Form 5500

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Annual Return/Report of Employee Benefit Plan

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

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

OMB Nos. 1210-0110
1210-0089

2013

This Form is Open to Public Inspection

Part I Annual Report Identification Information

For calendar plan year 2013 or fiscal plan year beginning 01/01/2013 and ending 12/31/2013

A This return/report is for:
- [ ] a multiemployer plan;
- [ ] a multiple-employer plan; or
- [X] a single-employer plan;
- [ ] a DFE (specify) ____

B This return/report is:
- [ ] the first return/report;
- [ ] the final return/report;
- [ ] an amended return/report;
- [ ] a short plan year return/report (less than 12 months).

C If the plan is a collectively-bargained plan, check here. . . . . ▶ [ ]

D Check box if filing under:
- [X] Form 5558;
- [ ] automatic extension;
- [ ] the DFVC program;
- [ ] special extension (enter description)

Part II Basic Plan Information—enter all requested information

1a Name of plan
PEER FOODS GROUP, INC. PROFIT SHARING AND 401(K) PLAN

1b Three-digit plan number (PN) ▶ 010

1c Effective date of plan 12/30/1940

2a Plan sponsor's name and address; include room or suite number (employer, if for a single-employer plan)

PEER FOODS GROUP, INC.

1200 WEST 35TH STREET
3RD FLOOR
CHICAGO, IL 60609

2b Employer Identification Number (EIN)
36-0851490

2c Sponsor's telephone number
773-475-2312

2d Business code (see instructions)
311610

Caution: A penalty for the late or incomplete filing of this return/report will be assessed unless reasonable cause is established.

Under penalties of perjury and other penalties set forth in the instructions, I declare that I have examined this return/report, including accompanying schedules, statements and attachments, as well as the electronic version of this return/report, and to the best of my knowledge and belief, it is true, correct, and complete.

SIGN HERE	Filed with authorized/valid electronic signature.	10/10/2014	SUSAN O'CONNELL
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

Preparer's name (including firm name, if applicable) and address; include room or suite number. (optional)

Preparer's telephone number (optional)

3a Plan administrator's name and address [X] Same as Plan Sponsor Name [ ] Same as Plan Sponsor Address	**3b** Administrator's EIN	
	3c Administrator's telephone number	
4 If the name and/or EIN of the plan sponsor has changed since the last return/report filed for this plan, enter the name, EIN and the plan number from the last return/report:	**4b** EIN	
a Sponsor's name	**4c** PN	
5 Total number of participants at the beginning of the plan year	**5**	269
6 Number of participants as of the end of the plan year (welfare plans complete only lines **6a, 6b, 6c,** and **6d**).		
a Active participants	**6a**	258
b Retired or separated participants receiving benefits	**6b**	0
c Other retired or separated participants entitled to future benefits	**6c**	27
d Subtotal. Add lines **6a**, **6b**, and **6c**	**6d**	285
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits	**6e**	0
f Total. Add lines **6d** and **6e**	**6f**	285
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**	220
h Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested	**6h**	24
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	**7**	

8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions:
2F 2G 2J 2K 2R 2S 2T 3D 3H 2E

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

9a Plan funding arrangement (check all that apply)		**9b** Plan benefit arrangement (check all that apply)	
(1)	[ ] Insurance	**(1)**	[ ] Insurance
(2)	[ ] Code section 412(e)(3) insurance contracts	**(2)**	[ ] Code section 412(e)(3) insurance contracts
(3)	[X] Trust	**(3)**	[X] Trust
(4)	[ ] General assets of the sponsor	**(4)**	[ ] General assets of the sponsor

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

a Pension Schedules

(1) [X] **R** (Retirement Plan Information)

(2) [ ] **MB** (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary

(3) [ ] **SB** (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary

b General Schedules

(1) [X] **H** (Financial Information)

(2) [ ] **I** (Financial Information – Small Plan)

(3) [ ] ___ **A** (Insurance Information)

(4) [X] **C** (Service Provider Information)

(5) [ ] **D** (DFE/Participating Plan Information)

(6) [ ] **G** (Financial Transaction Schedules)

SCHEDULE C (Form 5500)	Service Provider Information	OMB No. 1210-0110
Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	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.**	**2013** **This Form is Open to Public Inspection.**

For calendar plan year 2013 or fiscal plan year beginning 01/01/2013 and ending 12/31/2013

A Name of plan
PEER FOODS GROUP, INC. PROFIT SHARING AND 401(K) PLAN

B Three-digit plan number (PN) ▶ 010

C Plan sponsor's name as shown on line 2a of Form 5500
PEER FOODS GROUP, INC.

D Employer Identification Number (EIN)
36-0851490

Part I Service Provider Information (see instructions)

You must complete this Part, in accordance with the instructions, to report the information required for **each person** who received, directly or indirectly, $5,000 or more in total compensation (i.e., money or anything else of monetary value) in connection with services rendered to the plan or the person's position with the plan during the plan year. If a person received **only** eligible indirect compensation for which the plan received the required disclosures, you are required to answer line 1 but are not required to include that person when completing the remainder of this Part.

1 Information on Persons Receiving Only Eligible Indirect Compensation

a Check "Yes" or "No" to indicate whether you are excluding a person from the remainder of this Part because they received only eligible indirect compensation for which the plan received the required disclosures (see instructions for definitions and conditions).. . . . . [X] Yes [ ] No

b If you answered line 1a "Yes," enter the name and EIN or address of each person providing the required disclosures for the service providers who received only eligible indirect compensation. Complete as many entries as needed (see instructions).

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

FIDELITY INVESTMENTS INSTITUTIONAL

04-2647786

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

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2. Information on Other Service Providers Receiving Direct or Indirect Compensation. Except for those persons for whom you answered "Yes" to line 1a above, complete as many entries as needed to list each person receiving, directly or indirectly, $5,000 or more in total compensation (i.e., money or anything else of value) in connection with services rendered to the plan or their position with the plan during the plan year. (See instructions).

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

FIDELITY INVESTMENTS INSTITUTIONAL

04-2647786

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
37 60 64 65 71	RECORDKEEPER	4390	Yes [X] No [ ]	Yes [X] No [ ]	0	Yes [X] No [ ]

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

LPL FINANCIAL CORPORATION

95-2834236

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
55	ADVISOR	0	Yes [X] No [ ]	Yes [X] No [ ]	9037	Yes [ ] No [X]

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

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

2. Information on Other Service Providers Receiving Direct or Indirect Compensation. Except for those persons for whom you answered "Yes" to line 1a above, complete as many entries as needed to list each person receiving, directly or indirectly, $5,000 or more in total compensation (i.e., money or anything else of value) in connection with services rendered to the plan or their position with the plan during the plan year. (See instructions).

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

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

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

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

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

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

Part I Service Provider Information (continued)

3 If you reported on line 2 receipt of indirect compensation, other than eligible indirect compensation, by a service provider, and the service provider is a fiduciary or provides contract administrator, consulting, custodial, investment advisory, investment management, broker, or recordkeeping services, answer the following questions for (a) each source from whom the service provider received $1,000 or more in indirect compensation and (b) each source for whom the service provider gave you a formula used to determine the indirect compensation instead of an amount or estimated amount of the indirect compensation. Complete as many entries as needed to report the required information for each source.

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation		**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
SOUND SHORE FD INC	8 SOUND SHORE DRIVE SUITE 180 GREENWICH, CT 06830	0.40%

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation		**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
HENNESSY LARGE VALUE	7250 REDWOOD BLVD., STE 200 NOVATO, CA 94945	0.40%

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation		**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
JANUS GLOBAL	151 DETROIT ST. DENVER, CO 80206	0.35%

Part I Service Provider Information (continued)

3 If you reported on line 2 receipt of indirect compensation, other than eligible indirect compensation, by a service provider, and the service provider is a fiduciary or provides contract administrator, consulting, custodial, investment advisory, investment management, broker, or recordkeeping services, answer the following questions for (a) each source from whom the service provider received $1,000 or more in indirect compensation and (b) each source for whom the service provider gave you a formula used to determine the indirect compensation instead of an amount or estimated amount of the indirect compensation. Complete as many entries as needed to report the required information for each source.

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FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
TOUCHSTONE FOCUSED 303 BROADWAY, SUITE 1100 CINCINNATI, OH 45202	0.10%

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
MANAGERS SPECIAL 800 CONNECTICUT AVE. NORWALK, CT 06854	0.10%

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
BARON ASSET 767 5TH AVENUE 49TH FLOOR NEW YORK, NY 10153	0.08%

Part I Service Provider Information (continued)

3 If you reported on line 2 receipt of indirect compensation, other than eligible indirect compensation, by a service provider, and the service provider is a fiduciary or provides contract administrator, consulting, custodial, investment advisory, investment management, broker, or recordkeeping services, answer the following questions for (a) each source from whom the service provider received $1,000 or more in indirect compensation and (b) each source for whom the service provider gave you a formula used to determine the indirect compensation instead of an amount or estimated amount of the indirect compensation. Complete as many entries as needed to report the required information for each source.

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
ABDN EMERG MKTS IS A - BOSTON FINA P.O. BOX 8480 BOSTON, MA 02266	0.25%

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
ABF INTL EQUITY ADV - STATE STREET 225 FRANKLIN STREET BOSTON, MA 02111	0.25%

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
ALGER SPECTRA A - STATE STREET BAN 04-0025081	0.25%

Part I Service Provider Information (continued)

3 If you reported on line 2 receipt of indirect compensation, other than eligible indirect compensation, by a service provider, and the service provider is a fiduciary or provides contract administrator, consulting, custodial, investment advisory, investment management, broker, or recordkeeping services, answer the following questions for (a) each source from whom the service provider received $1,000 or more in indirect compensation and (b) each source for whom the service provider gave you a formula used to determine the indirect compensation instead of an amount or estimated amount of the indirect compensation. Complete as many entries as needed to report the required information for each source.

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation		**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
ALZGI NFJ MDCPVL A - BOSTON FINANC	330 W. 9TH STREET KANSAS CITY, MO 66160	0.25%

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation		**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
BLKRK GLOBAL ALLOC A - BNY MELLON	P.O. BOX 9793 PROVIDENCE, RI 02940	0.25%

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation		**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
BLKRK INTL OPP A - BNY MELLON INV	P.O. BOX 9793 PROVIDENCE, RI 02940	0.25%

Part I Service Provider Information (continued)

3 If you reported on line 2 receipt of indirect compensation, other than eligible indirect compensation, by a service provider, and the service provider is a fiduciary or provides contract administrator, consulting, custodial, investment advisory, investment management, broker, or recordkeeping services, answer the following questions for (a) each source from whom the service provider received $1,000 or more in indirect compensation and (b) each source for whom the service provider gave you a formula used to determine the indirect compensation instead of an amount or estimated amount of the indirect compensation. Complete as many entries as needed to report the required information for each source.

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation		**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
BLKRK LATIN AMER A - BNY MELLON IN	P.O. BOX 9793 PROVIDENCE, RI 02940	0.25%

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation		**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
BLKRK S&P500 STK A - BNY MELLON IN	P.O. BOX 9793 PROVIDENCE, RI 02940	0.05%

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation		**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
CALVERT LT INCOME A - BOSTON FINAN	P.O. BOX 8480 BOSTON, MA 02266	0.25%

Part I Service Provider Information (continued)

3 If you reported on line 2 receipt of indirect compensation, other than eligible indirect compensation, by a service provider, and the service provider is a fiduciary or provides contract administrator, consulting, custodial, investment advisory, investment management, broker, or recordkeeping services, answer the following questions for (a) each source from whom the service provider received $1,000 or more in indirect compensation and (b) each source for whom the service provider gave you a formula used to determine the indirect compensation instead of an amount or estimated amount of the indirect compensation. Complete as many entries as needed to report the required information for each source.

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
COL STRAT INCOME A - COLUMBIA MGT P.O. BOX 8081 BOSTON, MA 02266	0.25%

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
COLUMBIA INTL VAL A - COLUMBIA MGT P.O. BOX 8081 BOSTON, MA 02266	0.25%

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
DREY OP MIDCAP VAL A - DREYFUS TRA 200 PARK AVENUE NEW YORK, NY 10166	0.35%

Part I Service Provider Information (continued)

3 If you reported on line 2 receipt of indirect compensation, other than eligible indirect compensation, by a service provider, and the service provider is a fiduciary or provides contract administrator, consulting, custodial, investment advisory, investment management, broker, or recordkeeping services, answer the following questions for (a) each source from whom the service provider received $1,000 or more in indirect compensation and (b) each source for whom the service provider gave you a formula used to determine the indirect compensation instead of an amount or estimated amount of the indirect compensation. Complete as many entries as needed to report the required information for each source.

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation		**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
EV ASIAN SMALL CO A - BNY MELLON I	P.O. BOX 9793 PROVIDENCE, RI 02940	0.25%

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation		**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
EV DIV BUILDER A - BNY MELLON INV	P.O. BOX 9793 PROVIDENCE, RI 02940	0.25%

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
FED CLOVER SM VAL A - STATE STREET 04-0025081	0.35%

Part I Service Provider Information (continued)

3 If you reported on line 2 receipt of indirect compensation, other than eligible indirect compensation, by a service provider, and the service provider is a fiduciary or provides contract administrator, consulting, custodial, investment advisory, investment management, broker, or recordkeeping services, answer the following questions for (a) each source from whom the service provider received $1,000 or more in indirect compensation and (b) each source for whom the service provider gave you a formula used to determine the indirect compensation instead of an amount or estimated amount of the indirect compensation. Complete as many entries as needed to report the required information for each source.

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
FED KAUFMANN SM CP A - STATE STREE 04-0025081	0.35%

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
FED MID CAP INDEX SS - STATE STREE 04-0025081	0.05%

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
FED PRUDENT BEAR A - STATE STREET 04-0025081	0.35%

Part I Service Provider Information (continued)

3 If you reported on line 2 receipt of indirect compensation, other than eligible indirect compensation, by a service provider, and the service provider is a fiduciary or provides contract administrator, consulting, custodial, investment advisory, investment management, broker, or recordkeeping services, answer the following questions for (a) each source from whom the service provider received $1,000 or more in indirect compensation and (b) each source for whom the service provider gave you a formula used to determine the indirect compensation instead of an amount or estimated amount of the indirect compensation. Complete as many entries as needed to report the required information for each source.

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
HARTFORD MIDCAP R4 - HARTFORD ADMI 41-0679409	0.25%

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
HTFD INFL PLUS R4 - HARTFORD ADMIN 41-0679409	0.25%

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
HTFD INTL SM CO R4 - HARTFORD ADMI 41-0679409	0.25%

Part I Service Provider Information (continued)

3 If you reported on line 2 receipt of indirect compensation, other than eligible indirect compensation, by a service provider, and the service provider is a fiduciary or provides contract administrator, consulting, custodial, investment advisory, investment management, broker, or recordkeeping services, answer the following questions for (a) each source from whom the service provider received $1,000 or more in indirect compensation and (b) each source for whom the service provider gave you a formula used to determine the indirect compensation instead of an amount or estimated amount of the indirect compensation. Complete as many entries as needed to report the required information for each source.

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
INVS COMSTOCK A - INVESCO INVESTME 11 GREENWAY PLAZA, SUITE 100 HOUSTON, TX 77046	0.35%

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
INVS EURO SM CO A - INVESCO CANADA 5140 YONGE STREET, SUITE 900 TORONTO, ON M2N 6 CA	0.35%

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
JANUS ENTERPRISE S - JANUS SERVICE 43-1804048	0.25%

Part I Service Provider Information (continued)

3 If you reported on line 2 receipt of indirect compensation, other than eligible indirect compensation, by a service provider, and the service provider is a fiduciary or provides contract administrator, consulting, custodial, investment advisory, investment management, broker, or recordkeeping services, answer the following questions for (a) each source from whom the service provider received $1,000 or more in indirect compensation and (b) each source for whom the service provider gave you a formula used to determine the indirect compensation instead of an amount or estimated amount of the indirect compensation. Complete as many entries as needed to report the required information for each source.

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
JANUS GLB RESEARCH S - JANUS SERVI 43-1804048	0.25%

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
JANUS GLOBAL TECH S - JANUS SERVIC 43-1804048	0.25%

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
JANUS HIGH-YIELD S - JANUS SERVICE 43-1804048	0.25%

Part I Service Provider Information (continued)

3 If you reported on line 2 receipt of indirect compensation, other than eligible indirect compensation, by a service provider, and the service provider is a fiduciary or provides contract administrator, consulting, custodial, investment advisory, investment management, broker, or recordkeeping services, answer the following questions for (a) each source from whom the service provider received $1,000 or more in indirect compensation and (b) each source for whom the service provider gave you a formula used to determine the indirect compensation instead of an amount or estimated amount of the indirect compensation. Complete as many entries as needed to report the required information for each source.

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
JANUS TRITON S - JANUS SERVICES LL 43-1804048	0.25%

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
LD ABBETT AFFILTD A - DST SYSTEMS, 43-1581814	0.25%

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
LD ABT EM MKT CURR A - DST SYSTEMS 43-1581814	0.25%

Part I Service Provider Information (continued)

3 If you reported on line 2 receipt of indirect compensation, other than eligible indirect compensation, by a service provider, and the service provider is a fiduciary or provides contract administrator, consulting, custodial, investment advisory, investment management, broker, or recordkeeping services, answer the following questions for (a) each source from whom the service provider received $1,000 or more in indirect compensation and (b) each source for whom the service provider gave you a formula used to determine the indirect compensation instead of an amount or estimated amount of the indirect compensation. Complete as many entries as needed to report the required information for each source.

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
LD ABT MID CAP STK A - DST SYSTEMS 43-1581814	0.25%

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
MFS EMRG MKT DEBT R3 - MFS SERVICE 04-2865649	0.25%

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
OPPHMR RISING DIVD A - OFI GLOBAL TWO WORLD FINANCIAL CENTER 225 LIBERTY STREET, 14TH FLOOR NEW YORK, NY 10281	0.25%

Part I Service Provider Information (continued)

3 If you reported on line 2 receipt of indirect compensation, other than eligible indirect compensation, by a service provider, and the service provider is a fiduciary or provides contract administrator, consulting, custodial, investment advisory, investment management, broker, or recordkeeping services, answer the following questions for (a) each source from whom the service provider received $1,000 or more in indirect compensation and (b) each source for whom the service provider gave you a formula used to determine the indirect compensation instead of an amount or estimated amount of the indirect compensation. Complete as many entries as needed to report the required information for each source.

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation		**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
PIF INTL EQ IDX R3 - PRINCIPAL SHA	P.O. BOX 8024 BOSTON, MA 02266	0.30%

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation		**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
PIM LOW DURATION A - BOSTON FINANC	P.O. BOX 8480 BOSTON, MA 02266	0.25%

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation		**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
PIM RE REAL RET A - BOSTON FINANCI	P.O. BOX 8480 BOSTON, MA 02266	0.25%

Part I Service Provider Information (continued)

3 If you reported on line 2 receipt of indirect compensation, other than eligible indirect compensation, by a service provider, and the service provider is a fiduciary or provides contract administrator, consulting, custodial, investment advisory, investment management, broker, or recordkeeping services, answer the following questions for (a) each source from whom the service provider received $1,000 or more in indirect compensation and (b) each source for whom the service provider gave you a formula used to determine the indirect compensation instead of an amount or estimated amount of the indirect compensation. Complete as many entries as needed to report the required information for each source.

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
PIMCO LT US GOVT A - BOSTON FINANC P.O. BOX 8480 BOSTON, MA 02266	0.25%

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
PIONEER EMRG MKTS A - PIONEER INVE 04-2890696	0.35%

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
PIONEER EQ INC A - PIONEER INVESTM 04-2890696	0.35%

Part I Service Provider Information (continued)

3 If you reported on line 2 receipt of indirect compensation, other than eligible indirect compensation, by a service provider, and the service provider is a fiduciary or provides contract administrator, consulting, custodial, investment advisory, investment management, broker, or recordkeeping services, answer the following questions for (a) each source from whom the service provider received $1,000 or more in indirect compensation and (b) each source for whom the service provider gave you a formula used to determine the indirect compensation instead of an amount or estimated amount of the indirect compensation. Complete as many entries as needed to report the required information for each source.

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
PIONEER FDMTL GRTH A - PIONEER INV 04-2890696	0.35%

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
PIONEER GLB HI YLD A - PIONEER INV 04-2890696	0.35%

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
PIONEER HIGH YIELD A - PIONEER INV 04-2890696	0.35%

Part I Service Provider Information (continued)

3 If you reported on line 2 receipt of indirect compensation, other than eligible indirect compensation, by a service provider, and the service provider is a fiduciary or provides contract administrator, consulting, custodial, investment advisory, investment management, broker, or recordkeeping services, answer the following questions for (a) each source from whom the service provider received $1,000 or more in indirect compensation and (b) each source for whom the service provider gave you a formula used to determine the indirect compensation instead of an amount or estimated amount of the indirect compensation. Complete as many entries as needed to report the required information for each source.

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
TEMPLETON FOREIGN A - FRANKLIN TEM 94-3167260	0.25%

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
WFA PREC METALS A - BOSTON FINANCI P.O. BOX 8480 BOSTON, MA 02266	0.30%

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
WFA SM CAP VALUE A - BOSTON FINANC P.O. BOX 8480 BOSTON, MA 02266	0.30%

Part I Service Provider Information (continued)

3 If you reported on line 2 receipt of indirect compensation, other than eligible indirect compensation, by a service provider, and the service provider is a fiduciary or provides contract administrator, consulting, custodial, investment advisory, investment management, broker, or recordkeeping services, answer the following questions for (a) each source from whom the service provider received $1,000 or more in indirect compensation and (b) each source for whom the service provider gave you a formula used to determine the indirect compensation instead of an amount or estimated amount of the indirect compensation. Complete as many entries as needed to report the required information for each source.

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
WFA SPL SM CAP VL A - BOSTON FINAN P.O. BOX 8480 BOSTON, MA 02266	0.30%

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
LPL FINANCIAL CORPORATION	55	9037

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
NATIONAL FINANCIAL SERVICES LLC 04-3523567	---

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.

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

Part III Termination Information on Accountants and Enrolled Actuaries (see instructions)

(complete as many entries as needed)

a	Name:	**b** EIN:
c	Position:	
d	Address:	**e** Telephone:

Explanation:

a	Name:	**b** EIN:
c	Position:	
d	Address:	**e** Telephone:

Explanation:

a	Name:	**b** EIN:
c	Position:	
d	Address:	**e** Telephone:

Explanation:

a	Name:	**b** EIN:
c	Position:	
d	Address:	**e** Telephone:

Explanation:

a	Name:	**b** EIN:
c	Position:	
d	Address:	**e** Telephone:

Explanation:

SCHEDULE H (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Financial Information

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

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

OMB No. 1210-0110

2013

This Form is Open to Public Inspection

For calendar plan year 2013 or fiscal plan year beginning 01/01/2013 and ending 12/31/2013

A Name of plan
PEER FOODS GROUP, INC. PROFIT SHARING AND 401(K) PLAN

B Three-digit plan number (PN) ▶ 010

C Plan sponsor's name as shown on line 2a of Form 5500
PEER FOODS GROUP, INC.

D Employer Identification Number (EIN)
36-0851490

Part I Asset and Liability Statement

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

Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a	0	0
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	0	0
(2) Participant contributions	1b(2)	0	0
(3) Other	1b(3)	0	0
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	486600	472191
(2) U.S. Government securities	1c(2)	0	0
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)	0	0
(B) All other	1c(3)(B)	0	0
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)	0	0
(B) Common	1c(4)(B)	707528	855293
(5) Partnership/joint venture interests	1c(5)	0	0
(6) Real estate (other than employer real property)	1c(6)	0	0
(7) Loans (other than to participants)	1c(7)	0	0
(8) Participant loans	1c(8)	344816	411657
(9) Value of interest in common/collective trusts	1c(9)	0	0
(10) Value of interest in pooled separate accounts	1c(10)	0	0
(11) Value of interest in master trust investment accounts	1c(11)	0	0
(12) Value of interest in 103-12 investment entities	1c(12)	0	0
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	4734427	6059272
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other	1c(15)	0	0

		(a) Beginning of Year	(b) End of Year
1d Employer-related investments:			
(1) Employer securities	1d(1)	0	0
(2) Employer real property	1d(2)	0	0
e Buildings and other property used in plan operation	1e	0	0
f Total assets (add all amounts in lines 1a through 1e)	1f	6273371	7798413
Liabilities			
g Benefit claims payable	1g	0	0
h Operating payables	1h	0	0
i Acquisition indebtedness	1i	0	0
j Other liabilities	1j	0	0
k Total liabilities (add all amounts in lines 1g through1j)	1k	0	0
Net Assets			
l Net assets (subtract line 1k from line 1f)	1l	6273371	7798413

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
a Contributions:			
(1) Received or receivable in cash from: **(A)** Employers	2a(1)(A)	322260	
(B) Participants	2a(1)(B)	262034	
(C) Others (including rollovers)	2a(1)(C)	34232	
(2) Noncash contributions	2a(2)	0	
(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		618526
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	48	
(B) U.S. Government securities	2b(1)(B)	0	
(C) Corporate debt instruments	2b(1)(C)	0	
(D) Loans (other than to participants)	2b(1)(D)	0	
(E) Participant loans	2b(1)(E)	15760	
(F) Other	2b(1)(F)	0	
(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		15808
(2) Dividends: **(A)** Preferred stock	2b(2)(A)	0	
(B) Common stock	2b(2)(B)	26990	
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	302540	
(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		329530
(3) Rents	2b(3)		0
(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	2b(4)(A)	32190	
(B) Aggregate carrying amount (see instructions)	2b(4)(B)	28276	
(C) Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result	2b(4)(C)		3914
(5) Unrealized appreciation (depreciation) of assets: **(A)** Real estate	2b(5)(A)	0	
(B) Other	2b(5)(B)	136673	
(C) Total unrealized appreciation of assets. Add lines **2b(5)(A)** and **(B)**	2b(5)(C)		136673

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		0
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		0
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		0
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		0
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		583089
c Other income	2c		0
d Total income. Add all **income** amounts in column (b) and enter total	2d		1687540
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	150453	
(2) To insurance carriers for the provision of benefits	2e(2)	0	
(3) Other	2e(3)	0	
(4) Total benefit payments. Add lines **2e(1)** through **(3)**	2e(4)		150453
f Corrective distributions (see instructions)	2f		7726
g Certain deemed distributions of participant loans (see instructions)	2g		0
h Interest expense	2h		0
i Administrative expenses: **(1)** Professional fees	2i(1)	0	
(2) Contract administrator fees	2i(2)	0	
(3) Investment advisory and management fees	2i(3)	0	
(4) Other	2i(4)	4319	
(5) Total administrative expenses. Add lines **2i(1)** through **(4)**	2i(5)		4319
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		162498
Net Income and Reconciliation			
k Net income (loss). Subtract line **2j** from line **2d**	2k		1525042
l Transfers of assets:			
(1) To this plan	2l(1)		0
(2) From this plan	2l(2)		

Part III Accountant's Opinion

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

a The attached opinion of an independent qualified public accountant for this plan is (see instructions):

(1) ☐ Unqualified **(2)** ☐ Qualified **(3)** ☒ Disclaimer **(4)** ☐ Adverse

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

c Enter the name and EIN of the accountant (or accounting firm) below:

(1) Name: WARADY & DAVIS LLP **(2)** EIN: 36-2170602

d The opinion of an independent qualified public accountant is **not attached** because:

(1) ☐ This form is filed for a CCT, PSA, or MTIA. **(2)** ☐ It will be attached to the next Form 5500 pursuant to 29 CFR 2520.104-50.

Part IV Compliance Questions

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

During the plan year:

		Yes	No	Amount
a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)	4a		X	
b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)	4b		X	

			Yes	No	Amount
c	Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)	4c		X	
d	Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)	4d		X	
e	Was this plan covered by a fidelity bond?	4e	X		1000000
f	Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?	4f		X	
g	Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?	4g		X	
h	Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?	4h		X	
i	Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	4i	X		
j	Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked, and see instructions for format requirements.)	4j		X	
k	Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?	4k		X	
l	Has the plan failed to provide any benefit when due under the plan?	4l		X	
m	If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	4m		X	
n	If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.	4n		X	

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

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

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

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

Part V Trust Information (optional)

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

SCHEDULE R (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Retirement Plan Information

This schedule is required to be filed under section 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code).

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

OMB No. 1210-0110

2013

This Form is Open to Public Inspection.

For calendar plan year 2013 or fiscal plan year beginning 01/01/2013 and ending 12/31/2013

A Name of plan
PEER FOODS GROUP, INC. PROFIT SHARING AND 401(K) PLAN

B Three-digit plan number (PN) ▶ 010

C Plan sponsor's name as shown on line 2a of Form 5500
PEER FOODS GROUP, INC.

D Employer Identification Number (EIN)
36-0851490

Part I Distributions

All references to distributions relate only to payments of benefits during the plan year.

1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions **1**

2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits):

EIN(s): 04-6568107

Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.

3 Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year **3**

Part II Funding Information (If the plan is not subject to the minimum funding requirements of section of 412 of the Internal Revenue Code or ERISA section 302, skip this Part)

4 Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)? ..... ☐ **Yes** ☐ **No** ☐ **N/A**

If the plan is a defined benefit plan, go to line 8.

5 If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. **Date:** Month _____ Day _____ Year _____

If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.

6 a Enter the minimum required contribution for this plan year (include any prior year accumulated funding deficiency not waived) **6a**

b Enter the amount contributed by the employer to the plan for this plan year **6b**

c Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount) **6c**

If you completed line 6c, skip lines 8 and 9.

7 Will the minimum funding amount reported on line 6c be met by the funding deadline? ..... ☐ **Yes** ☐ **No** ☐ **N/A**

8 If a change in actuarial cost method was made for this plan year pursuant to a revenue procedure or other authority providing automatic approval for the change or a class ruling letter, does the plan sponsor or plan administrator agree with the change? ..... ☐ **Yes** ☐ **No** ☐ **N/A**

Part III Amendments

9 If this is a defined benefit pension plan, were any amendments adopted during this plan year that increased or decreased the value of benefits? If yes, check the appropriate box. If no, check the "No" box. ..... ☐ **Increase** ☐ **Decrease** ☐ **Both** ☐ **No**

Part IV ESOPs (see instructions). If this is not a plan described under Section 409(a) or 4975(e)(7) of the Internal Revenue Code, skip this Part.

10 Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan? ..... ☐ **Yes** ☐ **No**

11 a Does the ESOP hold any preferred stock? ..... ☐ **Yes** ☐ **No**

b If the ESOP has an outstanding exempt loan with the employer as lender, is such loan part of a "back-to-back" loan? (See instructions for definition of "back-to-back" loan.) ..... ☐ **Yes** ☐ **No**

12 Does the ESOP hold any stock that is not readily tradable on an established securities market? ..... ☐ **Yes** ☐ **No**

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

13 Enter the following information for each employer that contributed more than 5% of total contributions to the plan during the plan year (measured in dollars). See instructions. *Complete as many entries as needed to report all applicable employers.*

a Name of contributing employer

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

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

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):

---

a Name of contributing employer

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

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

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

---

a Name of contributing employer

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

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

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

---

a Name of contributing employer

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

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

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

---

a Name of contributing employer

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

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

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

---

a Name of contributing employer

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

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

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

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

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

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

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

16 Information with respect to any employers who withdrew from the plan during the preceding plan year:

a Enter the number of employers who withdrew during the preceding plan year	**16a**	
b If line 16a is greater than 0, enter the aggregate amount of withdrawal liability assessed or estimated to be assessed against such withdrawn employers	**16b**	

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

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

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

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

a Enter the percentage of plan assets held as:
Stock: _____% Investment-Grade Debt: _____% High-Yield Debt: _____% Real Estate: _____% Other: _____%

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

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

PEER FOODS GROUP, INC. PROFIT SHARING AND 401(K) PLAN

FINANCIAL STATEMENTS

DECEMBER 31, 2013

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Warady & Davis LLP
Certified Public Accountants & Consultants

INDEPENDENT AUDITORS' REPORT

Plan Administrator
Peer Foods Group, Inc. Profit Sharing and 401(k) Plan
Chicago, Illinois

Report on the Financial Statements

We were engaged to audit the accompanying financial statements of PEER FOODS GROUP, INC. PROFIT SHARING AND 401(K) PLAN ("Plan"), which comprise the statements of net assets available for benefits as of December 31, 2013 and 2012, and the related statements of changes in net assets available for benefits for the years then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

Plan 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.

Auditors' 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 4, which was certified by Fidelity Management Trust Company, the trustee of the Plan, except for comparing the information with the related information included in the financial statements and supplemental schedules. 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 a certification from the trustee as of and for the years ended December 31, 2013 and 2012 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.

Other Matter

We were engaged for the purpose of forming an opinion on the financial statements as a whole. The supplemental schedule listed in the accompanying table of contents, which is the responsibility of plan management, is presented for the purpose of additional analysis and is not a required part of the financial statements but is required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974. Because of the significance of the matter described in the Basis for Disclaimer of Opinion paragraph, it is inappropriate to and we do not express an opinion on the supplemental schedule referred to above.

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 schedule, 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.



October 9, 2014

STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS

As of December 31	**2013**	2012
ASSETS		
Investments at Fair Value		
Money Market Fund	**$ 472,191**	$ 486,600
Common Stocks	**855,293**	707,528
Mutual Funds	**6,059,272**	4,734,427
	7,386,756	5,928,555
Receivables		
Employer Matching Contribution	**159**	140
Employee Contribution	**841**	811
Employer Profit Sharing Contribution	**429,255**	300,000
Notes Receivable from Participants	**411,657**	344,816
Total Receivables	**841,912**	645,767
Total Assets	**8,228,668**	6,574,322
LIABILITIES		
Excess Contributions Payable	**14,838**	—
NET ASSETS AVAILABLE FOR BENEFITS	**$ 8,213,830**	$ 6,574,322

See accompanying notes.

STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS

For the Years Ended December 31	**2013**	2012
ADDITIONS TO NET ASSETS ATTRIBUTED TO		
Investment Income		
Net Appreciation in Fair Value of Investments	**$ 719,763**	$ 281,618
Gain on Sale of Investments	**3,914**	8,390
Dividends and Interest	**329,578**	132,561
Total Investment Income	**1,053,255**	422,569
Interest Income - Notes Receivable from Participants	**15,760**	21,494
Contributions		
Employer Matching	**22,278**	24,355
Employee	**262,064**	226,193
Employer Profit Sharing	**429,255**	300,000
Employee Rollover	**34,232**	28,627
Total Contributions	**747,829**	579,175
Total Additions	**1,816,844**	1,023,238
DEDUCTIONS FROM NET ASSETS ATTRIBUTED TO		
Administrative Fees	**4,319**	3,216
Corrective Distributions	**22,564**	—
Benefits Paid to Participants	**150,453**	183,810
Total Deductions	**177,336**	187,026
Net Increase	**1,639,508**	836,212
NET ASSETS AVAILABLE FOR BENEFITS		
Beginning	**6,574,322**	5,738,110
ENDING	**$ 8,213,830**	$ 6,574,322

See accompanying notes.

NOTES TO FINANCIAL STATEMENTS

NOTE 1—PLAN DESCRIPTION

Peer Foods Group, Inc. Profit Sharing and 401(k) Plan (the "Plan") is a defined contribution plan designed to operate under the provisions of Section 401(k) of the Internal Revenue Code ("IRC"). The Plan covers all eligible domestic employees of Peer Foods Group, Inc. (the "Company"). It is subject to the provisions of the Employee Retirement Income Security Act of 1974 ("ERISA"), as amended. The following description of the Plan provides only summary information. Participants should refer to the Plan document for a more complete description of the Plan's provisions.

ELIGIBILITY

Each employee is eligible to make pre-tax deferrals to the Plan and receive Company discretionary matching contributions after completion of three months of service. Each employee shall become eligible for the Company discretionary profit-sharing contribution on the first day of the year after the employee completes one year of service.

CONTRIBUTIONS

Each year, participants may elect to contribute up to 100% of pre-tax annual compensation as defined in the Plan to a maximum of $17,500 for 2013 and $17,000 for 2012. Participants who are at least age 50 may make additional "catch-up" contributions of $5,500 in 2013 and 2012. Participants may also rollover amounts representing distributions from other qualified plans. Participants direct the investment of their contributions into various investment options offered by the Plan.

Based on the discretion of the Board of Directors, the Company may, subject to certain limitations, make a matching contribution to the Plan for each participant in accordance with the terms of the Plan document. For 2013 and 2012, the Company made a matching contribution of 25% of a participant's salary deferral, not to exceed $500 for each eligible participant.

The Company may also elect to make a discretionary profit-sharing contribution. This contribution is non-participant-directed. Company's discretionary profit-sharing contributions were $429,255 for 2013 and $300,000 for 2012.

PARTICIPANT ACCOUNTS

Each participant's account is credited with the participant's contribution, the Company's discretionary matching contribution, and an allocation of the Company's discretionary profit-sharing contribution, if applicable, and Plan earnings. Allocations are based on participant contributions, plan compensation, or account balances, as defined by the Plan document. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

VESTING

Participants are 100% vested in their elective deferral contributions plus actual earnings thereon. Vesting in the Company's contributions portion of their accounts, plus actual earnings thereon, is based on years of continuous service. A participant is 100% vested after six years of credited service.

NOTE 1—PLAN DESCRIPTION (Continued)

PAYMENT OF BENEFITS

Upon termination of service due to retirement, disability or death, a participant may elect to receive a lump-sum payment. Upon termination of service prior to retirement, disability or death, the participants may elect to receive, based on their account balances as of the last day of the calendar quarter following termination, the vested portion of their accounts in a lump-sum payment. Participants may receive distributions of their elective deferral contributions plus actual earnings thereon under certain financial hardship circumstances.

FORFEITURES

Forfeitures of participants' Company matching accounts can be applied to pay recordkeeping administrative expenses of the Plan if so directed by the Plan administrator. Any amounts not used to pay administrative expenses are allocated as of the last day of each Plan Year as an additional employer matching contribution if the forfeitures are from employer matching contribution accounts, or allocated as an additional employer profit sharing contribution if the forfeitures are from employer profit sharing accounts. The allocations are made in the same manner as regular matching and/or profit-sharing contributions are allocated. If a participant is rehired before he or she incurs five consecutive one-year breaks in service, any amounts forfeited will be restored to his or her matching account and profit-sharing account. Forfeitures totaled $7,368 in 2013 and $10,803 in 2012. Forfeitures allocated to participants were $8,189 in 2013 and $-0- in 2012. Forfeitures used for the plan expenses were $1,500 in 2013 and $997 in 2012. Forfeitures available for future use are $11,242 as of December 31, 2013 and $13,562 as of December 31, 2012.

NOTE 2—SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

BASIS OF ACCOUNTING

The accompanying financial statements have been prepared using the accrual basis of accounting.

USE OF ESTIMATES

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

INVESTMENT VALUATION AND INCOME RECOGNITION

The Plan's investments at December 31, 2013 and 2012 are held by Fidelity Management Trust Company ("Fidelity"). All investments are valued at market value as of December 31, 2013 and 2012.

Purchases and sales of securities are reflected on a trade-date basis. Realized gains and losses on the sale of securities are computed on a specific identification basis.

Dividend and interest income are recognized when received. Net appreciation (depreciation) on investments held represents the change in market value of the investments from the beginning of the Plan year (or date the investments were purchased, if later) to the end of the Plan year.

NOTE 2—SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

NOTES RECEIVABLE FROM PARTICIPANTS

Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest. Delinquent participant loans are reclassified as distributions based upon the terms of the plan document.

PAYMENT OF BENEFITS

Benefits are recorded when paid.

ADMINISTRATIVE EXPENSES

Expenses of the Plan, to the extent that the Company does not pay such expenses, may be paid out of the assets of the Plan.

NOTE 3—FAIR VALUE MEASUREMENTS

Financial Accounting Standards Board (FASB) Accounting Standards Codification (ASC) 820, *Fair Value Measurements and Disclosures*, establishes a framework for measuring fair value. That framework 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 measurements) and the lowest priority to unobservable inputs (level 3 measurements). The three levels of the fair value hierarchy under FASB ASC 820 are described below:

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.

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 observable inputs and minimize the use of unobservable inputs.

Following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodologies used at December 31, 2013 and 2012.

NOTE 3—FAIR VALUE MEASUREMENTS (Continued)

Level 1 Fair Value Measurements

Mutual funds are valued at quoted net asset values of the shares held by the Plan at year-end.

Common stocks are valued at closing price reported on the active market on which the individual securities are traded.

Level 2 Fair Value Measurements

Money market funds are valued at the net asset value ("NAV") of shares held by the Plan at year-end. NAV is determined by each fund's trustee based on the fair value of the underlying securities held less liabilities held by the fund. This practical expedient is not used when it is determined to be provable that the fund will sell the investment for an amount different than the reported NAV. Plan transactions (issuance and redemptions) may occur daily. There are no restrictions on a participant's ability to redeem investments. However, withdrawals prompted by certain events (e.g., termination of the managed income portfolio, changes in laws and regulations) may restrict a participant's ability to redeem the investment at its NAV.

Level 3 Fair Value Measurements

Level 3 Fair Value Measurements are not applicable to the Plan for 2013 and 2012.

The methods described above may produce a fair value calculation that may not be indicative of net realizable value or reflective of future fair values. Furthermore, while the Plan believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair value of certain financial instruments could result in a different fair value measurement at the reporting date.

The following table sets forth by level, within the fair value hierarchy, the Plan's assets at fair value as of December 31, 2013 and 2012:

	Assets at Fair Value as of December 31, 2013			
	Level 1	Level 2	Level 3	Total
Mutual Funds:				
Blend Funds	$ 4,927,926	$ —	$ —	$ 4,927,926
Growth Funds	621,054	—	—	621,054
Income Funds	74,663	—	—	74,663
Value Funds	356,171	—	—	356,171
Other	79,458	—	—	79,458
Total Mutual Funds	6,059,272	—	—	6,059,272
Money Market Fund	—	472,191	—	472,191
Common Stocks	855,293	—	—	855,293
Total Assets at Fair Value	$ 6,914,565	$ 472,191	$ —	$ 7,386,756

NOTE 3—FAIR VALUE MEASUREMENTS (Continued)

	Assets at Fair Value as of December 31, 2012			
	Level 1	Level 2	Level 3	Total
Mutual Funds:				
Blend Funds	$ 4,103,381	$ —	$ —	$ 4,103,381
Growth Funds	298,229	—	—	298,229
Income Funds	79,708	—	—	79,708
Value Funds	193,710	—	—	193,710
Other	59,399	—	—	59,399
Total Mutual Funds	4,734,427	—	—	4,734,427
Money Market Fund	—	486,600	—	486,600
Common Stocks	707,528	—	—	707,528
Total Assets at Fair Value	$ 5,441,955	$ 486,600	$ —	$ 5,928,555

NOTE 4—INFORMATION CERTIFIED BY TRUSTEE AND CUSTODIAN

The Plan administrator has elected the method of annual reporting compliance permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Accordingly, Fidelity Management Trust Company, the trustee of the Plan, has certified that the following data included in the accompanying financial statements and schedule is complete and accurate.

a. Investments, as shown in the accompanying statements of assets available for benefits as of December 31, 2013 and 2012.

b. Investment income, as shown in the accompanying statements of changes in assets available for benefits for the years ended December 31, 2013 and 2012.

c. The schedule of assets (held at end of year) as of December 31, 2013, as shown on Schedule H - Line 4(i).

The Plan's independent 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 schedule.

NOTE 5—INVESTMENTS

Investments representing 5% or more of net assets available for benefits as of December 31:

	2013	2012
BlackRock S&P 500 Stock Fund Investor A Shares	**$ 642,668**	$ 458,759
Fidelity Advisor Freedom 2020 Fund - Class A	**621,354**	536,796
Fidelity Advisor Freedom 2030 Fund - Class A	**746,141**	684,483
Fidelity Advisor Freedom 2015 Fund - Class A	**584,920**	682,181
Fidelity Advisor Freedom 2025 Fund - Class A	**1,252,782**	1,064,606

During 2013 and 2012, the Plan's investments (including gains and losses on investment bought and sold, as well as held during the year) appreciated in value as follows:

Mutual Funds	**$ 583,089**	$ 236,394
Common Stock	**136,674**	45,224
	$ 719,763	$ 281,618

NOTE 6—NOTES RECEIVABLE FROM PARTICIPANTS

Participants may borrow up to 50% of their vested account balance, with a maximum loan amount of $50,000. Repayments of principal and interest are made in equal monthly installments over the specified loan period (generally five years) through payroll deductions. Interest rates are determined by following procedures that consider the rates issued by lending institutions under similar circumstances.

NOTE 7—RELATED PARTY AND PARTY-IN-INTEREST TRANSACTIONS

The Company provides to the Plan certain accounting and administrative services for which no fees are charged. In addition, the majority of the expenses of the Plan are paid by the Company.

Plan investments are managed by the trustee of the Plan. The Plan's third party administrator is Fidelity. Fidelity is considered a party-in-interest.

NOTE 8—PLAN TERMINATION

Although it has not expressed any intent to do so, the Company has the right under the Plan to discontinue its contributions at any time and to terminate the Plan at any time subject to the provisions of ERISA. If the Company should decide to terminate the Plan, participants would become 100% vested in the Company contribution portion of their accounts.

NOTE 9—RECONCILIATION OF FINANCIAL STATEMENTS TO FORM 5500

The following is a reconciliation of net assets available for benefits per the financial statements to the Form 5500 as of December 31, 2013 and 2012:

	2013	2012
Net Assets Available for Benefits per the Form 5500	**$ 7,798,413**	$ 6,273,371
Add: Employee Contribution Receivable, Current Year	**841**	811
Employer Matching Contribution Receivable, Current Year	**159**	140
Employer Profit Sharing Contribution Receivable, Current Year	**429,255**	300,000
Less: Refund of Excess Contribution, Current Year	**(14,838)**	—
Net Assets Available for Benefits per the Financial Statements	**$ 8,213,830**	$ 6,574,322

The following is a reconciliation of the changes in net assets available for benefits per the financial statements to the Form 5500 for the year ended December 31, 2013.

Net Increase in Assets Available for Plan Benefits per the Form 5500	$ 1,525,042
Add: Employee Contribution Receivable, Current Year	841
Add: Employer Matching Contribution Receivable, Current Year	159
Add: Employer Profit Sharing Contribution Receivable, Current Year	429,255
Less: Refund of Excess Contribution, Current Year	(14,838)
Less: Employee Contribution Receivable, Prior Year	(811)
Less: Employer Matching Contribution Receivable, Prior Year	(140)
Less: Employer Profit Sharing Contribution Receivable, Prior Year	(300,000)
Net Increase in Assets Available for Plan Benefits per the Financial Statements	$ 1,639,508

NOTE 10—TAX STATUS

The Plan is a Volume Submitter Defined Contribution Plan ("Volume Submitter Plan") designed by Fidelity Management & Research Co. The Volume Submitter Plan was adopted by the Company on April 1, 2010. The Volume Submitter Plan obtained its latest opinion letter on March 31, 2008, in which the Internal Revenue Service ("IRS") stated that the Volume Submitter Plan, as then designed, was in compliance with the applicable requirements of the Internal Revenue Code ("IRC"). The Company has not applied for its own determination letter from the IRS. However, the Plan administrator believes that the Plan is currently designed and being operated in compliance with the applicable requirements of the IRC. Therefore, the Plan administrator believes that the Plan was qualified and the related trust was tax-exempt as of the financial statement dates.

Accounting principles generally accepted in the United States of America require plan management to evaluate tax positions taken by the plan and recognize a tax liability (or asset) if the plan has taken an uncertain position that more likely than not would not be sustained upon examination by the Internal Revenue Service. The plan administrator has analyzed the tax positions taken by the plan, and has concluded that as of December 31, 2013, there are no uncertain positions taken or expected to be taken that would require recognition of a liability (or asset) or disclosure in the financial statements. The plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress. The plan administrator believes it is no longer subject to income tax examinations for years prior to 2010.

NOTE 11—RISKS AND UNCERTAINTIES

The Plan invests in various investment securities. Investment securities are exposed to various risks such as interest rate, market and credit risks. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in the values of investment securities will occur in the near term, and that such changes could materially affect participants' account balances and the amounts reported in the statements of net assets available for benefits.

NOTE 12—SUBSEQUENT EVENTS

Management has evaluated subsequent events through October 9, 2014, the date which the financial statements were available for issue. There were no subsequent events which require disclosure.

SUPPLEMENTARY INFORMATION

SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)
Form 5500
EIN: 36-0851490
Plan Number: 010
As of December 31, 2013

	Identity of Issuer, Borrower, Lessor or Similar Party	Description of Investment, including Maturity Date Rate of Interest, Collateral, Par or Maturity Value	Cost	Current Value
	Interest-Bearing Cash			
	SDB Investments	SDB Money Market Fund	**	$ 315,082
	Prime Fund - Daily Money Class	Money Market Fund	**	155,668
*	Fidelity Money Market Trust Retirement Government	Money Market Fund	**	1,441
	Total Interest Bearing-Cash			472,191
	Common Stock			
	Various Issuers	SDB Common Stock	**	855,293
	Registered Investment Companies			
	PIMCO Real Estate Real Return Strategy Fund Class A	Registered Investment Company	**	65,351
	Columbia Small Cap Index Fund Class A	Registered Investment Company	**	38,558
	Templeton Foreign Fund Class A	Registered Investment Company	**	115,369
	Wells Fargo Advantage Small Cap Value Fund Class A	Registered Investment Company	**	65,625
	Pioneer Global High Yield Fund Class A	Registered Investment Company	**	29,111
	BlackRock Global Allocation Fund Investor A Shares	Registered Investment Company	**	2,035
	Federated Kaufmann Small Cap Fund Class A Shares	Registered Investment Company	**	59,387
	Hartford Inflation Plus Fund Class R4	Registered Investment Company	**	537
	Invesco European Small Company Fund Class A	Registered Investment Company	**	13,510
	Columbia International Value Fund Class A	Registered Investment Company	**	293
	Dreyfus Opportunistic Midcap Value Fund Class A	Registered Investment Company	**	29,220
	Invesco Comstock Fund Class A	Registered Investment Company	**	6,287
	Lord Abbett Affiliated Fund Class A	Registered Investment Company	**	31,170
	AllianzGI NFJ Mid-Cap Value Fund Class A	Registered Investment Company	**	86,813
	Wells Fargo Advantage Special Small Cap Value Fund Class A	Registered Investment Company	**	90,297
	Wells Fargo Advantage Precious Metals Fund Class A	Registered Investment Company	**	47,861
	Eaton Vance Dividend Builder Fund Class A	Registered Investment Company	**	86,841
	American Beacon International Equity Fund Advisor Class	Registered Investment Company	**	15,996
	BlackRock International Opportunities Portfolio Investor A Shares	Registered Investment Company	**	81,943
	Oppenheimer Rising Dividends Fund Class A	Registered Investment Company	**	103,370
	Janus Enterprise Fund Class S	Registered Investment Company	**	55,628
	Federated Clover Small Value Fund Class A Shares	Registered Investment Company	**	9,623
	Janus Triton Fund Class S	Registered Investment Company	**	17,087
	Pioneer Fundamental Growth Fund Class A	Registered Investment Company	**	84,804
	Janus High-Yield Fund Class S	Registered Investment Company	**	28,597
	Pioneer High Yield Fund Class A	Registered Investment Company	**	15,042
	Federated Prudent Bear Fund Class A Shares	Registered Investment Company	**	2,557
	PIMCO Long-Term U.S. Government Fund Class A	Registered Investment Company	**	872
	BlackRock S&P 500 Stock Fund Investor A Shares	Registered Investment Company	**	642,668
	Janus Global Research Fund Class S Shares	Registered Investment Company	**	30,552
	Alger Spectra Fund Class A	Registered Investment Company	**	133,353
	Hartford International Small Company Fund Class R4	Registered Investment Company	**	27,822
	Janus Global Technology Fund Class S	Registered Investment Company	**	493
	Aberdeen Emerging Markets Fund Class A	Registered Investment Company	**	4,866
*	Fidelity Advisor Leveraged Company Stock Fund - Class A	Registered Investment Company	**	81,908
*	Fidelity Advisor Consumer Discretionary Fund - Class A	Registered Investment Company	**	1,889
*	Fidelity Advisor Freedom 2010 Fund - Class A	Registered Investment Company	**	7,328
*	Fidelity Advisor Freedom 2020 Fund - Class A	Registered Investment Company	**	621,354
*	Fidelity Advisor Freedom 2030 Fund - Class A	Registered Investment Company	**	746,141
*	Fidelity Advisor Freedom 2040 Fund - Class A	Registered Investment Company	**	94,381
*	Fidelity Advisor Freedom 2015 Fund - Class A	Registered Investment Company	**	584,920
*	Fidelity Advisor Freedom 2025 Fund - Class A	Registered Investment Company	**	1,252,782
*	Fidelity Advisor Freedom 2035 Fund - Class A	Registered Investment Company	**	218,438
*	Fidelity Advisor Freedom 2045 Fund - Class A	Registered Investment Company	**	161,304
*	Fidelity Advisor Freedom 2050 Fund - Class A	Registered Investment Company	**	67,561
*	Fidelity Advisor Worldwide Fund - Class A	Registered Investment Company	**	89,404
*	Fidelity Advisor Freedom 2055 Fund - Class A	Registered Investment Company	**	5,641
	Principle International Equity Index Fund R-3	Registered Investment Company	**	3,116
	Federated Mid-Cap Index Fund Service Shares	Registered Investment Company	**	17,480
	Lord Abbett Mid Cap Stock Fund Class A	Registered Investment Company	**	1,802
	MFS Emerging Markets Debt Fund Class R3	Registered Investment Company	**	201
	PIMCO Low Duration Fund Clss A	Registered Investment Company	**	303
	Pioneer Equity Income Fund Class A	Registered Investment Company	**	323
	Various Issuers	SDB Mutual Funds	**	79,458
	Total Registered Investment Companies			6,059,272
	Notes Receivable from Participants	Interest at 4.25% to 5.25% Maturing thru December 2018	**	411,657
	TOTAL			$ 7,798,413

* Represents a party in interest.

** Cost basis is not required to be reported for participant-directed accounts.

PEER FOODS GROUP, INC. PROFIT SHARING AND 401(K) PLAN

FINANCIAL STATEMENTS

DECEMBER 31, 2013

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Warady & Davis LLP
Certified Public Accountants & Consultants

INDEPENDENT AUDITORS' REPORT

Plan Administrator
Peer Foods Group, Inc. Profit Sharing and 401(k) Plan
Chicago, Illinois

Report on the Financial Statements

We were engaged to audit the accompanying financial statements of PEER FOODS GROUP, INC. PROFIT SHARING AND 401(K) PLAN ("Plan"), which comprise the statements of net assets available for benefits as of December 31, 2013 and 2012, and the related statements of changes in net assets available for benefits for the years then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

Plan 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.

Auditors' 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 4, which was certified by Fidelity Management Trust Company, the trustee of the Plan, except for comparing the information with the related information included in the financial statements and supplemental schedules. 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 a certification from the trustee as of and for the years ended December 31, 2013 and 2012 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.

Other Matter

We were engaged for the purpose of forming an opinion on the financial statements as a whole. The supplemental schedule listed in the accompanying table of contents, which is the responsibility of plan management, is presented for the purpose of additional analysis and is not a required part of the financial statements but is required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974. Because of the significance of the matter described in the Basis for Disclaimer of Opinion paragraph, it is inappropriate to and we do not express an opinion on the supplemental schedule referred to above.

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 schedule, 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.



October 9, 2014

STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS

As of December 31	**2013**	2012
ASSETS		
Investments at Fair Value		
Money Market Fund	**$ 472,191**	$ 486,600
Common Stocks	**855,293**	707,528
Mutual Funds	**6,059,272**	4,734,427
	7,386,756	5,928,555
Receivables		
Employer Matching Contribution	**159**	140
Employee Contribution	**841**	811
Employer Profit Sharing Contribution	**429,255**	300,000
Notes Receivable from Participants	**411,657**	344,816
Total Receivables	**841,912**	645,767
Total Assets	**8,228,668**	6,574,322
LIABILITIES		
Excess Contributions Payable	**14,838**	—
NET ASSETS AVAILABLE FOR BENEFITS	**$ 8,213,830**	$ 6,574,322

See accompanying notes.

STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS

For the Years Ended December 31	**2013**	2012
ADDITIONS TO NET ASSETS ATTRIBUTED TO		
Investment Income		
Net Appreciation in Fair Value of Investments	**$ 719,763**	$ 281,618
Gain on Sale of Investments	**3,914**	8,390
Dividends and Interest	**329,578**	132,561
Total Investment Income	**1,053,255**	422,569
Interest Income - Notes Receivable from Participants	**15,760**	21,494
Contributions		
Employer Matching	**22,278**	24,355
Employee	**262,064**	226,193
Employer Profit Sharing	**429,255**	300,000
Employee Rollover	**34,232**	28,627
Total Contributions	**747,829**	579,175
Total Additions	**1,816,844**	1,023,238
DEDUCTIONS FROM NET ASSETS ATTRIBUTED TO		
Administrative Fees	**4,319**	3,216
Corrective Distributions	**22,564**	—
Benefits Paid to Participants	**150,453**	183,810
Total Deductions	**177,336**	187,026
Net Increase	**1,639,508**	836,212
NET ASSETS AVAILABLE FOR BENEFITS		
Beginning	**6,574,322**	5,738,110
ENDING	**$ 8,213,830**	$ 6,574,322

See accompanying notes.

NOTES TO FINANCIAL STATEMENTS

NOTE 1—PLAN DESCRIPTION

Peer Foods Group, Inc. Profit Sharing and 401(k) Plan (the "Plan") is a defined contribution plan designed to operate under the provisions of Section 401(k) of the Internal Revenue Code ("IRC"). The Plan covers all eligible domestic employees of Peer Foods Group, Inc. (the "Company"). It is subject to the provisions of the Employee Retirement Income Security Act of 1974 ("ERISA"), as amended. The following description of the Plan provides only summary information. Participants should refer to the Plan document for a more complete description of the Plan's provisions.

ELIGIBILITY

Each employee is eligible to make pre-tax deferrals to the Plan and receive Company discretionary matching contributions after completion of three months of service. Each employee shall become eligible for the Company discretionary profit-sharing contribution on the first day of the year after the employee completes one year of service.

CONTRIBUTIONS

Each year, participants may elect to contribute up to 100% of pre-tax annual compensation as defined in the Plan to a maximum of $17,500 for 2013 and $17,000 for 2012. Participants who are at least age 50 may make additional "catch-up" contributions of $5,500 in 2013 and 2012. Participants may also rollover amounts representing distributions from other qualified plans. Participants direct the investment of their contributions into various investment options offered by the Plan.

Based on the discretion of the Board of Directors, the Company may, subject to certain limitations, make a matching contribution to the Plan for each participant in accordance with the terms of the Plan document. For 2013 and 2012, the Company made a matching contribution of 25% of a participant's salary deferral, not to exceed $500 for each eligible participant.

The Company may also elect to make a discretionary profit-sharing contribution. This contribution is non-participant-directed. Company's discretionary profit-sharing contributions were $429,255 for 2013 and $300,000 for 2012.

PARTICIPANT ACCOUNTS

Each participant's account is credited with the participant's contribution, the Company's discretionary matching contribution, and an allocation of the Company's discretionary profit-sharing contribution, if applicable, and Plan earnings. Allocations are based on participant contributions, plan compensation, or account balances, as defined by the Plan document. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

VESTING

Participants are 100% vested in their elective deferral contributions plus actual earnings thereon. Vesting in the Company's contributions portion of their accounts, plus actual earnings thereon, is based on years of continuous service. A participant is 100% vested after six years of credited service.

NOTE 1—PLAN DESCRIPTION (Continued)

PAYMENT OF BENEFITS

Upon termination of service due to retirement, disability or death, a participant may elect to receive a lump-sum payment. Upon termination of service prior to retirement, disability or death, the participants may elect to receive, based on their account balances as of the last day of the calendar quarter following termination, the vested portion of their accounts in a lump-sum payment. Participants may receive distributions of their elective deferral contributions plus actual earnings thereon under certain financial hardship circumstances.

FORFEITURES

Forfeitures of participants' Company matching accounts can be applied to pay recordkeeping administrative expenses of the Plan if so directed by the Plan administrator. Any amounts not used to pay administrative expenses are allocated as of the last day of each Plan Year as an additional employer matching contribution if the forfeitures are from employer matching contribution accounts, or allocated as an additional employer profit sharing contribution if the forfeitures are from employer profit sharing accounts. The allocations are made in the same manner as regular matching and/or profit-sharing contributions are allocated. If a participant is rehired before he or she incurs five consecutive one-year breaks in service, any amounts forfeited will be restored to his or her matching account and profit-sharing account. Forfeitures totaled $7,368 in 2013 and $10,803 in 2012. Forfeitures allocated to participants were $8,189 in 2013 and $-0- in 2012. Forfeitures used for the plan expenses were $1,500 in 2013 and $997 in 2012. Forfeitures available for future use are $11,242 as of December 31, 2013 and $13,562 as of December 31, 2012.

NOTE 2—SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

BASIS OF ACCOUNTING

The accompanying financial statements have been prepared using the accrual basis of accounting.

USE OF ESTIMATES

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

INVESTMENT VALUATION AND INCOME RECOGNITION

The Plan's investments at December 31, 2013 and 2012 are held by Fidelity Management Trust Company ("Fidelity"). All investments are valued at market value as of December 31, 2013 and 2012.

Purchases and sales of securities are reflected on a trade-date basis. Realized gains and losses on the sale of securities are computed on a specific identification basis.

Dividend and interest income are recognized when received. Net appreciation (depreciation) on investments held represents the change in market value of the investments from the beginning of the Plan year (or date the investments were purchased, if later) to the end of the Plan year.

NOTE 2—SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

NOTES RECEIVABLE FROM PARTICIPANTS

Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest. Delinquent participant loans are reclassified as distributions based upon the terms of the plan document.

PAYMENT OF BENEFITS

Benefits are recorded when paid.

ADMINISTRATIVE EXPENSES

Expenses of the Plan, to the extent that the Company does not pay such expenses, may be paid out of the assets of the Plan.

NOTE 3—FAIR VALUE MEASUREMENTS

Financial Accounting Standards Board (FASB) Accounting Standards Codification (ASC) 820, *Fair Value Measurements and Disclosures*, establishes a framework for measuring fair value. That framework 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 measurements) and the lowest priority to unobservable inputs (level 3 measurements). The three levels of the fair value hierarchy under FASB ASC 820 are described below:

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.

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 observable inputs and minimize the use of unobservable inputs.

Following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodologies used at December 31, 2013 and 2012.

NOTE 3—FAIR VALUE MEASUREMENTS (Continued)

Level 1 Fair Value Measurements

Mutual funds are valued at quoted net asset values of the shares held by the Plan at year-end.

Common stocks are valued at closing price reported on the active market on which the individual securities are traded.

Level 2 Fair Value Measurements

Money market funds are valued at the net asset value ("NAV") of shares held by the Plan at year-end. NAV is determined by each fund's trustee based on the fair value of the underlying securities held less liabilities held by the fund. This practical expedient is not used when it is determined to be provable that the fund will sell the investment for an amount different than the reported NAV. Plan transactions (issuance and redemptions) may occur daily. There are no restrictions on a participant's ability to redeem investments. However, withdrawals prompted by certain events (e.g., termination of the managed income portfolio, changes in laws and regulations) may restrict a participant's ability to redeem the investment at its NAV.

Level 3 Fair Value Measurements

Level 3 Fair Value Measurements are not applicable to the Plan for 2013 and 2012.

The methods described above may produce a fair value calculation that may not be indicative of net realizable value or reflective of future fair values. Furthermore, while the Plan believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair value of certain financial instruments could result in a different fair value measurement at the reporting date.

The following table sets forth by level, within the fair value hierarchy, the Plan's assets at fair value as of December 31, 2013 and 2012:

	Assets at Fair Value as of December 31, 2013			
	Level 1	Level 2	Level 3	Total
Mutual Funds:				
Blend Funds	$ 4,927,926	$ —	$ —	$ 4,927,926
Growth Funds	621,054	—	—	621,054
Income Funds	74,663	—	—	74,663
Value Funds	356,171	—	—	356,171
Other	79,458	—	—	79,458
Total Mutual Funds	6,059,272	—	—	6,059,272
Money Market Fund	—	472,191	—	472,191
Common Stocks	855,293	—	—	855,293
Total Assets at Fair Value	$ 6,914,565	$ 472,191	$ —	$ 7,386,756

NOTE 3—FAIR VALUE MEASUREMENTS (Continued)

	Assets at Fair Value as of December 31, 2012			
	Level 1	Level 2	Level 3	Total
Mutual Funds:				
Blend Funds	$ 4,103,381	$ —	$ —	$ 4,103,381
Growth Funds	298,229	—	—	298,229
Income Funds	79,708	—	—	79,708
Value Funds	193,710	—	—	193,710
Other	59,399	—	—	59,399
Total Mutual Funds	4,734,427	—	—	4,734,427
Money Market Fund	—	486,600	—	486,600
Common Stocks	707,528	—	—	707,528
Total Assets at Fair Value	$ 5,441,955	$ 486,600	$ —	$ 5,928,555

NOTE 4—INFORMATION CERTIFIED BY TRUSTEE AND CUSTODIAN

The Plan administrator has elected the method of annual reporting compliance permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Accordingly, Fidelity Management Trust Company, the trustee of the Plan, has certified that the following data included in the accompanying financial statements and schedule is complete and accurate.

a. Investments, as shown in the accompanying statements of assets available for benefits as of December 31, 2013 and 2012.

b. Investment income, as shown in the accompanying statements of changes in assets available for benefits for the years ended December 31, 2013 and 2012.

c. The schedule of assets (held at end of year) as of December 31, 2013, as shown on Schedule H - Line 4(i).

The Plan's independent 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 schedule.

NOTE 5—INVESTMENTS

Investments representing 5% or more of net assets available for benefits as of December 31:

	2013	2012
BlackRock S&P 500 Stock Fund Investor A Shares	**$ 642,668**	$ 458,759
Fidelity Advisor Freedom 2020 Fund - Class A	**621,354**	536,796
Fidelity Advisor Freedom 2030 Fund - Class A	**746,141**	684,483
Fidelity Advisor Freedom 2015 Fund - Class A	**584,920**	682,181
Fidelity Advisor Freedom 2025 Fund - Class A	**1,252,782**	1,064,606

During 2013 and 2012, the Plan's investments (including gains and losses on investment bought and sold, as well as held during the year) appreciated in value as follows:

Mutual Funds	**$ 583,089**	$ 236,394
Common Stock	**136,674**	45,224
	$ 719,763	$ 281,618

NOTE 6—NOTES RECEIVABLE FROM PARTICIPANTS

Participants may borrow up to 50% of their vested account balance, with a maximum loan amount of $50,000. Repayments of principal and interest are made in equal monthly installments over the specified loan period (generally five years) through payroll deductions. Interest rates are determined by following procedures that consider the rates issued by lending institutions under similar circumstances.

NOTE 7—RELATED PARTY AND PARTY-IN-INTEREST TRANSACTIONS

The Company provides to the Plan certain accounting and administrative services for which no fees are charged. In addition, the majority of the expenses of the Plan are paid by the Company.

Plan investments are managed by the trustee of the Plan. The Plan's third party administrator is Fidelity. Fidelity is considered a party-in-interest.

NOTE 8—PLAN TERMINATION

Although it has not expressed any intent to do so, the Company has the right under the Plan to discontinue its contributions at any time and to terminate the Plan at any time subject to the provisions of ERISA. If the Company should decide to terminate the Plan, participants would become 100% vested in the Company contribution portion of their accounts.

NOTE 9—RECONCILIATION OF FINANCIAL STATEMENTS TO FORM 5500

The following is a reconciliation of net assets available for benefits per the financial statements to the Form 5500 as of December 31, 2013 and 2012:

	2013	2012
Net Assets Available for Benefits per the Form 5500	**$ 7,798,413**	$ 6,273,371
Add: Employee Contribution Receivable, Current Year	**841**	811
Employer Matching Contribution Receivable, Current Year	**159**	140
Employer Profit Sharing Contribution Receivable, Current Year	**429,255**	300,000
Less: Refund of Excess Contribution, Current Year	**(14,838)**	—
Net Assets Available for Benefits per the Financial Statements	**$ 8,213,830**	$ 6,574,322

The following is a reconciliation of the changes in net assets available for benefits per the financial statements to the Form 5500 for the year ended December 31, 2013.

Net Increase in Assets Available for Plan Benefits per the Form 5500	$ 1,525,042
Add: Employee Contribution Receivable, Current Year	841
Add: Employer Matching Contribution Receivable, Current Year	159
Add: Employer Profit Sharing Contribution Receivable, Current Year	429,255
Less: Refund of Excess Contribution, Current Year	(14,838)
Less: Employee Contribution Receivable, Prior Year	(811)
Less: Employer Matching Contribution Receivable, Prior Year	(140)
Less: Employer Profit Sharing Contribution Receivable, Prior Year	(300,000)
Net Increase in Assets Available for Plan Benefits per the Financial Statements	$ 1,639,508

NOTE 10—TAX STATUS

The Plan is a Volume Submitter Defined Contribution Plan ("Volume Submitter Plan") designed by Fidelity Management & Research Co. The Volume Submitter Plan was adopted by the Company on April 1, 2010. The Volume Submitter Plan obtained its latest opinion letter on March 31, 2008, in which the Internal Revenue Service ("IRS") stated that the Volume Submitter Plan, as then designed, was in compliance with the applicable requirements of the Internal Revenue Code ("IRC"). The Company has not applied for its own determination letter from the IRS. However, the Plan administrator believes that the Plan is currently designed and being operated in compliance with the applicable requirements of the IRC. Therefore, the Plan administrator believes that the Plan was qualified and the related trust was tax-exempt as of the financial statement dates.

Accounting principles generally accepted in the United States of America require plan management to evaluate tax positions taken by the plan and recognize a tax liability (or asset) if the plan has taken an uncertain position that more likely than not would not be sustained upon examination by the Internal Revenue Service. The plan administrator has analyzed the tax positions taken by the plan, and has concluded that as of December 31, 2013, there are no uncertain positions taken or expected to be taken that would require recognition of a liability (or asset) or disclosure in the financial statements. The plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress. The plan administrator believes it is no longer subject to income tax examinations for years prior to 2010.

NOTE 11—RISKS AND UNCERTAINTIES

The Plan invests in various investment securities. Investment securities are exposed to various risks such as interest rate, market and credit risks. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in the values of investment securities will occur in the near term, and that such changes could materially affect participants' account balances and the amounts reported in the statements of net assets available for benefits.

NOTE 12—SUBSEQUENT EVENTS

Management has evaluated subsequent events through October 9, 2014, the date which the financial statements were available for issue. There were no subsequent events which require disclosure.

SUPPLEMENTARY INFORMATION

SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)
Form 5500
EIN: 36-0851490
Plan Number: 010
As of December 31, 2013

	Identity of Issuer, Borrower, Lessor or Similar Party	Description of Investment, including Maturity Date Rate of Interest, Collateral, Par or Maturity Value	Cost	Current Value
	Interest-Bearing Cash			
	SDB Investments	SDB Money Market Fund	**	$ 315,082
	Prime Fund - Daily Money Class	Money Market Fund	**	155,668
*	Fidelity Money Market Trust Retirement Government	Money Market Fund	**	1,441
	Total Interest Bearing-Cash			472,191
	Common Stock			
	Various Issuers	SDB Common Stock	**	855,293
	Registered Investment Companies			
	PIMCO Real Estate Real Return Strategy Fund Class A	Registered Investment Company	**	65,351
	Columbia Small Cap Index Fund Class A	Registered Investment Company	**	38,558
	Templeton Foreign Fund Class A	Registered Investment Company	**	115,369
	Wells Fargo Advantage Small Cap Value Fund Class A	Registered Investment Company	**	65,625
	Pioneer Global High Yield Fund Class A	Registered Investment Company	**	29,111
	BlackRock Global Allocation Fund Investor A Shares	Registered Investment Company	**	2,035
	Federated Kaufmann Small Cap Fund Class A Shares	Registered Investment Company	**	59,387
	Hartford Inflation Plus Fund Class R4	Registered Investment Company	**	537
	Invesco European Small Company Fund Class A	Registered Investment Company	**	13,510
	Columbia International Value Fund Class A	Registered Investment Company	**	293
	Dreyfus Opportunistic Midcap Value Fund Class A	Registered Investment Company	**	29,220
	Invesco Comstock Fund Class A	Registered Investment Company	**	6,287
	Lord Abbett Affiliated Fund Class A	Registered Investment Company	**	31,170
	AllianzGI NFJ Mid-Cap Value Fund Class A	Registered Investment Company	**	86,813
	Wells Fargo Advantage Special Small Cap Value Fund Class A	Registered Investment Company	**	90,297
	Wells Fargo Advantage Precious Metals Fund Class A	Registered Investment Company	**	47,861
	Eaton Vance Dividend Builder Fund Class A	Registered Investment Company	**	86,841
	American Beacon International Equity Fund Advisor Class	Registered Investment Company	**	15,996
	BlackRock International Opportunities Portfolio Investor A Shares	Registered Investment Company	**	81,943
	Oppenheimer Rising Dividends Fund Class A	Registered Investment Company	**	103,370
	Janus Enterprise Fund Class S	Registered Investment Company	**	55,628
	Federated Clover Small Value Fund Class A Shares	Registered Investment Company	**	9,623
	Janus Triton Fund Class S	Registered Investment Company	**	17,087
	Pioneer Fundamental Growth Fund Class A	Registered Investment Company	**	84,804
	Janus High-Yield Fund Class S	Registered Investment Company	**	28,597
	Pioneer High Yield Fund Class A	Registered Investment Company	**	15,042
	Federated Prudent Bear Fund Class A Shares	Registered Investment Company	**	2,557
	PIMCO Long-Term U.S. Government Fund Class A	Registered Investment Company	**	872
	BlackRock S&P 500 Stock Fund Investor A Shares	Registered Investment Company	**	642,668
	Janus Global Research Fund Class S Shares	Registered Investment Company	**	30,552
	Alger Spectra Fund Class A	Registered Investment Company	**	133,353
	Hartford International Small Company Fund Class R4	Registered Investment Company	**	27,822
	Janus Global Technology Fund Class S	Registered Investment Company	**	493
	Aberdeen Emerging Markets Fund Class A	Registered Investment Company	**	4,866
*	Fidelity Advisor Leveraged Company Stock Fund - Class A	Registered Investment Company	**	81,908
*	Fidelity Advisor Consumer Discretionary Fund - Class A	Registered Investment Company	**	1,889
*	Fidelity Advisor Freedom 2010 Fund - Class A	Registered Investment Company	**	7,328
*	Fidelity Advisor Freedom 2020 Fund - Class A	Registered Investment Company	**	621,354
*	Fidelity Advisor Freedom 2030 Fund - Class A	Registered Investment Company	**	746,141
*	Fidelity Advisor Freedom 2040 Fund - Class A	Registered Investment Company	**	94,381
*	Fidelity Advisor Freedom 2015 Fund - Class A	Registered Investment Company	**	584,920
*	Fidelity Advisor Freedom 2025 Fund - Class A	Registered Investment Company	**	1,252,782
*	Fidelity Advisor Freedom 2035 Fund - Class A	Registered Investment Company	**	218,438
*	Fidelity Advisor Freedom 2045 Fund - Class A	Registered Investment Company	**	161,304
*	Fidelity Advisor Freedom 2050 Fund - Class A	Registered Investment Company	**	67,561
*	Fidelity Advisor Worldwide Fund - Class A	Registered Investment Company	**	89,404
*	Fidelity Advisor Freedom 2055 Fund - Class A	Registered Investment Company	**	5,641
	Principle International Equity Index Fund R-3	Registered Investment Company	**	3,116
	Federated Mid-Cap Index Fund Service Shares	Registered Investment Company	**	17,480
	Lord Abbett Mid Cap Stock Fund Class A	Registered Investment Company	**	1,802
	MFS Emerging Markets Debt Fund Class R3	Registered Investment Company	**	201
	PIMCO Low Duration Fund Clss A	Registered Investment Company	**	303
	Pioneer Equity Income Fund Class A	Registered Investment Company	**	323
	Various Issuers	SDB Mutual Funds	**	79,458
	Total Registered Investment Companies			6,059,272
	Notes Receivable from Participants	Interest at 4.25% to 5.25% Maturing thru December 2018	**	411,657
	TOTAL			$ 7,798,413

* Represents a party in interest.

** Cost basis is not required to be reported for participant-directed accounts.