arrangement (check all that Insurance	at apply)	
	Code section 412(e)(3) insurance contracts	insurance co	ontracts		
	(3) X Trust (4) General assets of the sponsor	oonsor			
10	Check all applicable boxes in 10a and 10b to indicate which schedules are at	(4) ttached, and, w	General assets of the sphere indicated, enter the number		. (See instructions)
а	Pension Schedules	b General	Schedules		
	(1) R (Retirement Plan Information)	(1)	X H (Financial Inform	nation)	
	(2) MB (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary	(2) (3) (4)	I (Financial Inform A (Insurance Inform C (Service Provide	mation)	,
	(3) SB (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary	(5) (6)	D (DFE/Participati	_	

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.)						
11b Is the plan currently in compliance with the Form M-1 filing requirements? (See instructions and 29 CFR 2520.101-2.)						
11c Enter the Receipt Confirmation Code for the 2015 Form M-1 annual report. If the plan was not required to file the 2015 Form M-1 annual report, enter the Receipt Confirmation Code for the most recent Form M-1 that was required to be filed under the Form M-1 filing requirements. (Failure to enter a valid Receipt Confirmation Code will subject the Form 5500 filing to rejection as incomplete.)						

Form 5500 (2015)

Receipt Confirmation Code__

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SCHEDULE C (Form 5500)

Department of the Treasury Internal Revenue Service

Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation

Service Provider Information

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

File as an attachment to Form 5500.

OMB No. 1210-0110

2015

This Form is Open to Public Inspection.

For calendar plan year 2015 or fiscal plan year beginning 01/01/2015	and ending 12/31/2015
A Name of plan RAILROAD EMPLOYEES NATIONAL HEALTH FLEXIBLE SPENDING ACCOUNT PLAN	B Three-digit plan number (PN) 512
C Plan sponsor's name as shown on line 2a of Form 5500 NATIONAL CARRIERS' CONFERENCE COMMITTEE	D Employer Identification Number (EIN) 52-1036399
Part I Service Provider Information (see instructions)	
You must complete this Part, in accordance with the instructions, to report the information or more in total compensation (i.e., money or anything else of monetary value) in connection plan during the plan year. If a person received only eligible indirect compensation for which answer line 1 but are not required to include that person when completing the remainder of	n with services rendered to the plan or the person's position with the h the plan received the required disclosures, you are required to
1 Information on Persons Receiving Only Eligible Indirect Compensa	tion
a Check "Yes" or "No" to indicate whether you are excluding a person from the remainder of	his Part because they received only eligible
indirect compensation for which the plan received the required disclosures (see instructions	s for definitions and conditions)
b If you answered line 1a "Yes," enter the name and EIN or address of each person providing received only eligible indirect compensation. Complete as many entries as needed (see in	
(b) Enter name and EIN or address of person who provided you d	isclosures on eligible indirect compensation
(b) Enter name and EIN or address of person who provided you of	isclosure on eligible indirect compensation
(b) Enter name and EIN or address of person who provided you d	sclosures on eligible indirect compensation
(b) Enter name and EIN or address of person who provided you d	sclosures on eligible indirect compensation

	Schedule C (Form 550	00) 2015		Page 3 - 1		
answered	l "Yes" to line 1a above	e, complete as many	entries as needed to list ea	r Indirect Compensation ach person receiving, directly or ne plan or their position with the	indirectly, \$5,000 or more in	total compensation
		(a) Enter name and EIN or	address (see instructions)		
UNITEDHE	EALTHCARE			YLUM STREET ORD, CT 06103		
36-273957	1					
(b) Service Code(s)	Relationship to employer, employee organization, or	(d) Enter direct compensation paid by the plan. If none,		(f) Did indirect compensation include eligible indirect compensation, for which the	(g) Enter total indirect compensation received by service provider excluding	(h) Did the service provider give you a formula instead o

			(a) Enter name and FIN or	address (see instructions)		
UNITEDHI	EALTHCARE		185 AS	YLUM STREET ORD, CT 06103		
36-273957	71					
(b) Service Code(s)	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		(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	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?
12 13 15	NONE	324121	Yes No X	Yes No		Yes No
			(a) Enter name and EIN or	address (see instructions)		
TMDG,LLC	0		SUITE !	ST PRATT STREET 525 IORE, MD 21202		
03-058306	54					
(b) Service Code(s)	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	52488	Yes No X	Yes No		Yes No
			(a) Enter name and EIN or	address (see instructions)		
(b) Service Code(s)	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?	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?
	1	1				

Yes No

Yes No

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answered	I "Yes" to line 1a above	e, complete as many	entries as needed to list ea	r Indirect Compensation ch person receiving, directly or ne plan or their position with the	indirectly, \$5,000 or more in t	total compensation	
		(a) Enter name and EIN or	address (see instructions)			
(b) Service Code(s)	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?	Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0	(h) Did the service provider give you a formula instead of an amount or estimated amount?	
			Yes No	Yes No		Yes No	
		(a) Enter name and EIN or	address (see instructions)			
(b) Service Code(s)	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?	Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0	(h) Did the service provider give you a formula instead of an amount or estimated amount?	
			Yes No	Yes No		Yes No No	
		(a) Enter name and EIN or	address (see instructions)			
(b) Service Code(s)	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?	Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0	(h) Did the service provider give you a formula instead of an amount or estimated amount?	
			Yes No	Yes No		Yes No	

Part I Service Provider Information (continued)

(d) Enter name and EIN (address) of source of indirect compensation

3 If you reported on line 2 receipt of indirect compensation, other than eligible indirect compen or provides contract administrator, consulting, custodial, investment advisory, investment may questions for (a) each source from whom the service provider received \$1,000 or more in incomprovider gave you a formula used to determine the indirect compensation instead of an amount many entries as needed to report the required information for each source.	anagement, broker, or recordkeepir direct compensation and (b) each s	ng services, answer the following ource for whom the service
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation	formula used to determine	compensation, including any e the service provider's eligibility the indirect compensation.
(a) Enter service provider name as it appears on line 2	(b) Service Codes	(c) Enter amount of indirect
	(see instructions)	compensation
(d) Enter name and EIN (address) of source of indirect compensation	formula used to determine	compensation, including any e the service provider's eligibility the indirect compensation.
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation

(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.

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Part II Service Providers Who Fail or Refuse to Provide Information							
4 Provide, to the extent possible, the following information for each service provider who failed or refused to provide the information necessary to complete this Schedule.							
(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide					
(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(C) Describe the information that the service provider failed or refused to provide					
(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(C) Describe the information that the service provider failed or refused to provide					
(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(C) Describe the information that the service provider failed or refused to provide					
(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(C) Describe the information that the service provider failed or refused to provide					
(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(C) Describe the information that the service provider failed or refused to provide					

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Da	rt III	Termination Information on Accountants and Envalled Actuaries (assis	otructions)
ra	II C III	Termination Information on Accountants and Enrolled Actuaries (see insection) (complete as many entries as needed)	siructions)
а	Name:		b EIN:
С	Positio	n:	
d	Addres	s:	e Telephone:
	olonotio:		
ΕX	olanatior		
а	Name:		b EIN:
С	Positio	1:	
d	Addres	s:	e Telephone:
	olonotio.		
ΕX	olanatior		
а	Name:		b EIN:
С	Positio	n:	
d	Addres	s:	e Telephone:
	olanatior	<u> </u>	
L X	Jiai ialioi	•	
а	Name:		b EIN:
C	Positio	1:	
d	Addres	s:	e Telephone:
	.		
ΕX	olanatior		
а	Name:		b EIN:
C	Positio	1:	
d	Addres		e Telephone:
Ex	olanatior		

SCHEDULE H (Form 5500)

Department of the Treasury Internal Revenue Service

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

2015

This Form is Open to Public Inspection

For calendar plan year 2015 or ilscar plan year beginning 01/01/2015		and e	Iding 12/31/2015		
A Name of plan RAILROAD EMPLOYEES NATIONAL HEALTH FLEXIBLE SPENDING ACCOUNT PLAN			B Three-digit plan number (PN	۷) 🕨	512
C Plan sponsor's name as shown on line 2a of Form 5500			D Employer Identific	cation Number (F	EIN)
NATIONAL CARRIERS' CONFERENCE COMMITTEE			52-1036399		
Part I Asset and Liability Statement		I			
1 Current value of plan assets and liabilities at the beginning and end of the plan the value of the plan's interest in a commingled fund containing the assets of r lines 1c(9) through 1c(14). Do not enter the value of that portion of an insurant benefit at a future date. Round off amounts to the nearest dollar. MTIAs, C and 1i. CCTs, PSAs, and 103-12 IEs also do not complete lines 1d and 1e. See	more than one ce contract wh CCTs, PSAs, a	plan on a li nich guarant and 103-12 l	ne-by-line basis unles ees, during this plan y	s the value is re ear, to pay a spe	portable on ecific dollar
Assets		(a) Be	ginning of Year	(b) End	of Year
a Total noninterest-bearing cash	1a				
b Receivables (less allowance for doubtful accounts):					
(1) Employer contributions	1b(1)				
(2) Participant contributions	1b(2)		63668		31769
(3) Other	1b(3)		16		75
C General investments:					
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)		2121745		2519238
(2) U.S. Government securities	1c(2)				
(3) Corporate debt instruments (other than employer securities):					
(A) Preferred	1c(3)(A)				
(B) All other	1c(3)(B)				
(4) Corporate stocks (other than employer securities):					
(A) Preferred	1c(4)(A)				
(B) Common	1c(4)(B)				
(5) Partnership/joint venture interests	1c(5)				
(6) Real estate (other than employer real property)	1c(6)				
(7) Loans (other than to participants)	1c(7)				
(8) Participant loans	1c(8)				
(9) Value of interest in common/collective trusts	1c(9)				0
(10) Value of interest in pooled separate accounts	1c(10)				
(11) Value of interest in master trust investment accounts	1c(11)				
(12) Value of interest in 103-12 investment entities	1c(12)				
(13) Value of interest in registered investment companies (e.g., mutual	1c(13)			-	

1c(14)

1c(15)

funds)......(14) Value of funds held in insurance company general account (unallocated

contracts).....

(15) Other.....

1d	Employer-related investments:		(a) Beginning of Year	(b) End of Year
	(1) Employer securities	1d(1)		
	(2) Employer real property	1d(2)		
е	Buildings and other property used in plan operation	1e		
f	Total assets (add all amounts in lines 1a through 1e)	1f	2185429	2551082
	Liabilities			
g	Benefit claims payable	1g	161510	211104
h	Operating payables	1h	42050	39299
i	Acquisition indebtedness	1i		
j	Other liabilities	1j		
k	Total liabilities (add all amounts in lines 1g through1j)	1k	203560	250403
	Net Assets			
I	Net assets (subtract line 1k from line 1f)	11	1981869	2300679
	· '	- I		

Part II Income and Expense Statement

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

	Income		(a) Amount	(b) Total
а	Contributions:			
	(1) Received or receivable in cash from: (A) Employers	2a(1)(A)	796003	
	(B) Participants	2a(1)(B)	9231876	
	(C) Others (including rollovers)	2a(1)(C)		
	(2) Noncash contributions	2a(2)		
	(3) Total contributions. Add lines 2a(1)(A), (B), (C), and line 2a(2)	2a(3)		10027879
b	Earnings on investments:			
	(1) Interest:			
	(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	162	
	(B) U.S. Government securities	2b(1)(B)		
	(C) Corporate debt instruments	2b(1)(C)		
	(D) Loans (other than to participants)	2b(1)(D)		
	(E) Participant loans	2b(1)(E)		
	(F) Other	2b(1)(F)		
	(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		162
	(2) Dividends: (A) Preferred stock	2b(2)(A)		
	(B) Common stock	2b(2)(B)		
	(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)		
	(3) Rents	2b(3)		
	(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)		
	(B) Aggregate carrying amount (see instructions)	2b(4)(B)		
	(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)		
	(5) Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)		
	(B) Other	2b(5)(B)		
	(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		

				(a) An	nount		(b)	Total
	(6) Net investment gain (loss) from common/collective trusts	2b(6)						
	(7) Net investment gain (loss) from pooled separate accounts	2b(7)						
	(8) Net investment gain (loss) from master trust investment accounts	2b(8)						
	(9) Net investment gain (loss) from 103-12 investment entities	2b(9)						
	(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)						
С	Other income	2c						
d	Total income. Add all income amounts in column (b) and enter total	2d						10028041
	Expenses							
е	Benefit payment and payments to provide benefits:							
	(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)			9330	306		
	(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)						9330306
f								
g	Certain deemed distributions of participant loans (see instructions)	2g						
h	Interest expense	2h						
i	Administrative expenses: (1) Professional fees	2i(1)			52	488		
	(2) Contract administrator fees	0:(0)			324	121		
	(3) Investment advisory and management fees	0:/0\			2	316		
	(4) Other	0:/4)						
	(5) Total administrative expenses. Add lines 2i(1) through (4)	0:/5\						378925
i	Total expenses. Add all expense amounts in column (b) and enter total	2j						9709231
•	Net Income and Reconciliation							
k	Net income (loss). Subtract line 2j from line 2d	2k						318810
	Transfers of assets:							
-	(1) To this plan	21(1)						
	(2) From this plan	21(2)						
		` ' '						
Pa	art III Accountant's Opinion							
	Complete lines 3a through 3c if the opinion of an independent qualified public attached.			to this F	orm 550	0. Comp	olete line 3d if a	n opinion is not
a	The attached opinion of an independent qualified public accountant for this pla	⊣ `	uctions):					
	(1) Unqualified (2) Qualified (3) Disclaimer (4)	Adverse					П	
	Did the accountant perform a limited scope audit pursuant to 29 CFR 2520.103	3-8 and/or 103-	-12(d)?				× Yes	∐ No
С	Enter the name and EIN of the accountant (or accounting firm) below:		(a) F	INI. OO (2500004			
<u>ا</u>	(1) Name:TMDG, LLC The opinion of an independent qualified public accountant is not attached because the context of the con		(2) E	IIN: 03-0)583064			
u		cause: ched to the nex	kt Form 5	500 pui	rsuant to	29 CFR	2520.104-50.	
Pa	art IV Compliance Questions							
4	CCTs and PSAs do not complete Part IV. MTIAs, 103-12 IEs, and GIAs do r 103-12 IEs also do not complete lines 4j and 4l. MTIAs also do not complete		nes 4a, 4	le, 4f, 4	g, 4h, 4k	, 4m, 4n	, or 5.	
	During the plan year:			Yes	No	N/A	Am	nount
а	Was there a failure to transmit to the plan any participant contributions within period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any puntil fully corrected. (See instructions and DOL's Voluntary Fiduciary Corrected.	orior year failur		X				55858
b	Were any loans by the plan or fixed income obligations due the plan in defau close of the plan year or classified during the year as uncollectible? Disregal loans secured by participant's account balance. (Attach Schedule G (Form 5 "Yes" is checked.)	ult as of the rd participant 5500) Part I if	4b		X			

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Schedule H (Form 5500) 2015

			Yes	No	N/A		Α	mount	
С	Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)	4c		X					
d	Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)	4d		X					
е	Was this plan covered by a fidelity bond?	4e	X					10000	00
f	Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?			X					
g	Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?			X					
h	Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?			X					
i	Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	411	X						
j	Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked, and see instructions for format requirements.)		X						
k	Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?			X					
ı	Has the plan failed to provide any benefit when due under the plan?			X					
m	If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)			X					
n	If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3	4n							
0	Did the plan trust incur unrelated business taxable income?	40							
р	Were in-service distributions made during the plan year?	4p		Χ					-
5a 5b	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 If, during this plan year, any assets or liabilities were transferred from this plan to another pla transferred. (See instructions.)		_	_	Amours) to wh		sets or li	abilities w	ere
	5b(1) Name of plan(s)			5b	(2) EIN(s)		5b(3) PN(s)
					<u> </u>				, (.)
50	If the plan is a defined benefit plan, is it covered under the PBGC insurance program (see E	:RISA	section	4021\2		es [No	Not dete	rmined
		.NIJA	35011UI I	7021) ·	📙 т	US	INU	ivol dele	mineu
6a Name of trust THE RR EMPLOYEES HEALTH FSA TRUST						usi s E 300868			
6c	6c Name of trustee or custodian 6d Trustee's or custodian's telephone number								

FINANCIAL REPORT (Together with report of Independent Public Accountants)

December 31, 2015 and 2014

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INDEPENDENT AUDITOR'S REPORT

To the National Carriers' Conference Committee with respect to
The Railroad Employees National Health Flexible Spending Account Plan

Report on the Financial Statements

We were engaged to audit the accompanying financial statements of The Railroad Employees National Health Flexible Spending Account Plan (the Plan), which comprise the statements of net assets available for benefits and of plan benefit obligations as of December 31, 2015 and 2014, and the related statements of changes in net assets available for benefits and of changes in plan benefit obligations for the year ended December 31, 2015, 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 conducting the audit in accordance with auditing standards generally accepted in the United States of America. Because of the matter described in the Basis for Disclaimer of Opinion paragraph, however, we were not able to obtain sufficient appropriate audit evidence to provide a basis for an audit opinion.

Basis for Disclaimer of Opinion

As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the Plan Administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Note 3, which was certified by SunTrust Bank, the trustee of the Plan, except for comparing this information with the related information included in the financial statements. We have been informed by the Plan Administrator that the trustee holds the Plan's investment assets and executes investment transactions. The Plan Administrator has

obtained certifications from the trustee as of December 31, 2015 and 2014, and for the year ended December 31, 2015 that the information provided to the Plan Administrator by the trustee is complete and accurate.

Disclaimer of Opinion

Because of the significance of the matter described in the Basis for Disclaimer of Opinion paragraph, we have not been able to obtain sufficient appropriate audit evidence to provide a basis for an audit opinion. Accordingly, we do not express an opinion on these financial statements.

Emphasis of Matter

As discussed in Note 1 to the financial statements, during the year ended December 31, 2015, the Plan adopted new accounting guidance, Financial Accounting Standards Board (FASB) Accounting Standards Update (ASU) 2015-12, Plan Accounting: Defined Benefit Pension Plans (Topic 960), Defined Contribution Pension Plans (Topic 962), Health and Welfare Benefit Plans (Topic 965) – (Part I) Fully Benefit-Responsive Investment Contracts, (Part II) Plan Investment Disclosures, and (Part III) Measurement Date Practical Expedient (a consensus of the FASB Emerging Issues Task Force). This update was retrospectively applied to December 31, 2014. Our opinion has not been modified with respect to this matter.

Other Matter

The supplemental schedules, schedule of delinquent contributions, schedule of assets (held at end of year), and schedule of reportable transactions as of and for the year ended December 31, 2015, are required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 and are presented for the purposes of additional analysis and are not a required part of the financial statements. These supplemental schedules are the responsibility of the Plan's management. Because of the significance of the matter described in the Basis for Disclaimer of Opinion paragraph, we do not express an opinion on the supplemental schedules.

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

The form and content of the information included in the financial statements and supplemental schedules, other than that derived from the information certified by the trustee, have been audited by us in accordance with auditing standards generally accepted in the United States of America and, in our opinion, are presented in compliance with the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974.

TADGIL

Baltimore, Maryland October 12, 2016

Statements of Net Assets Available for Benefits December 31, 2015 and 2014

	2015	2014
ASSETS		
Investments, at fair value	<u>\$ 2,519,238</u>	<u>\$ 2,121,745</u>
Receivables: Participants' contributions Accrued interest	31,769 75	63,668 16
	31,844	<u>63,684</u>
Total assets	<u>2,551,082</u>	2,185,429
LIABILITIES		
Accounts payable	39,299	42,050
Total liabilities	39,299	42,050
NET ASSETS AVAILABLE FOR BENEFITS	<u>\$ 2,511,783</u>	\$ 2,143,379

The Notes to Financial Statements are an integral part of these statements.

Statement of Changes in Net Assets Available for Benefits For the Year Ended December 31, 2015

ADDITIONS

Investment income: Interest income Less investment expenses	\$ 162 (2,316)
	(2,154)
Participants' contributions Participating railroads' contributions Participants' COBRA contributions	9,113,179 796,003 118,697
	10,027,879
Total additions	<u>10,025,725</u>
DEDUCTIONS	
Benefits paid to or for participants, beneficiaries, and dependents: Claims paid	9,280,712
Administrative expenses	376,609
Total deductions	9,657,321
Net increase	368,404
NET ASSETS AVAILABLE FOR BENEFITS Beginning of year	<u>2,143,379</u>
End of year	<u>\$_2,511,783</u>

The Notes to Financial Statements are an integral part of this statement.

Statements of Plan Benefit Obligations December 31, 2015 and 2014

2015 2014

AMOUNTS CURRENTLY PAYABLE TO OR FOR PARTICIPANTS, BENEFICIARIES, AND DEPENDENTS Claims payable

The Notes to Financial Statements are an integral part of these statements.

Statement of Changes in Plan Benefit Obligations For the Year Ended December 31, 2015

AMOUNTS CURRENTLY PAYABLE TO OR FOR	
PARTICIPANTS, BENEFICIARIES, AND DEPENDENTS	
Claims payable:	
Balance at beginning of year	\$ 161,510
Claims reported and approved for payment	9,330,306
Claims paid	<u>(9,280,712</u>)

\$ 211,104

Balance at end of year

The Notes to Financial Statements are an integral part of this statement.

Note 1. Description of the Plan

The following description of The Railroad Employees National Health Flexible Spending Account Plan (the Plan) provides only general information. Participants should refer to the Plan's Summary Plan Description for a more complete description of the Plan's provisions.

General

The Plan and related Trust were established January 1, 2013 pursuant to collective-bargaining. The Plan is a defined contribution plan administered by the National Carriers' Conference Committee and is subject to the provisions of the Railway Labor Act, as amended, and the Employee Retirement Income Security Act of 1974 (ERISA), as amended.

Benefits

The Plan allows a participant to use pre-tax wage deductions to pay for certain medical care expenses incurred that satisfy requirements established by the Internal Revenue Service through a Health Flexible Spending Arrangement (Health FSA). Such use is limited to the participant's annual election for Health Flexible Spending Arrangement (FSA) benefits.

Eligibility

Upon satisfying the eligibility and coverage requirements, as outlined in the Plan's Summary Plan Description, a prospective participant must make an annual election to participate in the Plan.

Participant accounts

An individual account is maintained for each participant of the Plan. This account is credited for contributions provided by the participant and charged for all reimbursements made to the participant during the Plan year.

Regardless of the amount actually credited to a participant's account, the amount available to the participant at any time within a period of coverage shall equal the total annual Health FSA benefit election reduced by any prior reimbursements to the participant in the same period of coverage.

Note 1. Description of the Plan (continued)

Experience gains

If the Plan has an experience gain for the Plan year (the total of all amounts remitted to the Plan for the year plus earnings on such amounts exceeds the total amount of all reimbursements for health care expenses for the Plan year), then such gain shall be used to defray reasonable administrative costs of the Plan. Any remaining gain shall remain in the Plan to defray reasonable administrative costs of the Plan for subsequent years or, at the Plan Administrator's discretion, may be distributed in any manner permitted by the Code and ERISA.

Vesting

Participants are immediately vested in their account. (See additional disclosure related to forfeitures).

Payment of benefits

Benefits will be paid for eligible health care expenses submitted by a Plan participant and received by the Plan Administrator no later than March 31st following the close of the Plan year.

Any benefit check sent to a participant that is not cashed within ninety (90) days of the date on which it is issued shall be forfeited, and the participant shall have no further right to receive reimbursement for the health care expenses for which such benefit check was issued, unless, within one (1) year from the date the check was issued, the participant demonstrates to the Plan Administrator's satisfaction that the check was not received.

Forfeitures

In addition to the forfeitures noted above, any balance remaining in the participant's account as of March 31st for the preceding Plan year, December 31st, will be forfeited by the participant and will remain in the Plan to defray reasonable administrative costs.

Period of coverage

In general, the period of coverage for a participant shall commence on January 1st and terminate on December 31st of the Plan year. In addition, if the participant has unused amounts in their Health FSA account and remain a participant or COBRA qualified beneficiary on the last day of the Plan year, their period of coverage will continue through January 30th of the year immediately following the Plan year.

Note 1. Description of the Plan (continued)

Period of coverage (continued)

However, in the case where a participant ceases to remain eligible to participate in the Plan, the period of coverage will terminate on the date on which the participant's eligibility terminates.

Funding

The Plan is funded through participant contributions. If the Plan experiences a shortfall, the Plan will either borrow the funds necessary to pay claims or require the participating employers to make supplemental contributions to cover the shortage.

Tax status

The Plan has filed for a determination letter from the Internal Revenue Service regarding the Plan's qualification under the related trust's tax-exempt status under the provision of Section 501(c)(9) of the Code. The Plan Administrator will make any changes deemed necessary to ensure that the Plan is granted tax-exempt status. Representatives of the Plan Administrator believe the Plan is currently designed and is being operated in compliance with the applicable requirements of the Code and, accordingly, the Trust's net investment income is exempt from income taxation. However, as a result of the Plan's funding policy, from time to time the trust may be subject to income taxes. No federal or state income taxes have been recorded during the year ending December 31, 2015 for unrelated business taxable income.

Financial Accounting Standards Board (FASB) Accounting Standards Codification (ASC) 740, Income Taxes, prescribes a recognition threshold and measurement attribute for the financial statement recognition and measurement of a tax position taken or expected to be taken in a tax return. The Plan's management has evaluated the impact of this guidance to its financial statements. The Plan's tax returns are subject to examination by taxing authorities, generally for a period of three years from the date the returns are filed.

Plan termination

In the event of termination of the Plan, the Trust's remaining assets will be used to provide for the payment of any and all obligations of the Plan. Such payments shall be for the exclusive benefit of the Plan participants and beneficiaries and to defray the administrative expenses of the Plan.

Note 1. Description of the Plan (continued)

Recent accounting pronouncements

In May 2015, the FASB issued Accounting Standards Update No. 2015-07, Fair Value Measurement (Topic 820): Disclosures for Investments in Certain Entities That Calculate Net Asset Value per Share (or Its Equivalent) (a consensus of the FASB Emerging Issues Task Force). The amendments in this update remove the requirement to categorize within the fair value hierarchy all investments for which fair value is measured using the net asset value per share practical expedient. However, sufficient information must be provided to permit reconciliation of the fair value of assets categorized within the fair value hierarchy to the amounts presented in the Statements of Net Assets Available for Benefits. The amendments also remove the requirement to make certain disclosures for all investments that are eligible to be measured at fair value using the net asset value per share practical expedient. The amendments in this update are effective for public business entities for fiscal years beginning after December 15, 2015. For all other entities, the amendments in this update are effective for fiscal years beginning after December 15, 2016. Early adoption is permitted. Plan management has determined that this update is not currently applicable to the Plan.

In July 2015, the FASB issued Accounting Standards Update No. 2015-12, Plan Accounting: Defined Benefit Pension Plans (Topic 960), Defined Contribution Pension Plans (Topic 962), Health and Welfare Benefit Plans (Topic 965) – (I) Fully Benefit-Responsive Investment Contracts, (II) Plan Investment Disclosures, and (III) Measurement Date Practical Expedient (a consensus of the FASB Emerging Issues Task Force). The purpose of this update is to simplify plan accounting.

The amendments in Part I of this update designate contract value as the only required measure for direct investments in fully benefit-responsive investment contracts. Fully benefit-responsive investment contracts will be presented at contract value; accordingly, there will no longer be an adjustment from fair value to contract value on the face of the financial statements.

The amendments in Part II of this update will eliminate the requirements for plans to disclose (1) individual investments that represent 5 percent or more of net assets available for benefits and (2) the net appreciation or depreciation for investments by general type for both participant-directed investments and nonparticipant-directed investments. The net appreciation or depreciation in investments for the period will still be required to be presented in the aggregate. In addition, if an investment is measured using the net asset value per share (or its equivalent) practical expedient in Topic 820 and that investment is in a fund that files a U.S. Department of Labor

Note 1. Description of the Plan (continued)

Form 5500, Annual Return/Report of Employee Benefit Plan, as a direct filing entity, disclosure of that investment's strategy will no longer be required.

The amendments in Part III of this update reduce complexity in employee benefit plan accounting by providing a practical expedient that permits plans to measure investments and investment-related accounts as of a month-end date that is closest to the plan's fiscal year-end, when the fiscal period does not coincide with month-end.

The update may be adopted in whole or by part (I, II, and III), as applicable. The amendments in this update are effective for fiscal years beginning after December 15, 2015. Early adoption is permitted. Upon adoption, the amendments in Parts I and II shall be applied retrospectively to all periods presented; the amendments in Part III shall be applied prospectively. Plan management has adopted Part II of this update as of and for the year ended December 31, 2015 and has retrospectively applied it to December 31, 2014. Prior year amounts and disclosures have been revised to reflect the retrospective application of adopting this new update. Parts I and III are currently not applicable to the Plan.

Note 2. Significant Accounting Policies

Basis of accounting

The financial statements of the Plan are prepared on the accrual basis of accounting in accordance with accounting principles generally accepted in the United States of America.

Use of estimates

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires the Plan Administrator to make estimates and assumptions that affect certain reported amounts of assets and liabilities and disclosure of contingent assets and liabilities as of the date of the financial statements. Accordingly, actual results could differ from those estimates.

Valuation of investments and income recognition

Investments are reported at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. See Note 4 for discussion of fair value measurements.

Note 2. Significant Accounting Policies (continued)

Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded on the accrual basis.

Fair value of financial instruments

The Plan administrator believes the carrying value of financial instruments, as stated in the financial statements, approximates their fair value.

Payment of benefits

Claims expense is recorded when paid by the Plan.

Participant contributions and contributions receivable

Employee contributions are remitted to the Plan on at least a monthly basis in accordance with the participant's annual Health FSA benefit election. Employee contributions are recognized as revenue in the Plan year to which the annual election amount relates.

Participants' COBRA contributions

A participant, who experiences a qualifying event, as defined by Federal COBRA guidelines, may self-pay to continue coverage in the Plan for a limited period of time. Participants' COBRA contributions are recognized when due and payable.

Allowance for doubtful accounts

The Plan utilizes the allowance method to account for uncollectible receivables. Unless otherwise noted, an allowance for doubtful accounts for the Plan's receivable balances is not considered necessary as probable uncollectible amounts have been determined by the Plan Administrator not to be significant to the financial statements.

Claims Payable

Claims payable includes benefit obligations related to claims incurred but not paid, and amounts accrued for benefits through the period of coverage for Plan participants and COBRA qualified beneficiaries as of December 31st.

Forfeitures

Forfeitures are recorded in the year in which they occur.

Note 2. Significant Accounting Policies (continued)

Subsequent Events

The Plan has evaluated subsequent events through October 12, 2016, the date the financial statements were available to be issued.

Note 3. Information Certified by the Plan's Trustee and the Plan Administrator

The following investments are held by a bank administered trust fund and were certified by the Trustee, SunTrust Bank, and the Plan Administrator as complete and accurate.

	2015		
Money Market Fund*:			
Investments	\$ 2,519,238	\$	2,121,745
Accrued interest	\$ 75	\$	16
Interest income	\$ 162		N/A

^{*} Investments held as of December 31, 2015 and 2014 were in Federated Treasury Obligation MM-1 #68 FFS.

The investment activity reported on the schedule of assets (held at end of year) and schedule of reportable transactions was also certified by the Trustee, SunTrust Bank, and the Plan Administrator as complete and accurate.

The Plan's independent public accountants did not perform auditing procedures with respect to this information, except for comparing such information to the related information included in the financial statements and supplemental schedules.

Note 4. Fair Value Measurements

The framework for measuring fair value provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (level 1) and the lowest priority to unobservable inputs (level 3). The three levels of the fair value hierarchy are described as follows:

Level 1

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

Note 4. Fair Value Measurements (continued)

Level 2

inputs to the valuation methodology include:

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

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

Level 3

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

The asset's or liability's fair value measurement level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement. Valuation techniques used need to maximize the use of relevant observable inputs and minimize the use of unobservable inputs.

The valuation methodology used for assets measured at fair value as of December 31, 2015 and 2014 is as follows:

Money market funds

Shares of a money market portfolio are considered cash equivalents and are valued at their carrying amount due to their short-term nature.

As of December 31, 2015 and 2014 all of the Plan's investment assets have been determined by the Plan Administrator to be level 1.

Note 5. Forfeitures

Forfeitures arise when either a benefit check sent to a participant is not cashed within ninety (90) days of the date on which it is issued or when a balance remains (i.e., the total contributions made by a Plan participant exceed the total amount paid to that participant) in a participant's account as of March 31st for the preceding Plan year, December 31st. Forfeitures related to uncashed benefit checks amount to approximately \$64,362 and \$68,773 as of and for the year ended December 31, 2015 and 2014,

Note 5. Forfeitures (continued)

respectively. Forfeitures related to unused participant account balances amounted to approximately \$103,500 and \$103,000 as of March 31, 2016 and 2015, which related to the years ending December 31, 2015 and 2014, respectively. These forfeitures were used to defray reasonable administrative costs of the Plan

Note 6. Concentration of Participants of Participating Railroads

There are approximately 26 railroads participating in the Plan, of which participants of four railroads comprised approximately 88% and 96% of the total Plan participant population as of and for the years ended December 31, 2015 and 2014, respectively, as depicted in the following table:

	Percentage of	Percentage of Total Plan Activity			
Railroad	2015	2014			
Α	32.3%	33.0%			
В	23.4%	24.4%			
С	16.2%	16.1%			
D	16.1%	22.4%			

Note 7. Reconciliation of Financial Statements to Form 5500

The following is a reconciliation of net assets available for benefits per the accompanying 2015 and 2014 financial statements to the Form 5500.

		2015		2014
Net assets available for benefits as reported within				
the financial statements	\$	2,511,783	\$	2,143,379
Benefit obligations currently payable	1	211,104)	1	<u>161,510</u>)
Net assets available for benefits as reported within				•
the Form 5500	<u>\$</u>	2,300,679	\$	<u>1,981,869</u>

The following is a reconciliation of benefits paid to participants per the financial statements to the Form 5500 for the year ended December 31, 2015.

Benefits paid to participants as reported within the financial statements Add: Current benefit obligations, end of year Less: Current benefit obligations, beginning of year	\$ 	9,280,712 211,104 161,510)
Benefits paid to participants as reported within the Form 5500	<u>\$_</u>	9,330,306

Note 7. Reconciliation of Financial Statements to Form 5500 (continued)

Benefit obligations currently payable to or for participants are recorded on the Form 5500 for obligations which arise as of December 31st but not yet paid as of that date.

Note 8. Party in Interest Transactions

The Plan paid administrative fees to service providers during the year that are considered party in interest transactions. This includes management fees paid to SunTrust, the trustee of the Plan, for certain Plan assets invested in money market funds. These transactions are exempt from the prohibited transaction rules of ERISA.

Note 9. Prohibited Transactions

During 2015, an aggregate of \$8,768 of certain participating railroads' employee withholdings were not deposited into the Plan within the timeframe required by the United States Department of Labor's (DOL) regulations. These withholdings are included in the participants' contributions receivable balance as of December 31, 2015. To correct these failures, the Plan Administrator deposited these withholdings, along with contributions for lost earnings, to the Plan on or prior to October 12, 2016.

During 2014, an aggregate of \$47,090 of certain participating railroads' employee withholdings were not deposited into the Plan within the timeframe required by the DOL's regulations. These withholdings are included in the participants' contributions receivable balance as of December 31, 2014. To correct this failure, the Plan Administrator deposited the withholdings, along with contributions for lost earnings, to the Plan on or prior to October 9, 2015.

Note 10. Contingencies

A participant has one year from the date a check was issued for benefits, to contact the Plan Administrator, even though that check may not have been cashed within the ninety (90) days required by the Plan, and request to have that check reissued. If the participant satisfies the requirements as set forth in the Summary Plan Description, then an otherwise forfeited claim will become reimbursable by the Plan. As of December 31, 2015 and 2014, there were \$64,362 and \$68,773, respectively, in such forfeitures that are subject to this provision of the Plan. These amounts were excluded from the claims payable balances as of December 31, 2015 and 2014 and represent the maximum amount that may be paid by the Plan if all forfeited claims become reimbursable. The Plan Administrator is of the opinion, based on all available known facts, that the amount expected to be paid with respect to the forfeited claims subject to this provision would not have a material effect on the financial position or results of operations of the Plan.

Note 11. Risks and Uncertainties

The Plan invests in money market funds with SunTrust. These investments are exposed to credit risk. Due to the level of risk associated with these investments given the current economic condition and uncertainty in the market place, it is at least reasonably possible that changes in the value of these investments may occur in the near term and that such changes could materially affect the amounts reported in the statements of net assets available for benefits and changes in net assets available for benefits.

SUPPLEMENTAL SCHEDULES

Schedule of Delinquent Participant Contributions For the Year Ended December 31, 2015

Schedule H Item 4(a) – Schedule of Delinquent Participant Contributions

EIN: 52-1036399 Plan Number: 512

	1			
Participant Contributions Transferred Late to Plan	Total That Constitute Nonexempt Prohibited Transactions			
Check Here if Late Participant			Contributions	Total Fully Corrected
Loan Repayments Are Included:	İ	Contributions	Pending	Under VFCP
	Contributions	Corrected	Correction in	and PTE
🖰	Not Corrected	Outside VFCP	VFCP	2002-51
	\$ -	\$ 45,506	\$ -	\$ -
	\$ -	\$ 946	\$ -	\$ -
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Schedule H Item 4(a) – Schedule of Delinquent Participant Contributions (continued) EIN: 52-1036399

Plan Number: 512

Participant Contributions Transferred Late to Plan	Total That Constitute Nonexempt Prohibited Transactions			
Charle Hara if Late Destinant			Contributions	Total Fully
Check Here if Late Participant			Contributions	Corrected
Loan Repayments Are Included:	0	Contributions	Pending	Under VFCP
	Contributions	Corrected	Correction in	and PTE
<u> </u>	Not Corrected	Outside VFCP	VFCP	2002-51
	\$ -	\$ 83	\$ -	\$ -
	\$ -	\$ 742	\$ -	\$ -
	\$ -	\$ 371	\$ -	\$ -
	\$ -	\$ 371	\$ -	\$ -
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THE RAILROAD EMPLOYEES NATIONAL HEALTH FLEXIBLE SPENDING ACCOUNT PLAN

Schedule of Assets (Held at End of Year) December 31, 2015

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

EIN: 52-1036399 Plan Number: 512

(a)	(b)	(c)	(d)	(e)
	Identity of Issue, Borrower, Or Similar Party	Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par or Maturity	Cost	Current <u>Value</u>
*	SunTrust Bank	Money market fund		

Federated Trsy Obligs MM-1 #68FFS \$ 2,519,238 \$ 2,519,238

Account 70-04-102-7949279

^{*} Known party-in-interest to the Plan.

THE RAILROAD EMPLOYEES NATIONAL HEALTH FLEXIBLE SPENDING ACCOUNT PLAN

Schedule of Reportable Transactions For the Year Ended December 31, 2015

Schedule H Item 4(j) - Schedule of Reportable Transactions

EIN: 52-1036399 Plan Number: 512

(a)	(b)	(c)	(d)	(g)	(i)
		Purchase	Selling	Asset	Current
Identity of Party Involved	Description of Assets	<u>Price</u>	<u>Price</u>	<u>Cost</u>	<u>Value</u>

SunTrust Bank

Account 70-04-102-7949279 (See attached schedule as prepare and reported by SunTrust Bank)

REPORTABLE TRANSACTIONS MORKSHEET

1/1/15 THROUGH 12/31/15

RAILROAD EMPLOYEES NATIONAL FSA

PRINCIPAL CASH EXPENSE INCURRED

PAGE 136

BOUGHT/SOLD DATE

ACCOUNT 7949279

SHARES PAR VALUE

MICE

ERISA COST

ERISA COST GAIN/LOSS

COMPARATIVE VALUE (5X) DECINNING MARKET VALUE

2,121,761.16 106,088.66

CATEGORY 1 - SINGLE TRANSACTION EXCEEDS 5% OF VALUE

	107,954 ×
	•
89# I-I	1.0000
ISSUE: 60934N500 - FEDERATED TRSY OBLIGS MM-I 468	107,954.3400
15SUE: 60934N500 -	01/23/15 \$

107,954 15,400

115,400

144,844 132,861 127,120

141,804

01/23/15 \$	•	107.9	107,954.3400	•		1.0000	
ISSUE:	005252609	ISSUE: 60934N500 - FEDERATED TRSY OBLIGS HM-I &68	D TRSY	S51780	1- E	#e9	
01/20/15 \$	ø	115,3	115,399.9108	•		1.0000	
ISSUE:	60934N500	ISSUE: 60934N500 - FEDERATED TRSY OBLIGS MM-I 668	D TRSY	OBLIES	1-HH	894	
4 407 007 00			**** *** ***	•		-	

1.0000 141,804.15 B 141,004.1200 1.00 ISSUE: 60934N500 - FEDERATED TRSY OBLIGS MM-1 #60 ISSUE: 60934M500 - FEDERATED TRSY OBLIGS MM-I #68 144,844.1400

02/11/15 \$

02/18/15 \$

ISSUE:

02/24/15 02/25/15

I SSUE:

- FEDERATED TRSY OBLIGS MM-I #68 132,860.7100 60934N560

.0000 .0000

- FEDERATED TRSY DBLIGS MM-I #68 - FEDERATED TRSY OBLIGS MM-I #68 127,120.1100 126,523.9400 60934N500

0000 .0000 .0000

> - FEDERATED TRSY OBLIGS HM-I 131,367.2500 154,858.3280 ISSUE: 60934N500 ISSUE: 60934N500 03/02/15 \$

#68

- FEDERATED TRSY DALIGS NM-I 468 - FEDERATED TRSY OBLIGS MM-I 107,869.8480 133,904.0700 1\$\$UE: 40934N500 03/03/15

- FEDERATED TRSY OBLIGS MM-I #68 106,368.9400 ISSUE: 60934N500 03/11/15 \$ 03/09/15

. 0000 .0000 . 0000 .0000 . 0000 0000-1

..0000

- FEDERATED TRSY OBLIGS MM-I 148,072.6300 ISSUE: 60934N500 005N5£609 03/31/15 04/23/15 I SSUE:

- FEDERATED TRSY OBLIGS NN-I #68 - FEDERATED TRSY OBLIGS NM-I 182,751.6400 60934N500 ISSUE: 60934N500 06/05/15 B 05/08/15 I \$\$UE:

99

- FEDERATED TRSY OBLIGS MM-I #68 - FEDERATED TRSY OBLIGS MM-I 120,814.2200 115,508.8700 152,111.5000 ISSUE: 60934N500 ISSUE: 60934N500 07/14/15 1

132,861 * 131,367 * 107,870 144,844 -127,120 126,524 133,904 106,369 141,804 -148,073 134,858 -182,752 -115,509

34,858

133,904

126,524 131,367 107,870 106,369 148,073

120,814

182,752 115,509

-132,112

20,814 132,112



REPORTABLE TRANSACTIONS HORISHEET

1/1/15 THROUGH 12/31/15

RATLEGAD ENPLOYEES NATIONAL FSA

PACE 137

BOUGHT/30LD	SHARES PAR VALUE	UNCT	EXPENSED	PRINCIPAL CASH	ERISA COST	ERISA COST GADALOSS
ISSUE: 60954M50B	ISSUE: 60934M500 - FEDERATED TRSV ORITICS MM-1 ACA	1-14 S				
08/10/15 B	172,890.5200	1.000	•	-172,891 #	172,091	
1110E: 40914N500 185UE: 40934N500	721/15 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	0000°1 +68	•	-222,795 #	222,795	
09/08/15 B ISSUE: 40934N500	/08/15 B 121,439.8900 1.00 155UE: 60954NS00 - FEDERATED TRSY DRICES MM-I ACA	1.000 I	•	-121,440 *	121,440	
09/22/15 B ISSUE: 60934N500	/22/15 B 111,536.7600 ISSUE: 60934H500 - FEDERATED TRSY OBLIES HM-T	1.0000	•	- 111,537 +	111,537	
10/07/15 B ISSUE: 60934N500	/07/15 B 120,540.1000 ISSUE: 60934N500 - FEDERATED TRSY DRITE	1.0000 1.0000 1.0000	•	-120,540 *	120,540	
18/22/15 B ISSUE: 60954N500	/22/15 } 107,714.1200 ISSUE: 60934N500 - FEDERATED TRSY OBLIC		•	-107,718 *	107,718	
11/20/15 B ISSUE: 60934N500	/20/15 B 112,237,7900 ISSUE: 60934M500 - FEDERATED TRSY DELIG	1.000 S	•	-112,238 *	112,238	
12/08/15 B ISSUE: 40934N506			•	-163,590 =	163,590	
12/29/15 B			•	* 489,656 *	173,654	
GRAND TOTAL	TOTAL			· · · · · · · · · · · · · · · · · · ·	5,516,538	

CATEGORY 2 - SERIES OF TRANSACTIONS WITH SAME BROKER EXCEEDS 5% OF VALUE

*** NO TRANSACTIONS QUALIFIED FOR THIS SECTION ***

CATEGORY 3 - SERIES OF TRANSACTIONS IN SAME SECURITY EXCEEDS 5% DF VALUE

ISSUE: 60934M500 - FEDERATED TRSY OBLIGS MN-I 468

.14 .56,095
• •
1.0666
16.1500 56,095.350
01/05/15 10 01/09/15 10 10

16 56,095



21/15/11 HROUGH 12/31/15

RAILROAD EMPLOYEES NATIONAL FSA

15,622.0200 25,266.5600 25,266.5600 25,052.0200 25,05	DATE BOUCHT/30LD	PAR VALUE	PRICE	DECURRED	PRINCIPAL CASH	ERISA COST	CAIN/LOSS
99,256,5600 1.0000 0 1-99,257 86,525 7500 1.0000 0 1-99,252 86,525 7500 1.0000 0 1-96,252 86,525 7500 1.0000 0 1-96,252 86,525 7500 1.0000 0 1-96,252 86,525 7500 1.0000 0 1-15,412 11,11,200 1.0000 1.0000 1-15,512 86,772 500 1.0000 1.0000 1-15,713 86,772 500 1.0000 1.0000 1-15,713 11,11,200 1.0000 1.0000 1-15,713 86,772 500 1.0000 1.0000 1-15,714 11,11,200 1.0000 1.0000 1-15,714 11,11,11,11,11,11,11,11,11,11,11,11,11	01/12/15 B	15,852.0200	1.0000	J		15,852	
199,225,7300 1,0000 0	01/16/15 3	30,266.5609	1.0000	•	-50,267	30,247	
1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,	6 51 :	59,926.4100	0000.1		-59,928	59,928	
14, 167, 1200 1, 1000 1, 14, 140 1, 14, 140 1, 14, 140 1, 14, 140 1, 14, 140 1, 14, 140 1, 140 1, 14, 140 1, 140 1, 14, 140 1, 140 1, 14, 140 1,	•	0001.020.08				929'99	
141.845.1500 1.0000 0 -141.846 1 141.845.1500 1.0000 0 -141.846 1 141.845.1500 1.0000 0 -141.846 1 141.845.1500 1.0000 0 -141.846 1 141.845.1500 1.0000 0 -141.846 1 141.845.1500 1.0000 0 -151.150 1 141.845.1500 1.0000 0 -151.150 1 141.85 2400 1.0000 0 -151.85 340 -171.155 2400 1.0000 0 -171.155 2400 1.0000 0 -171.155 2400 1.0000 0 -171.155 2400 1.0000 0 -171.155 2400 1.0000 0 -171.155 2400 1.0000 0 -171.155 2400 1.0000 0 -171.155 2400 1.0000 0 -175.440 -171.155 2400 1.0000 0 -175.440 -175.440 1.0000 0 -175.440							
141,864,1200 1.0000 1.45,464 144,864		16.7200	1.000			71	
69,453.3500 1.0880 0 -65,458 10,20.200 1.0880 0 -65,458 10,20.100 1.0800 0 -127,120 11,20.100 1.0800 0 -127,120 11,20.100 1.0800 0 -137,120 11,30.200 1.0800 0 -137,120 11,31.200 1.0800 0 -137,121 11,31.200 1.0800 0 -137,121 11,31.200 1.0800 0 -137,131 11,31.200 1.0800 0 -137,131 11,31.200 1.0800 0 -137,131 11,31.200 1.0800 0 -137,131 11,31.7,200 1.0800 0 -137,131 11,000 1.0800 0 -137,44 11,000 1.0800 0 -137,44 11,000 1.0800 0 -10,135 11,000 1.0800 0 -10,135 11,000 1.0800 0 -10,137	- 10	141,804,1200	1.0000		- 141,404 *	141,804	
86,546,7800 1.0800 9 -49,903 127,120,120 1.8800 1.8800 1.88,904 1.88,904 135,964,7800 1.8000 0 -127,120 1.88,904 135,964,6700 1.8000 0 -135,904 1.88,904 1,51,22,6500 1.8000 0 -135,904 1.88,904 1,51,25,5600 1.8000 0 -135,738 1.88 5,977,272,6500 1.8000 0 -13,138 -1,138 6,517,2500 1.8000 0 -22,421 -22,421 6,517,2500 1.8000 0 -22,421 -22,421 1,517,2500 1.8000 0 -22,421 -22,421 42,643,3500 1.8000 0 -12,135 -13,135 1,517,2500 1.8000 0 -12,145 -13,131 1,517,2500 1.8000 0 -12,145 -13,131 1,517,2500 1.8000 0 -13,131 -13,131 1,517,2500 1.8000 0		65,458.3500	1.0000	_	-65,458	48,498	
127,120,1100 1.0000 0 -127,120 1 1 1 1 1 1 1 1 1	-	49,902.6500	1.0000	•	-49,903	49,903	
127,120 100 1,0000 1,0	2 3	88,644.7800	1.6000	•	199'663	88,645	
133,966,0700	2 2	127,120.1100	1.6000	•	-127,120 #	127,120	
B 35,906,0700 1,0000 0 -35,906 * B 35,906,0700 1,0000 0 -55,906 B 45,732,6500 1,0000 0 -63,738 B 71,135,2600 1,0000 0 -77,135 B 71,135,2600 1,0000 0 -52,976 B 75,460,2500 1,0000 0 -75,469 B 42,643,370 1,0000 0 -75,469 B 42,643,370 1,0000 0 -75,469 B 42,643,370 1,0000 0 -75,469 B 10,075,210 1,0000 0 -75,469 B 10,075,220 1,0000 0 -76,075 B <td>5 3</td> <td>10.0600</td> <td>1.0000</td> <td>_</td> <td>01-</td> <td>10</td> <td></td>	5 3	10.0600	1.0000	_	01-	10	
85,798,600 1,000 0 -55,733 1,131,280 1,000 0 -1,131 1,131,280 1,000 0 -1,135 5,132,240 1,000 0 -1,135 6,137,280 1,000 0 -26,73 1,135,220 1,000 0 -26,73 1,135,220 1,000 0 -26,73 1,137,220 1,000 0 -26,43 1,137,220 1,000 0 -26,43 1,137,220 1,000 0 -26,43 1,000 1,000 0 -26,43 1,000 1,000 0 -26,43 1,000 1,000 0 -26,43 1,000 1,000 0 -26,43 1,000 1,000 0 -26,43 1,000 1,000 0 -26,43 1,000 1,000 0 -26,43 1,000 1,000 0 -26,73 1,000 1,000	4 9	133,904.0700	1.0000	_	406,661-	133,904	
1,151.260 1,000 0 -1,151 1,151.260 1,000 0 -1,151 1,151.260 1,000 0 -1,151 1,200 1,000 0 -56,974 1,000 1,000 0 -56,974 1,17.220 1,000 0 -52,621 1,17.220 1,000 0 -52,649 1,17.220 1,000 0 -52,649 1,17.220 1,000 0 -52,649 1,10,012.200 1,000 0 -12,469 1,00,012.200 1,000 0 -12,469 1,000 1,000 0 -10,012 1,000 1,000 0 -10,013 1,000 1,000 0 -10,115 1,12,576 1,000 0 -10,115 1,12,590 1,000 0 -10,115 1,12,500 1,000 0 -10,115 1,12,500 1,000 0 -10,115 1,12,500	18 19	US: , 908 . 0400	1.0000		906'32'	806,356	
1.151.286 1.000 0 -1.151 1.155 1.155 2.540 1.000 0 -5.4 974 2.540 1.000 0 -5.4 974 2.540 1.000 0 -5.4 974 2.540 1.000 0 -5.4 621 2.540 1.000 0 -5.4 621 2.540 1.000 0 -5.4 621 2.540 1.000 0 -5.4 621 2.540 1.000 0 -7.5 682 1.000 1.000 0 -7.5 682 1.000 1.000 0 -7.5 682 1.000 0 -7.5 682 1.000 0 -7.5 682 1.000 0 -7.5 682 1.000 0 -7.5 682 1.000 0 -7.5 682 1.000 0 -7.5 682 1.000 0 -7.5 682 1.000 1.000 0 -7.5 682 1.000 0 -7.5 682 1.000 0 -7.5 682 1.000 0 -7.5 682 1.000 0 -7.5 682 1.000 0 -7.5 682 1.000 0 -7.5 682 1.000 0 -7.5 682 1.000 1.000 0 -7.5 682 1.000 0 -7.5 682 1.000 0 -7.5 682 1.000 0 -7.5 682 1.000 0 -7.5 682 1.000 0 -	4 6	63,732.6500	1.0000	_	-63,733	60,700	
P. 77, 135, 260 1,000 0 -71, 135 S. 520 1,000 0 -58, 978 S. 520 1,000 0 -52, 621 B. 517, 220 1,000 0 -75, 489 B. 517, 220 1,000 0 -75, 489 B. 546, 550 1,000 0 -75, 489 B. 100, 012, 220 1,000 0 -75, 489 B. 100, 012, 220 1,000 0 -100, 075 B. 100, 012, 220 1,000 0 -166, 075 B. 100, 012, 220 1,000 0 -166, 075 B. 100, 012, 220 1,000 0 -190, 015 B. 101, 14, 500 1,000 0 -19, 714 B. 11, 14, 500 1,000 0 -19, 714 B. 20, 75, 810 1,000 0 -19, 714 B. 20, 75, 810 1,000 0 -20, 744 B. 20, 75, 810 1,000 0 -20, 744 B. 20, 75, 810 1,000 0 -20, 744 B. 20, 74	-	1,151.2800	1.0000	_	1,151	1,151	
56,977,5900 1,0000 0 -56,976 5 5,8300 1,0000 0 -52,621 6 5,577,2200 1,0000 0 -52,621 75,648,5370 1,0000 0 -52,643 1 0,075,1200 1,0000 0 -75,469 1 1,0000 0 -75,469 -10,075 1 1,0000 0 -75,469 -10,075 1 1,0000 0 -10,075 -10,075 1 1,0000 0 -10,075 -10,075 1 1,0000 0 -10,075 -10,075 1 1,0000 0 -10,075 -10,075 1 1,0000 0 -10,075 -10,075 1 1,0000 0 -10,115 -10,075 1 1,0000 0 -10,115 -10,115 1 1,0000 0 -10,115 -10,115 1 1,0000 0 -10,115 -10,115 1 1,0000 0 -10,115 -10,115 2 1,275,51 0 0 -25,52 <td>-</td> <td>71,135.2400</td> <td>1.0000</td> <td></td> <td>-71,155</td> <td>71,135</td> <td></td>	-	71,135.2400	1.0000		-71,155	71,135	
5.8200 1.0000 0 -6 8.521 1.0000 0 -81,817 8.521 1.0000 0 -81,817 8.542 1.0000 0 -75,463 8.542 1.0000 0 -75,463 8.542 1.0000 0 -10,054 8.542 1.0000 0 -10,012 9.542 2.800 1.0000 0 -10,012 9.542 2.800 1.0000 0 -10,012 9.542 2.800 1.0000 0 -10,012 9.745 2.800 1.0000 0 -10,115 9.745 8.00 1.0000 0 -182,124 9.755 8.00 1.0000 0 -182,125 9.755 8.00 1.0000 0 -182,125 9.755 9.000 0 -10,115 9.755 9.000 0 -10,115 9.755 9.000 0 -10,115 <th< td=""><td></td><td>58,977.5900</td><td>1.6000</td><td>_</td><td>-58,978</td><td>58,978</td><td></td></th<>		58,977.5900	1.6000	_	-58,978	58,978	
B 52,621.3609 1.0000 0 -52,621 B 42,645.3709 1.0000 0 -75,649 B 75,646.500 1.0000 0 -75,649 B 10,075.1206 1.0000 0 -76,445 B 10,075.1206 1.0000 0 -10,075 B 10,075.200 1.0000 0 -10,075 B 10,175.270 1.0000 0 -10,115 B 10,114.560 1.0000 0 -10,115 B 10,114.560 1.0000 0 -10,115 B 20,745.640 1.0000 0 -10,115 B 50,073.640 1.0000 0 -10,115 B 50,073.640 1.0000 0 -10,115 B	4	5.8300	1.6000	•	*	•	
B 47,517,2200 1,0000 0 -73,489 B 75,488,590 1,0000 0 -75,489 B 42,648,3700 1,0000 0 -10,075 B 10,075,1200 1,0000 0 -10,075 B 10,012,2600 1,0000 0 -10,012 B 10,115,9713 0 -10,012 B 10,115,9710 1,0000 0 -10,013 B 10,115,9713 0 -10,115 B 10,116,972,810 1,0000 0 -10,115 B 10,116,400 1,0000 0 -12,744 B 20,745,810 1,0000 0 -20,744 B 25,610 1,0000<		52,621.3600	1.0000	_	-52,621	52,621	
B 75,488.5500 1.0000 0 -75,459 B 42,453.790 1.0000 0 -42,643 B 10,075.1200 1.0000 0 -10,075 B 10,075.2500 1.0000 0 -16,075 B 55,912.2500 1.0000 0 -18,073 -1 B 19,715.970 1.0000 0 -18,075 -1 B 10,715.970 1.0000 0 -18,714 B 20,745.740 1.0000 0 -25,425 B 12,500 1.0000 0 -25,40 B 12,500 1.0000 0 -25,50 B 49,724.570 1.0000 0 -25,50	-	81,517.2200	1.0000	_	11,517	81,517	
42,643.3700 1.0000 0 -42,443 10,012.200 1.0000 0 -10,015 10,012.200 1.0000 0 -10,015 1,0000 0 -10,015 -10,016 1,0000 0 -16,913 -10,016 1,0000 0 -10,115 -10,115 1,014.500 1,0000 0 -10,115 1,027.45.610 1,0000 0 -10,115 1,027.54.540 1,0000 0 -20,744 1,0000 0 -20,745 -20,744 1,0000 0 -20,572 -20,744 1,0000 0 -20,745 -20,744 1,0000 0 -20,745 -20,744 1,0000 0 -20,745 -20,744 1,0000 0 -20,745 -20,744 1,0000 0 -20,745 -20,744 1,0000 0 -20,745 -20,744 1,0000 0 -20,575 -20,575 <t< td=""><td></td><td>75,488.5500</td><td>1.0000</td><td>_</td><td>- 75,489</td><td>75,469</td><td></td></t<>		75,488.5500	1.0000	_	- 75,489	75,469	
10,075,1206 1,0000 0 -10,075 1 100,012 1 100,012 2560 1,0000 0 -10,012 1 100,012 25,913 25,912 25,913 25,912	5 B	42,643.3700	1.0000	_	-42,643	42,643	
100,012.2600 1.0000 0 -100,012 148,072.2500 1.0000 0 -158,012 19,713.2500 1.0000 0 -15,714 19,713.2760 1.0000 0 -10,115 10,114.5600 1.0000 0 -10,115 10,714.5610 1.0000 0 -10,115 10,714.5610 1.0000 0 -10,115 10,714.5610 1.0000 0 -10,115 10,714.5610 1.0000 0 -26,275 10,714.5610 1.0000 0 -26,275 10,714.5610 1.0000 0 -26,275 11,500 1.0000 0 -26,275 11,500 1.0000 0 -26,275 115,502.870 1.0000 0 -25,255 115,503.870 1.0000 0 -25,255 115,504.770 1.0000 0 -25,255 115,504.570 1.0000 0 -25,255 1100.000 0 -25,255	2	10,075.1200	1.0000	•	-10,075	10,075	
164,072,630 1,0000 0 -166,073 m 15,715,230 1,0000 0 -15,714 19,715,791 1,0000 0 -19,714 10,114,560 1,0000 0 -19,714 10,114,560 1,0000 0 -10,714 20,745,810 1,0000 0 -20,744 20,745,810 1,0000 0 -20,744 20,745,810 1,0000 0 -20,744 30,017,360 1,0000 0 -20,744 40,274,400 1,0000 0 -25,831 30,254,700 1,0000 0 -25,831 40,575,1300 1,0000 0 -25,835 40,575,1300 1,0000 0 -49,575 40,575,1300 1,0000 0 -49,575 40,575,1300 1,0000 0 -49,575 40,575,1300 1,0000 0 -49,575 40,575,1300 1,0000 0 -49,575 40,575,100 1,0000 0	ان ا	100,012.2600	1.0000	•	-100,012	100,012	
BS.912.2300 1.0000 -BS.912 B 0.6800 1.0000 -19.714 B 19.715.9700 1.0000 0 -19.714 B 10.114.5600 1.0000 0 -19.714 B 20.743.8100 1.0000 0 -20.744 B 20.745.8100 1.0000 0 -20.744 B 20.745.8100 1.0000 0 -20.745 B 20.745.8100 1.0000 0 -20.746 B 25.81.4600 1.0000 0 -26.671 B 1.2500 1.0000 0 -25.831 B 1.2500 1.0000 0 -25.831 B 1.2500 1.0000 0 -25.25 B 1.0000 0	1	148,072.6300	1.0000	•	-168,073 *	148,073	
19,713,97e0	-	55,912.2300	1.0000		6. 1919 -	55,912	
19,715.97e0	.	0.6800	1.0000	•		-	
10.114.5600 1.0000 0 -10.115 182,751.6600 1.0000 0 -20,744 20,745.8100 1.0000 0 -30,017 50,017.3600 1.0000 0 -76,671 56,670.5900 1.0000 0 -76,671 8 1.2500 1.0000 0 -25,831 96,274.5700 1.0000 0 -25,831 11.5508.8700 1.0000 0 -25,831 11.5508.8700 1.0000 0 -29,575 12.5600 1.0000 0 -29,575 12.5600 1.0000 0 -29,575 12.5600 1.0000 0 -29,575 12.5600 1.0000 0 -29,575 13.5600 1.0000 0 -29,575 15.5600 1.0000 0 -29,575 15.5600 1.0000 0 -29,575 15.5600 1.0000 0 -29,575 15.5700 0 0 -29,575 15.5700 0 0 -29,575 <t< td=""><td>-</td><td>19,715.9760</td><td>1.0000</td><td></td><td></td><td>19,714</td><td></td></t<>	-	19,715.9760	1.0000			19,714	
182,781,6400 1.0000 0 -182,752 mm 20,743,810 1.0000 0 -20,744 30,017 0 -30,017 40,274,570 1.0000 0 -94,671 55,81,4600 1.0000 0 -94,675 8 1.25,00 1.0000 0 -49,575 9 25,84,770 1.0000 0 -49,575 8 25,50 1.0000 0 -29,55 9 1.010 0 -95,475 9 1.0000 0 -95,475 9 1.0000 0 -95,40 9 1.0000 0 -95,40 9 1.0000 0 -95,40 9 1.0000 0 -95,40 9 1.0000 0 -95,40 9 1.0000 0 -95,40 9 1.0000 0 -95,40 9 1.0000 0 -95,40 9 1.0000 0 -95,40 9 1.0000 0 -95,40 9 1.0000 0 -95,40 9 1.0000 0 -95,40 9 1.0000 0 -95,40	m	10,114.5600	1.0000			10,115	
20,743.8100 1.0000 0 -20,744 30,017.3610 1.0000 0 -30,017 4,677.3610 1.0000 0 -76,671 25,631.4610 1.0000 0 -25,831 49,575.1500 1.0000 0 -25,831 49,575.1500 1.0000 0 -49,575 49,575.1500 1.0000 0 -49,575 49,575.1500 1.0000 0 -49,575 40,575.1500 1.0000 0 -59,575 40,575.1500 1.0000 0 -59,575 40,575.1500 1.0000 0 -59,575 40,575.1500 1.0000 0 -59,575 40,575.1500 1.0000 0 -55,675 40,575.1500 1.0000 0 -55,675 40,575.1500 1.0000 0 -55,675 40,575.1500 1.0000 0 -55,675 40,575.1000 1.0000 0 -55,675 40,575.1000 1.0000 <th< td=""><td></td><td>182,751.6400</td><td>1.0000</td><td></td><td></td><td>182,752</td><td></td></th<>		182,751.6400	1.0000			182,752	
\$6,017.3600 1.0000 0 -30,017 \$6,270.5900 1.0000 0 -76,671 \$6,274.670 1.0000 0 -25,831 \$1,2500 1.0000 0 -25,831 \$1,2500 1.0000 0 -15,509 = 1 \$2,284.7700 1.0000 0 -49,575 \$2,284.7700 1.0000 0 -69,575 \$2,284.7700 1.0000 0 -89,102 \$2,284.7700 1.0000 0 -89,545 \$2,284.7700 1.0000 0 -86,102 \$2,284.7700 1.0000 0 -86,102 \$2,284.7700 1.0000 0 -86,403 \$2,284.7700 1.0000 0 -86,403 \$2,284.7800 1.0000 0 -86,403 \$2,284.7800 1.0000 0 -86,403 \$2,284.7800 1.0000 0 -86,403 \$2,284.7800 1.0000 0 -86,403 \$2,284.7800 1.0000 0 </td <td>*</td> <td>20,743.8100</td> <td>1.0000</td> <td></td> <td></td> <td>20,744</td> <td></td>	*	20,743.8100	1.0000			20,744	
F (4,670.5900 1.0000 0 -76,671 F (25,674.5700 1.0000 0 -86,275 B (25,631.4600 1.0000 0 -25,631 B (25,631.4600 1.0000 0 -115,503 B (25,254.7700 1.0000 0 -115,503 1 B (25,254.7700 1.0000 0 -115,503 1 B (25,254.7700 1.0000 0 -29,255 1 B (25,254.7700 1.0000 0 -61,102 0 B (25,254.7700 1.0000 0 -59,255 255 B (25,255.2500) 1.0000 0 -56,403 -56,403 -1000 B (25,255.2500) 1.0000 0 -56,403 -1000 -56,403 B (25,250.2500) 1.0000 0 -56,403 -1000 -56,403 B (25,250.2500) 1.0000 0 -56,403 -1000 -56,403 B (25,250.2500) 1.0000 0 -56,403 -1000 -56,403 B (25,250.250	5 B	30,017.3600	1.0000	_		30,017	
96,274,576 1.0000 0 -96,275 25,81,4600 1.0000 0 -25,831 1.2500 1.0000 0 -115,509 * 1 3 1.2500 1.0000 0 -115,509 * 1 49,575,1500 1.0000 0 -29,255 1 49,575,1500 1.0000 0 -29,255 40,575,1000 1.0000 0 -81,102 40,575,8600 1.0000 0 -95,403 40,575,8600 1.0000 0 -56,240 40,575,8600 1.0000 0 -56,240 40,575,8600 1.0000 0 -56,240	-	76,670.5900	1.0000			76,671	
B 25,831,4600 1.0600 0 -25,831 B 1.2500 1.0000 0 -115,509 * 1 B 49,575,1500 1.0000 0 -45,575 B 29,254,7700 1.0000 0 -29,255 B 95,402,8400 1.0000 0 -95,403 B 56,259,5800 1.0000 0 -95,403 B 0.8700 1.0000 0 -56,240 B 0.8700 1.0000 0 -56,240	1 6	96,274.5700	1.0000			96,275	
1.2500	# 10	25,831.4600	1.0000			25,831	
115,500.870	-	1.2500	1.0000	_		-	
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B 95,402,660 1.000 0 -95,403 B 56,239,580 1.000 0 -56,240 B 0.870 1.060 0 -1	~	81,101.8900	1.0000	•	-81,102	81,102	
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	15 3	0.8700	1.0800		-	_	

REPORTABLE TRANSACTIONS HONISHEET

1/1/15 THROUGH 12/31/15

PAGE 139

RATISTAD EMPLOYEES NATIONAL FSA

		The contract of	PILITAL CASH	ENTERN COST	GAINALOSS
2,246.0700 2,246.0700 2,246.0700 44,755.4000 1,72,490.5200 1,72,490.5200 1,72,490.5200 1,72,490.5200 1,72,490.5200 1,74,790.700 1,74,790.700 1,74,790.700 1,74,710.700 1,74,710.7000 1,74,7	1.000		4 318 8 14	120 021	
2,285.6789 95,875.9100 65,785.6789 66,785.6789 172,690.8289 172,690.8289 172,690.8289 173,630.8289 173,630.8289 173,630.8289 173,630.8289 173,630.8289 173,630.8289 173,630.8289 173,630.8289 173,630.8289 173,630.8289 173,630.8289 173,630.8389 173,630.8389 173,630.8389 173,630.8389 173,630.8389 173,630.8389 173,630.8389 173,630.8389 173,630.8389 173,630.8389 173,630.8389 173,630.8389 173,630.8389 173,630.8389 173,630.8389 173,630.8389 173,630.8389 173,630.8389 173,630.8389	9000			+T0'021	
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## 95, 373, 9100 ## 64, 735, 9100 ## 6, 245, 0940 ## 75, 410, 1720 ## 75, 410, 1720 ## 75, 420, 420 ## 75, 420 ## 75, 420, 420 ## 75, 420, 420 ## 75, 420, 420 ## 75, 420 ## 75, 420, 420 ## 75, 420, 420 ## 75, 420, 420 ## 75, 420, 420 ## 75, 420, 420 ## 75, 420, 420 ## 75, 420, 420 ## 75, 4	1.0000	•	728-86-	25.25	
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## 172,490.9508 ## 75,410.1709 ## 75,410.1709 ## 75,400.1709 ## 75,400.4200 ## 75,400.4200 ## 75,400.4200 ## 75,400.4200 ## 76,275.7000 ## 76	1.000	•	696 Y	V (
75,41e.170e 277,951.970e 277,951.970e 277,951.970e 277,459.800e 277,459.800e 277,459.800e 277,459.800e 277,557.900e	1.0000	•		750'0	
222,794,920 3,244,920 3,244,520 11,344,250 121,439,890 121,439,890 121,439,890 121,439,890 111,536,800 111,536,700 111,536,700 111,800 111,836,700 111,8	1.8600	•	# 1404244	168,571	
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## 48.789.8000 ## 121,439.2900 ## 121,439.2900 ## 121,439.2900 ## 121,439.2900 ## 111,1354.7600 ## 120,3401.7900 ## 120,3401.7900 ## 120,3401.7900 ## 120,3401.7900 ## 120,3401.7900 ## 120,3401.7900 ## 120,3401.7900 ## 120,3401.7900 ## 120,3401.7900 ## 120,3401.7900 ## 120,3401.7900 ## 120,3401.7900 ## 120,3401.7900 ## 120,3401.7900 ## 120,3401.7900 ## 130,4401.7900 ## 140,4401.	1.0000			661133	
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75,656.8500 1			70% - C)	
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## 76.275.7000 1 1 1556.7000 1 1 1556.7000 1 1 1556.7000 1 1 1556.7000 1 1 1556.7000 1 1 1566.7000 1 1 1 1566.7000 1 1 1 1 1 1 1 1 1	1.0000			121, 121	
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1	0900	•		9/2/9/	
120, 240, 1006 120, 240, 1006 12, 240, 2606 13, 244, 1400 13, 244, 1400 14, 273, 4100 15, 244, 1400 17, 511, 1500 17, 511, 1500 18, 242, 6400 18, 2442, 6400 18, 2442, 6400 18, 2442, 6400 18, 2442, 6400 18, 2442, 6400 18, 2442, 6400 19, 2442, 6400 10, 2442, 6400 11, 22, 237, 7500 11, 22, 237, 237, 237, 237, 237, 237, 237,	1.0000		# 1960 FTT	168,111	
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## 49,700.8000 ## 16,873.2600 ## 15,044.1400 ## 15,044.1400 ## 107,718.1200 ## 107,718.1200 ## 107,718.1200 ## 107,718.1200 ## 107,718.1200 ## 107,718.1200 ## 107,718.1200 ## 107,718.1200 ## 107,718.1200 ## 107,517.1500 ## 107,517.1500 ## 107,527.7500 ## 107,527.7500	1.0000	•	4 647-051-	44	
## 16,873.2609 ## 15,844.1409 ## 15,844.1409 ## 4,976.9409 ## 4,976.9409 ## 107,778.1209 ## 107,778.1209 ## 107,778.1209 ## 107,778.1209 ## 107,778.1209 ## 107,778.1209 ## 107,842.8709 ## 12,827.7509 ## 12,827.7509 ## 12,827.7509 ## 12,827.7509	1.000	•			
## 65,647.950# 13.044.140#	1.000		-16.973	MARK VI	
13,044,1400 13,044,1400 13,044,1400 14,974,9000 15,974,1200 17,974,1200 17,974,1200 17,974,1200 18,974,1200 18,974,1200 18,974,1200 18,974,1200 18,974,1200 18,974,1200 19,974	1.0000	•	240.89-		
# 4,976,900 # 4,976,900 # 107,718,1200 # 107,718,1200 # 17,817,0300 # 12,900 # 12,900 # 12,900 # 12,900 # 12,237,1600 # 12,237,1900 # 12,237,7900 # 103,690,5200 # 103,690,5200	1.000	•	440.81.	18.046	
### ### ##############################	1.800	٠	-96,733	96.738	
10 10 10 10 10 10 10 10 10 10 10 10 10 1	1.000	•	-4.977	4.977	
### 50,605.7400 #### 77,517.0500 #### 77,517.0500 #### 77,517.0500 #### 77,517.1600 #### 7,517.1600 ##### 112,237.7900 ###################################	1.0004	•	-167,718 *	107.718	
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12.9000 13.462.6600 14.67.450 15.757.1600 112.637.7900 103,690.5200 105,690.5200 105,690.5200	7.000	•	713.77-	77. KIZ	
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79.075.4500 8 67.842.8700 9 12.2517.1600 112.2517.7900 105.690.5200 105.690.5200 105.690.5200 105.899.8500	1.000	•	-83.663	27 24	
## 67,542.5708 ## 112,257.1608 ## 6,256.9608 ## 6,626.8608 ## 103,690.5208 ## 165,589.8508	1.0000	•	270,07-	270.67	
97,517.1600 112,237.7900 103,690.5200 103,690.5200 163,590.6500	1.000	•	-67.543	198-19	
112,237.7900 103,626.8600 103,690.5200 103,590.6500 163,589.6500	1.000	•	718,76-	97.517	
5, 626, 8600 103, 690, 5200 103, 690, 5200 163, 580	1.000	•	-112,238 *	112.28	
103,690,5208 103,690,5208 163,530 163,530	1.0000	•	-4.627	7.77	
206.550	1.0000	•	-103,691	107.101	
164,089,6500	1.0000	•	-207	207	
	1.0000	•	+ 065.591-	147. Z.A.	
0000.750.00	1.0000	•	-80,648	899.08	
12/11/15 5 1.000	1.800	•	-11,976	11.976	

REPORTABLE TRANSACTIONS NORKSHEET

1/1/15 THROUGH 12/31/15

BAILBOAD EMPLOYEES NATIONAL FSA

1,710,7200 1,000 0	11,709.7200 1.0000 1.0000 1.02,727 1.02,727 1.0000	DATE BOUGHT/SOLD	SHARES PAR VALUE	LAGT	EXPENSE	PRINCIPAL CASH	ERISA COST	ERISA COST GAIN/LOSS
\$1 25.152.7000 1,00	\$ 52.127 5400	12/14/15 1	1,709.7500	1.6000			1,710	
\$ 9.27.300 1000 -2.47 2.	Sub-Total of Buys	12/18/15 1	52,126.7000	1.0000		1	52,127	
17.467.200 1.000 -1.524 -2.47	\$\begin{array}{cccccccccccccccccccccccccccccccccccc	12/21/15 1	98,272.9400	1.0000			98,273	
175,250,1000 1,0000 -75,250 1,5000 -	\$\text{5.55}\$\text{5.200}\$\tag{5.52}\$5.	12/22/15 \$	2,497.5080	1.0000			2,497	
1.75.654, 2000 1.0000 -175.652 155.251 1.75.654, 2000 1.0000 -175.652 155.251 1.75.654, 2000 1.0000 -175.654 155.251 1.75.654, 2000 1.0000 -6.317 -6.317 2.75.75, 2000 1.0000 -6.317 -6.317 2.75.75, 2000 1.0000 -6.777 -6.317 2.75.75, 2000 1.0000 -6.777 -6.317 2.75.75, 2000 1.0000 -6.777 -6.777 2.75.75, 2000 1.0000 -6.777 -6.777 2.75.75, 2000 1.0000 -6.777 -6.777 2.75.75, 2000 1.0000 -6.777 -6.777 2.75.75, 2000 1.0000 -6.777 -6.777 2.75.75, 2000 1.0000 -6.777 -6.777 2.75.75, 2000 1.0000 -6.777 -6.777 2.75.75, 2000 1.0000 -6.777 -6.777 2.75.75, 2000 1.0000 -6.777 -6.777 2.75.75, 2000 1.0000 -6.	## 175.550.0000 1.0000 0 1.75,654 177,654 177,655 177,	12/24/15 3	0,295.0100	1.6086			8,293	
17, 654, 2500 1,000 0 1,15, 654 17	\$\text{Sub-fort.2500} \text{Light.} \text{Sub-fort.0f Buys} \text{big} \text{Light.} \text{Sub-fort.0f Buys} \text{light.} \tex	12/28/15 1	75,250.8000	1.0000			75,251	
\$\text{c}\$\t	Sub-Toral DF Buys 6 101 5	12/29/15 1	173,654.2300	1.6000		-173,654		
5 6,916.530 1,000 6,917 6,917 6,917 6,917 6,917 6,917 6,917 6,917 1,5416 2,5416 1,5416 2,5416 2,5416 2,5417	5 6,916.5500 1.0000 0 6,917 10,416	T-408	BUYS #		P P P P P P P P P P P P P P P P P P P	•	•	
\$ 11,415,460 1,600 1,600 16,416 4,416 4,416 16,416 4,416	14,415,440		0089.916.9	1.6000		716.9	6,917	•
g (40,1918, G770 1,0000 (40,195 (40,196 <t< td=""><td>8 15,912.670 1,000 1,0919 1,6919 1,6919 1,6919 1,6919 1,6919 1,6919 1,691 64.372.470 1,600 1,600 1,600 1,6919 1,6919 64.372.470</td><td></td><td>14.415.6400</td><td>1.6000</td><td></td><td></td><td>14,416</td><td>•</td></t<>	8 15,912.670 1,000 1,0919 1,6919 1,6919 1,6919 1,6919 1,6919 1,6919 1,691 64.372.470 1,600 1,600 1,600 1,6919 1,6919 64.372.470		14.415.6400	1.6000			14,416	•
\$ 46.372.100 1.0000 0 46.372 46.372 \$ 50.55.100 1.0000 0 46.372 46.372 \$ 50.55.100 1.0000 0 29.150 77.429 \$ 62.517.000 1.0000 0 45.377 45.377 \$ 62.517.000 1.0000 0 45.377 45.377 \$ 62.517.000 1.0000 0 45.377 45.377 \$ 62.517.000 1.0000 0 107.396 107.396 \$ 107.399.2100 1.0000 0 107.396 107.396 \$ 100.390.2200 1.0000 0 107.396 107.396 \$ 100.400 1.0000 0 107.396 107.396 \$ 100.400 1.0000 0 107.396 107.396 \$ 100.400 1.0000 0 107.396 107.396 \$ 100.400 1.0000 0 107.396 107.396 \$ 100.400 1.0000 0 107.467 107.467 \$ 100.400 1.0000 0	\$ 44.155.100 1.0000 0 44.527 46.537		18,916.6700	1.000			18,919	•
\$ \$45,72	\$ \$6.372.4100 1.0000 6.572 66.372 66.372 66.372 66.372 66.372 66.372 66.372 66.372 66.372 67.72		48,155,1900	1.6080			68,155	•
\$ 22,150,2700 1,0000 0 29,150 29,150 \$ 77,428,6400 1,0000 0 77,429 77,429 \$ 62,517,9200 1,0000 0 62,517 62,517 \$ 62,517,0400 1,0000 0 62,517 62,517 \$ 62,517,0400 1,0000 0 115,400 107,954 \$ 110,529,9100 1,0000 0 115,400 115,400 \$ 110,529,9100 1,0000 0 115,400 115,400 \$ 110,100.1200 1,0000 0 115,400 115,400 \$ 10,100.1200 1,0000 0 115,400 115,400 \$ 10,100.1200 1,0000 0 115,400 115,400 \$ 10,100.1200 1,0000 0 115,400 115,400 \$ 10,100.1200 1,0000 0 115,400 115,400 \$ 10,100.1200 1,0000 0 115,400	\$ \$		46,372.4100	1.0000		0 46,572	46,372	•
\$ 29,150 1,0000 0 77,429 77,429 \$ 77,422,640 1,0000 0 77,429 45,779 \$ 62,517,220 1,0000 0 62,517 45,779 \$ 107,954,340 1,0000 0 107,954 107,954 \$ 107,954,340 1,0000 0 107,954 107,954 \$ 107,954,340 1,0000 0 107,954 107,954 \$ 107,954,340 1,0000 0 107,954 107,954 \$ 107,954,440 1,0000 0 107,954 107,950 \$ 107,954,440 1,0000 0 107,954 107,950 \$ 107,954,440 1,0000 0 107,950 107,950 \$ 107,954,440 1,0000 0 107,950 107,950 \$ 107,954,440 1,0000 0 107,950 107,970 \$ 107,954,440 1,0000 0 107,950 107,970 \$ 107,954,440 1,0000 0 107,950 107,950 \$ 107,950 1,0000<	\$ \$	\$ 51/60/10	408.5900	1.0000		604	409	0
S 77.428.6400 1.0000 0 45.779 45.779 S 1.77.428.6400 1.0000 0 45.779 45.779 S 1.0000 0 1.0000 0 1.07.994 1.07.994 S 1.000 1.0000 0 1.07.994 1.07.994 1.07.994 S 1.000 1.0000 0 1.07.94 1.07.994 1.07.994 S 1.000 1.0000 0 1.07.94 1.07.94 1.07.94 S 1.000 1.0000 0 1.07.94 1.07.94 1.07.94 S 1.000 1.0000 0	S 77.428.8400 1.0000 0 77.429 77.5 S 45.712.9200 1.0000 0 45.712.9 42.5 S 107.84.3400 1.0000 0 45.712.9 42.5 S 105.4400 1.0000 0 105.400 1105.5 S 105.4400 1.0000 0 115.400 1115.5 S 105.454.400 1.0000 0 115.400 1115.5 S 105.456.200 1.0000 0 115.40 1115.5 S 105.456.200 1.0000 0 115.40 115.5 S 59.41.4900 1.0000 0 77.963 77.7 S 59.456.7600 1.0000 0 77.766 95.961 18.5 S 144.464.1400 1.0000 0 144.864.4 17.5 17.5 S 144.464.1400 1.0000 0 144.864.4 1.0000 1.0000 1.0000 1.0000 1.0000 1.0000 <td>-</td> <td>29,150.0700</td> <td>•</td> <td></td> <td></td> <td>29,150</td> <td>0</td>	-	29,150.0700	•			29,150	0
8 65,772 65,779 65,779 65,779 8 65,717.0400 1,0000 0 62,517 62,517 8 107,954.3400 1,0000 0 107,954 1,07,954 1,07,954 8 107,954.3400 1,0000 0 107,954 1,07,954 1,07,954 8 100,954.3400 1,0000 0 107,954 1,07,954 1,07,954 8 100,954.3400 1,0000 0 1,07,954 1,07,954 1,07,954 9 100,954.400 1,0000 0 1,07,954 1,07,954 1,07,954 9 100,954.400 1,0000 0 1,04,444 1,07,954 1,07,954 9 100,954.700 1,0000 0 77,965 77,965 1,04,444 1,04,444 1,04,444 1,04,144 1,04,444 1,04,444 1,04,444 1,04,444 1,04,444 1,04,444 1,04,444 1,04,144 1,04,444 1,04,144 1,04,144 1,04,144 1,04,144 1,04,144	S 45,779		77,428.8400	•			77,429	•
\$ 107,954.5400 1,0000 0 107,954.1 62,517 </td <td>S GZ.517 GZ.527 GZ.527 S LOT, 954. 3400 1.0000 0 107,954 # 107,954 # S BB, 054. 3400 1.0000 0 115,400 # 115,400 # S 100.120 1.0000 0 115,400 # 115,400 # S 100.1200 1.0000 0 100.130 100.130 S 1546.6200 1.0000 0 1547 81.154 S 59,961.4500 1.0000 0 100.150 100.150 S 77,962.7600 1.0000 0 77,963 77.7 S 74,716 74,716 74,716 74,716 74,716 S 74,716 1.0000 0 74,716</td> <td></td> <td>45,778.9200</td> <td>1.000</td> <td></td> <td></td> <td>45,779</td> <td>0</td>	S GZ.517 GZ.527 GZ.527 S LOT, 954. 3400 1.0000 0 107,954 # 107,954 # S BB, 054. 3400 1.0000 0 115,400 # 115,400 # S 100.120 1.0000 0 115,400 # 115,400 # S 100.1200 1.0000 0 100.130 100.130 S 1546.6200 1.0000 0 1547 81.154 S 59,961.4500 1.0000 0 100.150 100.150 S 77,962.7600 1.0000 0 77,963 77.7 S 74,716 74,716 74,716 74,716 74,716 S 74,716 1.0000 0 74,716		45,778.9200	1.000			45,779	0
S 115,490 1 107,954 1 107,954 S 115,400 1 107,954 1 107,954 S 10,150 10,100 0 107,954 S 10,154 10,100 0 10,190 10,190 S 10,156 10,000 0 10,190 10,190 10,190 S 154 620 1,000 0 95,961 95,961 95,961 S 77,962 1,000 0 77,962 77,962 77,962 S 77,962 1,000 0 77,962 77,962 77,962 S 74,715 77,962 77,962 77,962 77,962 77,962 S 74,715 1,000 0 77,964 1,64,964 4,716 S 74,715 1,000 0 1,64,964 4,716 77,16 S 74,715 1,000 0 1,72,23 77,16 77,16 S 166,724 1,000 0	S 115,795.41 1.0000 0 115,795.41 107.95.41 1107.95.41 1107.95.41 1107.95.41 1107.95.41 1107.95.41 1107.85.81 1107.85.81 11	01/21/15 \$	62,517.0400	0000 . 1		715'29	718729	0
S BLOSA 4400 1,0000 0 112,400 1,12,400 </td <td>S 115,597,200 1.0000 0 1.15,900 1.15,900 S 100,190,1200 1.0000 0 100,190 1.15,900 S 1546,8200 1.0000 0 95,941 95,150 S 95,972,6300 1.0000 0 95,961 95,170 S 77,962,7600 1.0000 0 77,963 77,756 S 76,716,2400 1.0000 0 77,963 77,756 S 76,716,2400 1.0000 0 76,716 76,716 76,716 S 152,662,2600 1.0000 0 1.22,864 1.15,964</td> <td>-</td> <td>107,954.3400</td> <td>1.0000</td> <td></td> <td>486' 101</td> <td>107,954</td> <td></td>	S 115,597,200 1.0000 0 1.15,900 1.15,900 S 100,190,1200 1.0000 0 100,190 1.15,900 S 1546,8200 1.0000 0 95,941 95,150 S 95,972,6300 1.0000 0 95,961 95,170 S 77,962,7600 1.0000 0 77,963 77,756 S 76,716,2400 1.0000 0 77,963 77,756 S 76,716,2400 1.0000 0 76,716 76,716 76,716 S 152,662,2600 1.0000 0 1.22,864 1.15,964	-	107,954.3400	1.0000		486' 101	107,954	
5 100,190,1200 1,000 0 10,190,190 100,	8 100,190,1200 1,0000 0 100,190 8 1,546,2200 1,0000 0 1,547 1,000 8 1,546,2400 1,0000 0 1,546 1,547 1,000 8 1,546,2400 1,0000 0 77,943 77,745 1,446 1,456		115,599.9100			110,440	DOP'STI	5 •
\$ 1,546,820 1.0000 0 81,547 81,547 \$ 5,961 1.0000 0 59,961 95,961 \$ 59,971,4900 1.0000 0 59,961 95,961 \$ 50,766 1.0000 0 77,963 77,963 \$ 14,420 1.0000 0 77,963 77,963 \$ 14,420 1.0000 0 74,716 50,076 \$ 50,076 1.0000 0 74,716 77,76 \$ 52,160 1.0000 0 74,716 74,716 \$ 52,160 1.0000 0 74,716 74,716 \$ 52,260 1.0000 0 75,323 77,323 \$ 126,524 1.0000 0 77,384 77,384 \$ 126,525,940 1.0000 0 77,384 77,384 \$ 126,527,940 1.0000 0 77,384 77,384 \$ 126,527,940 1.0000 0 77,384 77,384 \$ 126,527,940 1.0000 0 77,384 <th< td=""><td>\$ 5,961,600 1,000 0 95,961 95,962 95,961 95,962<!--</td--><td>01/67/13 3</td><td></td><td></td><td></td><td></td><td>1901</td><td>, 6</td></td></th<>	\$ 5,961,600 1,000 0 95,961 95,962 95,961 95,962 </td <td>01/67/13 3</td> <td></td> <td></td> <td></td> <td></td> <td>1901</td> <td>, 6</td>	01/67/13 3					1901	, 6
\$ 5,961,4900 1.0000 0 95,961	\$ 95,961.4900 1.0000 0 95,961 95,96	02/03/15 \$	81,546.8200	1.0000			81,547	•
S S	S S9,979.4300 1.0000 0 59,960 59,960 59,960 57,963 77,963 77,963 77,963 77,963 77,963 77,963 77,963 77,963 77,963 77,963 77,963 77,963 77,963 77,963 77,964 80,076	02/04/15 \$	93,961.4900	1.0000			93,961	•
\$ \$	\$ \$	02/05/15 \$	59,979.6300	1.0090			59,980	•
\$ \$	\$ \$	02/06/15 \$	77,962.7600	1.0080			77,963	•
\$ \$	\$ 144,844.1400 1.0000 0 144,844 ** <th< td=""><td>02/09/15 \$</td><td>429.5500</td><td>1.0000</td><td></td><td></td><td>429</td><td>•</td></th<>	02/09/15 \$	429.5500	1.0000			429	•
\$6,076,2860 \$6,076 \$6,076 \$6,076 \$6,076 \$6,076 \$6,076 \$6,076 \$6,076 \$6,076 \$6,076 \$6,076 \$6,076 \$6,076 \$6,716 \$6,716 \$6,716 \$6,716 \$6,716 \$6,716 \$6,16 <	\$6,076.2860 1.0000 90,076.2860 1.0000 94,716 74,716 <	\$ 51/11/20	144,844.1400	1.0000		-	144,844	•
\$2,169,5800 1,0000 94,716 74,716 \$2,169,5800 1,0000 0 75,169 52,169 \$2,169,5800 1,0000 0 73,323 73,323 \$2,525,6400 1,0000 0 72,524 89,245 \$2,546,5900 1,0000 0 77,384 77,384 \$7,586,6200 1,0000 0 77,384 77,384 \$7,586,6200 1,0000 0 77,384 77,384 \$131,567,2500 1,0000 0 134,858 134,557 \$134,567,2500 1,0000 0 66,915 66,915 \$15,567,2500 1,0000 0 66,915 66,915 \$26,57,7500 1,0000 0 66,915 66,915 \$25,920,2500 1,0000 0 66,915 66,915 \$26,916,73 0 66,916 66,916 66,916 \$289,0800 1,0000 0 66,916 66,916 \$289,0800 1,0000 0 66,916 <	\$2,162.8500 1.0000 74,715.850 74,715.850 74,715.850 74,715.850 74,715.851 74,715.851 74,715.851 74,715.851 74,715.851 74,715.851 74,715.851 74,715.851 74,715.851 74,715.851 77,584 77,584 77,584 77,584 77,584 77,784	02/12/15 \$	50,074.2860	1.0000			50,076	•
\$2,168,5600 1,6000 0 52,169 52,169 \$2,168,5600 1,0000 0 132,861 135,861 \$1,52,864 1,0000 0 73,323 73,323 \$1,54,550,5400 1,0000 0 126,524 126,524 \$2,244,5900 1,0000 0 77,384 77,384 \$2,544,5900 1,0000 0 77,384 77,384 \$2,54,5200 1,0000 0 151,367 131,367 \$2,54,5200 1,0000 0 134,858 134,858 \$2,500 1,0000 0 66,915 66,915 \$2,500 1,0000 0 66,915 66,915 \$2,920,57,1500 1,0000 0 66,915 66,915 \$2,920,2300 1,0000 0 66,915 66,915 \$2,920,2300 1,0000 0 66,915 66,915 \$2,920,2300 1,0000 0 66,915 66,915 \$2,920,6300 1,0000 0 66,91	\$2,162,560 1,8880 0 52,169 52,123 </td <td>02/13/15 \$</td> <td>74,715.8500</td> <td>1.0660</td> <td></td> <td></td> <td>74,716</td> <td>•</td>	02/13/15 \$	74,715.8500	1.0660			74,716	•
\$ 132,861,7100 1,0000 1,0000 132,861,723 132,861 \$ 73,323,4400 1,0000 0 73,223 73,223 73,223 \$ 72,324,4400 1,0000 0 124,524 124,524 124,524 \$ 89,245,500 1,0000 0 77,384 77,384 77,384 \$ 131,367,2500 1,0000 0 131,367 131,367 131,367 \$ 134,367,2500 1,0000 0 134,856 134,858 134,858 \$ 134,367,2500 1,0000 0 66,913 66,913 66,913 \$ 56,917,7400 1,0000 0 66,913 66,913 66,913 \$ 55,920 1,0000 0 66,913 66,913 66,913 \$ 55,920 1,0000 0 56,924 66,913 66,913 \$ 289,683 1,0000 0 66,913 66,913 66,913 \$ 289,680 1,0000 0 66,913 66,913 66,913 \$ 289,680 1,0000 0	\$ \$	02/17/15 \$	52,168.5800	1.6080			52,169	•
\$\frac{75}{525}\frac{4600}{6600} \$1.525 \$75,525 \$75,525 \$75,525 \$\frac{126}{525}\frac{526}{6600} \$\frac{1000}{10000} \$\frac{126}{526}\frac{7}{7}\frac{526}{366} \$\frac{126}{526}\frac{526}{7}\frac{7}{326} \$\frac{126}{526}\frac{526}{7}\frac{7}{326} \$\frac{126}{526}\frac{526}{7}\frac{7}{326} \$\frac{126}{526}\frac{526}{7}\frac{7}{326} \$\frac{156}{526}\frac{526}{7}\frac{7}{326} \$\frac{156}{526}\frac{526}{7}\frac{7}{326} \$\frac{156}{526}\frac{526}{7}\frac{7}{326} \$\frac{156}{56}\frac{526}{7}\frac{7}{326} \$\frac{156}{526}\frac{526}{7}\frac{7}{326} \$\frac{156}{56}\frac{526}{7}\frac{7}{326} \$\frac{156}{56}\frac{526}{7}\frac{7}{326} \$\frac{156}{56}\frac{526}{5}\frac{7}{326} \$\frac{156}{56}\frac{526}{7}\frac{7}{326} \$\frac{156}{56}\frac{526}{7}\frac{526}{5}52	\$\text{5.22.5.4600} \$\text{1.0000} \$\text{7.52.5.5} \$\text{7.52.5.5} \$\text{7.52.5.5} \$\text{7.52.5.5.5} \$\text{7.52.5.5.5} \$\text{7.52.5.5.5.5} \$\text{7.52.5.5.5.5.5.5} \$7.52.5.5.5.5.5.5.5.5.5.5.5.5.5.5.5.5.5.5	02/18/15 \$	132,860.7100	1.0000		132.861	132,861	•
\$ 126,524 \$ 126,524 <t< td=""><td>\$ \$</td><td>02/20/15 \$</td><td>73,323.4400</td><td>1.0000</td><td></td><td></td><td>73,525</td><td>•</td></t<>	\$ \$	02/20/15 \$	73,323.4400	1.0000			73,525	•
\$9,244.590 1.0000 0 77,384 77,384 77,384 \$7,584.420 1.0000 0 77,384 77,384 77,384 \$131,347.250 1.0000 0 151,347 151,347 \$15,567.250 1.0000 0 154,858 + 154,858 154,858 \$46,914.740 1.0000 0 66,915 66,915 \$5,920.250 1.0000 0 55,920 55,920 \$289.0800 1.0000 0 107,870 \$107,869.8400 1.0000 0 107,870	\$ 9,244.5900 1.0000 0 89,245 89,245 \$ 77,584.4200 1.0000 0 77,584 78,575 78,520 78,575 78,589 <td>02/25/15 \$</td> <td>126,525.9400</td> <td>1.0000</td> <td></td> <td></td> <td>126,524</td> <td>•</td>	02/25/15 \$	126,525.9400	1.0000			126,524	•
\$ 77,584,4200 \$ 17,584 \$ 77,584 \$ 77,584 \$ 131,547,2500 \$ 1,6000 \$ 154,658 * \$ 131,547 \$ 134,658.5200 \$ 1,6000 \$ 154,658 * \$ 154,658 \$ 46,914.7500 \$ 1,0000 \$ 66,915 \$ 66,915 \$ 55,920,2300 \$ 1,0000 \$ 66,915 \$ 55,920 \$ 289,0800 \$ 1,0000 \$ 289 \$ 289 \$ 107,869.8400 \$ 1,0000 \$ 107,870 \$ 107,870	\$ 77,584,4200 1.0000 0 77,584 78,784		89,244.5900	1.0000			89,245	٥
\$ 131,367 * 131,367 * 131,367 * 131,367 * 131,367 * 131,367 * 131,367 * 131,367 * 131,367 * 134,858 * 134,	\$ 131,367,2500 1.6000 0 131,367 * 131, 55	02/27/15 \$	77,584.4200	1.0000			77,384	•
\$ 134,858.3200 1.8000 0 134,858	S 134,854.526 1.8800 0 134,856 ** 1.34,856 **	03/02/15 \$	151,567.2500	1.6000			131,367	•
\$ 99,673.1500 1.0000 6 99,673 99,673 \$ 66,914.7400 1.0000 0 66,915 66,915 \$ 55,920.2500 1.0000 0 55,920 55,920 \$ 289.0800 1.0000 0 10000 289 \$ 107,869.8600 1.0000 0 107,876 # 107,870	\$ 99,673.1500 1.0000 0 99,673 99, \$ 66,914.7400 1.0000 0 66,915 66, \$ 55,920.2500 1.0000 0 55,920 55,920 \$ 289.0800 1.0000 0 107,879 H 107, \$ 28,759.8000 1.0000 0 28,760 28,	03/03/15 S	134,858.5200	1.8000			194,458	•
\$ 66,914,7400 1.0000 0 66,915 66,915 \$ 55,920,2500 1.0000 0 55,920 55,920 \$ 289,0800 1.8000 0 289 289 \$ 107,869,8400 1.0000 0 107,870 # 107,870	\$ 66,914.7400 1.0000 0 66,915 66, \$ 55,920.2500 1.0000 0 55,920 55, \$ 289.0800 1.0000 0 107,879 H 107, \$ 28,759.8000 1.0000 0 28,769 28,	03/04/15 \$	99,673,1500	1.0000			819'66	•
\$ 55,920.2500 1.0000 0 55,920 55,920 55,920 \$ 5,920 \$ 5,920 \$ 5,920 \$ 5,920 \$ 5,920 \$ 5,920 \$ 5,920 \$ 5,920 \$ 1.0000 0 1.0000 0 1.07,870 # 107,870	\$ 55,920.2500 1.0000 0 55,920 55, \$ 289.0500 1.0000 0 289 \$ 107,869.8600 1.0000 0 107,878 H 107, \$ 28,759.8000 1.0000 0 28,760 28,	03/05/15 \$	66,914.7400	1.0000			66,915	•
\$ 289.0800 1.8006 0 289 249 \$ 107,869.860 1.0000 0 107,870 n	\$ 289.0500 1.8006 0 289 \$ 107,869.8400 1.0009 0 107,878 H 107, \$ 28,759.8000 1.0000 0 28,769 28,	03/06/15 \$	55,920.2300	1.0003			55,920	•
\$ 107,869.8400 1.0000 0 107,876 # 107,870	\$ 107,849.8400 1.0000 0 107,878 p. \$ 28,759.8000 1.0000 0 28,748	03/09/15 \$	289.6800	1.0000			586	0
	\$ 28,759.8000 1.0006 0 28,769	03/11/15 \$	107,869.8400	1.0000		107.878	107,870	•



1/1/15 THROUGH 12/31/15

RAILMOND (

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BOLONT/SOLD	PAR VALUE	PRICE	INCURRED	PRINCIPAL CASH	ERISA COST	ERISA COST GAIN/LOSS
82/13/15 \$	63,160.9200	1.0000		191.29	171.83	
03/16/15 S	98,151,1500	1.000		181,180		
03/17/15 \$	75,652.5700	1.000		75,652	75.452	
03/18/15 \$	77,372.4000	1.0000		77,572	77.372	•
03/25/15 \$	83,999.450#	1.0000		92,999	668 W	
03/26/15 S	75,520.2100	1.0000		75,520	78.87	
63/27/15 \$	82,725.0500	1.0000		82,725	82,725	• •
03/30/15 \$	69,442.7200	1.0000		0 69,443	69,443	
05/31/15 S	106,368.9400	1.0000		106,369 +	106,369	
04/01/15 \$	10,088.9500	1.000		10,086	10.01	
04/02/15 S	11,485.4300	1.0000		11,485	11.485	
	21,349.8900	1.0000		21,390	21.590	
	104.5500	1.000		105	101	
	27,375.1200	1.0000	_	27,375	27.575	
	57,835,7500	1.0000	-	57,836	30.4.72	
04/15/15 \$	59,954,8960	1.000		59,954	486,68	•
	54,177.4880	1.0000	-	54,177	54.177	
	32,728.0080	1.0000		32,728	32,728	
	65,652.9800	1.000		65,633	65,633	
	44,296.5400	1.0600		14,297	44,297	
	52,517.7060		_	52,518	52,518	
\$ 61/62/6	75,055,7260	7.800	-	76,054	78,054	
S 61/00/5	996-527/6	7.000		57,285	57,285	•
S 61/10/6/		7 · 0000		14,470	14,470	•
	996/-996/91	7.000		18,939	18,959	•
2 CT/21/CI	0056-71	0000°		=	•1	
6 61/11/6	925.0/8/25	7.0000	•	52.874	32.874	•
5/16/15 5	10/1/11:08	1.0000		13,771	13,771	•
5/14/18 S	DD+0.768.76	7.000		57,882	37,432	•
15/20/15 c				299'51	14,462	
-	AND AND THE COURSE			B15'69	49.518	•
	0016: 1:00 AA			906,82	28,905	•
85/27/15 6	44.41.116.04			215'96	46,512	•
	22.355.388			21.712	64,712	•
2 51/10/98	41.520.488			666,25	557 22	•
06/02/15 5	127. 456. VA			41,529	41,529	•
A 1/20/70	C2 417 8888				956'22	•
-	7.989.2780		•	25,518	52,618	
\$ \$1/80/90	11 010 B	0000		NO. 1	6961/	
8 \$1/80/98	51,249,5100	1.0000	•	F. 12	19	
06/10/15 \$	46.675.9000	1.0000			V45.16	
06/11/15 \$	27,959.6588	1.0000			0/0/07	
06/12/15 \$	15,337.5400	1.0000		15.33	ARK ME	
06/15/15 \$	23,608.6700	1.6080		23.488	##7161	



1/1/15 THROUGH 12/31/15

RAILBOAD EMPLOYEES NATIONAL FSA

DATE BOUGHT/50LD	SHAPES PAR VALLE	UNET	EXPENSE	PRINCIPAL CASH	ERISA COST	ERISA COST GAIN/LOSS
	477 46	-		077 86	897 8C	
0 61/41/00	2000.014.02				21.046	•
0 E1/27/00						
	29.220.7900	1.000			29,221	•
	31,430.6700	1.0000	•	31,451	51,431	•
5 51/05/90	50,728,9400	1.000	•	50,729	50,729	•
07/01/15 \$	40,182.9700	1.0000	•	40,183	40,183	•
07/06/15 5	61,548.8280	1.0000	•	61,549	61,549	•
07/08/15 \$	25.4700	1.0000		23	23	•
07/08/15 \$	52,884.9700	1.0400		32,885	32,845	•
07/09/15 \$	11,240.5400	1.000	•	11,241	11,241	•
07/10/15 \$	23,191,1400	1.0000		25,191	23,191	•
	7,197.1100	1.0000	•	7,197	7,197	0
	30,626.5788	1.000		50,021	20,021	0
	24,475.6200	J. 000		52	24,476	•
07/21/15 \$	17,437.0000	1.000	_		17,437	•
07/23/15 S	16,989.9200	1.0000	•	2	16,990	•
07/27/15 \$	17,696.7200	1.0000	•	17,697	17,697	•
07/29/15 \$	37,461.4600	1.000		37,461	37,461	•
07/30/15 \$	21,528.7400	1.0000	_	21,529	21,529	•
07/31/15 \$	61,925.4000	1.0800	_	0 61,925	61,925	•
04/03/15 \$	18,410.6900	1.0000	•	18,411	119,411	•
08/04/15 \$	26,495.4380	1.000	_	0 26,495	26,495	•
08/05/15 \$	26,119.5000	1.0000	•	26,119	26,119	•
08/06/15 \$	5,397.2500	1.0000	•	2,397	5,397	•
\$ \$1/01/80	48.6500	1.0000	_		\$	•
04/11/15 \$	18,605.8100	1.0000	•	18,806	908'81	•
08/13/15 \$	16,321.5900	1.000		16,321	16,321	0
00/14/15 \$	19,160.1800	1.000		19,160	19,160	•
08/17/15 \$	18,215.4700	1.000		18,215	18,215	0
08/18/15 S	15,211.7200	1.600		15,212	15,212	~
	20,689.5100	1.000		20,690	20,690	•
08/24/15 \$	14,645.0900	1.000	_	14,645	14,645	•
08/26/15 \$	1,372.4900	1.000	•	1,572	1,572	•
04/27/15 \$	15,896.9108	J . 0000		15,497	15,497	•
08/28/15 \$	15,844.6000	1.6000			10.648	•
08/31/15 \$	88,975.2100	1.000	-		55,975	•
8 #1/10/60	20,196.3908	1.0068		~	20,196	•
09/02/15 \$	14,545.4200			18,	18,346	6
09/09/15 \$	104.7000	3.0000	_		108	•
09/09/15 \$	15,727.6500				15,728	•
09/10/15 \$	17,961.1500	1.0000			17,961	•
\$ 51/11/60	15,221.7400	1.0000		-	15,222	•
09/14/15 \$	4,245.4000	1.0040			4,243	•
09/15/15 \$	2,088.4280	1.0000	_	2,018	2,088	•
, 09/21/15 \$	13,514.5200	1.0000	_	18,517	13,517	•



REPORTABLE TRANSACTIONS HONCSHEET

1/1/15 THEOLEM 12/31/15

BATE BOLCHT/30LB	SHARES PAR VALUE		EXPENSED	PRINCIPAL CASH	ERISA COST	ERISA COST GAZIN/LOSS
\$ 51/52/00	9.681.1508	1.0000				
\$ 51/52/60	9,947.7500	1.0000			189'6	
2 51/22/40	11.945.4500	1.000		31. Ec.	17 1	
2 67/23/60	16,610.9600	1.000	•	117 71		
S \$1/05/60	43,049,8708	1.000			119.611	
\$ \$1/10/01	7,822.7600	1.000				
10/62/15 \$	10,706.9900	7.0000		679.1	7,823	
10/05/15 \$	9,416.4280	7.0000		70,707	10,707	
10/06/15 \$	14,049.5486	1.0000			9,416	
\$ 51/80/01	195.4680	1.6800			14,050	
10/13/15 \$	9,763.6100	1.0000		567	195	
10/15/15 8	7,185,4700	1.0000	•	#9/·A	9,764	
16/21/15 \$	14,512.4800	0000		5,165	7,185	
10/26/15 \$	11.743.9680			14,512	14,512	
10/27/15 \$	11,410.7500			11.744	11,744	
10/24/15 \$	16.628.6388			11,411	11,411	
10/29/15 \$	12.656 9800		•	16,489	16,489	
10/30/15 \$	24. XXX . 32	7.000	•	12,455	12,455	
-	44E4 E47 9	P300-1	•	25,466	25.466	
-		000.7	•	769.7	4.494	
-	DOTT: CAY OF	7.0000 1.0000		12,293	12.293	
_	0007-076	7 · 0000	•	9,976	9.676	
11/09/15 4	0000-107	7 · 0000	•	284	286	
11/12/15 5			•	9.286	742	
11/16/15 6	4.275.2800	1.000	•	4.275		
11/17/16 6	10/2-682-5	1.0000	•	9.289		
11/10/15 5	6.975.1600	1.0000	•	6.975		
11/34/15 5	6,877.2800	1.0000	•	6.877	NIA Y	
2 61/62/11	10.748.5680	1.0000			70.0	
2 61/67	7,264.2400	1.0000		776-1	13,760	
S 51/00/11	32,268.5780	1.9660	•	100 10	1,264	
2/01/15 \$	3,869.4788	7.0000		99776	32,268	
2/02/15 \$	11,644.2300	1.0000	•	NO 10 10 10 10 10 10 10 10 10 10 10 10 10	690'8	
12/03/15 \$	5,979.1380	1.0000	2 4	11,646	11,646	
12/04/15 S	7,988.9260	0000			8.979	
12/07/15 \$	2,649.1500	0000		686'7	7,989	
2/04/15 \$	40.0100			699'2	5,649	
2/10/15 \$	8,149,3289			3	;	
12/15/15 \$	10.920.5550		•	8,149	6,149	
12/16/15 \$	13.944.2700		•	10,921	10,921	
12/11/15 s	17.658 2144			13,944	13,944	
12/23/15 \$	0.12.000.00 0.44.0	0000.7	•	17,658	17,658	
12/30/15 \$	9999 47E 7	000D T	•	855.6	9.44	
12/51/15 5		•	•	6,761	177.7	
	20,079.7664	7 · 6080	•	604.600		



REPORTABLE TRANSACTIONS MORKSHEET

1/1/15 THROUGH 12/31/15

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RAILINDAD EIPLOYEES NATIONAL FSA

ERISA COST GAIN/LOSS		
ERISA COST	12,252,108	12,252,108
PRINCIPAL CASH	12,252,100	12,252,108
EXPENSE INCURRED		
PRICE		
SHARES PAR VALUE	SUB-TOTAL	GRAND TOTAL
BOLGHT/SOLD		

CATEGORY 4 - SINGLE TRANSACTION WITH ONE BROKER EXCEEDS 5x OF VALUE

*** NO TRANSACTIONS QUALIFIED FOR THIS SECTION ***

FOOTES

* * SIMBLE TRANSACTION IS 5% REPORTABLE B * BUY TRANSACTION S * SELL TRANSACTION R * REINVESTHENT TRANSACTION

(Rev. August 2012) Department of the Treasury Internal Revenue Service

Application for Extension of Time To File Certain Employee Plan Returns

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

OMB No. 1545-0212

File With IRS Only

Par	rt Identification					
Α	Name of filer, plan administrator, or plan sponsor (see instructions)	Caralana da	iumber (see instruction number (EIN) (9 c	ons). ligits		
	NATIONAL CARRIERS' CONFERENCE COMMITTEE	XX-XXXXXXXX		•		
	Number, street, and room or suite number (If a P.O. box, see instructions)					
	251 - 18TH STREET, SOUTH, SUITE 750	→ 52-10:	36399			
	City or town, state, and ZIP code	Social security num	ber (SSN) (9 digits X)	(X-XX-XX	XX)	
	ARLINGTON, VA 22202	-				
С	Plan name		Plan number	Plan	year er	yding
				MM	DD	YYYY
1	RAILROAD EMPLOYEES NATIONAL HEALTH FLEX	TRLE	512	12	31	15
	rt II Extension of Time To File Form 5500 Series, and/or Form					
1	Check this box if you are requesting an extension of time on line 2 to file the		urn/report for the	plan liste	ed in	
	Part 1, C above.					
2	I request an extension of time until $10/17/2016$ to file Form 5500 sets	eries (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	A (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 (a normal due date of Form 5500 series, and/or Form 8955-SSA for which this 3 (above) is not later than the 15th day of the third month after the normal of	bove) if: (a) the Form 5558 extension is requested, due date.	is filed on or before and (b) the date	e the e on line	e 2 and/	or line
Par	t III Extension of Time To File Form 5330 (see instructions)					
	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			
		1	1			
а	Enter the Code section(s) imposing the tax	a				
b	Enter the payment amount attached		▶ Ь			
c	For excise taxes under section 4980 or 4980F of the Code, enter the reversi-	on/amendment date				
	State in detail why you need the extension:	on/amenument date:	- C			
•	out of a stant why you need the extension.					
			······································			
		· · · · · · · · · · · · · · · · · · ·				
nger is ap	penalties of perjury. I declare that to the best of my knowledge and belief, the statements made on this plication.	form are true, correct, and com	piete, and that I am a	uthorized t	o prepare	
igna	ature >		Date	>		

Form **5500**

Department of the Treasury Internal Revenue Service

Department of Labor Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Annual Return/Report of Employee Benefit Plan

This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6047(e), 6057(b), and 6058(a) of the Internal Revenue Code (the Code).

► Complete all entries in accordance with the instructions to the Form 5500.

OMB Nos. 1210-0110 1210-0089

2015

This Form Is Open to Public Inspection

Annual Report Identificatio	n Information		- <u> </u>
For calendar plan year 2015 or fiscal plan year		and endir	ng
A This return/report is for: (1) X a multiempl		a multiple-employer plan (Filers participating employer inform instructions); or a DFE (specify)	s checking this box must attach a list of nation in accordance with the form
B This return/report is: (1) the first return or amondo	· · · · · · · · · · · · · · · · · · ·	the final return/report;	
		a short plan year return/report (less	<i>'</i>
C If the plan is a collectively-bargained plan, D Check box if filing under: X Form 5558;		automol	tio outonoion.
- I	ension (enter description)	<u> </u>	tic extension; the DFVC program;
Basic Plan Information — er	nter all requested information	on	
1 a Name of plan DATIDOAD EMDIOVEEC MATTOMAL DE	TTOUT DEDUTE	11	b Three-digit
RAILROAD EMPLOYEES NATIONAL HE SPENDING ACCOUNT PLAN	ALTH FLEXIBLE	110	plan number (PN) ► 512 c Effective date of plan
SPENDING ACCOUNT FLAM		1.,	·
2a Plan sponsor's name (employer, if for a single-employer	nlan)	21	b Employer Identification Number (EIN)
Mailing address (include room, apt., suite no. and street, City or town, state or province, country, and ZIP or foreig	, or P.O. Box)		52-1036399
City or town, state or province, country, and an or long	A postal code (ii loreign, acc mon	· · · · · · · · · · · · · · · · · · ·	C Plan Sponsor's telephone number
		1	571-336-7600
2d Business code (see instructions)			
		L	482110
NATIONAL CARRIERS' CONFERENCE 251 - 18TH STREET, SOUTH, SUIT ARLINGTON, VA 22202	TE 750		
Caution: A penalty for the late or incomplete filing		**	
Under penalties of perjury and other penalties set forth in the inswell as the electronic version of this return/report, and to the best	tructions, I declare that I have exact of my knowledge and belief, it is	amined this return/report, including acco s true, correct, and complete.	ompanying schedules, statements and attachments, as
O.Kamth Huli Signature of plan administrator	10/12/14 Date	A. K. GRADIA Enter name of individual signing	as plan administrator
Signature of employer/plan sponsor	Date	Enter name of individual signing	as employer or plan sponsor
Signature of DFE	Date	Enter name of individual signing	as DFE
Preparer's name (including firm name, if applicable) and add	ress (include room or suite num	mber)	Preparer's telephone number
TIMOTHY A. HELLER, CPA TMDG, LLC. 500 E PRATT ST, STE 525 BALTIMORE MD	21202		[443] 743-1277
	21202		64

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

Form **5500** (2015) **v.150123**

_		/00 a =	
Form	5500	(2015)	1

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3 a Plan administrator's name and address X Same as Plan Sponsor	3b Administrat	or's EIN
	3c Administrat	or's telephone number
4 If the name and/or EIN of the plan sponsor has changed since the last re name, EIN and the plan number from the last return/report:	turn/report filed for this plan, enter the	4b EIN
a Sponsor's name		4c PN
5 Total number of participants at the beginning of the plan year		5 6526
6 Number of participants as of the end of the plan year unless otherw lines 6a(1), 6a(2), 6b, 6c, and 6d).	ise stated (welfare plans complete only	
a(1) Total number of active participants at the beginning of the plan	year	6a(1) 6526
a(2) Total number of active participants at the end of the plan year		6a(2) 5938
b Retired or separated participants receiving benefits		6 b
c Other retired or separated participants entitled to future benefits		6c
d Subtotal. Add lines 6a(2), 6b, and 6c		6d 5938
e Deceased participants whose beneficiaries are receiving or are entit		6e
f Total. Add lines 6d and 6e	•••••	6f
g Number of participants with account balances as of the end of the p complete this item)	lan year (only defined contribution plans	6 g
h Number of participants that terminated employment during the plan year withan 100% vested.	· · · · · · · · · · · · · · · · · · ·	6 h
7 Enter the total number of employers obligated to contribute to the plan (only multiemplo		7 26
8 a If the plan provides pension benefits, enter the applicable pension feature codes from the b If the plan provides welfare benefits, enter the applicable welfare feature codes from the		
9 a Plan funding arrangement (check all that apply)	9 b Plan benefit arrangement (check a	all that apply)
(1) Insurance	(1) Insurance	
(2) Code section 412(e)(3) insurance contracts	(2) Code section 412(e)(3) ins	urance contracts
(3) X Trust	(3) X Trust	
(4) General assets of the sponsor	(4) General assets of the spor	
10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and	•	nstructions)
a Pension Schedules	b General Schedules	
(1) R (Retirement Plan Information)	(1) X H (Financial Inform	•
(2) MB (Multiemployer Defined Benefit Plan and Certain		ation - Small Plan)
Money Purchase Plan Actuarial Information) – signed by	(3) A (Insurance Inform	•
the plan actuary	(4) X C (Service Provider	
(3) SB (Single-Employer Defined Benefit Plan Actuarial		g Plan Information)
Information) – signed by the plan actuary	(6) G (Financial Transa	action Schedules)

Form	5500	(2015	١
1 01111	JJ00	(2013	•

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i ing	Form M-1 Compliance Information (to be completed by welfare benefit plans)
	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.)
	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
	Enter the Receipt Confirmation Code for the 2015 Form M-1 annual report. If the plan was not required to file the 2015 Form M-1 annual report, enter the Receipt Confirmation Code for the most recent Form M-1 that was required to be filed under the Form M-1 filing requirements. (Failure to enter a valid Receipt Confirmation Code will subject the Form 5500 filing to rejection as incomplete.)
	Receipt Confirmation Code