

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). <p style="text-align: center;">▶ Complete all entries in accordance with the instructions to the Form 5500.</p>	OMB Nos. 1210-0110 1210-0089 <div style="text-align: center; font-size: 1.2em; font-weight: bold;">2013</div> <div style="text-align: center; font-weight: bold;">This Form is Open to Public Inspection</div>
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Part I	Annual Report Identification Information
For calendar plan year 2013 or fiscal plan year beginning <u>01/01/2013</u> and ending <u>12/31/2013</u>	
A This return/report is for:	☐ a multiemployer plan; ☐ a multiple-employer plan; or ☒ a single-employer plan; ☐ a DFE (specify) ____
B This return/report is:	☐ the first return/report; ☐ the final return/report; ☒ an amended return/report; ☐ a short plan year return/report (less than 12 months).
C If the plan is a collectively-bargained plan, check here.	☐
D Check box if filing under:	☒ Form 5558; ☐ automatic extension; ☐ the DFVC program; ☐ special extension (enter description)

Part II	Basic Plan Information—enter all requested information	
1a Name of plan <u>GLOBAL TECH RETIREMENT PLAN</u>	1b Three-digit plan number (PN) ▶	<u>001</u>
2a Plan sponsor's name and address; include room or suite number (employer, if for a single-employer plan) <u>GLOBAL TECH, INC.</u> <u>EGLOBALTECH</u> <u>3865 WILSON BLVD</u> <u>SUITE 500</u> <u>ARLINGTON, VA 22203</u>	1c Effective date of plan <u>01/01/2006</u>	2b Employer Identification Number (EIN) <u>56-2448125</u>
	2c Sponsor's telephone number <u>703-652-0991</u>	2d Business code (see instructions) <u>541519</u>

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.	<u>11/10/2014</u>	<u>SONYA JAIN</u>
	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 ☒ Same as Plan Sponsor Name ☐ Same as Plan Sponsor Address		3b Administrator's EIN	
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		3c Administrator's telephone number 4b EIN 4c PN	
5 Total number of participants at the beginning of the plan year		5	176
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	187
b Retired or separated participants receiving benefits		6b	0
c Other retired or separated participants entitled to future benefits.....		6c	38
d Subtotal. Add lines 6a , 6b , and 6c		6d	225
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits		6e	0
f Total. Add lines 6d and 6e		6f	225
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)		6g	143
h Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested		6h	34
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: 2E 2F 2G 2J 2K 2T 3D			
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) ☒ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor		9b Plan benefit arrangement (check all that apply) (1) ☒ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ 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) ☒ 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) ☒ H (Financial Information) (2) ☐ I (Financial Information – Small Plan) (3) ☒ <u>1</u> A (Insurance Information) (4) ☒ C (Service Provider Information) (5) ☒ D (DFE/Participating Plan Information) (6) ☐ G (Financial Transaction Schedules)	

SCHEDULE A (Form 5500) Department of the Treasury Internal Revenue Service <hr/> Department of Labor Employee Benefits Security Administration <hr/> 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 GLOBAL TECH RETIREMENT PLAN	B Three-digit plan number (PN) ►	001
C Plan sponsor's name as shown on line 2a of Form 5500 GLOBAL TECH, INC.	D Employer Identification Number (EIN) 56-2448125	

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.
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1 Coverage Information:

(a) Name of insurance carrier

JOHN HANCOCK LIFE INSURANCE COMPANY (U.S.A.)

(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
01-0233346	65838	69998	147	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
11464	3541

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

FSC AGENCY, INC. **12040 SOUTH LAKES DRIVE, SUITE 103**
RESTON, VA 20191

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
11464			3

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

UNIGLOBAL PENSION PLANNING, INC. **10432 BALLS FORD ROAD**
MANASSAS, VA 20109

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
	3541	TPA FEES & COMPENSATION	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	4085224

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. Specify nature of costs ▶	6d	

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

f If contract purchased, in whole or in part, to distribute benefits from a terminating plan, check here ☐**7 Contracts With Unallocated Funds (Do not include portions of these contracts maintained in separate accounts)**

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

b Balance at the end of the previous year	7b	
c Additions: (1) Contributions deposited during the year	7c(1)	
(2) Dividends and credits	7c(2)	
(3) Interest credited during the year	7c(3)	
(4) Transferred from separate account	7c(4)	
(5) Other (specify below)	7c(5)	
▶		
(6) Total additions	7c(6)	0
d Total of balance and additions (add lines 7b and 7c(6))	7d	0
e Deductions:		
(1) Disbursed from fund to pay benefits or purchase annuities during year	7e(1)	
(2) Administration charge made by carrier	7e(2)	
(3) Transferred to separate account	7e(3)	
(4) Other (specify below)	7e(4)	
▶		
(5) Total deductions	7e(5)	0
f Balance at the end of the current year (subtract line 7e(5) from line 7d)	7f	0

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)	0
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)	0
(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)	0
(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. ▶

<div>SCHEDULE C</div> <div>(Form 5500)</div> <div>Department of the Treasury Internal Revenue Service</div> <div>Department of Labor Employee Benefits Security Administration</div> <div>Pension Benefit Guaranty Corporation</div>	<div>Service Provider Information</div> <div>This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA).</div> <div>▶ File as an attachment to Form 5500.</div>	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 GLOBAL TECH RETIREMENT PLAN	B Three-digit plan number (PN) ▶	001
C Plan sponsor's name as shown on line 2a of Form 5500 GLOBAL TECH, INC.	D Employer Identification Number (EIN) 56-2448125	

Part I	Service Provider Information (see instructions)
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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 LIFE INSURANCE COMPANY

01-0233346

(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	RECORDKEEPER	64	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 ☐

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

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) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small>	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 <div style="border: 1px solid black; text-align: center; padding: 5px;">2013</div> This Form is Open to Public Inspection.
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For calendar plan year 2013 or fiscal plan year beginning 01/01/2013 and ending 12/31/2013

A Name of plan <u>GLOBAL TECH RETIREMENT PLAN</u>	B Three-digit plan number (PN) ►	<u>001</u>
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 <u>GLOBAL TECH, INC.</u>	D Employer Identification Number (EIN) <u>56-2448125</u>	

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)
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a Name of MTIA, CCT, PSA, or 103-12 IE: <u>RETIREMENT LIVING THROUGH 2050</u>			
b Name of sponsor of entity listed in (a): <u>JOHN HANCOCK LIFE INSURANCE COMPANY (U.S.A.)</u>			
c EIN-PN <u>01-0233346-001</u>	d Entity code <u>P</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>26946</u>	
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>RETIREMENT LIVING THROUGH 2045</u>			
b Name of sponsor of entity listed in (a): <u>JOHN HANCOCK LIFE INSURANCE COMPANY (U.S.A.)</u>			
c EIN-PN <u>01-0233346-001</u>	d Entity code <u>P</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>58159</u>	
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>RETIREMENT LIVING THROUGH 2040</u>			
b Name of sponsor of entity listed in (a): <u>JOHN HANCOCK LIFE INSURANCE COMPANY (U.S.A.)</u>			
c EIN-PN <u>01-0233346-001</u>	d Entity code <u>P</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>43539</u>	
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>RETIREMENT LIVING THROUGH 2035</u>			
b Name of sponsor of entity listed in (a): <u>JOHN HANCOCK LIFE INSURANCE COMPANY (U.S.A.)</u>			
c EIN-PN <u>01-0233346-001</u>	d Entity code <u>P</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>113882</u>	
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>RETIREMENT LIVING THROUGH 2030</u>			
b Name of sponsor of entity listed in (a): <u>JOHN HANCOCK LIFE INSURANCE COMPANY (U.S.A.)</u>			
c EIN-PN <u>01-0233346-001</u>	d Entity code <u>P</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>30532</u>	
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>RETIREMENT LIVING THROUGH 2025</u>			
b Name of sponsor of entity listed in (a): <u>JOHN HANCOCK LIFE INSURANCE COMPANY (U.S.A.)</u>			
c EIN-PN <u>01-0233346-001</u>	d Entity code <u>P</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>66734</u>	
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>RETIREMENT LIVING THROUGH 2020</u>			
b Name of sponsor of entity listed in (a): <u>JOHN HANCOCK LIFE INSURANCE COMPANY (U.S.A.)</u>			
c EIN-PN <u>01-0233346-001</u>	d Entity code <u>P</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>293120</u>	

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 LIFE INSURANCE COMPANY (U.S.A.)		
c EIN-PN 01-0233346-001	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 69683
a Name of MTIA, CCT, PSA, or 103-12 IE: LIFESTYLE AGGRESSIVE		
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INSURANCE COMPANY (U.S.A.)		
c EIN-PN 01-0233346-001	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 322700
a Name of MTIA, CCT, PSA, or 103-12 IE: LIFESTYLE GROWTH		
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INSURANCE COMPANY (U.S.A.)		
c EIN-PN 01-0233346-001	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 619605
a Name of MTIA, CCT, PSA, or 103-12 IE: LIFESTYLE BALANCED		
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INSURANCE COMPANY (U.S.A.)		
c EIN-PN 01-0233346-001	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 368341
a Name of MTIA, CCT, PSA, or 103-12 IE: LIFESTYLE MODERATE		
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INSURANCE COMPANY (U.S.A.)		
c EIN-PN 01-0233346-001	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 264344
a Name of MTIA, CCT, PSA, or 103-12 IE: LIFESTYLE CONSERVATIVE		
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INSURANCE COMPANY (U.S.A.)		
c EIN-PN 01-0233346-001	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 71248
a Name of MTIA, CCT, PSA, or 103-12 IE: ENERGY		
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INSURANCE COMPANY (U.S.A.)		
c EIN-PN 01-0233346-001	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 199378
a Name of MTIA, CCT, PSA, or 103-12 IE: DFA INTERNATIONAL VALUE		
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INSURANCE COMPANY (U.S.A.)		
c EIN-PN 01-0233346-001	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 27594
a Name of MTIA, CCT, PSA, or 103-12 IE: MID CAP STOCK FUND		
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INSURANCE COMPANY (U.S.A.)		
c EIN-PN 01-0233346-001	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 112749
a Name of MTIA, CCT, PSA, or 103-12 IE: SMALL CAP GROWTH INDEX		
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INSURANCE COMPANY (U.S.A.)		
c EIN-PN 01-0233346-001	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 86881

a Name of MTIA, CCT, PSA, or 103-12 IE: FINANCIAL SERVICES FUND		
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INSURANCE COMPANY (U.S.A.)		
c EIN-PN 01-0233346-001	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 88679
a Name of MTIA, CCT, PSA, or 103-12 IE: EUROPACIFIC GROWTH FUND		
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INSURANCE COMPANY (U.S.A.)		
c EIN-PN 01-0233346-001	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 34660
a Name of MTIA, CCT, PSA, or 103-12 IE: SMALL COMPANY VALUE FUND		
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INSURANCE COMPANY (U.S.A.)		
c EIN-PN 01-0233346-001	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 79665
a Name of MTIA, CCT, PSA, or 103-12 IE: SMALL CAP VALUE INDEX		
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INSURANCE COMPANY (U.S.A.)		
c EIN-PN 01-0233346-001	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 79675
a Name of MTIA, CCT, PSA, or 103-12 IE: COLUMBIA MID CAP VALUE		
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INSURANCE COMPANY (U.S.A.)		
c EIN-PN 01-0233346-001	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 53917
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 LIFE INSURANCE COMPANY (U.S.A.)		
c EIN-PN 01-0233346-001	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 101447
a Name of MTIA, CCT, PSA, or 103-12 IE: OPPENHEIMER GLOBAL		
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INSURANCE COMPANY (U.S.A.)		
c EIN-PN 01-0233346-001	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 391046
a Name of MTIA, CCT, PSA, or 103-12 IE: THE GROWTH FUND OF AMERICA		
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INSURANCE COMPANY (U.S.A.)		
c EIN-PN 01-0233346-001	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 86988
a Name of MTIA, CCT, PSA, or 103-12 IE: DAVIS NEW YORK VENTURE		
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INSURANCE COMPANY (U.S.A.)		
c EIN-PN 01-0233346-001	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 63121
a Name of MTIA, CCT, PSA, or 103-12 IE: WASHINGTON MUTUAL INVESTORS		
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INSURANCE COMPANY (U.S.A.)		
c EIN-PN 01-0233346-001	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 120036

a Name of MTIA, CCT, PSA, or 103-12 IE: **PIMCO TOTAL RETURN**

b Name of sponsor of entity listed in (a): **JOHN HANCOCK LIFE INSURANCE COMPANY (U.S.A.)**

c EIN-PN 01-0233346-001	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 116357
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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 LIFE INSURANCE COMPANY (U.S.A.)**

c EIN-PN 01-0233346-001	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 94198
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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)
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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)
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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)
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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)
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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)
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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)
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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)
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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)
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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
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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) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	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.	<small>OMB No. 1210-0110</small> 2013 This Form is Open to Public Inspection
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For calendar plan year 2013 or fiscal plan year beginning <u>01/01/2013</u> and ending <u>12/31/2013</u>		
A Name of plan <u>GLOBAL TECH RETIREMENT PLAN</u>	B Three-digit plan number (PN) ►	<u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>GLOBAL TECH, INC.</u>	D Employer Identification Number (EIN) <u>56-2448125</u>	

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	34955	64337
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions.....	1b(1)		
(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)	29786	56026
(9) Value of interest in common/collective trusts	1c(9)		
(10) Value of interest in pooled separate accounts	1c(10)	2313305	4085224
(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)		

1d Employer-related investments:

		(a) Beginning of Year	(b) End of Year
(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	2378046	4205587

Liabilities

g Benefit claims payable	1g		
h Operating payables	1h		
i Acquisition indebtedness	1i		
j Other liabilities	1j		
k Total liabilities (add all amounts in lines 1g through 1j)	1k	0	0

Net Assets

l Net assets (subtract line 1k from line 1f)	1l	2378046	4205587
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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 Contributions:**

		(a) Amount	(b) Total
(1) Received or receivable in cash from: (A) Employers	2a(1)(A)	295670	
(B) Participants	2a(1)(B)	952840	
(C) Others (including rollovers)	2a(1)(C)	322729	
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		1571239

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)	1431	
(F) Other	2b(1)(F)		
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		1431

(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)		
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(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)		
(B) Aggregate carrying amount (see instructions)	2b(4)(B)		
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)		0

(5) Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)		
(B) Other	2b(5)(B)		
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		0

		(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)		566315
(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		
d Total income. Add all income amounts in column (b) and enter total	2d		2138985

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	309355	
(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)		309355
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions)	2g		
h Interest expense	2h		
i Administrative expenses: (1) Professional fees	2i(1)		
(2) Contract administrator fees	2i(2)	2089	
(3) Investment advisory and management fees	2i(3)		
(4) Other	2i(4)		
(5) Total administrative expenses. Add lines 2i(1) through (4)	2i(5)		2089
j Total expenses. Add all expense amounts in column (b) and enter total	2j		311444

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		1827541
l Transfers of assets:			
(1) To this plan	2l(1)		
(2) From this plan	2l(2)		

Part III Accountant's Opinion

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

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

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

b Did the accountant perform a limited scope audit pursuant to 29 CFR 2520.103-8 and/or 103-12(d)?

☒ Yes ☐ No

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

(1) Name: SAGGAR & ROSENBERG, P.C.

(2) EIN: 52-2190100

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:

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.)

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.)

	Yes	No	Amount
4a		X	
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.)		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.)		X	
e Was this plan covered by a fidelity bond?	X		500000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		X	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	X		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked, and see instructions for format requirements.)		X	
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?		X	
l Has the plan failed to provide any benefit when due under the plan?		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)		X	
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.			

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

A Name of plan <u>GLOBAL TECH RETIREMENT PLAN</u>	B Three-digit plan number (PN) ▶ <u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>GLOBAL TECH, INC.</u>	D Employer Identification Number (EIN) <u>56-2448125</u>

Part I	Distributions
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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	<u>0</u>
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): <u>01-0233346</u>		
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 412 of the Internal Revenue Code or ERISA section 302, skip this Part)
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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
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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
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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.
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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): _____

Global Tech Retirement Plan

**Financial Statements and
Supplementary Information
December 31, 2013**

With Independent Auditor's Report Thereon

Global Tech Retirement Plan

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Independent Auditor's Report

Trustees of the
Global Tech Retirement Plan
Arlington, Virginia

Report on the Financial Statements

We were engaged to audit the accompanying financial statements of Global Tech Retirement Plan (the "Plan"), which comprise the statement of net assets available for benefits as of December 31, 2013 and the related statement of changes in net assets available for benefits for the year then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

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

Auditor's Responsibility

Our responsibility is to express an opinion on these financial statements based on conducting the audit in accordance with auditing standards generally accepted in the United States of America. Because of the matter described in the Basis for Disclaimer of Opinion paragraph, however, we were not able to obtain sufficient appropriate audit evidence to provide a basis for an audit opinion.

Basis for Disclaimer of Opinion

As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Securities Act of 1974, the trustees instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Note 4, which was certified by John Hancock Life Insurance Company (U.S.A.), the custodian of the Plan, except for comparing the information with the related information included in the financial statements. We have been informed by the plan administrator that the custodian holds the Plan's investment assets and executes investment transactions. The plan administrators have obtained a certification from the custodian as of December 31, 2013, and for the year then ended, that the information provided to the plan administrators by the custodian is complete and accurate.

Disclaimer of Opinion

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

Other Matter

The supplemental schedule of assets held at year end is required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 and is presented for the purpose of additional analysis and is not a required part of the financial statements. Because of the significance of the matter described in the Basis for Disclaimer of Opinion paragraph, we do not express an opinion on the supplemental schedule referred to above.

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

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

Rockville, Maryland
July 28, 2014

Saggar + Rosenberg, PC

Global Tech Retirement Plan
Statements of Net Assets Available for Benefits
December 31, 2013 (audited) and 2012 (unaudited)

	<u>2013</u> <u>(audited)</u>	<u>2012</u> <u>(unaudited)</u>
Assets		
Cash	\$ 64,337	\$ 34,955
Investments, at fair value (see Note 5)	4,085,224	2,313,305
Receivables:		
Notes receivable from participants	<u>56,026</u>	<u>29,786</u>
Total receivables	<u>56,026</u>	<u>29,786</u>
Total assets	<u>4,205,587</u>	<u>2,378,046</u>
Liabilities		
Distributions payable	<u>7,195</u>	<u>-</u>
Total liabilities	<u>7,195</u>	<u>-</u>
Net assets available for benefits	<u>\$ 4,198,392</u>	<u>\$ 2,378,046</u>

See Independent Auditor's Report and Footnotes

Global Tech Retirement Plan
Statement of Changes in Net Assets Available for Benefits
For the Years Ended December 31, 2013

Additions:

Additions to net assets attributed to:

Net appreciation in fair value of investments (see Note 5)	\$	566,315
--	----	---------

Interest income on notes receivable from participants		1,431
---	--	-------

Contributions:

Participants'		952,840
---------------	--	---------

Employer's		295,670
------------	--	---------

Rollovers		322,729
-----------	--	---------

		1,571,239
--	--	-----------

Total additions		<u>2,138,985</u>
------------------------	--	------------------

Deductions:

Deductions from net assets attributed to:

Benefits paid to participants		316,550
-------------------------------	--	---------

Administrative fees		<u>2,089</u>
---------------------	--	--------------

Total deductions		<u>318,639</u>
-------------------------	--	----------------

Net increase		<u>1,820,346</u>
---------------------	--	------------------

Net assets available for benefits:

Beginning of year		<u>2,378,046</u>
-------------------	--	------------------

End of Year	\$	<u><u>4,198,392</u></u>
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See Independent Auditor's Report and Footnotes

Global Tech Retirement Plan

Notes to Financial Statements

Note 1: Description of Plan

The following description of the Global Tech Retirement Plan (the “Plan”) provides only general information. Participants should refer to the Plan agreement for a more complete description of the Plan’s provisions.

General

The Plan is a defined contribution plan covering all employees of Global Tech, Inc., doing business as (d/b/a) eGlobalTech (“eGlobal” or the “Company”). All full time or part time employees who are age 21 or older and have completed three months of service are eligible to make salary deferrals and receive the Company’s contribution portion to the Plan which includes a non-elective contribution and a matching percentage. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA).

Contributions

Each year, participants may contribute the maximum percentage allowable of pretax annual compensation not to exceed the limits of the Internal Revenue Code, as defined in the Plan. Participants who have attained age 50 before the end of the Plan year are eligible to make catch-up contributions. Participants may also contribute amounts representing distributions from other qualified defined contribution plans (rollovers). Participants direct the investment of their contributions into various investment options offered by the Plan. During 2013, the Company elected not to make a non-elective contribution. The Company contributes a matching contribution of 50% of the aggregate salary reduction contribution to the extent aggregate contribution does not exceed 6% of compensation. The Company’s contributions are invested in accordance with the participant’s investment choices.

Participant Accounts

Each participant’s account is credited with the participant’s contributions and allocation of (a) the Company’s contributions and (b) Plan earnings, and charged with an allocation of administrative expenses. Allocations are based on participant earnings or account balances, as defined. The benefit to which a participant is entitled is the benefit that can be provided from the participant’s vested account.

Vesting

Participants are vested immediately in their contributions plus actual earnings thereon. Vesting in Company’s non-elective and matching contributions portion of their account is based on years of continuous service. A participant vests 25% per year over four years of credited service until being fully vested.

Global Tech Retirement Plan
Notes to Financial Statements

Note 1: Description of Plan (continued)

Notes Receivable from Participants

Participants may borrow from their fund accounts a minimum of \$1,000 up to a maximum equal to the lesser of \$50,000 or 50% of their vested interest in the Plan. The loans are secured by the balance in the participants' accounts and bear interest at 4.25%, which are commensurate with local prevailing rates at the time of the loan, as determined by the Plan administrator. Principal and interest is paid ratably through monthly payroll deductions.

Payment of Benefits

On termination of service due to death, disability, retirement, or other reasons, a participant may receive the value of the vested interest in his or her account as a lump-sum distribution. An in-service distribution may be taken by any participant that has attained the age of 59 and ½.

Forfeited Accounts

Forfeitures occur when a former participant has three consecutive years of a break in service. These accounts will be used to reduce employer contributions and Plan administrative expenses in the same year in which the forfeitures occur. At December 31, 2013 and 2012 forfeited non-vested accounts totaled \$29,382 and \$37,793, respectively. Subsequent to the year end, all remaining forfeitures were applied to reduce employer contributions.

Note 2: Summary of Significant Accounting Policies

Basis of Accounting

The financial statements of the Plan are prepared on the accrual basis of accounting.

Use of Estimates

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires the Plan administrators to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results may differ from those estimates.

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 measured date. See Note 5 for discussion of fair value measurements.

See Independent Auditor's Report

Global Tech Retirement Plan
Notes to Financial Statements

Note 2: Summary of Significant Accounting Policies (continued)

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

Notes Receivable from Participants

Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest. Interest income is recorded on the accrual basis. Related fees are recorded as administrative expenses and are expensed when they are incurred. No allowance for credit losses has been recorded as of December 31, 2013 or 2012. If a participant ceases to make loan repayments and the Plan administrator deems the participant loan to be in default, the participant loan balance is reduced and a benefit payment is recorded.

Payment of Benefits

Benefits are recorded when paid.

Administrative Fees

Certain expenses of maintaining the Plan are paid directly by the Company and are excluded from these financial statements. Fees related to the administration of notes receivable from participants are charged directly to the participants' accounts and are included in administrative expenses. Investment related expenses are included in net appreciation of fair value of investments.

Subsequent Events

For the year ended December 31, 2013, the Plan administrators have evaluated subsequent events for potential recognition and disclosure through July 28, 2014, the date of financial statement issuance.

Note 3: Tax Status

The Internal Revenue Service has determined and informed the Company by a letter dated March 31, 2008, that the Plan and related trust are designated in accordance with 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 requirements of the IRC.

Global Tech Retirement Plan
Notes to Financial Statements

Note 3: Tax Status (continued)

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 IRS. The Plan may be subject to a routine audit by taxing jurisdictions; however, there are currently no audits for any tax periods in progress. The Plan administrators believe it is no longer subject to income tax examinations for years prior to 2010.

Note 4: Information Certified by Trustee (unaudited)

The Plan administrator has elected the method of compliance as permitted by 29 CFR § 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA for 2013. Accordingly, John Hancock Life Insurance Company (U.S.A.), the custodian during 2013, has certified the completeness and accuracy of the investment activity during the year.

Note 5: Investments and Fair Value Measurement (unaudited)

The framework for measuring fair value provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (level 1) and the lowest priority to unobservable inputs (level 3). The three levels of the fair value hierarchy under FASB ASC 820 are described as follows:

Level 1: Inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets that the Plan has the ability to access.

Level 2: Inputs to the valuation methodology include

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

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

Level 3: Inputs to the valuation methodology are unobservable and significant to the fair value measurement.

Global Tech Retirement Plan
Notes to Financial Statements

Note 5: Investments and Fair Value Measurement (unaudited) (continued)

The asset or liability's fair value measurement level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement. Valuation techniques maximize the use of relevant observable inputs and minimize the use of unobservable inputs. Following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodologies used at December 31, 2013 and 2012.

Mutual Funds: Valued at the daily closing price as reported by the fund. Mutual funds held by the Plan are open-end mutual funds that are registered with the Securities and Exchange Commission. These funds are required to publish their daily net asset value and to transact that price. The mutual funds held by the Plan are deemed to be actively traded.

Corporate bonds and equity securities: Valued at the closing price reported on the active markets on which the individual securities are traded. If the quoted price of the identical asset or liability is not available, those securities are valued using pricing models maximizing the use of observable inputs for similar securities.

The following tables sets forth by level, within the fair value hierarchy, the Plan's investments:

Investments at Fair Value as of December 31, 2013

	<u>Level 1</u>	<u>Level 2</u>	<u>Level 3</u>	<u>Total</u>
Mutual funds:				
Allocation funds	\$ 1,323,538	\$ --	\$ --	\$ 1,323,538
Blend funds	1,304,188	--	--	1,304,188
Growth funds	286,618	--	--	286,618
Value funds	281,223	--	--	281,223
Sector funds	<u>288,057</u>	<u>--</u>	<u>--</u>	<u>288,057</u>
Total mutual funds	<u>3,483,624</u>	<u>--</u>	<u>--</u>	<u>3,483,624</u>
Corporate bonds:				
Intermediate term	116,357	--	--	116,357
Short term	<u>--</u>	<u>94,198</u>	<u>--</u>	<u>94,198</u>
Total corporate bonds	<u>116,357</u>	<u>94,198</u>	<u>--</u>	<u>210,555</u>
Equity securities	<u>391,045</u>	<u>--</u>	<u>--</u>	<u>391,045</u>
Total investments at fair value	<u>\$ 3,991,026</u>	<u>\$ 94,198</u>	<u>\$ --</u>	<u>\$ 4,085,224</u>

See Independent Auditor's Report

Global Tech Retirement Plan
Notes to Financial Statements

Note 5: Investments and Fair Value Measurement (unaudited) (continued)

Investments at Fair Value as of December 31, 2012

	<u>Level 1</u>	<u>Level 2</u>	<u>Level 3</u>	<u>Total</u>
Mutual funds:				
Allocation funds	\$ 771,766	\$ --	\$ --	\$ 771,766
Blend funds	848,548	--	--	848,548
Growth funds	85,028	--	--	85,028
Value funds	158,516	--	--	158,516
Sector funds	<u>144,692</u>	<u>--</u>	<u>--</u>	<u>144,692</u>
Total mutual funds	<u>2,008,550</u>	<u>--</u>	<u>--</u>	<u>2,008,550</u>
Corporate bonds:				
Intermediate term	76,225	--	--	76,225
Short term	<u>--</u>	<u>5,698</u>	<u>--</u>	<u>5,698</u>
Total corporate bonds	<u>76,225</u>	<u>5,698</u>	<u>--</u>	<u>81,923</u>
Equity securities	<u>222,833</u>	<u>--</u>	<u>--</u>	<u>222,833</u>
Total investments at fair value	<u>\$ 2,307,608</u>	<u>\$ 5,698</u>	<u>\$ --</u>	<u>\$ 2,313,306</u>

During 2013, the Plan's investments (including gains and losses on investments bought and sold, as well as held during the year) appreciated in value by \$566,315.

The following presents investments that represent 5% or more of the Plan's assets at December 31:

	<u>2013</u>	<u>2012</u>
John Hancock lifestyle growth	\$ 619,605	\$ 278,338
John Hancock lifestyle moderate	\$ 264,344	\$ 164,071
John Hancock lifestyle balanced	\$ 368,341	\$ 306,877
John Hancock lifestyle aggressive	\$ 322,700	\$ 205,010
John Hancock retirement living 2020	\$ 293,120	\$ 247,572
Energy	\$ 199,378*	\$ 144,692
Oppenheimer global	\$ 391,045	\$ 222,833

*Fund did not meet the 5% or more criteria during the respective year.

See Independent Auditor's Report

Global Tech Retirement Plan
Notes to Financial Statements

Note 6: Party-in-Interest Transactions

Certain Plan investments are shares of mutual funds managed by John Hancock Life Insurance Company (U.S.A.). John Hancock Life Insurance Company (U.S.A.) is the custodian as defined by the Plan, and, therefore, these transactions qualify as party-in-interest transactions. Fees incurred by the Plan for the investment management services are included in net appreciation in fair value of the investments, as they are paid through revenue sharing, rather than a direct payment. As described in Note 2, the Plan made a direct payment to the third party administrator of \$2,025 which was not covered by revenue sharing. The Plan sponsor pays any other fees related to the Plan's operations.

Note 7: Plan Termination

Although it has not expressed any intent to do so, the Company has the right under the Plan to discontinue its contributions at any time and to terminate the Plan subject to the provisions of ERISA. In the event of Plan termination, participants would become 100 percent vested in their employer contributions.

Note 8: Risks and Uncertainties

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

Note 9: Reconciliation of Financial Statements to Schedule H of Form 5500

The following is a reconciliation of net assets available for benefits per the financial statements at December 31, 2013 to Schedule H of Form 5500:

Total net assets available for benefits per the financial statements	\$ 4,198,392
Plus: Distributions payable	<u>7,195</u>
Total net assets available for benefits per Schedule H of Form 5500	<u>\$ 4,205,587</u>

Global Tech Retirement Plan
Notes to Financial Statements

Note 9: Reconciliation of Financial Statements to Schedule H of Form 5500 (continued)

The following is a reconciliation of benefits paid to participants per the financial statements at December 31, 2013 to Schedule H of Form 5500:

Benefits paid to participants per the financial statements	\$ 316,550
Less: 2013 distribution accrued for and paid out in 2014	<u>(7,195)</u>
Total benefits paid to participants per Schedule H of Form 5500	<u>\$ 309,355</u>

Global Tech Retirement Plan
EIN # 13-3601506 Plan # 001
Schedule H, line 4i - Schedule of Assets (Held At End Of Year)

(a)	(b) Identity of issuer, 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 lifestyle growth	Mutual Fund	**	\$ 619,605
*	John Hancock lifestyle conservative	Mutual Fund	**	71,248
*	John Hancock lifestyle moderate	Mutual Fund	**	264,344
*	John Hancock lifestyle balanced	Mutual Fund	**	368,341
	Europacific growth fund	Mutual Fund	**	34,660
*	John Hancock retirement living through 2015	Mutual Fund	**	69,683
*	John Hancock retirement living through 2020	Mutual Fund	**	293,120
*	John Hancock retirement living through 2025	Mutual Fund	**	66,734
*	John Hancock retirement living through 2030	Mutual Fund	**	30,532
*	John Hancock retirement living through 2035	Mutual Fund	**	113,882
*	John Hancock retirement living through 2040	Mutual Fund	**	43,539
*	John Hancock retirement living through 2045	Mutual Fund	**	58,159
*	John Hancock retirement living through 2050	Mutual Fund	**	26,946
*	John Hancock lifestyle aggressive	Mutual Fund	**	322,700
	Davis New York venture	Mutual Fund	**	63,121
*	John Hancock mid cap index fund	Mutual Fund	**	101,447
*	John Hancock small company value fund	Mutual Fund	**	79,665
	The growth fund of America	Mutual Fund	**	86,988
*	John Hancock mid cap stock fund	Mutual Fund	**	112,749
*	John Hancock small cap growth index	Mutual Fund	**	86,881
	Energy	Mutual Fund	**	199,378
*	John Hancock financial services fund	Mutual Fund	**	88,679
	DFA international value	Mutual Fund	**	27,594
	Washington mutual investors	Mutual Fund	**	120,036
	Columbia mid cap value	Mutual Fund	**	53,917
*	John Hancock small cap value index	Mutual Fund	**	79,676
	PIMCO total return	Corporate Bond	**	116,357
*	John Hancock stable value	Corporate Bond	**	94,198
	Oppenheimer global	Equity Security	**	391,045
*	Notes receivable from participants	Notes receivable from participants with interest rates at 4.25%, collateralized by participants' account balances and maturing through June 2018	**	56,026

Total

\$ 4,141,250

* Parties-In-Interest as defined by ERISA

** Not applicable for participant directed investments.

See Independent Auditor's Report and Footnotes



STATEMENT OF ASSETS AND LIABILITIES OF
THE SUB-ACCOUNTS OF JOHN HANCOCK LIFE INSURANCE COMPANY (U.S.A.)
FOR CONTRACT # 69998 THE TRUSTEES OF GLOBAL TECH, INC. 401(K)
RETIREMENT PLAN
MONEY INVESTED AS OF DECEMBER 31, 2013

Sub-Accounts	John Hancock USA		THE TRUSTEES OF GLOBAL TECH, INC. 401(K)	
	Total Sub-Accounts		RETIREMENT PLAN	
	Assets	Liabilities*	Total No of Units	Total Value
Retirement Living through 2050	\$ 153884405.87		2173.466663	\$ 26945.90
Retirement Living through 2045	\$ 666779271.23		4205.496389	\$ 58159.25
Retirement Living through 2040	\$ 681431070.10		3141.403277	\$ 43539.03
Retirement Living through 2035	\$ 888903249.72		8177.319113	\$ 113882.44
Retirement Living through 2030	\$ 1075788786.22		2246.055403	\$ 30531.64
Retirement Living through 2025	\$ 1211099209.00		4918.382788	\$ 66733.78
Retirement Living through 2020	\$ 1033652391.31		21553.786518	\$ 293119.77
Retirement Living through 2015	\$ 598533927.58		5160.684858	\$ 69682.56
Retirement Living through 2010	\$ 339344706.44		.000000	\$ 0.00
Retirement Choices at 2050	\$ 261588551.03		.000000	\$ 0.00
Retirement Choices at 2045	\$ 382769632.54		.000000	\$ 0.00
Retirement Choices at 2040	\$ 517236153.62		.000000	\$ 0.00
Retirement Choices at 2035	\$ 735784162.77		.000000	\$ 0.00
Retirement Choices at 2030	\$ 922046686.87		.000000	\$ 0.00
Retirement Choices at 2025	\$ 1024888930.57		.000000	\$ 0.00
Retirement Choices at 2020	\$ 790448518.37		.000000	\$ 0.00
Retirement Choices at 2015	\$ 396025078.92		.000000	\$ 0.00
Retirement Choices at 2010	\$ 229506378.85		.000000	\$ 0.00
Lifestyle Aggressive	\$ 3914818454.44		16755.622384	\$ 322699.93
Lifestyle Growth	\$ 11345472916.14		30841.316669	\$ 619604.98
Lifestyle Balanced	\$ 11814941074.03		18678.392644	\$ 368341.14
Lifestyle Moderate	\$ 3409936365.56		13975.966278	\$ 264344.07
Lifestyle Conservative	\$ 2649102010.24		3836.179330	\$ 71247.70
Russell Equity Growth	\$ 41902958.17		.000000	\$ 0.00
Russell Growth	\$ 114024306.00		.000000	\$ 0.00
Russell Balanced	\$ 131550617.08		.000000	\$ 0.00

*Assets = Liabilities

Note: this report does not reflect transactions processed after December 31, 2013
Cash Basis



STATEMENT OF ASSETS AND LIABILITIES OF
THE SUB-ACCOUNTS OF JOHN HANCOCK LIFE INSURANCE COMPANY (U.S.A.)
FOR CONTRACT # 69998 THE TRUSTEES OF GLOBAL TECH, INC. 401(K)
RETIREMENT PLAN
MONEY INVESTED AS OF DECEMBER 31, 2013

Sub-Accounts	John Hancock USA		THE TRUSTEES OF GLOBAL TECH, INC. 401(K)	
	Total Sub-Accounts		RETIREMENT PLAN	
	Assets and Liabilities*		Total No of Units	Total Value
Russell Moderate	\$	28272100.01	.000000	\$ 0.00
Russell Conservative	\$	17384744.02	.000000	\$ 0.00
Tocqueville Gold Fund	\$	40628.76	.000000	\$ 0.00
Fidelity Advisor Gold Fund	\$	59248959.14	.000000	\$ 0.00
Real Est. Securities Fund	\$	439007494.44	.000000	\$ 0.00
Natural Resources Fund	\$	117583013.64	.000000	\$ 0.00
DFA Emerging Markets Value	\$	221720412.30	.000000	\$ 0.00
iShares Gold Trust ETF	\$	73081.69	.000000	\$ 0.00
Royce Opportunity	\$	217999782.94	.000000	\$ 0.00
Intl Small Cap Fund	\$	113913261.18	.000000	\$ 0.00
Fidelity Adv Leveraged Co Stk	\$	66174835.79	.000000	\$ 0.00
Oppenheimer Developing Mkt	\$	668109965.78	.000000	\$ 0.00
PIMCO Commodity Real Return	\$	13331577.23	.000000	\$ 0.00
Energy	\$	485486510.80	2257.858427	\$ 199377.82
Dodge & Cox International St	\$	40684724.10	.000000	\$ 0.00
Keeley Small Cap Value	\$	42813061.76	.000000	\$ 0.00
DFA International Value	\$	87691808.28	1173.789636	\$ 27593.77
Aberdeen International Equity	\$	2617509.18	.000000	\$ 0.00
SSgA Mid Growth Index Fund	\$	59392235.90	.000000	\$ 0.00
International Value Fund	\$	271356152.51	.000000	\$ 0.00
DFA US Targeted Value Fund	\$	91588634.37	.000000	\$ 0.00
Mid Cap Stock Fund	\$	348311335.30	4162.077650	\$ 112748.72
T. Rowe Price Sci & Tech	\$	363756541.08	.000000	\$ 0.00
DFA U.S. Small Cap Fund	\$	223912996.02	.000000	\$ 0.00
iShares MSCI EAFE Value ETF	\$	931.10	.000000	\$ 0.00
iShares MSCI EAFE Growth ETF	\$	4040.11	.000000	\$ 0.00

*Assets = Liabilities



STATEMENT OF ASSETS AND LIABILITIES OF
THE SUB-ACCOUNTS OF JOHN HANCOCK LIFE INSURANCE COMPANY (U.S.A.)
FOR CONTRACT # 69998 THE TRUSTEES OF GLOBAL TECH, INC. 401(K)
RETIREMENT PLAN
MONEY INVESTED AS OF DECEMBER 31, 2013

Sub-Accounts	John Hancock USA		THE TRUSTEES OF GLOBAL TECH, INC. 401(K)	
	Total Sub-Accounts		RETIREMENT PLAN	
	Assets and Liabilities*		Total No of Units	Total Value
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Small Cap Growth Index	\$	398097175.98	2607.092286	\$ 86881.25
Intl Equity Index Fund	\$	234516666.78	.000000	\$ 0.00
International Core Fund	\$	40136018.92	.000000	\$ 0.00
SMALLCAP World Fund	\$	50103494.11	.000000	\$ 0.00
New World Fund	\$	52605136.65	.000000	\$ 0.00
Science & Technology Fund	\$	233773646.73	.000000	\$ 0.00
Financial Services Fund	\$	108925314.67	4275.881069	\$ 88679.44
Small Cap Index Fund	\$	267217811.35	.000000	\$ 0.00
American Century Heritage	\$	274514339.41	.000000	\$ 0.00
John Hancock Intl Growth	\$	14635975.52	.000000	\$ 0.00
Explorer	\$	72054617.74	.000000	\$ 0.00
Small Cap Growth Fund	\$	118363529.22	.000000	\$ 0.00
Pru Jennison 20/20 Focus Fund	\$	0.00	.000000	\$ 0.00
Inv Small Cap Growth	\$	182933882.51	.000000	\$ 0.00
Oppenheimer Intl Growth Fund	\$	115595954.08	.000000	\$ 0.00
EuroPacific Growth Fund	\$	810108259.03	594.505129	\$ 34660.13
Franklin Small-Mid Growth	\$	186046209.03	.000000	\$ 0.00
Legg Mason ClearBr Agg Growth	\$	219813686.57	.000000	\$ 0.00
Turner Large Growth Fund	\$	0.00	.000000	\$ 0.00
Thornburg International Value	\$	43934144.28	.000000	\$ 0.00
International Growth Fund	\$	55506958.09	.000000	\$ 0.00
T. Rowe Price Health Sci	\$	783541945.87	.000000	\$ 0.00
Vanguard Mid-Cap Growth ETF	\$	25687.92	.000000	\$ 0.00
Vanguard Mid-Cap Value ETF	\$	105720.64	.000000	\$ 0.00
Small Cap Opportunities Fund	\$	76125088.07	.000000	\$ 0.00
SSgA Mid Value Index Fund	\$	46150712.22	.000000	\$ 0.00

*Assets = Liabilities



STATEMENT OF ASSETS AND LIABILITIES OF
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FOR CONTRACT # 69998 THE TRUSTEES OF GLOBAL TECH, INC. 401(K)
RETIREMENT PLAN
MONEY INVESTED AS OF DECEMBER 31, 2013

Sub-Accounts	John Hancock USA		THE TRUSTEES OF GLOBAL TECH, INC. 401(K)	
	Total Sub-Accounts		RETIREMENT PLAN	
	Assets	Liabilities*	Total No of Units	Total Value
Aston/Fairpointe Mid Cap Fund	\$ 64055490.45		.000000	\$ 0.00
Small Company Value Fund	\$ 119034943.15		1935.440959	\$ 79665.39
Small Cap Value Index	\$ 93611144.74		3143.889857	\$ 79675.82
Royce Pennsylvania Mutual Fund	\$ 8861463.96		.000000	\$ 0.00
Columbia Mid Cap Value	\$ 78155090.76		4049.536191	\$ 53916.71
Small Cap Value Fund	\$ 355527517.57		.000000	\$ 0.00
Blue Chip Growth Fund	\$ 803317384.50		.000000	\$ 0.00
Value Fund	\$ 373983676.06		.000000	\$ 0.00
Mid Cap Index Fund	\$ 566485084.43		3102.715807	\$ 101447.17
T. Rowe Price Sml Cap Val	\$ 220883671.44		.000000	\$ 0.00
Oppenheimer Global	\$ 246848083.23		3903.103549	\$ 391045.87
JH Disciplined Value Mid Cap	\$ 20961933.68		.000000	\$ 0.00
Lord Abbett Value Opps Fund	\$ 36866504.43		.000000	\$ 0.00
Fundamental All Cap Core Fund	\$ 156308820.08		.000000	\$ 0.00
Mid Value Fund	\$ 246094382.36		.000000	\$ 0.00
Capital World Growth & Income	\$ 151171719.29		.000000	\$ 0.00
Capital Appreciation Fund	\$ 548824594.09		.000000	\$ 0.00
Templeton World	\$ 175641420.20		.000000	\$ 0.00
Domini Social Equity	\$ 72117106.73		.000000	\$ 0.00
All Cap Core Fund	\$ 23358233.52		.000000	\$ 0.00
John Hancock Rainier Grow	\$ 3167690.07		.000000	\$ 0.00
All Cap Value Fund	\$ 0.00		.000000	\$ 0.00
JPM MidCap Value Fund	\$ 358902980.80		.000000	\$ 0.00
MFS Utilities	\$ 0.00		.000000	\$ 0.00
New Perspective Fund	\$ 99587232.43		.000000	\$ 0.00
Pru Jennison Mid Growth Fund	\$ 135089758.65		.000000	\$ 0.00

*Assets = Liabilities



STATEMENT OF ASSETS AND LIABILITIES OF
THE SUB-ACCOUNTS OF JOHN HANCOCK LIFE INSURANCE COMPANY (U.S.A.)
FOR CONTRACT # 69998 THE TRUSTEES OF GLOBAL TECH, INC. 401(K)
RETIREMENT PLAN
MONEY INVESTED AS OF DECEMBER 31, 2013

Sub-Accounts	John Hancock USA	THE TRUSTEES OF GLOBAL TECH, INC. 401(K)	
	Total Sub-Accounts Assets and Liabilities*	RETIREMENT PLAN Total No of Units	Total Value
Fundamental Investors	\$ 248566246.34	.000000	\$ 0.00
Utilities Fund	\$ 368867623.22	.000000	\$ 0.00
Total Stock Market Index Fund	\$ 382179878.29	.000000	\$ 0.00
JPMorgan Large Cap Growth	\$ 21471630.28	.000000	\$ 0.00
Victory Diversified Stock	\$ 13044301.84	.000000	\$ 0.00
John Hancock Disciplined Value	\$ 509711964.00	.000000	\$ 0.00
Growth Index Fund	\$ 193272000.72	.000000	\$ 0.00
The Growth Fund of America	\$ 929939480.99	1794.447162	\$ 86987.98
Eaton Vance Large-Cap Value	\$ 40644522.91	.000000	\$ 0.00
Fidelity ContraFund	\$ 539225328.17	.000000	\$ 0.00
Fidelity Adv New Insights	\$ 90763603.74	.000000	\$ 0.00
Mass Investors Fund	\$ 65799965.18	.000000	\$ 0.00
Dodge & Cox Stock Fund	\$ 44341740.70	.000000	\$ 0.00
Equity Income Fund	\$ 346431107.81	.000000	\$ 0.00
Fundamental Large Cap Value	\$ 229360295.09	.000000	\$ 0.00
Davis New York Venture	\$ 563336881.65	1259.739504	\$ 63120.79
T. Rowe Price Equity Inc	\$ 590370190.39	.000000	\$ 0.00
Columbia Equity Value	\$ 8528690.73	.000000	\$ 0.00
Value Index Fund	\$ 105072719.91	.000000	\$ 0.00
BlackRock Basic Value	\$ 24545009.68	.000000	\$ 0.00
500 Index Fund	\$ 1441984996.33	.000000	\$ 0.00
Mutual Beacon	\$ 354621423.13	.000000	\$ 0.00
FT Founding Allocation	\$ 32048641.51	.000000	\$ 0.00
Washington Mutual Investors	\$ 387326661.10	2438.904524	\$ 120036.44
Investment Company of America	\$ 266761255.17	.000000	\$ 0.00
Parnassus Equity Income	\$ 137166643.32	.000000	\$ 0.00

*Assets = Liabilities



STATEMENT OF ASSETS AND LIABILITIES OF
THE SUB-ACCOUNTS OF JOHN HANCOCK LIFE INSURANCE COMPANY (U.S.A.)
FOR CONTRACT # 69998 THE TRUSTEES OF GLOBAL TECH, INC. 401(K)
RETIREMENT PLAN
MONEY INVESTED AS OF DECEMBER 31, 2013

Sub-Accounts	John Hancock USA		THE TRUSTEES OF GLOBAL TECH, INC. 401(K)	
	Total Sub-Accounts		RETIREMENT PLAN	
	Assets and Liabilities*		Total No of Units	Total Value
U.S. Equity Fund	\$	54914868.20	.000000	\$ 0.00
Ivy Asset Strategy Fund	\$	224492398.65	.000000	\$ 0.00
T. Rowe Price Cap Appreciation	\$	72159321.59	.000000	\$ 0.00
Capital Income Builder	\$	70079257.90	.000000	\$ 0.00
Pax World Balanced Fund	\$	2224116.12	.000000	\$ 0.00
Income Fund of America	\$	72164864.97	.000000	\$ 0.00
Core Global Diversification	\$	29577181.43	.000000	\$ 0.00
American Balanced Fund	\$	649752807.36	.000000	\$ 0.00
BlackRock Global Allocation	\$	443559883.50	.000000	\$ 0.00
PIMCO All Asset	\$	200680878.08	.000000	\$ 0.00
PIMCO All Asset All Authority	\$	13177597.50	.000000	\$ 0.00
Mutual Global Discovery	\$	447206849.23	.000000	\$ 0.00
Core Diversified Grwth & Inc	\$	31416005.53	.000000	\$ 0.00
Managers AMG FQ Global Alt	\$	0.00	.000000	\$ 0.00
Core Fundamental Holdings	\$	13311990.36	.000000	\$ 0.00
Alternative Asset Allocation	\$	8863855.03	.000000	\$ 0.00
American High-Income Fund	\$	0.00	.000000	\$ 0.00
MFS Emerging Markets Debt	\$	5075518.30	.000000	\$ 0.00
High Yield Fund	\$	449532788.36	.000000	\$ 0.00
U.S. High Yield Bond Fund	\$	87273663.34	.000000	\$ 0.00
Federated High Yield Bond	\$	50014815.24	.000000	\$ 0.00
Floating Rate Income Fund	\$	21273302.31	.000000	\$ 0.00
Global Bond Fund	\$	65393134.92	.000000	\$ 0.00
Real Return Bond Fund	\$	99567954.45	.000000	\$ 0.00
PIMCO Global Bond	\$	147550701.16	.000000	\$ 0.00
Oppenheimer Intl Bond	\$	89749430.83	.000000	\$ 0.00

*Assets = Liabilities



STATEMENT OF ASSETS AND LIABILITIES OF
THE SUB-ACCOUNTS OF JOHN HANCOCK LIFE INSURANCE COMPANY (U.S.A.)
FOR CONTRACT # 69998 THE TRUSTEES OF GLOBAL TECH, INC. 401(K)
RETIREMENT PLAN
MONEY INVESTED AS OF DECEMBER 31, 2013

Sub-Accounts	John Hancock USA		THE TRUSTEES OF GLOBAL TECH, INC. 401(K)	
	Total Sub-Accounts		RETIREMENT PLAN	
	Assets	Liabilities*	Total No of Units	Total Value
DFA Inflation-Protected Sec	\$	26846539.23	.000000	\$ 0.00
PIMCO Real Return	\$	240840642.64	.000000	\$ 0.00
Templeton Global Bond Fund	\$	117752869.31	.000000	\$ 0.00
Capital World Bond Fund	\$	14172844.18	.000000	\$ 0.00
T. Rowe Price Spectrum Inc	\$	200995869.13	.000000	\$ 0.00
Payden/Kravitz Cash Balance	\$	13411073.08	.000000	\$ 0.00
Strategic Income Opp Fund	\$	295382294.45	.000000	\$ 0.00
Active Bond Fund	\$	70495983.08	.000000	\$ 0.00
Investment Qual Bond Fund	\$	48387631.63	.000000	\$ 0.00
Total Return Fund	\$	309796994.56	.000000	\$ 0.00
Core Bond Fund	\$	78473748.75	.000000	\$ 0.00
PIMCO Total Return	\$	1208128442.46	7576.753573	\$ 116357.16
Total Bond Market Fund	\$	99920628.33	.000000	\$ 0.00
US Government Securities	\$	53171057.63	.000000	\$ 0.00
T. Rowe Price Short Term Bond	\$	42712190.61	.000000	\$ 0.00
Short-Term Federal	\$	352783764.93	.000000	\$ 0.00
Money Market Fund	\$	1846755290.21	.000000	\$ 0.00
John Hancock Stable Val	\$	1956361224.15	82184.328937	\$ 94197.54

*Assets = Liabilities

I hereby certify that this statement, given pursuant to 29 CFR 2520.103-5(c), is complete and accurate.

Peter Gordon
President, Retirement Plan Services

Production Date(R): JAN/03/2014