



Investment Returns and Assumptions Report

INVESTMENT RETURNS AND ASSUMPTIONS REPORT

PRB-1000

Retirement System Profile

Travis Co. ESD No. 6 Firefighters' Relief and Retirement	512-663-6804
System Name	Phone Number: (xxx) xxx-xxxx
Scott Falltrick	sfalltrick@ltfr.org
Report Contact Name (Please Print)	E-mail Address

Actual Rate of Return

(Most Recent 10 Fiscal Years)

Fiscal Year End (MM/DD/YYYY)	Net Return (Percent)	Gross Return (Percent)	Gross Return Methodology	
			Not Net of Admin Expenses	Net of Admin Expenses
12/31/2008	N/A	N/A		✓
12/31/2009	8.58%	9.71%		✓
12/31/2010	8.37%	9.37%		✓
12/31/2011	-1.37%	-0.63%		✓
12/31/2012	7.76%	8.54%		✓
12/31/2013	17.88%	18.69%		✓
12/31/2014	6.56%	7.23%		✓
12/31/2015	0.67%	1.23%		✓
12/31/2016	4.67%	5.22%		✓
12/31/2017	16.28%	16.88%		✓

Gross Return Methodology - In the last column, please indicate the methodology used to calculate each gross return presented as either: The Gross Return is not net of administrative expenses or the Gross Return is net of administrative expenses.

Actuarial Assumed Rate of Return

(Most Recent 10 Actuarial Valuations)

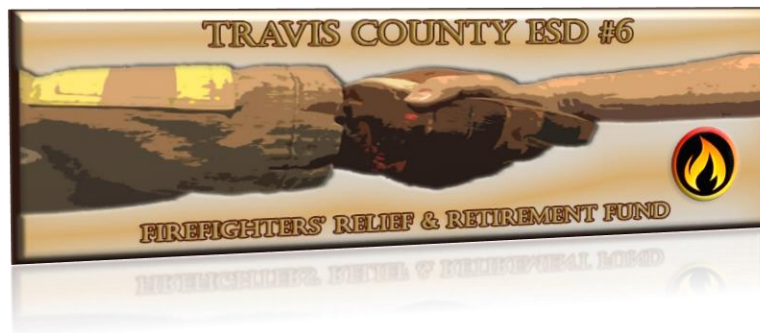
Valuation Date (MM/DD/YYYY)	Assumed Return (Percent)	Assumed Return Methodology		
		Net All Expenses	Net Investment Fees Only	Other
01/01/2008	7.00%	✓		No expenses netted
01/01/2010	7.00%	✓		No expenses netted
01/01/2012	7.00%	✓		No expenses netted
01/01/2014	7.00%	✓		
12/31/2015	7.00%	✓		

Assumed Return Methodology - In the last column, please indicate the methodology underlying each assumed rate of return as either: The return is net of all expenses; the return is net of investment fees; or, "Other". If "Other", please describe methodology used in Additional Comments section.

Information provided in this document may be based on methodologies assumed to be reasonable by the reporting entity. The information provided herein may be unaudited and is considered the best approximation of the plan at the time of submission. Additionally, the information provided in this document must be based on the fiscal year of the public retirement system submitting the report.

PYE 12/31/2017

TCESD#6 Firefighters' Relief and Retirement Fund
TCESD#6 Headquarters Building
15304 Pheasant Ln. Ste. #100
Lakeway, Texas 78734



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LONG-TERM RATES OF RETURN

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Annualized Rolling Rate of Return Information

Please check the appropriate methodology used to calculate the rates of return requested in the following section:

☐ Arithmetic Mean, ☒ Geometric Mean (Time-weighted Return), ☐ Internal Rate of Return

Most Recent:	1-Year Period	3-Year Period	10-Year Period	30-Year or Since Inception Period
Rolling Gross	16.88%	7.58%	N/A	8.31%
Rolling Net	16.28%	7.01%	N/A	7.55%

*If the system's inception date is less than 30 years from the report date, please enter the inception date:

Date of Inception (MM/DD/YYYY)	01/01/2009
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RETURN AND ASSUMPTIONS -- ADDITIONAL COMMENTS

Please use this section to provide any additional information or commentary that may help clarify information provided in the previous form.

Rates of Return

Net and Gross rates of return for the fiscal years ending December 31, 2009, and later are available.

Actuarial Assumed Rate of Return

Actuarial assumed rate of return information came from the fund's most recent actuarial valuation report. Currently, valuations are being performed biennially.

Average Rates of Return

The average rates of return are geometric rates of return. Please see the RoR_History Worksheet for details of the calculations.

*The "Since Inception" rates of return are nine-year averages. The 2008 plan year did not include a full year of contributions and included plan start-up expenses.

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RETURNS AND ASSUMPTIONS – UNAVAILABLE INFORMATION

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Please list any unavailable information requested in this form in the text box below, including an explanation of why the information is unavailable. Completion of this form fulfills the requirements stated in Section 802.108 (c) of Texas Government Code.

Net and gross rates of return are available for the December 31, 2009 and later fiscal years. The requested averages have been calculated to the extent data is available.

☒ By checking (or Copy and Paste: ✓) in this box, I certify that the information provided is accurate based on the methodology used; and that the retirement system for which this form is being provided agrees to a timely submission of the unavailable information if it becomes available.

CERTIFICATION

I certify that, as an official representative of the retirement system for which this report is being presented, I have the authority to provide the requested information, and that I have verified, to the best of my knowledge, that the information presented is complete, as far as indicated, and accurate.

(Note: By typing your name below, you are signing this document.)

Scott Falltrick
First Authorizing Signature Date

512-663-6804
First Authorizer Phone Number

Jim DeWitt
Second Authorizing Signature Date

512-266-2533
Second Authorizer Phone Number

Chairman
Title of First Authorizer

sfalltrick@ltfr.org
First Authorizer Email

Trustee
Title of Second Authorizer

jdewitt@ltfr.org
Second Authorizer Email

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