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;
- [X] 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
CERBERUS CAPITAL MANAGEMENT, L.P. PROFIT SHARING 401(K) PLAN

1b Three-digit plan number (PN) ▶ 001

1c Effective date of plan 01/01/1994

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

CERBERUS CAPITAL MANAGEMENT, L.P.

875 THIRD AVENUE, FLOOR 11
NEW YORK, NY 10022-7223

2b Employer Identification Number (EIN)
13-3709388

2c Sponsor's telephone number
212-891-2100

2d Business code (see instructions)
523900

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.	10/17/2014	ROUDABEH PEZESHKIAN
	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:

a Sponsor's name

4b EIN

4c PN

5	Total number of participants at the beginning of the plan year	**5**	706
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**	357
b	Retired or separated participants receiving benefits	**6b**	0
c	Other retired or separated participants entitled to future benefits	**6c**	385
d	Subtotal. Add lines **6a**, **6b**, and **6c**	**6d**	742
e	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	**6e**	2
f	Total. Add lines **6d** and **6e**.	**6f**	744
g	Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**	739
h	Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested	**6h**	0
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:
2A 2E 2F 2H 2J 2S 2T 3B 3D 3H

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)

- **(1)** [X] Insurance
- **(2)** [ ] Code section 412(e)(3) insurance contracts
- **(3)** [X] Trust
- **(4)** [ ] General assets of the sponsor

9b Plan benefit arrangement (check all that apply)

- **(1)** [X] Insurance
- **(2)** [ ] Code section 412(e)(3) insurance contracts
- **(3)** [X] Trust
- **(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)** [X] 1 **A** (Insurance Information)
- **(4)** [X] **C** (Service Provider Information)
- **(5)** [X] **D** (DFE/Participating Plan Information)
- **(6)** [ ] **G** (Financial Transaction Schedules)

SCHEDULE A (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Insurance Information

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

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

▶ Insurance companies are required to provide the information pursuant to ERISA section 103(a)(2).

OMB No. 1210-0110

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
CERBERUS CAPITAL MANAGEMENT, L.P. PROFIT SHARING 401(K) PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
CERBERUS CAPITAL MANAGEMENT, L.P.

D Employer Identification Number (EIN)
13-3709388

Part I **Information Concerning Insurance Contract Coverage, Fees, and Commissions** Provide information for each contract on a separate Schedule A. Individual contracts grouped as a unit in Parts II and III can be reported on a single Schedule A.

1 Coverage Information:

(a) Name of insurance carrier

JOHN HANCOCK LIFE INSURANCE COMPANY OF NEW YORK

(b) EIN	(c) NAIC code	(d) Contract or identification number	(e) Approximate number of persons covered at end of policy or contract year	Policy or contract year	
				(f) From	(g) To
13-3646501	86375	84668	577	01/01/2013	12/31/2013

2 Insurance fee and commission information. Enter the total fees and total commissions paid. List in line 3 the agents, brokers, and other persons in descending order of the amount paid.

(a) Total amount of commissions paid	(b) Total amount of fees paid
139913	5985

3 Persons receiving commissions and fees. (Complete as many entries as needed to report all persons).

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

AXA NETWORK LLC
1290 AVENUE OF THE AMERICAS
NEW YORK, NY 10104

(b) Amount of sales and base commissions paid	Fees and other commissions paid		
	(c) Amount	(d) Purpose	(e) Organization code
106879			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

T R PAUL, INC.
14 COMMERCE ROAD
NEWTOWN, CT 06470

(b) Amount of sales and base commissions paid	Fees and other commissions paid		
	(c) Amount	(d) Purpose	(e) Organization code
33034	5985	ADMINISTRATIVE	5

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	

Part II Investment and Annuity Contract Information

Where individual contracts are provided, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

4	Current value of plan's interest under this contract in the general account at year end	**4**	
5	Current value of plan's interest under this contract in separate accounts at year end	**5**	91237600

6 Contracts With Allocated Funds:

a State the basis of premium rates ▶

b	Premiums paid to carrier	**6b**	
c	Premiums due but unpaid at the end of the year	**6c**	
d	If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, enter amount.	**6d**	

Specify nature of costs ▶

e Type of contract: (1) ☐ individual policies (2) ☐ group deferred annuity

(3) ☐ other (specify) ▶

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

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

a Type of contract: (1) ☐ deposit administration (2) ☐ immediate participation guarantee

(3) ☐ guaranteed investment (4) ☐ other ▶

b	Balance at the end of the previous year			**7b**	
c	Additions: (1) Contributions deposited during the year	**7c(1)**			
	(2) Dividends and credits	**7c(2)**			
	(3) Interest credited during the year	**7c(3)**			
	(4) Transferred from separate account	**7c(4)**			
	(5) Other (specify below) ▶	**7c(5)**			
	(6) Total additions			**7c(6)**	
d	Total of balance and additions (add lines **7b** and **7c(6)**).			**7d**	
e	Deductions:				
	(1) Disbursed from fund to pay benefits or purchase annuities during year	**7e(1)**			
	(2) Administration charge made by carrier	**7e(2)**			
	(3) Transferred to separate account	**7e(3)**			
	(4) Other (specify below) ▶	**7e(4)**			
	(5) Total deductions			**7e(5)**	
f	Balance at the end of the current year (subtract line **7e(5)** from line **7d**)			**7f**	

Part III Welfare Benefit Contract Information

If more than one contract covers the same group of employees of the same employer(s) or members of the same employee organizations(s), the information may be combined for reporting purposes if such contracts are experience-rated as a unit. Where contracts cover individual employees, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

8 Benefit and contract type (check all applicable boxes)

a ☐ Health (other than dental or vision) **b** ☐ Dental **c** ☐ Vision **d** ☐ Life insurance
e ☐ Temporary disability (accident and sickness) **f** ☐ Long-term disability **g** ☐ Supplemental unemployment **h** ☐ Prescription drug
i ☐ Stop loss (large deductible) **j** ☐ HMO contract **k** ☐ PPO contract **l** ☐ Indemnity contract
m ☐ Other (specify) ▶

9 Experience-rated contracts:				
a Premiums: (1) Amount received	**9a(1)**			
(2) Increase (decrease) in amount due but unpaid	**9a(2)**			
(3) Increase (decrease) in unearned premium reserve	**9a(3)**			
(4) Earned (**(1)** + **(2)** - **(3)**)			**9a(4)**	
b Benefit charges (1) Claims paid	**9b(1)**			
(2) Increase (decrease) in claim reserves	**9b(2)**			
(3) Incurred claims (add **(1)** and **(2)**)			**9b(3)**	
(4) Claims charged			**9b(4)**	
c Remainder of premium: (1) Retention charges (on an accrual basis) --				
(A) Commissions	**9c(1)(A)**			
(B) Administrative service or other fees	**9c(1)(B)**			
(C) Other specific acquisition costs	**9c(1)(C)**			
(D) Other expenses	**9c(1)(D)**			
(E) Taxes	**9c(1)(E)**			
(F) Charges for risks or other contingencies	**9c(1)(F)**			
(G) Other retention charges	**9c(1)(G)**			
(H) Total retention			**9c(1)(H)**	
(2) Dividends or retroactive rate refunds. (These amounts were ☐ paid in cash, or ☐ credited.)			**9c(2)**	
d Status of policyholder reserves at end of year: (1) Amount held to provide benefits after retirement			**9d(1)**	
(2) Claim reserves			**9d(2)**	
(3) Other reserves			**9d(3)**	
e Dividends or retroactive rate refunds due. (Do not include amount entered in line **9c(2)**.)			**9e**	
10 Nonexperience-rated contracts:				
a Total premiums or subscription charges paid to carrier			**10a**	
b If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, other than reported in Part I, line 2 above, report amount			**10b**	

Specify nature of costs ▶

Part IV Provision of Information

11 Did the insurance company fail to provide any information necessary to complete Schedule A? ☐ Yes ☐ No

12 If the answer to line 11 is "Yes," specify the information not provided. ▶

SCHEDULE C (Form 5500)	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 CERBERUS CAPITAL MANAGEMENT, L.P. PROFIT SHARING 401(K) PLAN	**B** Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 CERBERUS CAPITAL MANAGEMENT, L.P.	**D** Employer Identification Number (EIN) 13-3709388

Part I Service Provider Information (see instructions)

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

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

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

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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)

JOHN HANCOCK NEW YORK

13-3646501

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
15 28 59 60 62 63 68	RECORDKEEPER	874	Yes [X] No [ ]	Yes [X] No [ ]	0	Yes [X] 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 [ ]

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
(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.	

(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.	

(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 D (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

DFE/Participating Plan Information

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

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

OMB No. 1210-0110

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
CERBERUS CAPITAL MANAGEMENT, L.P. PROFIT SHARING 401(K) PLAN

B Three-digit plan number (PN) ▶ 001

C Plan or DFE sponsor's name as shown on line 2a of Form 5500
CERBERUS CAPITAL MANAGEMENT, L.P.

D Employer Identification Number (EIN)
13-3709388

Part I **Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs)**
(Complete as many entries as needed to report all interests in DFEs)

a Name of MTIA, CCT, PSA, or 103-12 IE: RETIREMENT LIVING THROUGH 2050			
b Name of sponsor of entity listed in (a): JOHN HANCOCK NEW YORK			
c EIN-PN 13-3646501-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	391069
a Name of MTIA, CCT, PSA, or 103-12 IE: RETIREMENT LIVING THROUGH 2045			
b Name of sponsor of entity listed in (a): JOHN HANCOCK NEW YORK			
c EIN-PN 13-3646501-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	10382428
a Name of MTIA, CCT, PSA, or 103-12 IE: RETIREMENT LIVING THROUGH 2040			
b Name of sponsor of entity listed in (a): JOHN HANCOCK NEW YORK			
c EIN-PN 13-3646501-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	12860783
a Name of MTIA, CCT, PSA, or 103-12 IE: RETIREMENT LIVING THROUGH 2035			
b Name of sponsor of entity listed in (a): JOHN HANCOCK NEW YORK			
c EIN-PN 13-3646501-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	11020948
a Name of MTIA, CCT, PSA, or 103-12 IE: RETIREMENT LIVING THROUGH 2030			
b Name of sponsor of entity listed in (a): JOHN HANCOCK NEW YORK			
c EIN-PN 13-3646501-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	12245560
a Name of MTIA, CCT, PSA, or 103-12 IE: RETIREMENT LIVING THROUGH 2025			
b Name of sponsor of entity listed in (a): JOHN HANCOCK NEW YORK			
c EIN-PN 13-3646501-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	12397752
a Name of MTIA, CCT, PSA, or 103-12 IE: RETIREMENT LIVING THROUGH 2020			
b Name of sponsor of entity listed in (a): JOHN HANCOCK NEW YORK			
c EIN-PN 13-3646501-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	5596507

a Name of MTIA, CCT, PSA, or 103-12 IE: RETIREMENT LIVING THROUGH 2015		
b Name of sponsor of entity listed in (a): JOHN HANCOCK NEW YORK		
c EIN-PN 13-3646501-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 1726237
a Name of MTIA, CCT, PSA, or 103-12 IE: RETIREMENT LIVING THROUGH 2010		
b Name of sponsor of entity listed in (a): JOHN HANCOCK NEW YORK		
c EIN-PN 13-3646501-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 556308
a Name of MTIA, CCT, PSA, or 103-12 IE: DFA EMERGING MARKETS VALUE		
b Name of sponsor of entity listed in (a): JOHN HANCOCK NEW YORK		
c EIN-PN 13-3646501-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 1007291
a Name of MTIA, CCT, PSA, or 103-12 IE: PRU JENNISON 20/20 FOCUS FUND		
b Name of sponsor of entity listed in (a): JOHN HANCOCK NEW YORK		
c EIN-PN 13-3646501-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0
a Name of MTIA, CCT, PSA, or 103-12 IE: INTL EQUITY INDEX FUND		
b Name of sponsor of entity listed in (a): JOHN HANCOCK NEW YORK		
c EIN-PN 13-3646501-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 422776
a Name of MTIA, CCT, PSA, or 103-12 IE: SMALL CAP INDEX FUND		
b Name of sponsor of entity listed in (a): JOHN HANCOCK NEW YORK		
c EIN-PN 13-3646501-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 456821
a Name of MTIA, CCT, PSA, or 103-12 IE: FRANKLIN SMALL-MID GROWTH		
b Name of sponsor of entity listed in (a): JOHN HANCOCK NEW YORK		
c EIN-PN 13-3646501-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 347621
a Name of MTIA, CCT, PSA, or 103-12 IE: OPPENHEIMER GLOBAL		
b Name of sponsor of entity listed in (a): JOHN HANCOCK NEW YORK		
c EIN-PN 13-3646501-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 412586
a Name of MTIA, CCT, PSA, or 103-12 IE: INVESCO SMALL CAP GROWTH		
b Name of sponsor of entity listed in (a): JOHN HANCOCK NEW YORK		
c EIN-PN 13-3646501-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 343957
a Name of MTIA, CCT, PSA, or 103-12 IE: REAL EST. SECURITIES FUND		
b Name of sponsor of entity listed in (a): JOHN HANCOCK NEW YORK		
c EIN-PN 13-3646501-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 945373

a Name of MTIA, CCT, PSA, or 103-12 IE: IVY ASSET STRATEGY FUND		
b Name of sponsor of entity listed in (a): JOHN HANCOCK NEW YORK		
c EIN-PN 13-3646501-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 198874
a Name of MTIA, CCT, PSA, or 103-12 IE: VANGUARD SMALL CAP VALUE INDEX		
b Name of sponsor of entity listed in (a): JOHN HANCOCK NEW YORK		
c EIN-PN 13-3646501-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 723039
a Name of MTIA, CCT, PSA, or 103-12 IE: MID CAP INDEX FUND		
b Name of sponsor of entity listed in (a): JOHN HANCOCK NEW YORK		
c EIN-PN 13-3646501-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 810372
a Name of MTIA, CCT, PSA, or 103-12 IE: JOHN HANCOCK DISCIPLINED VALUE		
b Name of sponsor of entity listed in (a): JOHN HANCOCK NEW YORK		
c EIN-PN 13-3646501-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 814055
a Name of MTIA, CCT, PSA, or 103-12 IE: CAPITAL APPRECIATION FUND		
b Name of sponsor of entity listed in (a): JOHN HANCOCK NEW YORK		
c EIN-PN 13-3646501-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 1422709
a Name of MTIA, CCT, PSA, or 103-12 IE: TOTAL STOCK MARKET INDEX FUND		
b Name of sponsor of entity listed in (a): JOHN HANCOCK NEW YORK		
c EIN-PN 13-3646501-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 268432
a Name of MTIA, CCT, PSA, or 103-12 IE: SSGA MID VALUE INDEX FUND		
b Name of sponsor of entity listed in (a): JOHN HANCOCK NEW YORK		
c EIN-PN 13-3646501-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 456236
a Name of MTIA, CCT, PSA, or 103-12 IE: 500 INDEX FUND		
b Name of sponsor of entity listed in (a): JOHN HANCOCK NEW YORK		
c EIN-PN 13-3646501-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 3468862
a Name of MTIA, CCT, PSA, or 103-12 IE: BLACKROCK GLOBAL ALLOCATION		
b Name of sponsor of entity listed in (a): JOHN HANCOCK NEW YORK		
c EIN-PN 13-3646501-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 1288761
a Name of MTIA, CCT, PSA, or 103-12 IE: TOTAL RETURN FUND		
b Name of sponsor of entity listed in (a): JOHN HANCOCK NEW YORK		
c EIN-PN 13-3646501-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 2270458

a Name of MTIA, CCT, PSA, or 103-12 IE: ACTIVE BOND FUND

b Name of sponsor of entity listed in (a): JOHN HANCOCK NEW YORK

c EIN-PN 13-3646501-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 636520

a Name of MTIA, CCT, PSA, or 103-12 IE: TOTAL BOND MARKET FUND

b Name of sponsor of entity listed in (a): JOHN HANCOCK NEW YORK

c EIN-PN 13-3646501-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 381344

a Name of MTIA, CCT, PSA, or 103-12 IE: JOHN HANCOCK STABLE VAL

b Name of sponsor of entity listed in (a): JOHN HANCOCK NEW YORK

c EIN-PN 13-3646501-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 7383920

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

Part II Information on Participating Plans (to be completed by DFEs)

(Complete as many entries as needed to report all participating plans)

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

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
CERBERUS CAPITAL MANAGEMENT, L.P. PROFIT SHARING 401(K) PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
CERBERUS CAPITAL MANAGEMENT, L.P.

D Employer Identification Number (EIN)
13-3709388

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		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	8721729	9139579
(2) Participant contributions	1b(2)		
(3) Other	1b(3)		
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)		
(2) U.S. Government securities	1c(2)		
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)		
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)	429123	713280
(9) Value of interest in common/collective trusts	1c(9)		
(10) Value of interest in pooled separate accounts	1c(10)	61471604	91237600
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)		
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other	1c(15)	32226507	20353314

		(a) Beginning of Year	(b) End of Year
1d Employer-related investments:			
(1) Employer securities	1d(1)		
(2) Employer real property	1d(2)		
e Buildings and other property used in plan operation	1e		
f Total assets (add all amounts in lines 1a through 1e)	1f	102848963	121443773
Liabilities			
g Benefit claims payable	1g		
h Operating payables	1h		
i Acquisition indebtedness	1i		
j Other liabilities	1j	4659	
k Total liabilities (add all amounts in lines 1g through1j)	1k	4659	0
Net Assets			
l Net assets (subtract line 1k from line 1f)	1l	102844304	121443773

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)	9139579	
(B) Participants	2a(1)(B)	1331274	
(C) Others (including rollovers)	2a(1)(C)	548940	
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		11019793
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)		
(B) U.S. Government securities	2b(1)(B)		
(C) Corporate debt instruments	2b(1)(C)		
(D) Loans (other than to participants)	2b(1)(D)		
(E) Participant loans	2b(1)(E)	24831	
(F) Other	2b(1)(F)		
(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		24831
(2) Dividends: **(A)** Preferred stock	2b(2)(A)		
(B) Common stock	2b(2)(B)		
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)		
(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		0
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	2b(4)(A)	14817008	
(B) Aggregate carrying amount (see instructions)	2b(4)(B)	6529626	
(C) Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result	2b(4)(C)		8287382
(5) Unrealized appreciation (depreciation) of assets: **(A)** Real estate	2b(5)(A)		
(B) Other	2b(5)(B)	-5343568	
(C) Total unrealized appreciation of assets. Add lines **2b(5)(A)** and **(B)**	2b(5)(C)		-5343568

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		13806454
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		
c Other income	2c		198196
d Total income. Add all **income** amounts in column (b) and enter total	2d		27993088
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	9385935	
(2) To insurance carriers for the provision of benefits	2e(2)		
(3) Other	2e(3)		
(4) Total benefit payments. Add lines **2e(1)** through **(3)**	2e(4)		9385935
f Corrective distributions (see instructions)	2f		825
g Certain deemed distributions of participant loans (see instructions)	2g		
h Interest expense	2h		
i Administrative expenses: (1) Professional fees	2i(1)	5985	
(2) Contract administrator fees	2i(2)		
(3) Investment advisory and management fees	2i(3)	874	
(4) Other	2i(4)		
(5) Total administrative expenses. Add lines **2i(1)** through **(4)**	2i(5)		6859
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		9393619
Net Income and Reconciliation			
k Net income (loss). Subtract line **2j** from line **2d**	2k		18599469
l Transfers of assets:			
(1) To this plan	2l(1)		
(2) From this plan	2l(2)		

Part III Accountant's Opinion

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

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

(1) [X] 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 [X] No

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

(1) Name: PRICEWATERHOUSECOOPERS LLP **(2)** EIN: 13-4008324

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		10000000
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		20353314
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			

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
CERBERUS CAPITAL MANAGEMENT, L.P. PROFIT SHARING 401(K) PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
CERBERUS CAPITAL MANAGEMENT, L.P.

D Employer Identification Number (EIN)
13-3709388

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** 0

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): 13-3646501

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):

Cerberus Capital Management, L.P.
Profit Sharing 401(k) Plan

Financial Statements and Supplemental Schedules
December 31, 2013 and 2012

Cerberus Capital Management, L.P. Profit Sharing 401(k) Plan
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* Additional schedules required by 29 CFR 2520.103-10 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 ("ERISA") have been omitted because they are not applicable.



Independent Auditor's Report

To the Participants and Administrator of
Cerberus Capital Management, L.P. Profit Sharing 401(k) Plan:

We have audited the accompanying financial statements of Cerberus Capital Management, L.P. Profit Sharing 401(k) Plan (the "Plan"), which comprise the statements of net assets available for benefits as of December 31, 2013 and December 31, 2012, and the related statement of changes in net assets available for benefits for the year ended December 31, 2013, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditor's Responsibility

Our responsibility is to express an opinion on the financial statements based on our audits. We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on our judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, we consider internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the net assets available for benefits of the Plan as of December 31, 2013 and December 31, 2012 and the changes in net assets available for benefits for the year ended December 31, 2013, in accordance with accounting principles generally accepted in the United States of America.

pwc

Emphasis of Matter

As explained in Note 4 to the financial statements, the investment manager of Cerberus International, Ltd. ("Cerberus") has indefinitely suspended redemption requests received by Cerberus, which may impact the timing of the Plan's processing of participants' requests for benefit payments and the value ultimately received from the Plan's investment in Cerberus. Our opinion is not modified with respect to this matter.

Other Matter

Our audits were conducted for the purpose of forming an opinion on the financial statements as a whole. The supplemental schedule of assets (held at end of year) as of December 31, 2013 and the supplemental schedule of reportable transactions for the year ended December 31, 2013 are presented for the purpose of additional analysis and are not a required part of the financial statements but are supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974. Such information is the responsibility of the Plan's management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audits of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves and other additional procedures, in accordance with auditing standards generally accepted in the United States of America. In our opinion, the information is fairly stated in all material respects in relation to the financial statements as a whole.

PricewaterhouseCoopers LLP

October 14, 2014

Cerberus Capital Management, L.P. Profit Sharing 401(k) Plan
Statements of Net Assets Available for Benefits
As of December 31, 2013 and 2012

	2013	2012
Assets		
Investments, at fair value		
Cerberus International, Ltd.	$ 20,353,314	$ 32,226,507
John Hancock Pooled Separate Accounts	91,237,600	61,471,604
Total investments	111,590,914	93,698,111
Receivables		
Employer contribution	9,139,579	8,721,729
Notes receivable from participants	713,280	429,123
Total receivables	9,852,859	9,150,852
Total assets	121,443,773	102,848,963
Liabilities		
Other liabilities	-	4,659
Total liabilities	-	4,659
Net assets available for benefits	$ 121,443,773	$ 102,844,304

The accompanying notes are an integral part of these financial statements.

Cerberus Capital Management, L.P. Profit Sharing 401(k) Plan
Statement of Changes in Net Assets Available for Benefits
For the Year Ended December 31, 2013

		2013
Additions to net assets attributed to:		
Investment income		
Net appreciation in fair value		
Cerberus International, Ltd.	$	2,943,814
John Hancock Pooled Separate Accounts		13,806,454
Total investment income		16,750,268
Contributions		
Participant		1,335,933
Employer		9,139,579
Rollovers		549,672
Total contributions		11,025,184
Interest on notes receivable from participants		24,879
Other income		198,196
Total additions		27,998,527
Deductions from net assets attributed to:		
Benefits paid to participants		(9,392,199)
Administrative fees		(6,859)
Total deductions		(9,399,058)
Net increase in net assets available for benefits		18,599,469
Net assets available for benefits, beginning of year		102,844,304
Net assets available for benefits, end of year	$	121,443,773

The accompanying notes are an integral part of these financial statements.

1. Description of Plan

The following description of the Cerberus Capital Management, L.P. (the "Company" or the "Plan Administrator") Profit Sharing 401(k) Plan (the "Plan") provides only general information. Participants should refer to the Plan agreement for a more complete description of the Plan's provisions.

The Plan is a defined contribution profit sharing and 401(k) plan covering all full-time employees of the Company who are age twenty-one or older. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA).

Cerberus International, Ltd. ("Cerberus" or "the Investment Fund") was previously the Plan's sole investment and available as an investment to eligible participants from Plan inception to December 31, 2008. Decisions made with respect to the investment of the Plan's assets in the Investment Fund are made by Evercore Trust Company, N.A. (the "Fiduciary") as an independent fiduciary for the Plan. Effective May 29, 2009, the Company authorized John Hancock New York Retirement Plan Services ("John Hancock") to be the sole recipient of any contributions made on January 1, 2009 and thereafter.

Participants' contributions may be made into the default investment option, the John Hancock New York Retirement Living Portfolios. At the participants' discretion, contributions may be allocated to twenty other John Hancock Funds in lieu of the default investment option. Additionally, John Hancock serves as the record-keeper and custodian of the participants' investment accounts in the John Hancock portion of the Plan.

a. Eligibility

Employees are eligible to participate in the Plan at the initial date of employment and attainment of age twenty-one (21).

b. Contributions and Funding Policy

Each year, participants may contribute up to 75% of pre-tax and post-tax annual compensation as defined in the Plan agreement, which is not to exceed the Internal Revenue Service ("IRS") pre-tax limit of $17,500 for the year ended December 31, 2013. Participants who have attained the age of fifty (50) before the end of the plan year are eligible to make catch-up contributions, which is limited to an additional IRS deferral limit increase of $5,500 for the year ended December 31, 2013. Participants may also contribute amounts representing distributions from other qualified defined benefit or contribution plans.

Each year, the Company contributes to the Plan from its current profits before pension and profit-sharing costs and income taxes. The amount of the Company's contribution is discretionary and is allocated based on relative levels of compensation and is considered a "Nonelective Contribution". A "Nonelective Contribution" is defined as any employer contribution (including a contribution made at the employer's discretion) to the Plan, other than a participant's elective deferrals, qualified matching contributions and qualified nonelective contributions. The Plan Administrator establishes and maintains a "Nonelective Contribution Account" for each participant with respect to the participant's total interest in the Plan resulting from Nonelective Contributions. These profit sharing contributions were $9,139,579 and $8,721,729 for the years ended December 31, 2013 and 2012, respectively.

c. Participant Accounts
Each participant's account is credited with the participant's contribution and an allocation of (a) the Company's contribution and (b) Plan profit and loss. Allocations are based on participant earnings or account balances, as defined in the Plan agreement. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

d. Vesting
Participants are immediately vested in their allocated employer and participant contributions plus actual earnings thereon.

e. Payment of Benefits
On termination of service due to death, disability or retirement, or other reasons, a participant or the designated beneficiary may choose to receive an amount equal to the value of the participant's vested interest in his or her account in a lump sum amount, or may elect to maintain his or her account in the Plan. If any of the assets of a Nonelective Contribution Account are invested in securities whose sale or redemption is restricted, the distribution to the beneficiary will be limited to the unrestricted assets of the Nonelective Contribution Account. As further payments are received by Cerberus with respect to the restricted securities, the beneficiary will receive additional amounts equal to the proportionate share of the cash received by Cerberus. Alternatively, the beneficiary may be able to receive a distribution in-kind of the securities whose sale or redemption is restricted.

A participant's vested interest is determined as of the Plan's valuation date coincident with or preceding the date of determination. For a participant's balance in Cerberus, the determination dates are March 31, June 30, September 30, and December 31, while the determination date for a participant's balance in John Hancock is daily. For participants with John Hancock account balances in excess of $1,000, an election is available to defer the distribution until the participant is required by law to receive minimum required distributions. If the participant in John Hancock or Cerberus has not attained the Plan's normal retirement age, 65, they are not eligible to request a distribution of their vested account balance.

Liquidity risk arises when the Plan is not able to redeem its investments or raise other cash resources to settle the benefit payment obligations. The Plan may make distributions in-kind and may cause any distribution to be composed of cash, property or undivided fractional shares in property, provided, however, that no participant or beneficiary shall be required to accept more than his pro rata share of any in-kind distribution. See Note 4 for restrictions on redeeming from Cerberus.

f. Notes Receivable from Participants
Participants may borrow from their accounts at a minimum of $1,000 and a maximum of the lesser of one-half of the vested account balance or $50,000 reduced by the highest outstanding loan balance in the account during the prior twelve month period. A participant may only have one loan outstanding at any given time and the participant may not refinance an existing loan or obtain a second loan for the purpose of paying off the existing loan.

All loans bear interest at a rate of 4.25%; as determined by the Plan Administrator based on the prevailing interest rates charged by persons in the business of lending money for loans which would be made under similar circumstances. The interest rate remains fixed throughout the duration of the loan.

Notes receivable from participants must be repaid over a period not to exceed five years unless for the purchase of a principal residence.

2. Summary of Accounting Policies

a. Basis of Accounting

The accompanying financial statements of the Plan are prepared in compliance with the Department of Labor's ("DOL") Rules and Regulations for Reporting and Disclosure under ERISA and the accrual basis of accounting in conformity with accounting principles generally accepted in the United States of America ("GAAP").

b. Use of Estimates

The preparation of financial statements in conformity with GAAP requires management to make estimates and assumptions that affect the reported amounts of assets, liabilities, and changes therein, and disclosure of contingent assets and liabilities. Accordingly, actual results could differ from those estimates.

c. Investment Valuation and Income Recognition

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

Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded on an accrual basis. Net appreciation includes the Plan's gains and losses on investments bought and sold, as well as held during the year.

d. Payment of Benefits

Benefits are recorded when paid.

e. Notes Receivable from Participants

Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest.

3. Investments

The following table represents investments and their respective percentage of the Plan's net assets as of December 31, 2013 and 2012:

	2013	% of Net Assets	2012	% of Net Assets
Investments, at fair value				
Distressed Fund:				
Cerberus International, Ltd.*	20,353,314	16.76%	$ 32,226,507	31.34%
John Hancock New York Sub-accounts:				
Retirement Living through 2040*	12,860,783	10.59%	8,884,974	8.64%
Retirement Living through 2025*	12,397,752	10.21%	7,353,584	7.15%
Retirement Living through 2030*	12,245,560	10.08%	7,711,697	7.50%
Retirement Living through 2035*	11,020,948	9.07%	7,799,741	7.58%
Retirement Living through 2045*	10,382,428	8.55%	7,250,683	7.05%
John Hancock Stable Value Fund**	7,383,921	6.08%	3,916,840	3.81%
Retirement Living through 2020	5,596,507	4.61%	3,731,753	3.63%
500 Index Fund	3,468,862	2.86%	1,422,301	1.38%
Total Return Fund	2,270,458	1.87%	2,744,761	2.67%
Retirement Living through 2015	1,726,237	1.42%	1,171,540	1.14%
Capital Appreciation Fund	1,422,709	1.17%	381,045	0.37%
BlackRock Global Allocation Fund	1,288,761	1.06%	755,639	0.73%
DFA Emerging Markets Value Fund	1,007,291	0.83%	811,834	0.79%
Real Estate Securities Fund	945,373	0.78%	612,170	0.60%
John Hancock Disciplined Value Fund	814,055	0.68%	395,538	0.39%
Mid Cap Index Fund	810,372	0.67%	352,720	0.34%
Small Cap Value Index Fund	723,039	0.60%	301,791	0.29%
Active Bond Fund	636,520	0.52%	1,443,553	1.40%
Retirement Living through 2010	556,308	0.46%	1,213,561	1.18%
Small Cap Index Fund	456,821	0.38%	191,911	0.19%
SSgA Mid Cap Value Index Fund	456,236	0.38%	178,568	0.18%
International Equity Index Fund	422,776	0.35%	247,751	0.24%
Oppenheimer Global Fund	412,586	0.34%	350,365	0.34%
Retirement Living through 2050	391,069	0.32%	30,500	0.03%
Total Bond Market Fund	381,344	0.31%	696,640	0.68%
Franklin Small-Mid Cap Growth Fund	347,621	0.29%	454,440	0.44%
Invesco Small Cap Growth Fund	343,957	0.28%	114,892	0.11%
Total Stock Market Index Fund	268,432	0.22%	350,586	0.34%
Ivy Asset Strategy Fund	198,874	0.16%	63,928	0.06%
Prudential Jennison 20/20 Focus Fund	-	0.00%	536,298	0.52%
	$ 111,590,914	91.90%	$ 93,698,111	91.11%

*Denotes individual investments that constitute 5% or more of net assets as of December 31, 2013 and December 31, 2012.

**Denotes individual investments that constitute 5% or more of net assets as of December 31, 2013.

During the year ended December 31, 2013, the Plan's investments appreciated in value due to gains and losses on investments bought and sold, as well as held during the year, by $16,750,268 as follows:

		2013
Cerberus International, Ltd.	$	2,943,814
John Hancock Pooled Separate Accounts		13,806,454
	$	16,750,268

4. Fair Value Measurement

The Plan reports investments at fair value.

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

Level 1 – Inputs that reflect unadjusted quoted prices in active markets for identical assets or liabilities that the Plan has the ability to access at the measurement date;

Level 2 – Inputs other than quoted prices that are observable for the asset or liability either directly or indirectly, including inputs in markets that are not considered to be active;

Level 3 – Inputs that are unobservable.

Inputs are used in applying the various valuation techniques and broadly refer to the assumptions that market participants use to make valuation decisions, including assumptions about risk. Inputs may include price information, volatility statistics, specific and broad credit data, liquidity statistics, and other factors. A financial instrument's level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement. However, the determination of what constitutes "observable" requires significant judgment by the Plan Administrator. The Plan Administrator considers observable data to be that market data which is readily available, regularly distributed or updated, reliable and verifiable, not proprietary, and provided by independent sources that are actively involved in the relevant market. The categorization of a financial instrument within the hierarchy is based upon the pricing transparency of the instrument and does not necessarily correspond to the Plan Administrator's perceived risk of that instrument.

If the Plan Administrator determines that either the volume and/or level of activity for an asset or liability has significantly decreased (from normal conditions for that asset or liability) or price quotations or observable inputs are not associated with orderly transactions, increased analysis and management judgment will be required to estimate fair value. Valuation techniques such as an income approach might be appropriate to supplement or replace a market approach in those circumstances. The guidance also provides a list of factors to determine whether there has been a significant decrease in relation to normal market activity. Regardless of the valuation technique and inputs used, the objective for the fair value measurement in those circumstances is unchanged from

what it would be if markets were operating at normal activity levels and/or transactions were orderly; that is, to determine the current exit price.

Investment in Investment Fund. The Plan's investment in the Investment Fund is reported at fair value based on the Plan's share in the net assets of the Investment Fund. This investment does not have readily ascertainable market values and is subject to certain withdrawal restrictions. The value of the Plan's investment in the Investment Fund represents the amount the Plan would expect to receive at December 31, 2013 and December 31, 2012, respectively, if it were to liquidate its investment.

Because of the inherent uncertainty of the valuation for the Plan's investment and certain underlying investments held by the Investment Fund (which are valued by the Company in the absence of readily ascertainable market values), the estimated fair value of the Investment Fund may differ from the value that would have been used had a ready market existed for this investment, and the difference could be material.

The Investment Fund is a corporation organized in the Bahamas. The investment objective is to maximize total return on capital by seeking both current income and capital appreciation through the development and management of a diversified portfolio of distressed investments. Companies that are considered "distressed" typically include: (i) those facing operating difficulties; (ii) those undergoing, or considered likely to undergo, reorganization under U.S. bankruptcy law or similar laws in other countries; (iii) those which are or have been engaged in other extraordinary transactions, such as debt restructuring, reorganization and liquidation outside of bankruptcy; and (iv) those facing a broad range of liquidity issues. The Investment Fund also invests in mortgage backed securities, including collateralized mortgage obligations; asset backed securities; other mortgage backed or asset-backed related investments, including investments in vehicles or entities that hold, manage, or trade, mortgage backed securities or asset backed securities. The Investment Fund seeks to achieve its investment objective primarily through investment in debt securities, equity securities, other obligations and assets of undervalued, operationally challenged and/or financially troubled companies (or divisions or subsidiaries of such companies). The Investment Fund makes passive, active and control investments. The portfolio consists of investments in companies in various industries, investments in companies doing business in various countries and investments in various types of securities.

The Investment Fund has the following restrictions on redemptions. Redemption proceeds may be in the form of cash or securities or a combination of the two, as determined by the Investment Fund's Board of Directors. A portion of such proceeds may be withheld on the redemption date and paid upon completion of its annual financial statement audit.

Partridge Hill Overseas Management, L.L.C., an affiliate of the Company, serves as the Investment Manager (the "Investment Manager") to the Investment Fund. The Investment Fund may suspend redemption rights, in whole or in part, for a period of up to one year, when, in the opinion of its Investment Manager (a) disposal of the Investment Fund's investments would not be reasonably practicable or would be prejudicial to the non-redeeming members; (b) market events have created compelling investment opportunities for the Investment Fund, and the effect of the pending redemptions would potentially impair the Investment Fund's ability to take advantage of such opportunities and/or; (c) the Investment Fund's ability to liquidate its portfolio is restricted because of unusual market closures or suspensions in trading.

On September 30, 2009, the Investment Manager lifted the suspension of redemptions previously implemented and offered all shareholders the following choice: (i) have all or a portion of the shareholder's shares from the Investment Fund compulsorily redeemed as of September 30, 2009, and receive in connection with such redemptions, participating, vesting shares in a special purpose vehicle, Cerberus International SPV, Ltd. (the "SPV") that holds a pro-rata share of all the cash, securities, assets and liabilities of the Investment Fund attributable to the percentage of the shareholders seeking to redeem or; (ii) remain fully or partially invested in the Investment Fund under new terms that include reinvesting proceeds from the sale of the Investment Fund's securities and assets into Cerberus International II, Ltd., a newly formed Cayman Islands exempted company ("Cerberus International II") and/or receive distributions in cash.

The Investment Fund will be managed to optimize the realized value of its existing portfolio and will have the ability to make follow-on investments, engage in hedging transactions and enter into repurchase agreements or other leverage arrangements. Proceeds from the realization of the Investment Fund's investments (after deduction for actual or anticipated expenses and such reserves as may be determined by the Investment Manager are needed for hedging transactions, repurchase agreements and follow-on investments) (such amounts "Available Cash") are either invested in Cerberus International II or distributed directly to continuing shareholders. Each remaining shareholder received new shares in Cerberus International II corresponding to its pro rata amount of the Available Cash contributed to Cerberus International II.

For the years ended December 31, 2013 and 2012, the Fiduciary elected to receive all distributions from the Investment Fund in cash and reinvest such distributions in John Hancock. Distributions of $14,817,008 and $9,057,758 were received for the years ended December 31, 2013 and 2012, respectively.

Pooled Separate Accounts. Investments in Pooled Separate Accounts are valued at the unit value of units held by the Plan at year end as determined by John Hancock and are reviewed by the Plan Administrator. These securities generally may be redeemed daily and have been classified within Level 2.

The following tables set forth by level, within the fair value hierarchy, the Plan's investments at fair value as of December 31, 2013. The tables also include a roll forward of the amounts for the year ended December 31, 2013 for financial instruments classified within level 3. The classification of a financial instrument within level 3 is based upon the significance of the unobservable inputs to the overall fair value measurement.

	Investments at Fair Value as of December 31, 2013			
Description	Quoted Prices In Active Markets For Identical Assets Level 1	Significant Other Observable Inputs Level 2	Significant Unobservable Inputs Level 3	Total
Distressed Fund:				
Cerberus International, Ltd. [(a)]	$ -	$ -	$ 20,353,314	$ 20,353,314
Total Distressed Fund	-	-	20,353,314	20,353,314
John Hancock New York Sub-accounts:				
Target Date Funds				
Retirement Living through 2040	-	12,860,783	-	12,860,783
Retirement Living through 2025	-	12,397,752	-	12,397,752
Retirement Living through 2030	-	12,245,560	-	12,245,560
Retirement Living through 2035	-	11,020,948	-	11,020,948
Retirement Living through 2045	-	10,382,428	-	10,382,428
Retirement Living through 2020	-	5,596,507	-	5,596,507
Retirement Living through 2015	-	1,726,237	-	1,726,237
Retirement Living through 2010	-	556,308	-	556,308
Retirement Living through 2050	-	391,069	-	391,069
Total Target Date Funds	-	67,177,592	-	67,177,592
Fixed Income				
Active Bond Fund	-	636,520	-	636,520
Total Return Fund	-	2,270,458	-	2,270,458
Total Fixed Income	-	2,906,978	-	2,906,978
Stable Value Fund				
John Hancock Stable Value Fund	-	7,383,921	-	7,383,921
Total Stable Value Fund	-	7,383,921	-	7,383,921
Small/Mid Cap Value				
Small Cap Value Index Fund	-	723,039	-	723,039
SSgA Mid Cap Value Index Fund	-	456,236	-	456,236
Total Small/Mid Cap Value	-	1,179,275	-	1,179,275
International				
Oppenheimer Global Fund	-	412,586	-	412,586
DFA Emerging Markets Value Fund	-	1,007,291	-	1,007,291
Ivy Asset Strategy Fund	-	198,874	-	198,874
Total International	-	1,618,751	-	1,618,751
Index				
Total Bond Market Fund	-	381,344	-	381,344
500 Index Fund	-	3,468,862	-	3,468,862
Total Stock Market Index Fund	-	268,432	-	268,432
Mid Cap Index Fund	-	810,372	-	810,372
Small Cap Index Fund	-	456,821	-	456,821
International Equity Index Fund	-	422,776	-	422,776
Total Index	-	5,808,607	-	5,808,607

	Investments at Fair Value as of December 31, 2013			
Description	**Quoted Prices In Active Markets For Identical Assets Level 1**	**Significant Other Observable Inputs Level 2**	**Significant Unobservable Inputs Level 3**	**Total**
Small/Mid Cap Growth				
Franklin Small-Mid Cap Growth Fund	-	347,621	-	347,621
Invesco Small Cap Growth Fund	-	343,957	-	343,957
Total Small/Mid Cap Growth	-	691,578	-	691,578
Balanced				
BlackRock Global Allocation Fund	-	1,288,761	-	1,288,761
Total Balanced	-	1,288,761	-	1,288,761
Large Cap Growth				
Capital Appreciation Fund	-	1,422,709	-	1,422,709
Total Large Cap Growth	-	1,422,709	-	1,422,709
Large Cap Value				
John Hancock Disciplined Value Fund	-	814,055	-	814,055
Total Large Cap Value	-	814,055	-	814,055
Sector				
Real Estate Securities Fund	-	945,373	-	945,373
Total Sector	-	945,373	-	945,373
Total investments at fair value	$ -	$ 91,237,600	$ 20,353,314	$ 111,590,914

	2013 Level 3 Rollforward Investment, at fair value Cerberus International, Ltd.
Balance at December 31, 2012	$ 32,226,507
Sales	(14,817,008)
Realized gains/(losses)	8,287,382
Net change in unrealized appreciation/ (depreciation) on investments	(5,343,568)
Balance at December 31, 2013	$ 20,353,314
Net change in unrealized appreciation (depreciation) on financial instruments still held at December 31, 2013	$ 3,156,595

There were no transfers between level 1, level 2 or level 3 during the year ended December 31, 2013.

(a) The Investment Fund is valued at its net asset value as practical expedient.

The following tables set forth by level, within the fair value hierarchy, the Plan's investments at fair value as of December 31, 2012 and a roll forward of the amounts for the year ended December 31, 2012 for financial instruments classified within level 3. The classification of a financial instrument within level 3 is based upon the significance of the unobservable inputs to the overall fair value measurement.

	Investments at Fair Value as of December 31, 2012			
Description	**Quoted Prices In Active Markets For Identical Assets Level 1**	**Significant Other Observable Inputs Level 2**	**Significant Unobservable Inputs Level 3**	**Total**
Distressed Fund:				
Cerberus International, Ltd. [(a)]	$ -	$ -	$ 32,226,507	$ 32,226,507
Total Distressed Fund	-	-	32,226,507	32,226,507
John Hancock New York Sub-accounts:				
Target Date Funds				
Retirement Living through 2040	-	8,884,974	-	8,884,974
Retirement Living through 2030	-	7,711,697	-	7,711,697
Retirement Living through 2035	-	7,799,741	-	7,799,741
Retirement Living through 2045	-	7,250,683	-	7,250,683
Retirement Living through 2025	-	7,353,584	-	7,353,584
Retirement Living through 2020	-	3,731,753	-	3,731,753
Retirement Living through 2015	-	1,171,540	-	1,171,540
Retirement Living through 2010	-	1,213,561	-	1,213,561
Retirement Living through 2050	-	30,500	-	30,500
Total Target Date Funds	-	45,148,033	-	45,148,033
Fixed Income				
Active Bond Fund	-	1,443,553	-	1,443,553
Total Return Fund	-	2,744,761	-	2,744,761
Total Fixed Income	-	4,188,314	-	4,188,314
Stable Value Fund				
John Hancock Stable Value Fund	-	3,916,840	-	3,916,840
Total Stable Value Fund	-	3,916,840	-	3,916,840
Small/Mid Cap Value				
Small Cap Value Index Fund	-	301,791	-	301,791
SSgA Mid Cap Value Index Fund	-	178,568	-	178,568
Total Small/Mid Cap Value	-	480,359	-	480,359
International				
Oppenheimer Global Fund	-	350,365	-	350,365
DFA Emerging Markets Value Fund	-	811,834	-	811,834
Ivy Asset Strategy Fund	-	63,928	-	63,928
Total International	-	1,226,127	-	1,226,127
Index				
Total Bond Market Fund	-	696,640	-	696,640
500 Index Fund	-	1,422,301	-	1,422,301
Total Stock Market Index Fund	-	350,586	-	350,586
Mid Cap Index Fund	-	352,720	-	352,720
Small Cap Index Fund	-	191,911	-	191,911
International Equity Index Fund	-	247,751	-	247,751
Total Index	-	3,261,909	-	3,261,909

	Investments at Fair Value as of December 31, 2012			
Description	**Quoted Prices In Active Markets For Identical Assets Level 1**	**Significant Other Observable Inputs Level 2**	**Significant Unobservable Inputs Level 3**	**Total**
Small/Mid Cap Growth				
Franklin Small-Mid Cap Growth Fund	-	454,440	-	454,440
Invesco Small Cap Growth Fund	-	114,892	-	114,892
Total Small/Mid Cap Growth	-	569,332	-	569,332
Balanced				
BlackRock Global Allocation Fund	-	755,639	-	755,639
Total Balanced	-	755,639	-	755,639
Large Cap Growth				
Prudential Jennison 20/20 Focus Fund	-	536,298	-	536,298
Capital Appreciation Fund	-	381,045	-	381,045
Total Large Cap Growth	-	917,343	-	917,343
Large Cap Value				
John Hancock Disciplined Value Fund	-	395,538	-	395,538
Total Large Cap Value	-	395,538	-	395,538
Sector				
Real Estate Securities Fund	-	612,170	-	612,170
Total Sector	-	612,170	-	612,170
Total investments at fair value	$ -	$ 61,471,604	$ 32,226,507	$ 93,698,111

	2012 Level 3 Rollforward Investment, at fair value Cerberus International, Ltd.
Balance at December 31, 2011	$ 36,487,853
Sales	(9,057,758)
Realized gains/(losses)	4,821,700
Net change in unrealized appreciation/ (depreciation) on investments	(25,288)
Balance at December 31, 2012	$ 32,226,507
Net change in unrealized appreciation (depreciation) on financial instruments still held at December 31, 2012	$ 4,214,116

There were no transfers between level 1, level 2 or level 3 during the year ended December 31, 2012.

(a) The Investment Fund is valued at its net asset value as practical expedient.

5. Plan Termination

Although it has not expressed any intent to do so, the Company has the right to discontinue its contributions at any time and to terminate the Plan subject to the provisions of ERISA. In the event of Plan termination, any unallocated assets of the Plan shall be allocated to participant accounts and distributed in such a manner as the Company may determine.

6. Tax Status

The Internal Revenue Service has determined and informed the Company by letter dated September 19, 2011, that the Plan and related trust are designed in accordance with the applicable sections of the Internal Revenue Code ("IRC"). Although the Plan has been amended since receiving the determination letter, the Plan Administrator and the Plan's tax counsel believe that the Plan is designed and is currently being operated in compliance with the applicable provisions of the IRC.

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) for disclosure in the financial statements. The Plan is subject to routine audits by taxing jurisdictions; however there are currently no audits for any periods in progress. The Plan Administrator believes it is no longer subject to income tax examinations for years prior to 2010.

7. Risks and Uncertainties

The Plan provides for various investment options. Pooled Separate Accounts invest in funds holding a combination of stocks, bonds, fixed income securities and other investments 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.

The Plan is also exposed to liquidity risk. Note 1 to the financial statements further explains liquidity risk.

In the normal course of operations, the Investment Fund makes investments in both long and short securities, and other financial instruments, including derivatives, where the risk of potential loss due to changes in the market (market risk) or failure of the other party to the transaction to perform (credit risk) exceeds the related amounts recorded. The Investment Fund also utilizes various degrees of leverage. However, due to the nature of the Plan's interest, such risks are limited to the Plan's investment in the Investment Fund.

8. Related Parties

The Investment Fund is managed by the Company and its affiliates. Certain Plan investments are units of pooled separate accounts managed by John Hancock, the record-keeper and custodian of the Plan. Additionally, a Plan trustee, who is a principal of the Company, is a participant in the Plan. Therefore, these transactions qualify as party-in-interest transactions. The Company pays for certain administrative costs on the Plan's behalf.

9. Subsequent Events

The Investment Fund has made distributions of $7,252,821 since January 1, 2014. The Plan Administrator has evaluated subsequent events through October 14, 2014, the date the financial statements were available to be issued, and except as already included in the notes to these financial statements, has determined that no additional items require disclosure.

Cerberus Capital Management, L.P. Profit Sharing 401 (k) Plan
Schedule H, Line 4i – Schedule of Assets (Held at End of Year)
As of December 31, 2013

	Identity of issue, borrower, lessor, or similar party	Description of investment	Cost	Current value
Distressed Fund:				
*	Cerberus International, Ltd.	Investment Fund	$ 7,471,039	$ 20,353,314
John Hancock New York Sub-accounts:				
*	Retirement Living through 2040	Pooled Separate Account	(1)	12,860,783
*	Retirement Living through 2025	Pooled Separate Account	(1)	12,397,752
*	Retirement Living through 2030	Pooled Separate Account	(1)	12,245,560
*	Retirement Living through 2035	Pooled Separate Account	(1)	11,020,948
*	Retirement Living through 2045	Pooled Separate Account	(1)	10,382,428
*	John Hancock Stable Value Fund	Pooled Separate Account	(1)	7,383,921
*	Retirement Living through 2020	Pooled Separate Account	(1)	5,596,507
*	500 Index Fund	Pooled Separate Account	(1)	3,468,862
*	Total Return Fund	Pooled Separate Account	(1)	2,270,458
*	Retirement Living through 2015	Pooled Separate Account	(1)	1,726,237
*	Capital Appreciation Fund	Pooled Separate Account	(1)	1,422,709
*	BlackRock Global Allocation Fund	Pooled Separate Account	(1)	1,288,761
*	DFA Emerging Markets Value Fund	Pooled Separate Account	(1)	1,007,291
*	Real Estate Securities Fund	Pooled Separate Account	(1)	945,373
*	John Hancock Disciplined Value Fund	Pooled Separate Account	(1)	814,055
*	Mid Cap Index Fund	Pooled Separate Account	(1)	810,372
*	Small Cap Value Index Fund	Pooled Separate Account	(1)	723,039
*	Active Bond Fund	Pooled Separate Account	(1)	636,520
*	Retirement Living through 2010	Pooled Separate Account	(1)	556,308
*	Small Cap Index Fund	Pooled Separate Account	(1)	456,821
*	SSgA Mid Cap Value Index Fund	Pooled Separate Account	(1)	456,236
*	International Equity Index Fund	Pooled Separate Account	(1)	422,776
*	Oppenheimer Global Fund	Pooled Separate Account	(1)	412,586
*	Retirement Living through 2050	Pooled Separate Account	(1)	391,069
*	Total Bond Market Fund	Pooled Separate Account	(1)	381,344
*	Franklin Small-Mid Cap Growth Fund	Pooled Separate Account	(1)	347,621
*	Invesco Small Cap Growth Fund	Pooled Separate Account	(1)	343,957
*	Total Stock Market Index Fund	Pooled Separate Account	(1)	268,432
*	Ivy Asset Strategy Fund	Pooled Separate Account	(1)	198,874
*	Notes receivable from participants	Interest rate of 4.25%; Maturity dates ranging from 2014 through 2041.	-0-	713,280
Total			-	$ 112,304,194

* Party-in-Interest

(1) This is a participant directed investment, therefore cost is not applicable.

Cerberus Capital Management, L.P. Profit Sharing 401(k) Plan
Schedule H, Line 4j – Schedule of Reportable Transactions
For the Year Ended December 31, 2013

Party	Description of Asset	Number of Transactions	Purchase Price	Selling Price	Lease Rental	Expenses	Cost of Asset	Current Value of Asset on Transaction Date	Net Gain (Loss)
Cerberus Capital Management, L.P. Profit Sharing 401(k) Plan	Cerberus International, Ltd.	6	$ -	$ 14,817,008	$ -	$ -	$ 6,529,626	$ 14,817,008	$ 8,287,382

Attachment to 2013 Form 5500
Schedule H, line 4i - Schedule of Assets (Held at End of Year)

Plan Name Cerberus Capital Management, L.P. Profit Sharing 401(k) Plan **EIN:** 13-3709388
Plan Sponsor's Name Cerberus Capital Management, L.P. **PN:** 001

(a)	(b) Identity of issue, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par, or maturity value.	(d) Cost	(e) Current value
		Investment Fund		
*	Cerberus International, Ltd.		7,471,039	20,353,314
*	John Hancock New York	Retirement Living Through 2050		391,069
*	John Hancock New York	Retirement Living Through 2045		10,382,428
*	John Hancock New York	Retirement Living Through 2040		12,860,783
*	John Hancock New York	Retirement Living Through 2035		11,020,948
*	John Hancock New York	Retirement Living Through 2030		12,245,560
*	John Hancock New York	Retirement Living Through 2025		12,397,752

Attachment to 2013 Form 5500
Schedule H, line 4i - Schedule of Assets (Held at End of Year)

Plan Name Cerberus Capital Management, L.P. Profit Sharing 401(k) Plan **EIN:** 13-3709388
Plan Sponsor's Name Cerberus Capital Management, L.P. **PN:** 001

(a)	(b) Identity of issue, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par, or maturity value.	(d) Cost	(e) Current value
*	John Hancock New York	Retirement Living Through 2020		5,596,507
*	John Hancock New York	Retirement Living Through 2015		1,726,237
*	John Hancock New York	Retirement Living Through 2010		556,308
*	John Hancock New York	Stable Value		7,383,921
*	John Hancock New York	Total Return Fund		2,270,458
*	John Hancock New York	Active Bond Fund		636,520
*	John Hancock New York	500 Index Fund		3,468,862

Attachment to 2013 Form 5500
Schedule H, line 4i - Schedule of Assets (Held at End of Year)

Plan Name Cerberus Capital Management, L.P. Profit Sharing 401(k) Plan **EIN:** 13-3709388
Plan Sponsor's Name Cerberus Capital Management, L.P. **PN:** 001

(a)	(b) Identity of issue, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par, or maturity value.	(d) Cost	(e) Current value
*	John Hancock New York	Franklin Small-Mid Cap Growth		347,621
*	John Hancock New York	DFA Emerging Markets		1,007,291
*	John Hancock New York	BlackRock Global Alloc		1,288,761
*	John Hancock New York	SSgA Mid Value Index		456,236
*	John Hancock New York	JH Disciplined Value		814,055
*	John Hancock New York	Capital Appreciation Fund		1,422,709

Attachment to 2013 Form 5500
Schedule H, line 4i - Schedule of Assets (Held at End of Year)

Plan Name Cerberus Capital Management, L.P. Profit Sharing 401(k) Plan **EIN:** 13-3709388
Plan Sponsor's Name Cerberus Capital Management, L.P. **PN:** 001

(a)	(b) Identity of issue, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par, or maturity value.	(d) Cost	(e) Current value
*	John Hancock New York	Oppenheimer Global		412,586
*	John Hancock New York	Total Bond Market		381,344
*	John Hancock New York	Inv Small Cap Growth		343,957
*	John Hancock New York	International Eq Index		422,776
*	John Hancock New York	Mid Cap Index		810,372
*	John Hancock New York	Ivy Asset Strategy Fund		198,874
*	John Hancock New York	Small Cap Value Index		456,821

Attachment to 2013 Form 5500
Schedule H, line 4i - Schedule of Assets (Held at End of Year)

Plan Name Cerberus Capital Management, L.P. Profit Sharing 401(k) Plan **EIN:** 13-3709388
Plan Sponsor's Name Cerberus Capital Management, L.P. **PN:** 001

(a)	(b) Identity of issue, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par, or maturity value.	(d) Cost	(e) Current value
*	John Hancock New York	Real Estate Securities		945,373
*	John Hancock New York	Vanguard Small Cap Index		723,039
*	John Hancock New York	Total Stock Mkt Index		268,432
*	Various Plan Participants	Loans Terms 1 to 30 years Rate: 4.25%		713,280

Attachment to 2013 Form 5500
Schedule H, line 4j - Schedule of Reportable Transactions

Plan Name Cerberus Capital Management, L.P. Profit Sharing 401(k) Plan **EIN:** 13-3709388
Plan Sponsor's Name Cerberus Capital Management, L.P. **PN:** 001

(a) Identity of party involved	(b) Description of asset (include interest rate and maturity in case of a loan)	(c) Purchase price	(d) Selling price	(e) Lease rental	(f) Expense incurred with transaction	(g) Cost of asset	(h) Current value of asset on transaction date	(i) Net gain or (loss)
Cerberus Capital Management, L.P.	Cerberus International Fund		14,817,008			6,529,626	14,817,008	8,287,382