

Form 5500 Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Annual Return/Report of Employee Benefit Plan This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6047(e), 6057(b), and 6058(a) of the Internal Revenue Code (the Code). ▶ Complete all entries in accordance with the instructions to the Form 5500.	OMB Nos. 1210-0110 1210-0089 2013 This Form is Open to Public Inspection
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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>APHRB CHICAGO, LLC 401(K) PLAN</u>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%;">1b Three-digit plan number (PN) ▶</td> <td style="width: 20%; text-align: center;"><u>001</u></td> </tr> <tr> <td colspan="2">1c Effective date of plan <u>01/01/1999</u></td> </tr> </table>	1b Three-digit plan number (PN) ▶	<u>001</u>	1c Effective date of plan <u>01/01/1999</u>					
1b Three-digit plan number (PN) ▶	<u>001</u>								
1c Effective date of plan <u>01/01/1999</u>									
2a Plan sponsor's name and address; include room or suite number (employer, if for a single-employer plan) <u>AMCHECK</u> <u>100 WEST SUPERIOR STREET, #3</u> <u>OTTAWA, IL 61350</u>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2">2b Employer Identification Number (EIN) <u>20-3956221</u></td> </tr> <tr> <td colspan="2">2c Sponsor's telephone number <u>619-595-7900</u></td> </tr> <tr> <td colspan="2">2d Business code (see instructions) <u>561300</u></td> </tr> <tr> <td colspan="2" style="height: 40px;"></td> </tr> </table>	2b Employer Identification Number (EIN) <u>20-3956221</u>		2c Sponsor's telephone number <u>619-595-7900</u>		2d Business code (see instructions) <u>561300</u>			
2b Employer Identification Number (EIN) <u>20-3956221</u>									
2c Sponsor's telephone number <u>619-595-7900</u>									
2d Business code (see instructions) <u>561300</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.	01/09/2015	MICHAEL LOCKARD
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	Filed with authorized/valid electronic signature.	01/09/2015	MICHAEL LOCKARD
	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)

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

Form 5500 (2013)
v. 130118

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	886
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	843
b Retired or separated participants receiving benefits		6b	0
c Other retired or separated participants entitled to future benefits		6c	215
d Subtotal. Add lines 6a , 6b , and 6c		6d	1058
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits		6e	0
f Total. Add lines 6d and 6e		6f	1058
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)		6g	682
h Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested		6h	0
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)		7	
8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions: 2E 2F 2G 2J 2K 2T			
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 Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Insurance Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ► File as an attachment to Form 5500. ► Insurance companies are required to provide the information pursuant to ERISA section 103(a)(2).	OMB No. 1210-0110 2013 This Form is Open to Public Inspection
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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 APHRB CHICAGO, LLC 401(K) PLAN	B Three-digit plan number (PN) ►	001
C Plan sponsor's name as shown on line 2a of Form 5500 AMCHECK	D Employer Identification Number (EIN) 20-3956221	

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

(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	74455	682	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 21462	(b) Total amount of fees paid 46924
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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

UNITED ADVISORS, LLC
1405 DAVIS AVENUE
ENDWELL, NY 13760

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
0	46814	TPA FEES PAID	5

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

MORGAN STANLEY SMITH BARNEY
410 B STREET
SAN DIEGO, CA 92101

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
21462			4

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

MORGAN STANLEY INSURANCE SERVICES

410 B STREET
SAN DIEGO, CA 92101

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
	110	OTHER ALLOWANCES	4

(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	37208
5 Current value of plan's interest under this contract in separate accounts at year end	5	9205478

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	0
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c Additions: (1) Contributions deposited during the year	7c(1)	5531	
(2) Dividends and credits	7c(2)		
(3) Interest credited during the year	7c(3)	8	
(4) Transferred from separate account	7c(4)	31712	
(5) Other (specify below)	7c(5)		

(6) Total additions	7c(6)	37251
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d Total of balance and additions (add lines 7b and 7c(6))	7d	37251
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e Deductions:

(1) Disbursed from fund to pay benefits or purchase annuities during year	7e(1)	3	
(2) Administration charge made by carrier	7e(2)		
(3) Transferred to separate account	7e(3)		
(4) Other (specify below)	7e(4)	40	

(5) Total deductions	7e(5)	43
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f Balance at the end of the current year (subtract line 7e(5) from line 7d)	7f	37208
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Part III Welfare Benefit Contract Information

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

8 Benefit and contract type (check all applicable boxes)

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

9 Experience-rated contracts:

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

10 Nonexperience-rated contracts:

a Total premiums or subscription charges paid to carrier	10a	
b If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, other than reported in Part I, line 2 above, report amount.....	10b	

Specify nature of costs ▶

Part IV Provision of Information

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

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

SCHEDULE D (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration	DFE/Participating Plan Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ► File as an attachment to Form 5500.	OMB No. 1210-0110 2013 This Form is Open to Public Inspection.
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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>APHRB CHICAGO, LLC 401(K) 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>AMCHECK</u>	D Employer Identification Number (EIN) <u>20-3956221</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>DFA US SMALL CAP FUND</u>			
b Name of sponsor of entity listed in (a): <u>JOHN HANCOCK LIFE INSURANCE COMPANY</u>			
c EIN-PN <u>01-0233346-000</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>15910</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>SMALL CAP OPPORTUNITIES</u>			
b Name of sponsor of entity listed in (a): <u>JOHN HANCOCK LIFE INSURANCE COMPANY</u>			
c EIN-PN <u>01-0233346-000</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>481</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>BLUE CHIP GROWTH FUND</u>			
b Name of sponsor of entity listed in (a): <u>JOHN HANCOCK LIFE INSURANCE COMPANY</u>			
c EIN-PN <u>01-0233346-000</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>514</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>LEGG MASON CLEAR AGGRESSIVE GROWTH</u>			
b Name of sponsor of entity listed in (a): <u>JOHN HANCOCK LIFE INSURANCE COMPANY</u>			
c EIN-PN <u>01-0233346-000</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>21006</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>SSGA MID VALUE INDEX</u>			
b Name of sponsor of entity listed in (a): <u>JOHN HANCOCK LIFE INSURANCE COMPANY</u>			
c EIN-PN <u>01-0233346-000</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>1821</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>FUNDAMENTAL ALL CAP CORE</u>			
b Name of sponsor of entity listed in (a): <u>JOHN HANCOCK LIFE INSURANCE COMPANY</u>			
c EIN-PN <u>01-0233346-000</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>2205</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>OPPENHEIMER GLOBAL</u>			
b Name of sponsor of entity listed in (a): <u>JOHN HANCOCK LIFE INSURANCE COMPANY</u>			
c EIN-PN <u>01-0233346-000</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>61</u>

a Name of MTIA, CCT, PSA, or 103-12 IE: FUNDAMENTAL ALL CAP CORE		
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INSURANCE COMPANY		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 2022
a Name of MTIA, CCT, PSA, or 103-12 IE: JH DISCIPLINED VALUE		
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INSURANCE COMPANY		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 64639
a Name of MTIA, CCT, PSA, or 103-12 IE: DAVIS NY VENTURE		
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INSURANCE COMPANY		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 1849
a Name of MTIA, CCT, PSA, or 103-12 IE: T ROWE PRICE EQUITY INCOME		
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INSURANCE COMPANY		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 20220
a Name of MTIA, CCT, PSA, or 103-12 IE: US EQUITY FUND		
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INSURANCE COMPANY		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 3569
a Name of MTIA, CCT, PSA, or 103-12 IE: MUTUAL GLOBAL DISCOVERY FUND		
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INSURANCE COMPANY		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 10555
a Name of MTIA, CCT, PSA, or 103-12 IE: HIGH YIELD FUND		
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INSURANCE COMPANY		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 26364
a Name of MTIA, CCT, PSA, or 103-12 IE: PIMCO GLOBAL FUND		
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INSURANCE COMPANY		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 4895
a Name of MTIA, CCT, PSA, or 103-12 IE: VICTORY DIVERSIFIED STOCK FUND		
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INSURANCE COMPANY		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 202797
a Name of MTIA, CCT, PSA, or 103-12 IE: VALUE INDEX FUND		
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INSURANCE COMPANY		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 14981

a Name of MTIA, CCT, PSA, or 103-12 IE: **GROWTH INDEX FUND****b** Name of sponsor of entity listed in (a): **JOHN HANCOCK LIFE INSURANCE COMPANY**

c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 30833
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a Name of MTIA, CCT, PSA, or 103-12 IE: **VALUE FUND****b** Name of sponsor of entity listed in (a): **JOHN HANCOCK LIFE INSURANCE COMPANY**

c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 2136
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a Name of MTIA, CCT, PSA, or 103-12 IE: **UTILITIES FUND****b** Name of sponsor of entity listed in (a): **JOHN HANCOCK LIFE INSURANCE COMPANY**

c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 37180
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a Name of MTIA, CCT, PSA, or 103-12 IE: **TOTAL STOCK MARKET INDEX****b** Name of sponsor of entity listed in (a): **JOHN HANCOCK LIFE INSURANCE COMPANY**

c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 16048
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a Name of MTIA, CCT, PSA, or 103-12 IE: **TOTAL RETURN FUND****b** Name of sponsor of entity listed in (a): **JOHN HANCOCK LIFE INSURANCE COMPANY**

c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 9861
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a Name of MTIA, CCT, PSA, or 103-12 IE: **TOTAL BOND MARKET****b** Name of sponsor of entity listed in (a): **JOHN HANCOCK LIFE INSURANCE COMPANY**

c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 8211
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a Name of MTIA, CCT, PSA, or 103-12 IE: **T ROWE PRICE SCIENCE & TECHNOLOGY****b** Name of sponsor of entity listed in (a): **JOHN HANCOCK LIFE INSURANCE COMPANY**

c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 6788
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a Name of MTIA, CCT, PSA, or 103-12 IE: **T ROWE PRICE HEALTH & SCIENCE****b** Name of sponsor of entity listed in (a): **JOHN HANCOCK LIFE INSURANCE COMPANY**

c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 73703
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a Name of MTIA, CCT, PSA, or 103-12 IE: **T ROWE PRICE SPECTRUM INCOME FUND****b** Name of sponsor of entity listed in (a): **JOHN HANCOCK LIFE INSURANCE COMPANY**

c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 87780
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a Name of MTIA, CCT, PSA, or 103-12 IE: **SMALL CAP INDEX FUND****b** Name of sponsor of entity listed in (a): **JOHN HANCOCK LIFE INSURANCE COMPANY**

c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 148137
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a Name of MTIA, CCT, PSA, or 103-12 IE: SMALL CAP VALUE FUND		
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INSURANCE COMPANY		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 19133
a Name of MTIA, CCT, PSA, or 103-12 IE: SMALL CAP GROWTH INCOME FUND		
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INSURANCE COMPANY		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 31643
a Name of MTIA, CCT, PSA, or 103-12 IE: SMALL CAP GROWTH FUND		
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INSURANCE COMPANY		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 45525
a Name of MTIA, CCT, PSA, or 103-12 IE: SHORT TERM FEDERAL		
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INSURANCE COMPANY		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 69466
a Name of MTIA, CCT, PSA, or 103-12 IE: SCIENCE & TECHNOLOGY FUND		
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INSURANCE COMPANY		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 28927
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		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 20645
a Name of MTIA, CCT, PSA, or 103-12 IE: RETIREMENT LIVING AT 2045		
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INSURANCE COMPANY		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 533981
a Name of MTIA, CCT, PSA, or 103-12 IE: RETIREMENT LIVING AT 2040		
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INSURANCE COMPANY		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 477176
a Name of MTIA, CCT, PSA, or 103-12 IE: RETIREMENT LIVING AT 2035		
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INSURANCE COMPANY		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 517760
a Name of MTIA, CCT, PSA, or 103-12 IE: RETIREMENT LIVING AT 2030		
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INSURANCE COMPANY		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 578136

a Name of MTIA, CCT, PSA, or 103-12 IE: RETIREMENT LIVING AT 2025		
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INSURANCE COMPANY		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 358788
a Name of MTIA, CCT, PSA, or 103-12 IE: RETIREMENT LIVING AT 2020		
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INSURANCE COMPANY		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 215293
a Name of MTIA, CCT, PSA, or 103-12 IE: RETIREMENT LIVING AT 2015		
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INSURANCE COMPANY		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 14019
a Name of MTIA, CCT, PSA, or 103-12 IE: RETIREMENT LIVING AT 2010		
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INSURANCE COMPANY		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 98523
a Name of MTIA, CCT, PSA, or 103-12 IE: RETIREMENT LIVING AT 2050		
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INSURANCE COMPANY		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 191685
a Name of MTIA, CCT, PSA, or 103-12 IE: REAL ESTATE SECURITIES FUND		
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INSURANCE COMPANY		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 37853
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		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 76004
a Name of MTIA, CCT, PSA, or 103-12 IE: PIMCO REAL RETURN		
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INSURANCE COMPANY		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 165732
a Name of MTIA, CCT, PSA, or 103-12 IE: PIMCO ALL ASSET		
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INSURANCE COMPANY		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 7937
a Name of MTIA, CCT, PSA, or 103-12 IE: OPPENHEIMER INTERNATIONAL BOND		
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INSURANCE COMPANY		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 13290

a Name of MTIA, CCT, PSA, or 103-12 IE: NEW PERSPECTIVE FUND		
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INSURANCE COMPANY		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 45504
a Name of MTIA, CCT, PSA, or 103-12 IE: NATURAL RESOURCES FUND		
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INSURANCE COMPANY		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 44207
a Name of MTIA, CCT, PSA, or 103-12 IE: MONEY MARKET		
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INSURANCE COMPANY		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 515926
a Name of MTIA, CCT, PSA, or 103-12 IE: MID VALUE FUND		
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INSURANCE COMPANY		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 36477
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		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 5240
a Name of MTIA, CCT, PSA, or 103-12 IE: FUNDAMENTAL LARGE CAP VALUE		
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INSURANCE COMPANY		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 8295
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		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 224066
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		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 1396016
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		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 160700
a Name of MTIA, CCT, PSA, or 103-12 IE: LIFESTYLE BALANCE		
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INSURANCE COMPANY		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 977712

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		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 315215
a Name of MTIA, CCT, PSA, or 103-12 IE: KEELEY SMALL CAP VALUE		
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INSURANCE COMPANY		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 25600
a Name of MTIA, CCT, PSA, or 103-12 IE: SMALL COMPANY VALUE		
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INSURANCE COMPANY		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 10798
a Name of MTIA, CCT, PSA, or 103-12 IE: MID CAP INDEX		
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INSURANCE COMPANY		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 80562
a Name of MTIA, CCT, PSA, or 103-12 IE: INTERNATIONAL OPPS FUND		
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INSURANCE COMPANY		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 161655
a Name of MTIA, CCT, PSA, or 103-12 IE: INTERNATIONAL EQUITY INDEX		
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INSURANCE COMPANY		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 858
a Name of MTIA, CCT, PSA, or 103-12 IE: INCOME FUND OF AMERICA		
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INSURANCE COMPANY		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 56367
a Name of MTIA, CCT, PSA, or 103-12 IE: TARGETED VALUE FUND		
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INSURANCE COMPANY		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 1326
a Name of MTIA, CCT, PSA, or 103-12 IE: HERITAGE		
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INSURANCE COMPANY		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 14089
a Name of MTIA, CCT, PSA, or 103-12 IE: GROWTH FUND OF AMERICA		
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INSURANCE COMPANY		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 115753

a Name of MTIA, CCT, PSA, or 103-12 IE: FUNDAMENTAL INVESTORS		
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INSURANCE COMPANY		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 4137
a Name of MTIA, CCT, PSA, or 103-12 IE: FIDELITY ADV NEW INSIGHTS		
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INSURANCE COMPANY		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 163595
a Name of MTIA, CCT, PSA, or 103-12 IE: EUROPACIFIC GROWTH		
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INSURANCE COMPANY		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 123255
a Name of MTIA, CCT, PSA, or 103-12 IE: ENERGY FUND		
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INSURANCE COMPANY		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 63324
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		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 96467
a Name of MTIA, CCT, PSA, or 103-12 IE: DFA EMERGING MARKETS		
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INSURANCE COMPANY		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 87297
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		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 35
a Name of MTIA, CCT, PSA, or 103-12 IE: COLUMBIA VALUE & RESTRUCTURING		
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INSURANCE COMPANY		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 4256
a Name of MTIA, CCT, PSA, or 103-12 IE: COLUMBIA EQUITY VALUE		
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INSURANCE COMPANY		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 2702
a Name of MTIA, CCT, PSA, or 103-12 IE: CAPITAL WORLD GROWTH & INCOME		
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INSURANCE COMPANY		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 75282

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

b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INSURANCE COMPANY

c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 12539
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a Name of MTIA, CCT, PSA, or 103-12 IE: INVESTMENT COMPANY OF AMERICA

b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INSURANCE COMPANY

c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 132
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a Name of MTIA, CCT, PSA, or 103-12 IE: AF CAP WB

b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INSURANCE COMPANY

c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 7634
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a Name of MTIA, CCT, PSA, or 103-12 IE: INDEX FUND

b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INSURANCE COMPANY

c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 52451
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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
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) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Financial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ► File as an attachment to Form 5500.	OMB No. 1210-0110 2013 This Form is Open to Public Inspection
For calendar plan year 2013 or fiscal plan year beginning <u>01/01/2013</u> and ending <u>12/31/2013</u>		
A Name of plan <u>APHRB CHICAGO, LLC 401(K) 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>AMCHECK</u>		D Employer Identification Number (EIN) <u>20-3956221</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	34621	36065
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)	234800	195517
(9) Value of interest in common/collective trusts	1c(9)		
(10) Value of interest in pooled separate accounts	1c(10)	7647676	9205478
(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)	0	37209
(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	7917097	9474269

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	7917097	9474269
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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) Amount	(b) Total
a Contributions:			
(1) Received or receivable in cash from: (A) Employers	2a(1)(A)	287434	
(B) Participants	2a(1)(B)	1227345	
(C) Others (including rollovers)	2a(1)(C)	297530	
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		1812309
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)	7849	
(F) Other	2b(1)(F)	1452	
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		9301
(2) Dividends: (A) Preferred stock	2b(2)(A)		
(B) Common stock	2b(2)(B)		
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)		
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		0
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)		
(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)		1407995
(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		3229605

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	997023	
(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)		997023
f Corrective distributions (see instructions)	2f		28970
g Certain deemed distributions of participant loans (see instructions)	2g		1547
h Interest expense	2h		
i Administrative expenses: (1) Professional fees	2i(1)		
(2) Contract administrator fees	2i(2)	48347	
(3) Investment advisory and management fees	2i(3)		
(4) Other	2i(4)		
(5) Total administrative expenses. Add lines 2i(1) through (4)	2i(5)		48347
j Total expenses. Add all expense amounts in column (b) and enter total	2j		1075887

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		2153718
l Transfers of assets:			
(1) To this plan	2l(1)		544909
(2) From this plan	2l(2)		1141455

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: CEA, LLP

(2) EIN: 33-0927538

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		13478
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)
IO SEMICONDUCTOR 401(K) PLAN	26-4153194	001
EXPO INDUSTRIES, INC. 401(K) PLAN	95-2573302	001

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>APHRB CHICAGO, LLC 401(K) 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>AMCHECK</u>	D Employer Identification Number (EIN) <u>20-3956221</u>

Part I	Distributions
---------------	----------------------

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

1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions.....	1	<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)
----------------	--

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.
----------------	---

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): _____

**APHRB CHICAGO, LLC 401(k) PLAN
FINANCIAL STATEMENTS
DECEMBER 31, 2013 AND 2012**

APHRB Chicago, LLC 401(k) Plan
December 31, 2013 and 2012

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CERTIFIED PUBLIC ACCOUNTANTS AND CONSULTANTS

Thomas J. Applegate, CPA
Gregory Bellman, CPA
Tami Brennan, CPA
Robert Cairns, CPA
Eric Eng, CPA
Mark A. Stepka, CPA, CVA
Ellen Williams, CPA

INDEPENDENT AUDITOR'S REPORT

Plan Administrator
APHRB Chicago, LLC 401(k) Plan
San Diego, California

Report on the Financial Statements

We were engaged to audit the accompanying financial statements of the APHRB Chicago, LLC 401(k) Plan, which comprise the statements of net assets available for benefits - modified cash basis as of December 31, 2013 and 2012, and the related statement of changes in net assets available for benefits - modified cash basis for the year ended December 31, 2013, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of 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 error or fraud.

Auditor's Responsibility

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

Basis for Disclaimer of Opinion

As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the Plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Note J, which was certified by John Hancock Life Insurance Company (USA), the Custodian, 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 administrator has obtained a certification from the Custodian as of and for the years ended December 31, 2013 and 2012, that the information provided to the Plan administrator 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 these financial statements.

Other Matter

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

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

The form and content of the information included in the financial statements and supplemental schedules, other than that derived from the information certified by the 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.

CEA, LLP

December 29, 2014

APHRB Chicago, LLC 401(k) Plan
Statements of Net Assets Available for Benefits - Modified Cash Basis

December 31,	<u>2013</u>	<u>2012</u>
Assets		
Investments (at fair value)		
Pooled separate accounts	\$ 9,205,477	\$ 7,647,676
Guaranteed interest account	37,209	-
Interest-bearing cash	<u>36,065</u>	<u>34,621</u>
Total Investments	<u>9,278,751</u>	<u>7,682,297</u>
Receivables		
Notes receivable from participants	<u>195,518</u>	<u>234,800</u>
Net Assets Available for Benefits	<u><u>\$ 9,474,269</u></u>	<u><u>\$ 7,917,097</u></u>

APHRB Chicago, LLC 401(k) Plan
Statement of Changes in Net Assets Available for Benefits - Modified Cash Basis

For the Year Ended December 31, 2013

Additions

Changes in net assets attributed to:

Investment income:

Net realized and unrealized appreciation in fair value of investments	\$ 1,407,995
Interest	1,452
Interest - notes receivable from participants	7,849
Participant contributions	1,227,345
Employer contributions	287,434
Rollovers	297,530

Total Additions	3,229,605
-----------------	-----------

Deductions

Deductions from net assets attributed to:

Benefits paid to participants	997,023
Corrective distributions	28,970
Deemed distributions	1,547
Administrative expenses	48,347

Total Deductions	1,075,887
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Net Increase	2,153,718
--------------	-----------

Transfer in from other plans	544,909
Transfer out to other plans	(1,141,455)

Net assets available for benefits

Beginning of year	7,917,097
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End of year	\$ 9,474,269
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APHRB Chicago, LLC 401(k) Plan Notes to Financial Statements

A. DESCRIPTION OF PLAN

The following description of the APHRB Chicago, LLC 401(k) Plan ("Plan") provides general information only. Participants should refer to the Plan agreement for a more complete description of the Plan's provisions.

General

The Plan was established on January 1, 1999 as a participant – directed defined contribution plan. The Plan is a multiple employer plan that covers all eligible employees of APHRB, LLC dba AmCheck San Diego (the Company), the Plan Sponsor, and other adopting companies (Adopting Companies). The Plan allows for any business entity, with the approval of Plan management, to adopt the Plan and thereby become an Adopting Company. Notwithstanding the adoption of the Plan by other entities, the Plan is administrated as a single plan and all Plan assets are available to pay benefits to all participants under the Plan, unless otherwise required by applicable law governing multiple employer plans. Each Adopting Company has the right to withdraw from the Plan by providing written notification to the Plan Sponsor. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA).

As of December 31, 2013 and 2012, the following companies were Adopting Companies and, as such all information and financial data included in these financial statements, supplemental schedule and notes thereto relate to the Plan assets of all these companies.

- | | |
|--|-------------------------------------|
| • AmCheck Tax Service, LLC (1) | • Integrated Health Concepts, Inc. |
| • APHRB, LLC dba AmCheck San Diego (the Company) | • Integrated Practice Solutions |
| • APS Solutions San Diego, LLC | • I.O. Semiconductor, Inc. (2) |
| • ASI Security, Inc. | • Jakma Investments, LLC |
| • Associated Professional Services, Inc. | • National Lending Associates, Inc. |
| • Bone Collector, LLC | • Prescos, LLC (2) |
| • Cioffi Enterprises, Inc. | • Raphael's Party Rentals, Inc. |
| • Evolution Enterprises, Inc. | • Reflection Health, Inc. |
| • Expo Industries, Inc. (2) | • Resortcom Management, Inc. |
| • Hardcore Brand International | • S.H.E Manages Properties, Inc. |
| • Heavy Iron Studios, Inc. | • Waterstone, LLC |

- 1) As of December 31, 2012, this Company no longer participates in the Plan.
- 2) As of December 31, 2013, this Company no longer participates in the Plan.

Effective January 1, 2014, Conversio Health, LLC adopted the Plan and thereby became an Adopting Company.

APHRB Chicago, LLC 401(k) Plan

Notes to Financial Statements

A. DESCRIPTION OF PLAN (CONTINUED)

Eligibility

The Plan covers all eligible employees of the Adopting Companies as defined in the Plan document and adoption agreements. Each Adopting Company may designate the parameters for eligibility requirements for participation in the Plan as well as employer contributions, if any. Participant entry dates vary by Adopting Company and are defined in the respective Adopting Company's adoption agreements.

Contributions

The Plan allows for automatic enrollment. At the election of the Adopting Employer, and upon eligibility, employees are automatically enrolled in the Plan at a specified deferral rate determined by the Adopting Employer, unless they opt out of participating in the Plan. Each year, plan participants may contribute between 1% and 92% of pre-tax annual compensation, as defined in the Plan. Participants have the option to contribute either through pre-tax 401(k) contributions, Roth 401(k) contributions or a combination of both. Participants may change their deferral percentage each pay period. Participants may also contribute amounts representing distributions from other qualified retirement plans. The Plan provides for employer matching contributions, employer discretionary contributions and profit sharing contributions as set forth in the adoption agreements of each respective Adopting Company. Participating employers, at their discretion, may match employee contributions based on a specified percentage of the elective contribution made by the participant. The percent of the matching contribution is determined by the participating employer. The Plan also provides for discretionary contributions by the Adopting Employers to the Plan in such amounts as the Board of Directors of each of the Companies shall determine each year.

Participant Accounts

Each participant's account is credited with the participant's contribution and allocations of (a) the companies' contributions and (b) Plan earnings, and charged with an allocation of administrative expenses. Allocations are based on participant earnings or account balances, as defined. Forfeited balances of terminated participants' non-vested accounts are used to reduce the employer contributions of the respective Adopting Companies in the Plan. The Plan did not use any forfeitures to reduce employer matching contributions during the year ended December 31, 2013. At December 31, 2013, forfeitures totaling \$36,065 were available to reduce future employer contributions of the respective Adopting Employers. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

Vesting

Participants are immediately vested in their contributions plus actual earnings thereon. Vesting in the Adopting Company's employer contribution portion of their account plus actual earnings thereon is based on years of continuous service. Participant vesting schedules vary by Adopting Company and are defined in the respective Adopting Company's adoption agreements.

APHRB Chicago, LLC 401(k) Plan
Notes to Financial Statements

A. DESCRIPTION OF PLAN (CONTINUED)

Notes Receivable from Participants

Participants may borrow from their fund accounts up to a maximum equal to the lesser of \$50,000 or 50% of their vested account balance. The loans are repaid in regular installments no less frequently than monthly, by means of payroll deductions. The term of the loan may not exceed 5 years. If the purpose of the loan is for purchase or construction of a principal residence of the participant, then the term of the loan may not exceed 30 years. Loan transactions are treated as a transfer to (from) the investment fund from (to) the Participant Loans fund. The loans are secured by the balance in the participant's account and bear interest at a rate commensurate with local prevailing rates as determined by the Plan administrator. Interest rates ranged from 3.25% to 6.00% at December 31, 2013. Principal and interest is paid ratably through payroll deductions.

Payment of Benefits

Participants are eligible to receive a lump-sum distribution of benefits upon termination of employment, death, disability, retirement or Plan termination. Distributions may also be made for hardship withdrawals, which are authorized by the Plan administrator and conform to the "deemed hardship" standards set forth in Treasury Regulation Section 1.401(k)(d)(2). Such hardship distributions are subject to certain limitations.

Investment Options

John Hancock Life Insurance Company (USA), (Custodian or John Hancock) under a trust agreement, holds the assets of the Plan, including all contributions and earnings thereon. Upon enrollment in the Plan, participants may direct contributions to a variety of investment options.

B. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of Accounting

The financial statements of the Plan are prepared under the modified cash basis of accounting. Under this method of accounting, contributions and revenues are recognized when received, rather than when earned, and expenses are recorded when paid rather than when incurred.

Accounting Estimates

The Plan administrator uses estimates and assumptions in preparing the Plan's financial statements in accordance with accounting principles generally accepted in the United States of America. Those estimates and assumptions affect the reported amounts of assets and liabilities, the disclosure of contingent assets and liabilities, and the reported changes in net assets. Actual results could vary from the estimates that were used.

APHRB Chicago, LLC 401(k) Plan
Notes to Financial Statements

B. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

Risks and Uncertainties

Investments are exposed to various risks, such as interest rate, market fluctuation and credit. Due to the level of risk associated with certain investments and the level of uncertainty related to changes in the value of investments, it is at least reasonably possible that changes in risks in the near term could materially affect the amounts reported in the statements of net assets available for benefits and the statement of changes in net assets available for benefits.

Valuation of Investments and Income Recognition

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

Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded on the modified cash 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. Delinquent notes receivable from participants are reclassified as distributions based upon the terms of the plan document.

Plan Expenses

The Company sponsors the Plan. Personnel within the Company perform various administrative services for the Plan. The payroll and related overhead costs associated with these services are not included as Plan expenses. Administrative expenses of the Plan, including recordkeeping, consulting, investment, legal, and audit fees, are paid by the Company.

Payment of Benefits

Benefits are recorded when paid.

Date of Management's Review

The date to which events occurring after December 31, 2013, the date of the most recent statement of net assets available for benefits – modified cash basis, have been evaluated for possible adjustments to the financial statements or disclosures is December 29, 2014, which is the date on which the financial statements were available to be issued.

C. INCOME TAX STATUS

The Plan has not obtained an IRS determination letter for the Plan, in which the Internal Revenue Service states that the Plan, as designed, is in compliance with the applicable requirements of the Internal Revenue Code. However, the Plan administrator believes that the Plan is currently designed and is being operated in compliance with the applicable requirements of the Internal Revenue Code.

APHRB Chicago, LLC 401(k) Plan
Notes to Financial Statements

C. INCOME 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 Internal Revenue Service. Management evaluated the Plan's tax positions and concluded that the Plan had maintained its exempt status and had taken no uncertain tax positions that require adjustment to the financial statements. Therefore, no provision or liability for income taxes has been included in the financial statements. The Plan administrator believes it is no longer subject to income tax examinations for years prior to 2009.

D. PLAN TERMINATION

Although it has not expressed any intent to do so, the Plan sponsor has the right to terminate the Plan subject to the provisions of ERISA. In the event of Plan termination, participants will be entitled to their entire account balance.

E. PARTY-IN-INTEREST

There were no party-in-interest transactions between the Plan and the Custodian, other than the payment of investment fees from Plan assets for services rendered.

F. FAIR VALUE MEASUREMENTS

Financial Accounting Standards Board ("FASB") Accounting Standards Codification 820, *Fair Value Measurements and Disclosures*, establishes a framework for measuring fair value. That framework provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (level 1 measurements), and the lowest priority to unobservable inputs (level 3 measurements). The three levels of the fair value hierarchy under this topic are described below:

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

Level 2 Inputs to the valuation methodology include:

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

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

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

APHRB Chicago, LLC 401(k) Plan
Notes to Financial Statements

F. FAIR VALUE MEASUREMENTS (CONTINUED)

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

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

Pooled separate accounts and interest bearing cash: Valued based on the Plan's pro rate share of fund equity as determined by the custodian, based in the fair values of the underlying investments.

Guaranteed interest account: Valued at the net asset value (NAV), based on quoted market prices in active markets, of shares held by the Plan at year-end. This investment option is not fully benefit-responsive, but guarantees the return of principal plus compound interest over a defined 3-year period.

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

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

Assets at Fair Value as of December 31, 2013

	Level 1	Level 2	Level 3	Total
Pooled separate accounts				
Asset allocation – lifestyle	\$ 3,073,619	\$ -	\$ -	\$ 3,073,619
Asset allocation – lifecycle	2,985,361	-	-	2,985,361
Growth	921,202	-	-	921,202
Aggressive growth	882,530	-	-	882,530
Conservative	515,926	-	-	515,926
Income	473,494	-	-	473,494
Growth & income	<u>353,345</u>	<u>-</u>	<u>-</u>	<u>353,345</u>
Total pooled separate accounts	9,205,477	-	-	9,205,477
Guaranteed interest account	37,209	-	-	37,209
Interest-bearing cash	<u>36,065</u>	<u>-</u>	<u>-</u>	<u>36,065</u>
Total assets at fair value	<u>\$ 9,278,751</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ 9,278,751</u>

APHRB Chicago, LLC 401(k) Plan
Notes to Financial Statements

F. FAIR VALUE MEASUREMENTS (CONTINUED)

Assets at Fair Value as of December 31, 2012

	<u>Level 1</u>	<u>Level 2</u>	<u>Level 3</u>	<u>Total</u>
Pooled separate accounts				
Asset allocation – lifecycle	\$ 2,562,480	\$ -	\$ -	\$ 2,562,480
Asset allocation – lifestyle	2,319,561	-	-	2,319,561
Growth	703,817	-	-	703,817
Aggressive growth	665,801	-	-	665,801
Conservative	570,503	-	-	570,503
Income	594,030	-	-	594,030
Growth & income	<u>231,484</u>	<u>-</u>	<u>-</u>	<u>231,484</u>
Total pooled separate accounts	7,647,676	-	-	7,647,676
Interest-bearing cash	<u>34,621</u>	<u>-</u>	<u>-</u>	<u>34,621</u>
Total assets at fair value	<u>\$ 7,682,297</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ 7,682,297</u>

G. INVESTMENTS

The following presents investments at December 31, 2013 and 2012 that represent 5% or more of the Plan's net assets.

	<u>2013</u>	<u>2012</u>
John Hancock Life Insurance Co. Lifestyle Growth	\$ 1,396,016	\$ 819,037
John Hancock Life Insurance Co. Lifestyle Balanced	977,712	913,377
John Hancock Life Insurance Co. Retirement Living at 2030	578,136	*
John Hancock Life Insurance Co. Retirement Living at 2045	533,981	437,059
John Hancock Life Insurance Co. Retirement Living at 2035	517,760	*
John Hancock Life Insurance Co. Money Market Fund	515,926	570,503
John Hancock Life Insurance Co. Retirement Living at 2040	477,176	*

* Investment did not represent 5% or more of the Plan's net assets available for benefits.

H. TRANSFERS – IN FROM OTHER PLANS

The transfers-in from other plans of \$544,909, as shown on the accompanying Statement of Changes in Net Assets Available for Benefits – Modified Cash Basis, represents the net cash inflows to the Plan as a result of Plan mergers due to Adopting Companies entering the Plan. The following plans were merged into the Plan during the year ended December 31, 2013:

	<u>Effective Date of Merger</u>	<u>Fair Value of Assets Transferred to Plan</u>
Integrated Practice Solutions	October 2012	\$ 402,032
Cioffi Enterprises, Inc.	July 2013	142,069
ResortCom Management, Inc.	June 2012	<u>808</u>
Total transfers-in from other plans		<u>\$ 544,909</u>

APHRB Chicago, LLC 401(k) Plan
Notes to Financial Statements

I. TRANSFERS – OUT TO OTHER PLANS

The transfers-out to other plans of \$1,141,455, as shown on the accompanying Statement of Changes in Net Assets Available for Benefits – Modified Cash Basis, represents the net cash outflows from the Plan as a result of Plan transfers due to Adopting Companies leaving the Plan. The following plans were merged out of the Plan during the years ended December 31, 2013:

	<u>Effective Date of Transfer</u>	<u>Fair Value of Assets Transferred from Plan</u>
Expo Industries, Inc.	October 2013	\$ 833,314
IO Semiconductor, Inc.	June 2013	<u>308,141</u>
Total transfers-out to other plans		<u>\$ 1,141,455</u>

J. INFORMATION CERTIFIED BY THE CUSTODIAN (UNAUDITED)

At December 31, 2013 and 2012, the Plan's investments were held by the Custodian. The following is a summary of the Plan's financial information that is included in the financial statements based on information certified by the Custodian as complete and accurate in accordance with Section 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974.

The fair value of investments at December 31, 2013 and 2012, as reported by the Custodian is summarized as follows:

	<u>2013</u>	<u>2012</u>
Statements of net assets available for benefits – modified cash basis:		
Investments (at fair value):		
Pooled separate accounts	\$ 9,205,477	\$ 7,647,676
Guaranteed interest account	37,209	-
Interest-bearing cash	<u>36,065</u>	<u>34,621</u>
Total investments	9,278,751	7,682,297
Notes receivable from participants	<u>195,518</u>	<u>234,800</u>
	<u>\$ 9,474,269</u>	<u>\$ 7,917,097</u>
Statements of net assets available for benefits – modified cash basis:		
Interest income	\$ 1,452	
Interest income – notes receivable from participants	7,849	

During the year ended December 31, 2013, the Plan's investments (including gains and losses on investments bought and sold, as well as held during the year) appreciated in value as follows:

Pooled separate accounts	<u>\$ 1,407,995</u>
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Information included in the Schedule H, Line 4i - Schedule of Assets (Held at End of Year) as it relates to John Hancock Life Insurance Company (USA) was also certified by the Custodian.

APHRB Chicago, LLC 401(k) Plan
Notes to Financial Statements

K. NONEXEMPT TRANSACTIONS

As reported in Schedule H, Line 4a – Schedule of Delinquent Participant Contributions, certain participant contributions were not remitted to the Plan within the time frame specified by the Department of Labor's Regulation 29 CFR 2510.3-102, thus constituting nonexempt transactions between the Plan and the Company during the 2011 and 2009 Plan years. Late remittances amounted to \$5,500 and \$7,978 for the years ended December 31, 2011 and 2009, respectively. In October 2014 the Company deposited the appropriate lost earnings and remittances to the Plan.

L. SUBSEQUENT EVENTS

In January 2014 and April 2014, the Plan merged with two 401(k) Plans. The fair value of assets transferred into the Plan totaled \$1,387,604 and \$223,253, respectively.

**SUPPLEMENTAL
INFORMATION**

APHRB Chicago, LLC 401(k) Plan
(I.D. #20-3956221 - Plan #001)
Schedule H, Line 4i - Schedule of Assets
(Held at End of Year)

December 31, 2013

(a)	(b)	(c)	(d)	(e)
	Identity of issue, borrower, lessor, or similar party	Description of investment including maturity date, rate of interest, collateral, par or maturity value	Cost	Current Value
*	John Hancock Life Insurance Co.	Lifestyle Growth	\$ -	\$ 1,396,016
*	John Hancock Life Insurance Co.	Lifestyle Balanced	-	977,712
*	John Hancock Life Insurance Co.	Retirement Living at 2030	-	578,136
*	John Hancock Life Insurance Co.	Retirement Living at 2045	-	533,981
*	John Hancock Life Insurance Co.	Retirement Living at 2035	-	517,760
*	John Hancock Life Insurance Co.	Money Market Fund	-	515,926
*	John Hancock Life Insurance Co.	Retirement Living at 2040	-	477,176
*	John Hancock Life Insurance Co.	Retirement Living at 2025	-	358,788
*	John Hancock Life Insurance Co.	Lifestyle Aggressive	-	315,125
*	John Hancock Life Insurance Co.	Lifestyle Moderate	-	224,066
*	John Hancock Life Insurance Co.	Retirement Living at 2020	-	215,293
*	John Hancock Life Insurance Co.	Victory Diversified Stock	-	202,797
*	John Hancock Life Insurance Co.	Retirement Living at 2050	-	191,685
*	John Hancock Life Insurance Co.	PIMCO Real Return	-	165,732
*	John Hancock Life Insurance Co.	Fidelity Advisor New Insights	-	163,595
*	John Hancock Life Insurance Co.	International Growth Fund	-	161,665
*	John Hancock Life Insurance Co.	Lifestyle Conservative	-	160,700
*	John Hancock Life Insurance Co.	Small Cap Index Fund	-	148,137
*	John Hancock Life Insurance Co.	EuroPacific Growth Fund	-	123,255
*	John Hancock Life Insurance Co.	The Growth Fund of America	-	115,753
*	John Hancock Life Insurance Co.	Retirement Living at 2010	-	98,523
*	John Hancock Life Insurance Co.	DFA International Value	-	96,466
*	John Hancock Life Insurance Co.	T. Rowe Price Spectrum Income	-	87,780
*	John Hancock Life Insurance Co.	DFA Emerging Markets Value	-	87,297
*	John Hancock Life Insurance Co.	Mid Cap Index Fund	-	80,562
*	John Hancock Life Insurance Co.	PIMCO Total Return	-	76,004
*	John Hancock Life Insurance Co.	Capital World Growth & Income	-	75,282
*	John Hancock Life Insurance Co.	T. Rowe Price Health Sciences	-	73,703
*	John Hancock Life Insurance Co.	Short-Term Federal	-	69,466
*	John Hancock Life Insurance Co.	Disciplined Value	-	64,639
*	John Hancock Life Insurance Co.	Energy	-	63,324
*	John Hancock Life Insurance Co.	Income Fund of America	-	56,369
*	John Hancock Life Insurance Co.	500 Index Fund	-	52,451
*	John Hancock Life Insurance Co.	Small Cap Growth Fund	-	45,525
*	John Hancock Life Insurance Co.	New Perspective Fund	-	45,504
*	John Hancock Life Insurance Co.	Natural Resources Fund	-	44,207
*	John Hancock Life Insurance Co.	Real Estate Securities Fund	-	37,853
*	John Hancock Life Insurance Co.	Three Year Compound	-	37,209
*	John Hancock Life Insurance Co.	Utilities Fund	-	37,180
*	John Hancock Life Insurance Co.	Mid Value Fund	-	36,477
*	John Hancock Life Insurance Co.	Money Market	-	36,065
*	John Hancock Life Insurance Co.	Small Cap Growth Index	-	31,643
*	John Hancock Life Insurance Co.	Growth Index Fund	-	30,833
*	John Hancock Life Insurance Co.	Science & Technology Fund	-	28,927

APHRB Chicago, LLC 401(k) Plan
(I.D. #20-3956221 - Plan #001)
Schedule H, Line 4i - Schedule of Assets
(Held at End of Year)

December 31, 2013

(a)	(b)	(c)	(d)	(e)
	Identity of issue, borrower, lessor, or similar party	Description of investment including maturity date, rate of interest, collateral, par or maturity value	Cost	Current Value
*	John Hancock Life Insurance Co.	High Yield	-	26,364
*	John Hancock Life Insurance Co.	Keeley Small Cap Value	-	25,600
*	John Hancock Life Insurance Co.	Legg Mason ClearBr Aggressive Growth	-	21,006
*	John Hancock Life Insurance Co.	Columbia Mid Cap Value	-	20,645
*	John Hancock Life Insurance Co.	T. Rowe Price Equity Income	-	20,220
*	John Hancock Life Insurance Co.	Small Cap Value Fund	-	19,133
*	John Hancock Life Insurance Co.	Total Stock Market Index Fund	-	16,048
*	John Hancock Life Insurance Co.	DFA U.S. Small Cap Fund	-	15,910
*	John Hancock Life Insurance Co.	Value Index Fund	-	14,981
*	John Hancock Life Insurance Co.	American Century Heritage	-	14,089
*	John Hancock Life Insurance Co.	Retirement Living at 2015	-	14,019
*	John Hancock Life Insurance Co.	Oppenheimer International Bond	-	13,290
*	John Hancock Life Insurance Co.	Capital Income Builder	-	12,539
*	John Hancock Life Insurance Co.	Small Company Value Fund	-	10,799
*	John Hancock Life Insurance Co.	Mutual Global Discovery	-	10,555
*	John Hancock Life Insurance Co.	Total Return Fund	-	9,861
*	John Hancock Life Insurance Co.	Fundamental Large Cap Value	-	8,295
*	John Hancock Life Insurance Co.	Total Bond Market Fund	-	8,211
*	John Hancock Life Insurance Co.	PIMCO All Asset	-	7,937
*	John Hancock Life Insurance Co.	Capital World Bond Fund	-	7,635
*	John Hancock Life Insurance Co.	T. Rowe Price Science & Technology	-	6,788
*	John Hancock Life Insurance Co.	Mid Cap Stock Fund	-	5,240
*	John Hancock Life Insurance Co.	PIMCO Global Bond	-	4,895
*	John Hancock Life Insurance Co.	Strategic Income Opportunities Fund	-	4,256
*	John Hancock Life Insurance Co.	Fundamental Investors	-	4,137
*	John Hancock Life Insurance Co.	U.S. Equity Fund	-	3,569
*	John Hancock Life Insurance Co.	Columbia Equity Value	-	2,702
*	John Hancock Life Insurance Co.	Small Cap Value Index	-	2,205
*	John Hancock Life Insurance Co.	Value Fund	-	2,136
*	John Hancock Life Insurance Co.	Fundamental All Cap Core Fund	-	2,022
*	John Hancock Life Insurance Co.	Davis New York Venture	-	1,849
*	John Hancock Life Insurance Co.	SSgA Mid Value Index Fund	-	1,821
*	John Hancock Life Insurance Co.	DFA US Targeted Value Fund	-	1,326
*	John Hancock Life Insurance Co.	International Equity Index Fund	-	858
*	John Hancock Life Insurance Co.	Blue Chip Growth Fund	-	514
*	John Hancock Life Insurance Co.	Small Cap Opportunities Fund	-	481
*	John Hancock Life Insurance Co.	Investment Company of America	-	132
*	John Hancock Life Insurance Co.	Oppenheimer Global	-	61
*	John Hancock Life Insurance Co.	Financial Services Fund	-	35
*	Notes receivable from participants	Loans - Interest at 3.25% to 6.0%; secured by vested balances	-	195,518
			<u>\$</u>	<u>\$ 9,474,269</u>

*Parties-in-interest

APHRB Chicago, LLC 401(k) Plan
(I.D. #20-3956221 - Plan #001)
Schedule H, Line 4a - Schedule of Delinquent Participant Contributions

December 31, 2013

Participant Contributions Transferred Late to Plan	Total that Constitute Nonexempt Prohibited Transactions				Totally Fully Corrected Under VFCP and PTE 2002-51
	Contributions Not Corrected	Contributions Corrected Outside of VFCP	Contributions Pending Correction in VFCP		
Check here if Late Participant Loan Repayments are included: X					
<u>Participant Contributions - 2009 Plan Year</u>					
\$ 7,978	\$ 7,978	\$ -	\$ -	\$ -	
<u>Participant Contributions - 2011 Plan Year</u>					
\$ 5,500	\$ 5,500	\$ -	\$ -	\$ -	

APHRB Chicago, LLC 401(k) Plan
(I.D. #20-3956221 - Plan #001)
Schedule H, Line 4i - Schedule of Assets
(Held at End of Year)

December 31, 2013

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*	John Hancock Life Insurance Co.	Retirement Living at 2035	-	517,760
*	John Hancock Life Insurance Co.	Money Market Fund	-	515,926
*	John Hancock Life Insurance Co.	Retirement Living at 2040	-	477,176
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*	John Hancock Life Insurance Co.	Retirement Living at 2020	-	215,293
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*	John Hancock Life Insurance Co.	Retirement Living at 2050	-	191,685
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*	John Hancock Life Insurance Co.	Fidelity Advisor New Insights	-	163,595
*	John Hancock Life Insurance Co.	International Growth Fund	-	161,665
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*	John Hancock Life Insurance Co.	Mid Cap Index Fund	-	80,562
*	John Hancock Life Insurance Co.	PIMCO Total Return	-	76,004
*	John Hancock Life Insurance Co.	Capital World Growth & Income	-	75,282
*	John Hancock Life Insurance Co.	T. Rowe Price Health Sciences	-	73,703
*	John Hancock Life Insurance Co.	Short-Term Federal	-	69,466
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*	John Hancock Life Insurance Co.	Natural Resources Fund	-	44,207
*	John Hancock Life Insurance Co.	Real Estate Securities Fund	-	37,853
*	John Hancock Life Insurance Co.	Three Year Compound	-	37,209
*	John Hancock Life Insurance Co.	Utilities Fund	-	37,180
*	John Hancock Life Insurance Co.	Mid Value Fund	-	36,477
*	John Hancock Life Insurance Co.	Money Market	-	36,065
*	John Hancock Life Insurance Co.	Small Cap Growth Index	-	31,643
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*	John Hancock Life Insurance Co.	Keeley Small Cap Value	-	25,600
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*	John Hancock Life Insurance Co.	Value Index Fund	-	14,981
*	John Hancock Life Insurance Co.	American Century Heritage	-	14,089
*	John Hancock Life Insurance Co.	Retirement Living at 2015	-	14,019
*	John Hancock Life Insurance Co.	Oppenheimer International Bond	-	13,290
*	John Hancock Life Insurance Co.	Capital Income Builder	-	12,539
*	John Hancock Life Insurance Co.	Small Company Value Fund	-	10,799
*	John Hancock Life Insurance Co.	Mutual Global Discovery	-	10,555
*	John Hancock Life Insurance Co.	Total Return Fund	-	9,861
*	John Hancock Life Insurance Co.	Fundamental Large Cap Value	-	8,295
*	John Hancock Life Insurance Co.	Total Bond Market Fund	-	8,211
*	John Hancock Life Insurance Co.	PIMCO All Asset	-	7,937
*	John Hancock Life Insurance Co.	Capital World Bond Fund	-	7,635
*	John Hancock Life Insurance Co.	T. Rowe Price Science & Technology	-	6,788
*	John Hancock Life Insurance Co.	Mid Cap Stock Fund	-	5,240
*	John Hancock Life Insurance Co.	PIMCO Global Bond	-	4,895
*	John Hancock Life Insurance Co.	Strategic Income Opportunities Fund	-	4,256
*	John Hancock Life Insurance Co.	Fundamental Investors	-	4,137
*	John Hancock Life Insurance Co.	U.S. Equity Fund	-	3,569
*	John Hancock Life Insurance Co.	Columbia Equity Value	-	2,702
*	John Hancock Life Insurance Co.	Small Cap Value Index	-	2,205
*	John Hancock Life Insurance Co.	Value Fund	-	2,136
*	John Hancock Life Insurance Co.	Fundamental All Cap Core Fund	-	2,022
*	John Hancock Life Insurance Co.	Davis New York Venture	-	1,849
*	John Hancock Life Insurance Co.	SSgA Mid Value Index Fund	-	1,821
*	John Hancock Life Insurance Co.	DFA US Targeted Value Fund	-	1,326
*	John Hancock Life Insurance Co.	International Equity Index Fund	-	858
*	John Hancock Life Insurance Co.	Blue Chip Growth Fund	-	514
*	John Hancock Life Insurance Co.	Small Cap Opportunities Fund	-	481
*	John Hancock Life Insurance Co.	Investment Company of America	-	132
*	John Hancock Life Insurance Co.	Oppenheimer Global	-	61
*	John Hancock Life Insurance Co.	Financial Services Fund	-	35
*	Notes receivable from participants	Loans - Interest at 3.25% to 6.0%; secured by vested balances	-	195,518
			<u>\$ -</u>	<u>\$ 9,474,269</u>

*Parties-in-interest