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

2014

This Form is Open to Public Inspection

Part I Annual Report Identification Information

For calendar plan year 2014 or fiscal plan year beginning 01/01/2014 and ending 12/31/2014

A This return/report is for:
- [ ] a multiemployer plan;
- [ ] a multiple-employer plan (Filers checking this box must attach a list of participating employer information in accordance with the form instructions); or
- [X] a single-employer plan;
- [ ] a DFE (specify) ____

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

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

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

Part II Basic Plan Information—enter all requested information

1a Name of plan
LOEB & LOEB LLP PROFIT SHARING AND 401(K) PLAN

1b Three-digit plan number (PN) ▶ 005

1c Effective date of plan 01/01/1985

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

10100 SANTA MONICA BLVD
SUITE 2200
LOS ANGELES, CA 90067-4120

2b Employer Identification Number (EIN)
95-1780806

2c Plan Sponsor's telephone number
310-282-2000

2d Business code (see instructions)
541110

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

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

SIGN HERE	Filed with authorized/valid electronic signature.	10/08/2015	SCOTT COTIE
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

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

Preparer's telephone number (optional)

3a	Plan administrator's name and address [X] Same as Plan Sponsor	**3b**	Administrator's EIN
		3c	Administrator's telephone number
4	If the name and/or EIN of the plan sponsor has changed since the last return/report filed for this plan, enter the name, EIN and the plan number from the last return/report:	**4b**	EIN
a	Sponsor's name	**4c**	PN

5	Total number of participants at the beginning of the plan year	**5**	768
6	Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines **6a(1), 6a(2), 6b, 6c,** and **6d**).		
a(1)	Total number of active participants at the beginning of the plan year	**6a(1)**	561
a(2)	Total number of active participants at the end of the plan year	**6a(2)**	549
b	Retired or separated participants receiving benefits	**6b**	0
c	Other retired or separated participants entitled to future benefits	**6c**	199
d	Subtotal. Add lines **6a(2)**, **6b**, and **6c**.	**6d**	748
e	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	**6e**	0
f	Total. Add lines **6d** and **6e**.	**6f**	748
g	Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**	687
h	Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested	**6h**	2
7	Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	**7**	

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

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

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

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

a Pension Schedules

- **(1)** [X] **R** (Retirement Plan Information)
- **(2)** [ ] **MB** (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary
- **(3)** [ ] **SB** (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary

b General Schedules

- **(1)** [X] **H** (Financial Information)
- **(2)** [ ] **I** (Financial Information – Small Plan)
- **(3)** [ ] ___ **A** (Insurance Information)
- **(4)** [X] **C** (Service Provider Information)
- **(5)** [X] **D** (DFE/Participating Plan Information)
- **(6)** [ ] **G** (Financial Transaction Schedules)

Part III Form M-1 Compliance Information (to be completed by welfare benefit plans)

11a If the plan provides welfare benefits, was the plan subject to the Form M-1 filing requirements during the plan year? (See instructions and 29 CFR 2520.101-2.) .....…… ☐ Yes ☐ No

If "Yes" is checked, complete lines 11b and 11c.

11b Is the plan currently in compliance with the Form M-1 filing requirements? (See instructions and 29 CFR 2520.101-2.) ……..... ☐ Yes ☐ No

11c Enter the Receipt Confirmation Code for the 2014 Form M-1 annual report. If the plan was not required to file the 2014 Form M-1 annual report, enter the Receipt Confirmation Code for the most recent Form M-1 that was required to be filed under the Form M-1 filing requirements. (Failure to enter a valid Receipt Confirmation Code will subject the Form 5500 filing to rejection as incomplete.)

Receipt Confirmation Code_____

SCHEDULE C (Form 5500)	Service Provider Information	OMB No. 1210-0110
Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ **File as an attachment to Form 5500.**	**2014** **This Form is Open to Public Inspection.**

For calendar plan year 2014 or fiscal plan year beginning 01/01/2014 and ending 12/31/2014

A Name of plan
LOEB & LOEB LLP PROFIT SHARING AND 401(K) PLAN

B Three-digit plan number (PN) ▶ 005

C Plan sponsor's name as shown on line 2a of Form 5500
LOEB & LOEB LLP

D Employer Identification Number (EIN)
95-1780806

Part I Service Provider Information (see instructions)

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

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

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

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

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

CITY NATIONAL BANK

95-1780067

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
15 19 25 27 59 60 62 63 64 65 71	TRUSTEE/RECORD KEEPER	133670	Yes [X] No [ ]	Yes [X] No [ ]	48292	Yes [X] No [ ]

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

UBS

13-2638166

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
26 33 51 99	INVESTMENT ADVISOR	12287	Yes [X] No [ ]	Yes [X] No [ ]	559	Yes [X] No [ ]

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

HIGHTOWER ADVISORS LLC

26-2270729

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
26 51	INVESTMENT ADVISOR	14039	Yes [X] No [ ]	Yes [ ] No [X]	0	Yes [ ] No [X]

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

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

NATIONAL FINANCIAL SERVICES LLC

04-3523567

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
19 33 57 59 62 63 71	SUBCONTRACTOR OF CNB	3300	Yes [X] No [ ]	Yes [X] No [ ]	3773	Yes [X] No [ ]

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

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

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

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

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
CITY NATIONAL BANK	62	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
CITY NATIONAL BANK 95-1780067	INTEREST ON EXCESS BALANCES (I.E. FLOAT) HELD AT FED RESERVE BANKS ESTIMATED TO BE FED FUNDS TARGET RATE (0% TO 0.25%) LESS THE COST OF FDIC INSURANCE PREMIUMS.

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
NATIONAL FINANCIAL SERVICES LLC	62	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
NATIONAL FINANCIAL SERVICES LLC 04-3523567	MAY EARN INTEREST (FLOAT) FROM THE USE OF PENDING AMOUNTS SUCH AS ITEMS PENDING SETTLEMENT. FLOAT EARNINGS WILL BE REALIZED AT RATES APPROX THE FEDERAL FUNDS TARGET RATES.

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
US BANK	62	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
US BANK 41-0255900	US BANK MAY RETAIN INCOME ON THE "FLOAT" AS COMP FOR CUSTODY SERVICES. THE FLOAT RATE IS GENERALLY NO MORE THAN THE FEDERAL FUNDS TARGET RATES OF INTEREST.

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
CITY NATIONAL BANK	68	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
BROKERS USED BY CITY NATIONAL BANK 95-1780067	SOFT DOLLARS GENERATED FROM EQUITY TRANSACTIONS RANGES FROM $0.015-$0.035 PER SHARE AS AN EQUITY COMMISSION GENERATED ON ACCOUNTS TO ASSIST MGR IN INV-DECISION PROCESS.

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
NATIONAL FINANCIAL SERVICES LLC	60 63	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
ALLIANZ ATTN JOSEPH GULLACE FINANCE OPERATIONS NY 1633 BROADWAY NEW YORK, NY 10019	.400% PER YEAR ON CUSIP 018918276

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
NATIONAL FINANCIAL SERVICES LLC	60 63	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
DREYFUS ATTN ROB GALLINA/INSITUTIONAL SVS 144 GLENN CURTISS BLVD 8TH FLOOR UNIONDALE, NY 11556	.350% PER YEAR ON CUSIP 26200Q303

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
NATIONAL FINANCIAL SERVICES LLC	60 63	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
IVY IVY FUNDS 6300 LAMAR AVE OVERLAND PARK, KS 66202	.400% PER YEAR ON CUSIP 465897122

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
NATIONAL FINANCIAL SERVICES LLC	60 63	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
JANUS NO LOAD ATTN KRISTEN RENDER 151 DETROIT ST DENVER, CO 80206	.350% PER YEAR ON CUSIP 471023846

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
NATIONAL FINANCIAL SERVICES LLC	60 63	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
MANAGERS ATTN HENRY ORVIN 800 CONNECTICUT AVE. NORWALK, CT 06854	.400% PER YEAR ON CUSIP 00170J771

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
NATIONAL FINANCIAL SERVICES LLC	60 63	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
MATTHEWS ASIAN FDS ATTN STERLING TAI 4 EMBARCADERO CENTER STE 550 SAN FRANCISCO, CA 94111	.400% PER YEAR ON CUSIP 577125206, 577130107

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
NATIONAL FINANCIAL SERVICES LLC	60 63	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
OAKMARK CHRIS WRIGHT TWO NORTH LASALLE ST STE 500 CHICAGO, IL 60602	.350% PER YEAR ON CUSIP 413838509, 413838822

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
NATIONAL FINANCIAL SERVICES LLC	60 63	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
US GLOBAL INVESTORS ATTN MARK CARTER 7900 CALLAGHAN SAN ANTONIO, TX 78229	.400% PER YEAR ON CUSIP 911476208

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
NATIONAL FINANCIAL SERVICES LLC	60 63	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
WESTCHESTER CAPITAL WESTCHESTER CAPITAL MANAGEMENT, LLC 100 SUMMIT LAKE DRIVE VALHALLA, NY 10595	.400% PER YEAR ON CUSIP 589509108

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
NATIONAL FINANCIAL SERVICES LLC	72	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
AMERICAN HOST CONTROL 3500 WISEMAN BLVD SAN ANTONIO, TX 78251-4321	$18.00 PER YEAR ON CUSIP 298706102, 461308108

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
NATIONAL FINANCIAL SERVICES LLC	72	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
AMERICAN CLASS R HOST CONTROL 3500 WISEMAN BLVD SAN ANTONIO, TX 78251-4321	$10.00 PER YEAR ON CUSIP 140543836

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
NATIONAL FINANCIAL SERVICES LLC	72	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
JOHN HANCOCK ATTN JERRY DUKATZ 601 CONGRESS ST., 9TH FL. BOSTON, MA 02210	$16.00 PER YEAR ON CUSIP 47803W109

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
NATIONAL FINANCIAL SERVICES LLC	72	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
KEELEY 111 WEST JACKSON BLVD. STE 810 CHICAGO, IL 60604	$6.00 PER YEAR ON CUSIP 487300501

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
NATIONAL FINANCIAL SERVICES LLC	72	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
NEUBERGER BERMAN ATTN OWEN MCENTEE 605 3RD AVENUE 2ND FLOOR NEW YORK, NY 10158	$16.00 PER YEAR ON CUSIP 64128R855

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
NATIONAL FINANCIAL SERVICES LLC	72	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
ROYCE 745 FIFTH AVENUE SUITE 2400 NEW YORK, NY 10151	$16.00 PER YEAR ON CUSIP 780905600, 780905881

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
NATIONAL FINANCIAL SERVICES LLC	72	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
STRATTON 150 SOUTH WARNER RD, STE 460 KING OF PRUSSIA, PA 19406	$16.00 PER YEAR ON CUSIP 863137105

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
NATIONAL FINANCIAL SERVICES LLC	72	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
THIRD AVENUE 622 THIRD AVENUE 32 FLOOR NEW YORK, NY 10017	$16.00 PER YEAR ON CUSIP 884116500

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
NATIONAL FINANCIAL SERVICES LLC	72	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
CNI CHARTER FUNDS ATTN PATTY REILLY 1 FREEDOM VALLEY DRIVE OAKS, PA 19456	.000% PER YEAR ON CUSIP 125977108

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
NATIONAL FINANCIAL SERVICES LLC	72	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
DIMENSIONAL ATTN GENIE SEYMOUR 6300 BEE CAVES RD, BLDG ONE AUSTIN, TX 78746	.000% PER YEAR ON CUSIP 233203603, 233203736

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
NATIONAL FINANCIAL SERVICES LLC	72	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
DODGE & COX ATTN SANDY HE 555 CALIFORNIA ST 40TH FL SAN FRANCISCO, CA 94104	.000% PER YEAR ON CUSIP 256206103

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
NATIONAL FINANCIAL SERVICES LLC	72	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
FORWARD INSTL CL ATTN LOIRE WHITE 101 CALIFORNIA ST. SUITE 1600 SAN FRANCISCO, CA 94111	.100% PER YEAR ON CUSIP 349913822

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
NATIONAL FINANCIAL SERVICES LLC	72	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
JP MORGAN ATTN ALEISHA RADFORD 460 POLARIS PARKWAY WESTERVILLE, OH 43082	.060% PER YEAR ON CUSIP 4812C1793

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
NATIONAL FINANCIAL SERVICES LLC	72	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
MAIRS & POWERS ATTN CORY AKERS, US BANCORP 777 EAST WISCONSIN AVE MK-WI-T4MF MILWAUKEE, WI 53202	.100% PER YEAR ON CUSIP 56064V205

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
NATIONAL FINANCIAL SERVICES LLC	72	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
NATIXIS ATTN T CURTIS, NGAM DISTRIBUTORS LP 399 BOYLSTON ST., 8TH FLOOR BOSTON, MA 02116	.050% PER YEAR ON CUSIP 367829207

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
NATIONAL FINANCIAL SERVICES LLC	72	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
PIMCO ATTN JOSEPH GULLACE FINANCE OPERATIONS NY 1633 BROADWAY NEW YORK, NY 10019	.100% PER YEAR ON CUSIP 72201M438

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
NATIONAL FINANCIAL SERVICES LLC	72	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
SCHWAB FUNDS ATTN F. DAVIDSON 211 MAIN ST MS SF100PST-04-154 SAN FRANCISCO, CA 94105	.000% PER YEAR ON CUSIP 808509855

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
NATIONAL FINANCIAL SERVICES LLC	72	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
T ROWE PRICE ATTN FRANK CLARKSON 4515 PAINTERS MILL RD OWINGS MILLS, MD 21117	.040% PER YEAR ON CUSIP 741481105, 779556109, 779559103, 77956H500, 77956H815, 77956H880, 77957Y106, 779919109

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
NATIONAL FINANCIAL SERVICES LLC	72	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
VANGUARD 100 VANGUARD BLVD. MALVERN, PA 19355	.000% PER YEAR ON CUSIP 921908307, 921908604, 921908802, 921908851, 921908877, 921909602, 921921102, 921937306, 922031869, 922042809, 922908306, 922908702, 922908710, 922908843

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

4 Provide, to the extent possible, the following information for each service provider who failed or refused to provide the information necessary to complete this Schedule.

(a) Enter name and EIN or address of service provider (see instructions)	**(b)** Nature of Service Code(s)	**(c)** Describe the information that the service provider failed or refused to provide

(a) Enter name and EIN or address of service provider (see instructions)	**(b)** Nature of Service Code(s)	**(c)** Describe the information that the service provider failed or refused to provide

(a) Enter name and EIN or address of service provider (see instructions)	**(b)** Nature of Service Code(s)	**(c)** Describe the information that the service provider failed or refused to provide

(a) Enter name and EIN or address of service provider (see instructions)	**(b)** Nature of Service Code(s)	**(c)** Describe the information that the service provider failed or refused to provide

(a) Enter name and EIN or address of service provider (see instructions)	**(b)** Nature of Service Code(s)	**(c)** Describe the information that the service provider failed or refused to provide

(a) Enter name and EIN or address of service provider (see instructions)	**(b)** Nature of Service Code(s)	**(c)** Describe the information that the service provider failed or refused to provide

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

(complete as many entries as needed)

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE D (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

DFE/Participating Plan Information

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

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

OMB No. 1210-0110

2014

This Form is Open to Public Inspection.

For calendar plan year 2014 or fiscal plan year beginning 01/01/2014 and ending 12/31/2014

A Name of plan
LOEB & LOEB LLP PROFIT SHARING AND 401(K) PLAN

B Three-digit plan number (PN) ▶ 005

C Plan or DFE sponsor's name as shown on line 2a of Form 5500
LOEB & LOEB LLP

D Employer Identification Number (EIN)
95-1780806

Part I Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs)

(Complete as many entries as needed to report all interests in DFEs)

a Name of MTIA, CCT, PSA, or 103-12 IE: MORLEY STABLE VALUE FUND

b Name of sponsor of entity listed in (a): UNION BOND & TRUST COMPANY

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)
93-6274329-001	C	4466725

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

a Plan name	
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

2014

This Form is Open to Public Inspection

For calendar plan year 2014 or fiscal plan year beginning 01/01/2014 and ending 12/31/2014

A Name of plan
LOEB & LOEB LLP PROFIT SHARING AND 401(K) PLAN

B Three-digit plan number (PN) ▶ 005

C Plan sponsor's name as shown on line 2a of Form 5500
LOEB & LOEB LLP

D Employer Identification Number (EIN)
95-1780806

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	258517	-14034
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	4326963	4484897
(2) Participant contributions	1b(2)	17500	23000
(3) Other	1b(3)	13467	0
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	15405307	15091791
(2) U.S. Government securities	1c(2)	57541	31037
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		0
(B) All other	1c(3)(B)	763417	647669
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)	68947	0
(B) Common	1c(4)(B)	6127726	4977855
(5) Partnership/joint venture interests	1c(5)	306369	270277
(6) Real estate (other than employer real property)	1c(6)		0
(7) Loans (other than to participants)	1c(7)		0
(8) Participant loans	1c(8)	1754779	2057636
(9) Value of interest in common/collective trusts	1c(9)	3921897	4466725
(10) Value of interest in pooled separate accounts	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)		0
(12) Value of interest in 103-12 investment entities	1c(12)		0
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	150396631	159807918
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other	1c(15)	10436	10175

		(a) Beginning of Year	(b) End of Year
1d Employer-related investments:			
(1) Employer securities	1d(1)		0
(2) Employer real property	1d(2)		0
e Buildings and other property used in plan operation	1e		0
f Total assets (add all amounts in lines 1a through 1e)	1f	183429497	191854946
Liabilities			
g Benefit claims payable	1g		0
h Operating payables	1h		0
i Acquisition indebtedness	1i		0
j Other liabilities	1j	23000	0
k Total liabilities (add all amounts in lines 1g through1j)	1k	23000	0
Net Assets			
l Net assets (subtract line 1k from line 1f)	1l	183406497	191854946

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)	4487591	
(B) Participants	2a(1)(B)	5465163	
(C) Others (including rollovers)	2a(1)(C)	1245227	
(2) Noncash contributions	2a(2)	804739	
(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		12002720
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	59972	
(B) U.S. Government securities	2b(1)(B)	1559	
(C) Corporate debt instruments	2b(1)(C)	45473	
(D) Loans (other than to participants)	2b(1)(D)	0	
(E) Participant loans	2b(1)(E)	92783	
(F) Other	2b(1)(F)	313	
(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		200100
(2) Dividends: **(A)** Preferred stock	2b(2)(A)	2078	
(B) Common stock	2b(2)(B)	126161	
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	9245770	
(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		9374009
(3) Rents	2b(3)		0
(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	2b(4)(A)	16272293	
(B) Aggregate carrying amount (see instructions)	2b(4)(B)	16153115	
(C) Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result	2b(4)(C)		119178
(5) Unrealized appreciation (depreciation) of assets: **(A)** Real estate	2b(5)(A)	0	
(B) Other	2b(5)(B)	164143	
(C) Total unrealized appreciation of assets. Add lines **2b(5)(A)** and **(B)**	2b(5)(C)		164143

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		42843
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		0
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		0
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		0
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		1857357
c Other income	2c		46222
d Total income. Add all **income** amounts in column (b) and enter total	2d		23806572
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	15197633	
(2) To insurance carriers for the provision of benefits	2e(2)	0	
(3) Other	2e(3)	0	
(4) Total benefit payments. Add lines **2e(1)** through **(3)**	2e(4)		15197633
f Corrective distributions (see instructions)	2f		0
g Certain deemed distributions of participant loans (see instructions)	2g		0
h Interest expense	2h		0
i Administrative expenses: **(1)** Professional fees	2i(1)	132908	
(2) Contract administrator fees	2i(2)	0	
(3) Investment advisory and management fees	2i(3)	26286	
(4) Other	2i(4)	1296	
(5) Total administrative expenses. Add lines **2i(1)** through **(4)**	2i(5)		160490
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		15358123
Net Income and Reconciliation			
k Net income (loss). Subtract line **2j** from line **2d**	2k		8448449
l Transfers of assets:			
(1) To this plan	2l(1)		0
(2) From this plan	2l(2)		0

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)** [X] Disclaimer **(4)** [ ] Adverse

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

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

(1) Name: DELOITTE & TOUCHE LLP **(2)** EIN: 13-3891517

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

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

Part IV Compliance Questions

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

During the plan year:

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

			Yes	No	Amount
c	Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)	4c		X	
d	Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)	4d		X	
e	Was this plan covered by a fidelity bond?	4e	X		5000000
f	Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?	4f		X	
g	Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?	4g		X	
h	Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?	4h		X	
i	Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	4i	X		
j	Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked, and see instructions for format requirements.)	4j		X	
k	Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?	4k		X	
l	Has the plan failed to provide any benefit when due under the plan?	4l		X	
m	If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	4m		X	
n	If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.	4n			

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

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

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

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

Part V Trust Information (optional)

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

SCHEDULE R (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Retirement Plan Information

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

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

OMB No. 1210-0110

2014

This Form is Open to Public Inspection.

For calendar plan year 2014 or fiscal plan year beginning 01/01/2014 and ending 12/31/2014

A Name of plan
LOEB & LOEB LLP PROFIT SHARING AND 401(K) PLAN

B Three-digit plan number (PN) ▶ 005

C Plan sponsor's name as shown on line 2a of Form 5500
LOEB & LOEB LLP

D Employer Identification Number (EIN)
95-1780806

Part I Distributions

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

1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions **1** 0

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

EIN(s): 95-1780067 27-1228437

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

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

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

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

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

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

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

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

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

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

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

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

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

Part III Amendments

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

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

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

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

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

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

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

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

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

Loeb & Loeb LLP Profit Sharing and 401(k) Plan

Employer ID No.: 95-1780806
Plan Number: 005

Financial Statements as of December 31, 2014 and 2013, and for the Year Ended December 31, 2014, Supplemental Schedule as of December 31, 2014, and Independent Auditors' Report

LOEB & LOEB LLP PROFIT SHARING AND 401(k) PLAN

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NOTE: All other schedules required by Section 2520.103-10 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 have been omitted because they are not applicable.

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INDEPENDENT AUDITORS' REPORT

To the Trustee of and Participants in
Loeb & Loeb LLP Profit Sharing and 401(k) Plan
Los Angeles, California

We were engaged to audit the accompanying financial statements of the Loeb & Loeb LLP Profit Sharing and 401(k) Plan (the "Plan"), which comprise the statements of net assets available for benefits as of December 31, 2014 and 2013, and the related statement of changes in net assets available for benefits for the year ended December 31, 2014, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

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

Auditors' Responsibility

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

Basis for Disclaimer of Opinion

As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Note 3, which was certified by City National Bank, the trustee of the Plan, except for comparing the information with the related information included in the financial statements. We have been informed by the plan administrator that the trustee holds the Plan's investment assets and executes investment transactions. The plan administrator has obtained certifications from the trustee that the information as of December 31, 2014 and 2013, and for the year ended December 31, 2014, provided to the plan administrator by the trustee is complete and accurate.

Disclaimer of Opinion

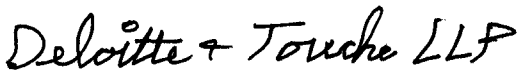
Because of the significance of the matter described in the Basis for Disclaimer of Opinion paragraph, we have not been able to obtain sufficient appropriate audit evidence to provide a basis for an audit opinion. Accordingly, we do not express an opinion on these financial statements.

Other Matter

The supplemental schedule of assets (held at end of year) as of December 31, 2014, listed in the table of contents, is required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 and is presented for the purpose of additional analysis and is not a required part of the financial statements. Because of the significance of the matter described in the Basis for Disclaimer of Opinion paragraph, we do not express an opinion on this supplemental schedule.

Report on Form and Content in Compliance with Department of Labor's Rules and Regulations

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



October 5, 2015

LOEB & LOEB LLP PROFIT SHARING AND 401(k) PLAN

STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
AS OF DECEMBER 31, 2014 AND 2013

	2014	2013
ASSETS:		
Investments (Notes 3, 4, and 5):		
Participant-directed investments—at fair value	$180,822,688	$173,394,892
Participant-directed investments—at estimated fair value	4,466,725	3,921,897
Total investments	185,289,413	177,316,789
Receivables:		
Notes receivable from participants	2,057,636	1,754,779
Employer contributions	4,484,897	4,326,963
Employee contributions	23,000	17,500
Accrued investment income		13,467
Total receivables	6,565,533	6,112,709
LIABILITIES—Other liabilities		(23,000)
NET ASSETS AVAILABLE FOR BENEFITS	$191,854,946	$183,406,498

See notes to financial statements.

LOEB & LOEB LLP PROFIT SHARING AND 401(k) PLAN

STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
FOR THE YEAR ENDED DECEMBER 31, 2014

INVESTMENT INCOME (Notes 3, 4 and 5):	
Interest and dividends	$ 9,481,327
Net appreciation in fair value of investments	2,160,614
Net appreciation in estimated fair value of investments	42,843
Net investment income	11,684,784
INTEREST INCOME ON NOTES RECEIVABLE FROM PARTICIPANTS	92,783
ADDITIONS—Contributions:	
Employer	4,487,591
Participant	5,465,163
Rollover	2,049,966
Total additions	12,002,720
DEDUCTIONS:	
Benefits paid to participants	(15,197,634)
Administrative expenses	(134,205)
Total deductions	(15,331,839)
INCREASE IN NET ASSETS	8,448,448
NET ASSETS AVAILABLE FOR BENEFITS:	
Beginning of year	183,406,498
End of year	$ 191,854,946

See notes to financial statements.

1. PLAN DESCRIPTION AND RELATED INFORMATION

The following description of the Loeb & Loeb LLP Profit Sharing and 401(k) Plan (the "Plan") is provided for general purposes only. Participants should refer to the Plan document for more complete information.

General—The Plan is a defined contribution plan established by Loeb & Loeb LLP (the "Firm"), a limited liability partnership, in January 1985. The Plan covers substantially all employees of the Firm. The pension committee appointed by the Firm (the "Plan Administrator") controls and manages the operation and administration of the Plan. City National Bank (the "Trustee") has served as the trustee of the Plan since April 1, 2004. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA).

Contributions—The Firm may, in its discretion, make a profit-sharing contribution to the Plan, and such contribution, if made, will be allocated among the accounts of the participants in a manner intended to satisfy the nondiscrimination rules of the Internal Revenue Code (IRC or the "Code"). The Firm may, at its discretion, contribute an additional amount for any Plan year provided that the Firm's total profit-sharing contribution for the Plan year does not exceed 25% of the aggregate compensation of all participants for the Plan year. Participants may elect to defer up to 25% of their annual compensation subject to certain Code limitations. The Firm does not provide a matching contribution on elective contributions. Notwithstanding the foregoing, if participants are or will be age 50 on or before the last day of the calendar year, they may make additional 401(k) catch-up contributions subject to Code limitations.

The Plan also provides that a participant may designate all or a part of his or her elective contributions as Roth contributions. Roth contributions are treated by the Firm as included in the participant's income at the time the participant would have received the amount in cash if the participant had not made the cash or deferred election and is accounted for separately under the Plan. Roth contributions and pretax elective contributions may not be reclassified as another type of contribution.

Rollovers—With the consent of the Plan Administrator, Plan participants are permitted to deposit distributions received from other plans (rollovers) into the Plan.

Participant Accounts—Individual accounts are maintained for each of the Plan's participants. Each participant's account is credited with the participant's contribution; an allocation of the Firm's contribution, if any; and Plan earnings or losses and charged with withdrawals and administrative expenses. Such amounts are invested in several available investment funds or individual-directed accounts (IDAs) as directed by the participant. If a participant chooses to invest his or her contributions in the IDA, he or she is limited as to the types of investments in which he or she can choose to invest. Further, if a participant chooses to invest in the IDA, his or her entire account balance must be held in the IDA. Plan earnings or losses and administrative expenses are allocated to participants based on participant account balances.

Vesting—Participants are immediately vested in their voluntary contributions. In relation to the Firm's contributions, participants are 0% vested in the first two years and are 100% vested after completing third year of service.

Payment of Benefits—On termination of service, a participant may elect to receive a lump-sum amount equal to the value of the participant's vested interest in his or her account.

Notes Receivable from Participants ("Participant Loans")—Participants may borrow from their accounts from a minimum of $1,000 to a maximum of 50% of their account balance or $50,000, whichever is less. The participant loans are secured by the vested balance in the participant's account and bear interest at a rate equal to the prime rate, plus 2% at the time funds are borrowed. Loan terms range from one to five years or up to 10 years for the purchase of a primary residence. However, one loan transferred in as a result of a plan merger has a maximum loan period greater than 10 years. As of December 31, 2014, interest rates range from 5.25% to 8.25%, with maturities ranging from 2015 to 2024.

Forfeited Accounts—When certain terminations of participation in the Plan occur, the nonvested portion of the participant's account, as defined by the Plan, represents a forfeiture. The Plan document permits the use of forfeitures to reduce profit-sharing contributions for the Plan year. As of December 31, 2014 and 2013, forfeited nonvested accounts totaled $92,020 and $42,060, respectively. All of the current-year forfeitures were used to reduce current-year employer contributions.

Investments—Participants direct the investment of their contributions into various investment options offered by the Plan. The Plan currently offers 27 mutual funds, a stable value fund, and IDA as investment options for participants. Participants may change their investment options at any time. Effective February 6, 2014, the Pension Committee approved the addition of PIMCO Short-term Institutional and fund replacements in the core investment menu. The Vanguard 500 Index Signal was replaced by Vanguard 500 Index Institutional, the Perkins Mid Cap Value I was replaced by Vanguard Selected Value, the Wells Fargo Advantage Small Cap Value Institutional was replaced by Vanguard Strategic Small-Cap Equity, and the MutualHedge Frontier Legends I was replaced by AQR Managed Futures Strategy. On November 24, 2014, the committee approved the addition of Metropolitan West Total Return Bond Fund I. On December 10, 2014, PIMCO Total Return I was replaced by the Metropolitan West Total Return Bond Fund.

2. SUMMARY OF ACCOUNTING POLICIES

Basis of Accounting—The accompanying financial statements have been prepared in accordance with accounting principles generally accepted in the United States of America (GAAP).

Use of Estimates—The preparation of financial statements in conformity with GAAP requires the Plan's management to make estimates and assumptions that affect the reported amounts of net assets available for benefits and changes therein. Actual results could differ from those estimates.

Risks and Uncertainties—The Plan invests in various investment instruments, including mutual funds, U.S. government securities, corporate debt instruments, and corporate stocks. Investment securities, in general, are exposed to various risks, such as interest rate risk, credit risk, and overall market volatility. Due to the level of risk associated with certain investment securities, it is reasonably possible that changes in the values of investment securities will occur in the near term and that such changes could materially affect the amounts reported in the financial statements.

Investment Valuation and Income Recognition—The Plan's investments are stated at fair value. Fair value of a financial instrument is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. See Note 4 for a discussion on fair value measurements. Shares of mutual funds are valued at quoted market prices, which represent the net asset value of shares held by the Plan at year-end. Common stock and the partnerships are valued at quoted market prices. The stable value fund is stated at estimated fair value as determined by the fair market value of the underlying investments. Cash and cash equivalents are recorded at cost, plus accrued interest. Corporate obligation and U.S. government securities traded in active markets on national securities exchanges are valued at closing prices on the last business day of each period presented. Securities traded in markets that are not considered active, including other assets, are valued based on quoted market prices, broker or dealer quotations, or alternative pricing sources with reasonable levels of price transparency.

Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded on an accrual basis. Dividends are recorded on the ex-dividend date.

Management fees charged to the Plan for investments in the mutual funds are deducted from income earned on a daily basis and are not separately reflected. Consequently, management fees are reflected as a reduction of investment return for such investments.

Net appreciation in fair value of investments in the statement of changes in net assets available for benefits includes realized and unrealized gains and losses on investments sold or 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 participant loans are recorded as distributions based on the terms of the Plan document.

Administrative Expenses—The Firm pays a portion of the Plan's expenses as provided in the Plan document. The remaining portion of the recordkeeping costs is charged against participants' accounts and is reflected as administrative expenses in the statement of changes in net assets available for benefits.

Payment of Benefits—Benefit payments to participants are recorded upon distribution. There were no amounts allocated to accounts of persons who have elected to withdraw from the Plan, but have not yet been paid at December 31, 2014 and 2013.

Excess Contribution Payable—The Plan is required to return excess contributions received during the Plan year in excess of IRC limits.

Subsequent Events—Subsequent events were evaluated through October 5, 2015, the date the financial statements were available to be issued.

Accounting Developments:

Fair Value Measurements—In May 2015, the Financial Accounting Standards Board ("FASB") issued Accounting Standards Update No. 2015-07, *Disclosures for Investments in Certain Entities That Calculate Net Asset Value per Share (or Its Equivalent)* ("ASU 2015-07"). Under ASU 2015-07, investments for which fair value is measured at net asset value per share (or its equivalent) using the practical expedient should not be categorized in the fair value hierarchy. Investments that calculate net asset value per share (or its equivalent), but for which the practical expedient is not applied will continue to be included in the fair value hierarchy. ASU 2015-07 also removes the requirement to make certain

disclosures for all investments that are eligible to be measured at fair value using the net asset value per share practical expedient. Rather, those disclosures are limited to investments for which the entity has elected to measure the fair value using that practical expedient. An entity would be required to include those investments as a reconciling item so that the total fair value amount of investments in the disclosure is consistent with the fair value investment balance in the statement of net assets available for benefits. This is effective for fiscal years beginning after December 15, 2015; early application is permitted.

Employee Benefit Plan Accounting—In July 2015, the FASB issued ASU No. 2015-12, *Plan Accounting: Defined Benefit Pension Plans (Topic 960), Defined Contribution Pension Plans (Topic 962), Health and Welfare Benefit Plans (Topic 965), I. Fully Benefit-Responsive Investment Contracts, II. Plan Investment Disclosures, III. Measurement Date Practical Expedient* ("ASU 2015-12"). The FASB is issuing this update in response to a proposal developed by the Emerging Issues Task Force that simplifies certain aspects of employee benefit plan accounting.

Part I of ASU 2015-12 requires fully benefit-responsive investment contracts to be measured, presented, and disclosed at contract value. Contract value is the relevant measure for those contracts because that is the amount participants normally would receive if they were to initiate permitted transactions (for example, withdrawals). The amendments in Part I are effective for fiscal years beginning after December 15, 2015; early application is permitted.

Part II of ASU 2015-12 requires that investments (both participant-directed and nonparticipant-directed) of employee benefit plans be grouped only by general type, such as the following: registered investment companies, government securities, common-collective trusts, pooled separate accounts, short-term securities, corporate bonds, common stock, mortgages, real estate, and self-directed brokerage accounts. Plans would no longer have to disclose the net appreciation or depreciation in fair value of investments by general type or individual investments equal to or greater than 5% of net assets available for benefits. In addition, if an investment is measured using the net asset value per share (or its equivalent) practical expedient and that investment is in a fund that files a U.S. Department of Labor Form 5500 as a direct filing entity, disclosure of that investment's strategy will no longer be required. The amendments in Part II are effective for fiscal years beginning after December 15, 2015; early application is permitted.

Part III of ASU 2015-12 provides a practical expedient to permit plans to measure investments and investment related accounts (for example, a liability for a pending trade with a broker) as of a month-end that is closest to the plan's fiscal year end, when the fiscal period does not coincide with a month-end. If a plan applies the practical expedient and a contribution, distribution, and/or significant event occurs between the alternative measurement date and the plan's fiscal year end, the plan should disclose the amount of the contribution, distribution, and/or significant event. The amendments in Part III are effective for fiscal years beginning after December 15, 2015; early application is permitted.

The Plan has not adopted the amendments of ASU 2015-07 or ASU 2015-12 in its financial statements as of December 31, 2014 and is currently assessing its impact.

3. INFORMATION CERTIFIED BY THE TRUSTEE

The following is a summary of the unaudited information regarding the Plan as of December 31, 2014 and 2013, and for the year ended December 31, 2014, included in the Plan's financial statements and supplemental schedule, that was prepared by or derived from the information prepared by City National Bank, the Trustee of the Plan and furnished to the Plan Administrator. The Plan Administrator has obtained certifications from the Trustee that such information is complete and accurate.

	2014	2013
Statements of net assets available for benefits:		
Investments at fair value as determined by market price:		
Cash and cash equivalents	$ 13,607,250	$ 14,309,078
Common stocks	4,977,855	6,127,726
Mutual funds	159,807,918	150,396,631
Corporate obligations	647,669	763,417
U.S. government securities and agencies	31,037	57,541
Savings and certificates of deposit (CDs)	1,470,507	1,354,746
Preferred stocks		68,947
Partnerships	270,277	306,369
Other assets	10,175	10,437
Investments at fair value	180,822,688	173,394,892
Investments at estimated fair value—Morley Stable Value Fund	4,466,725	3,921,897
Total investments	$ 185,289,413	$ 177,316,789
Investment income receivables	$ -	$ 13,467
Statement of changes in net assets available for benefits—investment income—interest and dividends	$ 9,481,327	$ 7,159,847
Appreciation (depreciation) in fair value of investments:		
Common stocks	$ 149,031	$ 1,148,363
Mutual funds	2,024,307	20,638,059
Corporate obligations	(22,588)	(16,617)
U.S. government securities and agencies	(1,141)	(1,675)
Savings and CDs	1,075	(37,426)
Preferred stocks		(5,697)
Partnerships	10,191	100,149
Other assets	(261)	(208)
Net appreciation in fair value of investments	$ 2,160,614	$ 21,824,948
Net appreciation in estimated fair value of investments	$ 42,843	$ 37,604

Notes 4 and 5: All investment balances and investment information, excluding the classification of investments by level in Note 4, are certified by the Trustee.

Supplemental schedule: All investment balances and information included in the supplemental schedule of assets (held at end of year) are certified by the Trustee.

4. FAIR VALUE MEASUREMENT

ASC 820, *Fair Value Measurements and Disclosures*, provides 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, as follows: Level 1, which refers to securities valued using unadjusted quoted prices from active markets for identical assets; Level 2, which refers to securities not traded on an active market but for which observable market inputs are readily available; and Level 3, which refers to securities valued based on significant unobservable inputs. Assets are classified in their entirety based on the lowest level of input that is significant to the fair value measurement. The Plan's policy is to recognize transfers between levels based on the actual date of the event or change in circumstances that caused the transfer.

Asset Valuation Techniques—Valuation methodologies maximize the use of relevant observable inputs and minimize the use of unobservable inputs. The 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, 2014 and 2013.

Cash Equivalents—Cash equivalents are primarily short-term money market commingled funds that are categorized as Level 1. They are priced at par, which matches market data.

Common Stock and Partnerships—Common stock and partnerships are valued at the closing price reported on the active market on which the securities are traded on the last business day of the Plan year. Common stock and partnerships are categorized as Level 1.

Mutual Funds—Mutual funds are valued at the daily closing price as reported by the fund. Mutual funds held by the Plan are open-ended mutual funds that are registered with the Securities and Exchange Commission. These funds are required to publish their daily net asset value and to transact at that price. The mutual funds held by the Plan are deemed to be actively traded. Shares of mutual funds held are categorized as Level 1.

Stable Value Fund—Valued at the net asset value of units of a bank collective trust. The net asset value, as provided by the Trustee, is used as a practical expedient to estimate fair value. The net asset value is based on the fair value of the underlying investments held by the fund less its liabilities. In relation to the Morley Stable Value Fund, all investment contracts held by the Fund at December 31, 2014 and 2013, are fully benefit responsive. The net asset value of the Fund is determined each business day by the Trustee. Contributions to the Fund may be made daily at the current net asset value and are considered as made immediately after the daily valuation. Withdrawals from the Fund for benefit payments and participant transfers to noncompeting options to be paid to the Plan participants shall be made within 30 days after written notification has been received and are considered as made immediately after the next valuation date subsequent to the Trustee approval. Withdrawals, other than for benefit payments and participant transfers to noncompeting options, require a 12-month advance written notice. Included in this written advance notice requirement are full or partial withdrawals of assets invested in the Fund resulting from plan sponsor-directed actions, such as terminating the fund as an investment option of the Plan. Investments in stable value fund are categorized as Level 2.

Fixed-income separate accounts and securities traded in markets that are not considered active are categorized as Level 2. They are valued using third-party pricing services. These services may use, for example, model-based pricing methods that utilize observable market data as inputs. Broker-dealer bids or quotes of securities with similar characteristics may also be used. The following table provides examples of inputs that are commonly relevant for valuing particular classes of fixed-income securities in which the Plan invests. These classifications are not exclusive and any of the inputs may be used to value any other class of fixed-income security.

Fixed-Income Class	Examples of Standard Inputs
Corporate obligations	Standard inputs and events affecting market sectors and individual issuer creditworthiness
Government and agencies	Standard inputs and Treasury curves and spreads, trade execution data, live trading levels, cash flows, bids, offers, quotes, spreads, indices, observed market movements, volatility, and specific terms and conditions (collectively, "standard inputs")
Savings and CDs	Priced at par

By level, the fair value hierarchy of the investments held by the Plan as of December 31, 2014 and 2013, is as follows:

As of December 31, 2014	Level 1	Level 2	Level 3	Total
Cash and cash equivalents	$ 13,607,250	$ -	$ -	$ 13,607,250
Common stocks:				
Consumer discretionary (CD)	93,109			93,109
Consumer staples (CS)	1,276,558			1,276,558
Energy (EG)	647,556			647,556
Financial (FN)	583,791	199,860		783,651
Health care (HC)	2,310			2,310
Industrial (IN)	519,019			519,019
Materials (MT)	287,206			287,206
Technology (TY)	838,874			838,874
Telecommunication (TS)	448,563			448,563
Utilities (UT)	81,009			81,009
Total common stocks	4,777,995	199,860	-	4,977,855
Mutual funds:				
Equity funds	130,593,109			130,593,109
Bond funds	29,214,809			29,214,809
Total mutual funds	159,807,918	-	-	159,807,918
Morley Stable Value Fund		4,466,725		4,466,725
Corporate obligations		647,669		647,669
U.S. government securities and agencies		31,037		31,037
Savings and CDs		1,470,507		1,470,507
Preferred stocks				-
Partnerships	270,277			270,277
Other assets		10,175		10,175
Total	$ 178,463,440	$ 6,825,973	$ -	$ 185,289,413

For the year ended December 31, 2014, there were no transfers in or out of Level 1, Level 2, or Level 3.

As of December 31, 2013	Level 1	Level 2	Level 3	Total
Cash and cash equivalents	$ 14,309,078	$ -	$ -	$ 14,309,078
Common stocks:				
Consumer discretionary (CD)	500,453			500,453
Consumer staples (CS)	233,706			233,706
Energy (EG)	862,298			862,298
Financial (FN)	1,016,036			1,016,036
Health care (HC)	722,846			722,846
Industrial (IN)	447,708			447,708
Materials (MT)	416,293			416,293
Technology (TY)	1,485,506			1,485,506
Telecommunication (TS)	216,454			216,454
Utilities (UT)	226,426			226,426
Total common stocks	6,127,726	-	-	6,127,726
Mutual funds:				
Equity funds	123,571,938			123,571,938
Bond funds	26,824,693			26,824,693
Total mutual funds	150,396,631	-	-	150,396,631
Morley Stable Value Fund		3,921,897		3,921,897
Corporate obligations		763,417		763,417
U.S. government securities and agencies		57,541		57,541
Savings and CDs		1,354,746		1,354,746
Preferred stocks	68,947			68,947
Partnerships	306,369			306,369
Other assets		10,437		10,437
Total	$ 171,208,751	$ 6,108,038	$ -	$ 177,316,789

For the year ended December 31, 2013, there were no transfers in or out of Level 1, Level 2, or Level 3.

5. INVESTMENTS

The Plan's investments that represented 5% or more of the Plan's net assets available for benefits as of December 31, 2014 and 2013, are as follows:

	2014	2013
Pimco Total Return FD INSTL-35	$ -	$ 16,780,244
Metro West Total Ret	11,450,298	
T. Rowe Price New America Growth Fund	14,775,573	15,141,718
Vanguard Prime Money Market Fund INSTL 066	11,672,061	12,183,963
Vanguard Inst Idx	11,890,011	
America Europacific Growth-R6	11,090,953	12,093,730
Fidelity Small Cap Discovery Fund	10,693,620	11,081,275
Vanguard Windsor II Fund—Admiral #573	10,188,706	9,496,002
Fidelity Contrafund #22	13,553,490	12,641,956

During the year ended December 31, 2014, the Plan's investments, including gains and losses on investments bought and sold as well as held during the year, appreciated (depreciated) in value as follows:

Appreciation (depreciation) in fair value of investments whose fair value was determined by quoted market price:	
Common stocks:	
Consumer discretionary (CD)	$ 9,797
Consumer staples (CS)	89,187
Energy (EG)	(78,115)
Financial (FN)	83,648
Healthcare (HC)	(715)
Industrial (IN)	(24,839)
Materials (MT)	6,663
Technology (TY)	40,429
	1,132
Utilities (UT)	21,845
Total common stocks	149,031
Mutual funds:	
Equity funds	2,141,244
Bond funds	(116,937)
Total mutual funds	2,024,307
Corporate obligations	(22,588)
U.S. government securities and agencies	(1,141)
Savings and CDs	1,075
Preferred stocks	
Partnerships	10,191
Other assets	(261)
Net appreciation in fair value of investments whose fair value was determined by quoted market price	$ 2,160,614

Net appreciation in fair value of investments whose fair value was

6. MORLEY STABLE VALUE FUND

The Morley Stable Value Fund is a collective trust fund sponsored by the Union Bond & Trust Company. The Fund was formed to provide preservation of capital, relatively stable returns consistent with its comparatively low risk profile, and liquidity for benefit-responsive payments. The Fund seeks to achieve this objective by investing primarily in a variety of high-quality stable value investment contracts, as well as cash and cash equivalents. It is intended that the Fund's stable value investment contracts will maintain a minimum weighted-average credit quality rating of A or better. The underlying fixed-income securities must be rated investment grade and meet issuer diversification guidelines. The duration of the Fund will not exceed four years. The Fund is typically appropriate for investors who desire low volatility, stable principal value, and returns commensurate with a capital preservation objective for a component of their retirement savings.

At December 31, 2014, the Plan's interest in the net assets of the Fund was approximately 0.05% of the total Fund value.

Investments held by a collective investment trust are required to be reported at fair value. However, contract value is the relevant measurement attribute for that portion of the net assets of a collective investment trust attributable to fully benefit-responsive investment contracts because contract value is the amount participants would receive if they were to initiate permitted transactions under the terms of the underlying defined contribution plans.

Investments in contracts are presented in the portfolio of investments at contract value, which represents invested principal, plus accrued interest thereon. The contracts are nontransferable, but provide for benefit-responsive withdrawals and participant transfers to noncompeting options by Plan participants at contract value. In the event facts and circumstances provide evidence that contract value is impaired, the contracts would be presented at fair value. In determining contract value, the Trustee considers such factors as the benefit responsiveness of the contracts, the ability of the parties to the contracts to perform in accordance with the terms of the contracts, and the likelihood of default by the issuer of an investment security.

7. PLAN TERMINATION

Although it has not expressed any intent to do so, the Firm has the right under the Plan to discontinue its contributions at any time and to terminate the Plan subject to the provisions set forth in ERISA. In the event that the Plan is terminated, participants would become 100% vested in their accounts.

8. FEDERAL INCOME TAX STATUS

The Plan uses a volume submitter Plan document sponsored by Louis Kravitz & Associates, Inc. ("Kravitz"). Kravitz received a determination letter from the Internal Revenue Service dated September 21, 2010, which states that the volume submitter Plan document satisfies the applicable provisions of the Code. The Plan's management believes that the Plan is currently designed and being operated in compliance with the applicable requirements of the Code, and the Plan continues to be tax exempt. Therefore, no provision for income taxes has been included in the Plan's financial statements.

GAAP requires the Plan's management to evaluate tax positions taken by the Plan and recognize a tax liability (or asset) if the Plan has taken an uncertain position that more likely than not would not be sustained upon examination by the Internal Revenue Service. The Plan Administrator has analyzed the tax positions taken by the Plan and has concluded that as of December 31, 2014, there are no uncertain positions taken or expected to be taken that would require recognition of a liability (or asset) or disclosure in the financial statements. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress. The Plan Administrator believes it is no longer subject to income tax examinations for years prior to 2011.

9. EXEMPT PARTY-IN-INTEREST TRANSACTIONS

Certain Plan investments, such as mutual funds, cash equivalents, and CDs, are managed by the Trustee. These investments and investment transactions qualify as exempt party-in-interest transactions.

* * * * * *

SUPPLEMENTAL SCHEDULE

LOEB & LOEB LLP PROFIT SHARING AND 401(k) PLAN

EIN: 95-1780806

PN: 005

FORM 5500, SCHEDULE H, PART IV, LINE 4(i)—SCHEDULE OF ASSETS (HELD AT END OF YEAR)

AS OF DECEMBER 31, 2014

(a)	(b) Identity of Issuer, Borrower, Lessor, or Similar Party	(c) Description of Investment, Including Maturity Date, Rate of Interest, Collateral, and Par or Maturity Value	(d) Cost	(e) Current Value
	CASH EQUIVALENTS:			
	Ameritrade Cash Account	Ameritrade Cash Account		$ (4,847)
*	City National Rochdale Pr	City National Rochdale Prime Money Market Fund Servicing Class	^	269,168
*	CNB Cash	CNB Cash		(30,271)
	Schwab Cash Account	Schwab Cash Account		4,014
	Schwab Money Market Fund	Schwab Money Market Fund		273,207
*	TDAM Money Market Portfol	TDAM Money Market Portfolio Select	^	1,437,951
*	Vanguard Prime Money Mark	Vanguard Prime Money Market Instl Class	^	11,672,061
		Total cash equivalents		13,621,283
	SAVINGS AND CD'S:			
	American Expr Centurion	American Expr Centurion	^	9,608
	CIT Bank	CIT Bank	^	27,072
	CIT Bank	CIT Bank	^	140,373
	CIT Bank	CIT Bank	^	69,285
	Compass Bank	Compass Bank	^	71,978
	Discover Bank	Discover Bank	^	71,618
	Discover Bank	Discover Bank	^	116,892
	Discover Bank	Discover Bank	^	13,848
	Fsgbank NA Tn	Fsgbank NA Tn	^	60,896
	GE Capital Bank	GE Capital Bank	^	11,897
	GE Capital Bank	GE Capital Bank	^	4,952
	GE Capital Retail Bank	GE Capital Retail Bank	^	25,115
	Goldman Sachs Bank USA	Goldman Sachs Bank USA	^	72,017
	Goldman Sachs Bank USA	Goldman Sachs Bank USA	^	74,558
	Goldman Sachs Bank USA	Goldman Sachs Bank USA	^	59,403
	Israel Discount Bk Of NY	Israel Discount Bk Of NY	^	231,999
	Parkway Bank & Trust Co	Parkway Bank & Trust Co	^	28,243
	State Bank Of India	State Bank Of India	^	45,852
	State Bank Of India	State Bank Of India	^	45,691
	State Bank Of India	State Bank Of India	^	86,326
	Synchrony Bank	Synchrony Bank	^	80,885
	Synchrony Bank	Synchrony Bank	^	64,492
	Synchrony Bank	Synchrony Bank	^	7,938
	Synchrony Bank	Synchrony Bank	^	44,615
	Synchrony Bank	Synchrony Bank	^	4,954
		Total savings and CD's		1,470,507
	GOVERNMENT & AGENCIES:			
	Freddie Mac G12484	Freddie Mac G12484	^	896
	US Treasury Note	US Treasury Note	^	30,141
		Total government and agencies		31,037

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LOEB & LOEB LLP PROFIT SHARING AND 401(k) PLAN

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FORM 5500, SCHEDULE H, PART IV, LINE 4(i)—SCHEDULE OF ASSETS (HELD AT END OF YEAR)

AS OF DECEMBER 31, 2014

(a)	(b) Identity of Issuer, Borrower, Lessor, or Similar Party	(c) Description of Investment, Including Maturity Date, Rate of Interest, Collateral, and Par or Maturity Value	(d) Cost	(e) Current Value
	CORPORATE OBLIGATIONS:			
	Armored Autogroup Inc	Armored Autogroup Inc	^	$ 50,000
	AT&T Inc	AT&T Inc	^	8,087
	Bank Of America Corp	Bank Of America Corp	^	27,142
	Caterpillar Financial Ser	Caterpillar Financial Services Corp	^	10,048
	Cincinnati Bell Inc	Cincinnati Bell Inc	^	24,714
	Clear Channel Communicat	Clear Channel Communicat	^	48,897
	Colgate Palmolive Co	Colgate Palmolive Co	^	5,411
	General Elec Cap Corp	General Elec Cap Corp	^	26,980
	General Elec Cap Corp	General Elec Cap Corp	^	27,623
	Goldman Sachs Group Inc	Goldman Sachs Group Inc	^	25,386
	Goldman Sachs Group Inc	Goldman Sachs Group Inc	^	27,279
	Harrahs Operating Co Inc	Harrahs Operating Co Inc	^	36,625
	Icahn Enterprises/Fin	Icahn Enterprises/Fin	^	25,438
	Intl Paper Co	Intl Paper Co	^	62,328
	Massey Energy Co	Massey Energy Co	^	47,625
	Medtronic Inc	Medtronic Inc	^	5,026
	Occidental Petroleum Cor	Occidental Petroleum Cor	^	5,084
	Pitney Bowes Inc	Pitney Bowes Inc	^	26,618
	Shell International Fin	Shell International Fin	^	10,168
	Sprint Nextel Corp	Sprint Nextel Corp	^	46,000
	Valero Energy Corp	Valero Energy Corp	^	56,690
	Visant Corp	Visant Corp	^	44,500
		Total corporate obligations		647,669
	COMMON STOCKS:			
	3-D Systems Corp	3-D Systems Corp	^	1,644
	3Power Energy Group	3Power Energy Group	^	586
	Acadia Realty Trust	Acadia Realty Trust	^	33,407
	Aegerion Pharmaceuticals	Aegerion Pharmaceuticals Inc	^	20,940
	Alaska Air Group Inc	Alaska Air Group Inc	^	14,342
	Alcatel-Lucent Spons ADR	Alcatel-Lucent Spons ADR	^	121
	Alvarion Ltd	Alvarion Ltd	^	5
	Amazon Com Inc	Amazon Com Inc	^	10,862
	American Green Group Inc	American Green Group Inc	^	209
	American Water Works Co I	American Water Works Co Inc	^	74,620
	Apollo Global Management	Apollo Global Management - A	^	990
	Apollo Investment Corp	Apollo Investment Corp	^	7,420
	Apple Inc	Apple Inc	^	488,100
	At&t Inc	At&t Inc	^	55,424
	Avalonbay Communities Inc	Avalonbay Communities Inc.	^	16,829
	Avnet Inc	Avnet Inc	^	21,510
	Bank Of America Corp	Bank Of America Corp	^	44,725

(Continued)

LOEB & LOEB LLP PROFIT SHARING AND 401(k) PLAN

EIN: 95-1780806

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FORM 5500, SCHEDULE H, PART IV, LINE 4(i)—SCHEDULE OF ASSETS (HELD AT END OF YEAR)

AS OF DECEMBER 31, 2014

(a)	(b) Identity of Issuer, Borrower, Lessor, or Similar Party	(c) Description of Investment, Including Maturity Date, Rate of Interest, Collateral, and Par or Maturity Value	(d) Cost	(e) Current Value
	Bb&t Corp	Bb&t Corp	^	$ 38,890
	Berkshire Hathaway Cl A	Berkshire Hathaway Cl A	^	226,000
	BlackRock Capital Investm	BlackRock Capital Investment Corp	^	73,800
	Boeing Company	Boeing Company	^	12,998
	Bristol-Myers Squibb Co	Bristol-Myers Squibb Co	^	43,092
	Canadian Natural Resource	Canadian Natural Resources	^	92,640
	Canadian Solar Inc	Canadian Solar Inc	^	8,104
	Capstone Turbine Corp.	Capstone Turbine Corp.	^	29,560
	Caterpillar Inc	Caterpillar Inc	^	52,172
	Cellcom Israel Ltd	Cellcom Israel Ltd	^	10,380
	Charles Schwab Corporatio	Charles Schwab Corporation	^	40,334
	Chesapeake Energy Corp	Chesapeake Energy Corp	^	39,140
	Chevron Corp	Chevron Corp	^	76,843
	Cisco Systems Inc	Cisco Systems Inc	^	41,723
	Citigroup Inc	Citigroup Inc	^	18,939
	Command Security Corporat	Command Security Corporation	^	7,360
	Conocophillips	Conocophillips	^	10,359
	Costco Wholesale Corp-New	Costco Wholesale Corp-New	^	14,175
	Cummins Inc	Cummins Inc	^	7,209
	Delta Air Lines Inc	Delta Air Lines Inc	^	9,838
	Discover Financial	Discover Financial	^	8,186
	Expo Holding Inc	Expo Holding Inc	^	4
	Exxon-Mobil Corporation	Exxon-Mobil Corporation	^	126,657
	Facebook Inc-A	Facebook Inc-A	^	39,010
	Frontier Communications C	Frontier Communications Corp	^	71,202
	General Electric Co	General Electric Co	^	83,391
	Gilead Sciences Inc	Gilead Sciences Inc	^	2,357
	Goldman Sachs Group Inc	Goldman Sachs Group Inc	^	48,458
	Google Inc Cl C	Google Inc Cl C	^	105,280
	Gopro Inc-Class A	Gopro Inc-Class A	^	2,213
	Granite Construction Inc.	Granite Construction Inc.	^	65,204
	GT Advanced Technologies	GT Advanced Technologies Inc	^	1,655
	Halozyme Therapeutics Inc	Halozyme Therapeutics Inc	^	63,401
	Health Care Reit Inc	Health Care Reit Inc	^	30,268
	Hecla Mng Co	Hecla Mng Co	^	1,395
	Honda Motor Ltd Sponsored	Honda Motor Ltd Sponsored ADR	^	14,760
	Intel Corporation	Intel Corporation	^	18,145
	Intl Business Machines In	Intl Business Machines Inc	^	160,440
	Johnson & Johnson	Johnson & Johnson	^	51,762
	Kennedy-Wilson Holdings I	Kennedy-Wilson Holdings Inc	^	75,900
	Kinder Morgan Inc	Kinder Morgan Inc	^	27,798
	Kleangas Energy Technolog	Kleangas Energy Technologies	^	1
	Kongzhong Corp ADR	Kongzhong Corp ADR	^	5,410
	L-3 Communication Hldgs I	L-3 Communication Hldgs Inc	^	12,621

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LOEB & LOEB LLP PROFIT SHARING AND 401(k) PLAN

EIN: 95-1780806

PN: 005

FORM 5500, SCHEDULE H, PART IV, LINE 4(i)—SCHEDULE OF ASSETS (HELD AT END OF YEAR)

AS OF DECEMBER 31, 2014

(a)	(b) Identity of Issuer, Borrower, Lessor, or Similar Party	(c) Description of Investment, Including Maturity Date, Rate of Interest, Collateral, and Par or Maturity Value	(d) Cost	(e) Current Value
	Liberty Star Uranium & Me	Liberty Star Uranium & Metal	^	$ 29
	Magellan Energy Ltd	Magellan Energy Ltd	^	150
	Merck & Company Inc	Merck & Company Inc	^	61,901
	Microsoft Corporation	Microsoft Corporation	^	81,984
	Mitcham Industries Inc	Mitcham Industries Inc	^	9,103
	ModusLink Global Solution	ModusLink Global Solutions Inc (mlnk 01/20/15)	^	19
	Mondelez International In	Mondelez International Inc	^	69,018
	Monsanto Company	Monsanto Company	^	179,205
	Murphy USA Inc	Murphy USA Inc	^	103,290
	Nabors Industries	Nabors Industries	^	7,983
	Nike Inc.	Nike Inc.	^	11,538
	Noble Corp PLC	Noble Corp PLC	^	8,285
	Nortech Systems Inc	Nortech Systems Inc	^	181,856
	NQ Mobile Inc	NQ Mobile Inc	^	7,605
	One Gas Inc	One Gas Inc	^	6,389
	Oneok Inc	Oneok Inc	^	30,870
	Outfront Media Inc	Outfront Media Inc	^	65,919
	Paragon Offshore Inc	Paragon Offshore Inc	^	460
	Pepsico Inc	Pepsico Inc	^	66,192
	Potash Corp	Potash Corp	^	60,927
	Procter & Gamble Co	Procter & Gamble Co	^	70,139
	Qihoo 360 Technology Co L	Qihoo 360 Technology Co Ltd	^	11,452
	Quasar Aerospace Industri	Quasar Aerospace Industries	^	1
	Quicksilver Resources (kw	Quicksilver Resources (kwkaq 3/19/15)	^	198
	Radio Shack Corp. (rshc 2	Radio Shack Corp. (rshc 2/3/15)	^	370
	Raytheon Co	Raytheon Co	^	10,817
	Regeneron Pharma Inc	Regeneron Pharma Inc	^	695,374
	Roche Hldg Ltd -Spons Adr	Roche Hldg Ltd -Spons Adr	^	42,827
	Ross Stores Inc	Ross Stores Inc	^	9,426
	Salamon Group Inc	Salamon Group Inc	^	111
	Sandridge Permian Trust	Sandridge Permian Trust	^	10,659
	Sarepta Therapeutics Inc	Sarepta Therapeutics Inc	^	13,240
	Seadrill Ltd	Seadrill Ltd	^	3,582
	Seventy Seven Energy Inc	Seventy Seven Energy Inc	^	768
	Sizmek Inc	Sizmek Inc	^	1,252
	Solarcity Corp	Solarcity Corp	^	10,696
	Solazyme Inc	Solazyme Inc	^	2,580
	Soufun Holdings Ltd ADR	Soufun Holdings Ltd ADR	^	7,390
	Southwest Airlines Compan	Southwest Airlines Company	^	6,560
	Splunk Inc	Splunk Inc	^	29,475
	Starbucks Corp.	Starbucks Corp.	^	12,308
	Sysco Corp	Sysco Corp	^	31,752
	Tapistron Intl Inc	Tapistron Intl Inc	^	
	Telecomunicacoes De S.P.	Telecomunicacoes De S.P. ADR	^	6,188

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LOEB & LOEB LLP PROFIT SHARING AND 401(k) PLAN

EIN: 95-1780806

PN: 005

FORM 5500, SCHEDULE H, PART IV, LINE 4(i)—SCHEDULE OF ASSETS (HELD AT END OF YEAR)

AS OF DECEMBER 31, 2014

(a)	(b) Identity of Issuer, Borrower, Lessor, or Similar Party	(c) Description of Investment, Including Maturity Date, Rate of Interest, Collateral, and Par or Maturity Value	(d) Cost	(e) Current Value
	Terra Tech Corp	Terra Tech Corp	^	$ 506
	Teva Pharmaceutical Indus	Teva Pharmaceutical Industries LTD ADR	^	28,755
	Texas Instruments Inc	Texas Instruments Inc	^	62,821
	The Mosaic Co	The Mosaic Co	^	45,650
	Titan Pharmaceuticals Inc	Titan Pharmaceuticals Inc (ttnpe 5/17/13)	^	2,310
	Transglobal Assets Inc	Transglobal Assets Inc	^	163
	Transocean Ltd	Transocean Ltd	^	13,289
	Trinity Industries Inc.	Trinity Industries Inc.	^	8,403
	Trudy Corp Comnew	Trudy Corp Comnew	^	
	Tyson Foods Inc Cl A	Tyson Foods Inc Cl A	^	8,017
	United Parcel Service	United Parcel Service	^	22,233
	Universal Travel Group	Universal Travel Group	^	
	Verizon Communications	Verizon Communications	^	32,746
	Virnetx Holding Corp	Virnetx Holding Corp	^	5,490
	Vornado Realty Trust Com	Vornado Realty Trust Com	^	24,365
	Weyerhaeuser Co	Weyerhaeuser Co	^	29,071
	Whiting Petroleum Corp	Whiting Petroleum Corp	^	33,000
	Williams Co.	Williams Co.	^	38,648
	Windstream Holdings Inc	Windstream Holdings Inc (win 04/27/15)	^	16,480
	Yahoo Inc.	Yahoo Inc.	^	15,152
	Yosen Group Inc	Yosen Group Inc	^	60
		Total common stocks		4,977,855
	COMMON/COLLECTIVE FUNDS:			
*	Morley Stable Value Fund	Morley Stable Value Fund 25 Bps (ter)	^	4,466,725
*				
*	MUTUAL FUNDS:			
*	13D Activist Fund-A	13D Activist Fund-A	^	209,375
	Alerian Mlp ETF	Alerian Mlp ETF	^	104,419
	AllianzGI Convertible & I	AllianzGI Convertible & Income Fund	^	47,383
	AllianzGI NFJ Dividend Va	AllianzGI NFJ Dividend Value Fund D	^	81,227
	AllianzGI NFJ Internation	AllianzGI NFJ International Value Fund A	^	119,653
	American Capital World Gr	American Capital World Grth&inc 5	^	24,164
	American Europacific Grow	American Europacific Growth A	^	202,998
	American Funds - New Worl	American Funds - New World Fun	^	354,889
	American Funds Income R6	American Funds Income R6	^	7,184,618
	American Funds Investment	American Funds Investment Co of America A	^	469,501
	AMG Frontier Small Cap Gr	AMG Frontier Small Cap Growth-Svc	^	30,397
	AQR Managed Futures Str-N	AQR Managed Futures Str-N	^	230,951
	Avenue Credit Strat Inv	Avenue Credit Strat Inv	^	68,802
	BlackRock Global Allocati	BlackRock Global Allocation Fund Inc. A	^	179,949
	Blackrock Global Long/Sho	Blackrock Global Long/Short Credit Fund A	^	103,408

(Continued)

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FORM 5500, SCHEDULE H, PART IV, LINE 4(i)—SCHEDULE OF ASSETS (HELD AT END OF YEAR)

AS OF DECEMBER 31, 2014

(a)	(b) Identity of Issuer, Borrower, Lessor, or Similar Party	(c) Description of Investment, Including Maturity Date, Rate of Interest, Collateral, and Par or Maturity Value	(d) Cost	(e) Current Value
*	City Nat Roch Limit Mat F	City Nat Roch Limit Mat F/Ii	^	$ 63,415
*	City National Rochdale Em	City National Rochdale Emerging Markets Fund Cl N	^	39,299
*	City National Rochdale Go	City National Rochdale Government Bond Fund Svc	^	60,128
*	City Natl High Yield Bond	City Natl High Yield Bond-Sv	^	35,270
	ClearBridge Aggressive Gr	ClearBridge Aggressive Growth Fund Class C	^	95,486
	Cty Natl Rochdale Corp Bd	Cty Natl Rochdale Corp Bd-Sv	^	82,009
	Delaware Emerging Markets	Delaware Emerging Markets-C	^	38,534
	Delaware Value Fund A	Delaware Value Fund A	^	174,767
	DFA International Small C	DFA International Small Cap Value	^	117,052
	Dnp Select Income Fund In	Dnp Select Income Fund Inc	^	23,475
	Dodge & Cox Intl Stock	Dodge & Cox Intl Stock	^	29,029
	Dreyfus Intl Stock Index	Dreyfus Intl Stock Index	^	19,422
	Dreyfus Opportunistic Mid	Dreyfus Opportunistic Midcap Value	^	77,565
	Eic Value Fund-A	Eic Value Fund-A	^	152,243
	EuroPacific Growth R6	EuroPacific Growth R6	^	11,090,953
	Fidelity Adv Levrgd Compa	Fidelity Adv Levrgd Company A	^	180,478
	Fidelity Blue Chip Growth	Fidelity Blue Chip Growth Fd 312	^	34,720
	Fidelity Blue Chip Value	Fidelity Blue Chip Value	^	34,461
	Fidelity Canada Fund	Fidelity Canada Fund	^	113,667
	Fidelity Contrafund	Fidelity Contrafund	^	13,553,490
	Fidelity Emerging Asia	Fidelity Emerging Asia	^	38,678
	Fidelity Floating Rate H/	Fidelity Floating Rate H/Inc	^	67,150
	Fidelity Intl Real Estate	Fidelity Intl Real Estate	^	187,330
	Fidelity Low-Priced Stk	Fidelity Low-Priced Stk	^	4,067,962
	Fidelity Sel Gold	Fidelity Sel Gold	^	20,709
	Fidelity Small Cap Discov	Fidelity Small Cap Discovery	^	10,693,620
	Fidelity Stock Selector L	Fidelity Stock Selector Large Cap Value Fund	^	43,357
	First Eagle Sogen Global	First Eagle Sogen Global A	^	95,383
	Forward Intl Small Compan	Forward Intl Small Companies-I	^	165,991
	Gateway	Gateway	^	18,262
	Guggenheim Bulletshares 2	Guggenheim Bulletshares 2017	^	25,431
	Harbor Intl	Harbor Intl	^	4,917,359
	Health Care Select Sector	Health Care Select Sector Spdr	^	10,257
	Invesco Intl Growth A	Invesco Intl Growth A	^	104,343
	iShares 7-10 Year Treasur	iShares 7-10 Year Treasury Bon	^	144,146
	Ishares Core S&P Mid-Cap	Ishares Core S&P Mid-Cap ETF	^	75,296
	Ishares Core S&P Small-Ca	Ishares Core S&P Small-Cap ETF	^	62,391
	iShares Emerging Markets	iShares Emerging Markets Local	^	30,914
	iShares MSCI ACWI ETF	iShares MSCI ACWI ETF	^	117,000
	iShares MSCI Australia ET	iShares MSCI Australia ETF	^	26,981
	iShares MSCI EAFE ETF	iShares MSCI EAFE ETF	^	114,075
	iShares MSCI Hong Kong ET	iShares MSCI Hong Kong ETF	^	6,162
	iShares MSCI Israel Cappe	iShares MSCI Israel Capped ETF	^	9,356
	iShares MSCI Japan ETF	iShares MSCI Japan ETF	^	43,128

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FORM 5500, SCHEDULE H, PART IV, LINE 4(i)—SCHEDULE OF ASSETS (HELD AT END OF YEAR)

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	Ishares Msci World ETF	Ishares Msci World ETF	^	$ 79,543
	iShares Russell 3000 ETF	iShares Russell 3000 ETF	^	74,597
	iShares S&P 500 Value ETF	iShares S&P 500 Value ETF	^	140,467
	iShares S&P Small-Cap 600	iShares S&P Small-Cap 600 Value	^	192,714
	iShares Select Dividend E	iShares Select Dividend ETF	^	39,700
	iShares U.S. Financial Se	iShares U.S. Financial Service	^	4,592
	Ivy Asset Strategy Fund -	Ivy Asset Strategy Fund - A	^	68,938
	Ivy High Income Fund I	Ivy High Income Fund I	^	1,148,546
	Ivy Mid Cap Growth I	Ivy Mid Cap Growth I	^	822,616
	Janus Forty Fund	Janus Forty Fund	^	85,257
	John Hancock Small Compan	John Hancock Small Company Fund A 3480	^	24,763
	JP Morgan Strategic Incom	JP Morgan Strategic Income Opportunities A	^	89,655
	JPMorgan Small Cap Value	JPMorgan Small Cap Value Fund Select	^	39,164
	Keeley Small Cap Value A	Keeley Small Cap Value A	^	119,164
	Mainstay L/C Growth A	Mainstay L/C Growth A	^	160,161
	MainStay Marketfield Fund	MainStay Marketfield Fund	^	102,059
	Mairs & Power Growth	Mairs & Power Growth	^	16,419
	Matthews Asia Small Compa	Matthews Asia Small Companies	^	169,143
	Matthews Pacific Tiger	Matthews Pacific Tiger	^	319,534
	Merger Fund	Merger Fund	^	114,029
	Metro West Total Ret I	Metro West Total Ret I	^	11,450,298
	Neuberger Ber Abs Ret Mm	Neuberger Ber Abs Ret Mm Ins	^	1,510,847
	Oakmark Equity & Inc I	Oakmark Equity & Inc I	^	1,976,300
	Oakmark Global Select Fun	Oakmark Global Select Fund - I	^	10,584
	Oakmark Intl Small Cap I	Oakmark Intl Small Cap I	^	205,206
	Oppenheimer Sr Float Rate	Oppenheimer Sr Float Rate-I	^	72,856
	Pimco All Assets All Auth	Pimco All Assets All Authority P	^	8,776
	Pimco Emerg Mkts Bd Instl	Pimco Emerg Mkts Bd Instl	^	36,424
	Pimco Short-Term Instl	Pimco Short-Term Instl	^	6,817,100
	Pimco Total Return C	Pimco Total Return C	^	64,633
	Powershares QQQ Nasdaq 10	Powershares QQQ Nasdaq 100	^	41,300
	Powershares Senior Loan P	Powershares Senior Loan Port	^	82,543
	Principal Equity Income F	Principal Equity Income Fund Instl	^	7,887,276
	Prudential Jennison Mid-C	Prudential Jennison Mid-Cap Growth A	^	89,663
	Prudential Jennison Natur	Prudential Jennison Natural Resources Z	^	229,381
	Putnam Diversified Inc A	Putnam Diversified Inc A	^	156,215
	Riverpark/Wedgewood-Ret	Riverpark/Wedgewood-Ret	^	136,037
	Royce Premier	Royce Premier	^	133,450
	Royce Total Return	Royce Total Return	^	51,865
	RS Floating Rate Fund-A	RS Floating Rate Fund-A	^	96,358
	Schwab S&P 500 Index	Schwab S&P 500 Index	^	205,362
	Select Sector Consumer Di	Select Sector Consumer Discretionary Tr	^	10,678
	Select Sector Spdr Tr - I	Select Sector Spdr Tr - Industrial	^	47,527
	Select Sector Spdr Utilit	Select Sector Spdr Utilities	^	21,721

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FORM 5500, SCHEDULE H, PART IV, LINE 4(i)—SCHEDULE OF ASSETS (HELD AT END OF YEAR)

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	SPDR S&P 500 ETF Trust	SPDR S&P 500 ETF Trust	^	$ 981,659
	Spdr S&P Aerospace & Def	Spdr S&P Aerospace & Def Etf	^	40,969
	Spdr S&P Dividend	Spdr S&P Dividend	^	219,852
	Spdr S&P Midcap 400 EFT T	Spdr S&P Midcap 400 EFT Trust	^	92,390
	Spdr S&P Retail	Spdr S&P Retail	^	19,202
	Spdr S&P Telecom Etf	Spdr S&P Telecom Etf	^	21,364
	Spdr S&P Transportation E	Spdr S&P Transportation Etf	^	5,968
	Stratton Small Cap Value	Stratton Small Cap Value	^	82,118
	T Rowe Price Emerging Eur	T Rowe Price Emerging Europe Fund	^	76,258
	T Rowe Price High Yield	T Rowe Price High Yield	^	82,420
	T Rowe Price Latin Americ	T Rowe Price Latin American Fd	^	114,755
	T Rowe Price Mid Cap Grow	T Rowe Price Mid Cap Growth	^	5,498,072
	T. Rowe Price Mid Value	T. Rowe Price Mid Value	^	4,871,595
	T. Rowe Price New Amer	T. Rowe Price New Amer	^	14,775,573
	T. Rowe Price New Asia	T. Rowe Price New Asia	^	342,159
	T. Rowe Price New Era	T. Rowe Price New Era	^	156,902
	T. Rowe Price Real Est	T. Rowe Price Real Est	^	847,628
	Technology Select Sector	Technology Select Sector Spdr	^	57,890
	Templeton Global Bond A	Templeton Global Bond A	^	75,540
	Templeton Global Bond Fd	Templeton Global Bond Fd - Ad	^	1,741,069
	Templeton Global Bond Fun	Templeton Global Bond Fund C	^	44,862
	Third Avenue Internationa	Third Avenue International Value Fund	^	21,740
	Thornburg International V	Thornburg International Value Fund C	^	71,320
	Usgi Global Resources Fun	Usgi Global Resources Fund	^	86,408
	Vanguard 500 Index Adm	Vanguard 500 Index Adm	^	388,025
	Vanguard 500 Index Inv	Vanguard 500 Index Inv	^	56,508
	Vanguard Capital Opportun	Vanguard Capital Opportunity Adm	^	2,865,955
	Vanguard Dividend Appreci	Vanguard Dividend Appreciation Index Inv	^	12,936
	Vanguard Energy Adm	Vanguard Energy Adm	^	111,571
	Vanguard Equity-Inc	Vanguard Equity-Inc	^	10,701
	Vanguard European Stk Ind	Vanguard European Stk Ind Admiral	^	265,967
	Vanguard FTSE Emerging Ma	Vanguard FTSE Emerging Market	^	32,096
	Vanguard GNMA Adm	Vanguard GNMA Adm	^	6,464,323
	Vanguard Growth ETF	Vanguard Growth ETF	^	129,235
	Vanguard Health Care	Vanguard Health Care	^	213,049
	Vanguard Inflation-Protec	Vanguard Inflation-Protected Securities Invst	^	33,403
	Vanguard Inst Idx	Vanguard Inst Idx	^	11,890,011
	Vanguard Intm Bd Idx	Vanguard Intm Bd Idx	^	32,482
	Vanguard Mid - Cap Growth	Vanguard Mid - Cap Growth Index	^	5,081
	Vanguard Mid Cap Idx	Vanguard Mid Cap Idx	^	101,389
	Vanguard Reit ETF	Vanguard Reit ETF	^	50,220
	Vanguard REIT Index Fund	Vanguard REIT Index Fund Adm	^	149,305
	Vanguard S&P 500 ETF	Vanguard S&P 500 ETF	^	37,680
	Vanguard S/T Bond Index A	Vanguard S/T Bond Index Adm	^	45,408

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FORM 5500, SCHEDULE H, PART IV, LINE 4(i)—SCHEDULE OF ASSETS (HELD AT END OF YEAR)

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	Vanguard Selected Value	Vanguard Selected Value	^	$ 1,205,703
	Vanguard Small- Cap ETF	Vanguard Small- Cap ETF	^	17,849
	Vanguard Smcp Idx	Vanguard Smcp Idx	^	263,520
	Vanguard Specialized Div	Vanguard Specialized Div Growth Fd	^	30,565
	Vanguard Strategic Small	Vanguard Strategic Small Cap Equity Inv	^	1,265,087
	Vanguard Tot Stk	Vanguard Tot Stk	^	713,577
	Vanguard Total Intl Stk	Vanguard Total Intl Stk	^	91,787
	Vanguard Total Stock Mark	Vanguard Total Stock Market ETF	^	703,262
	Vanguard Windsor Adm	Vanguard Windsor Adm	^	166,546
	Vanguard Windsor II Adm	Vanguard Windsor II Adm	^	10,188,706
	Virtus Emerging Markets O	Virtus Emerging Markets Opportunity A	^	72,353
	Voya Global Real Estate F	Voya Global Real Estate Fund Class I	^	48,473
	Voya Large Cap Value-C	Voya Large Cap Value-C	^	116,507
	Wisdomtree Europe Hedged	Wisdomtree Europe Hedged Equ	^	34,986
		TOTAL MUTUAL FUNDS		159,807,918
	NOTES, MORTGAGES, AND CONTRACTS			
	PARTICIPANT LOANS - LOEB & LOEB			
*	EE MASTER NOTE	SECURED BY VESTED INTEREST 5.25% to 8.25%	^	2,057,636
		TOTAL PARTICIPANT LOANS		2,057,636
		TOTAL NOTES, MORTGAGES, AND CONTRACTS		2,057,636

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LOEB & LOEB LLP PROFIT SHARING AND 401(k) PLAN

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FORM 5500, SCHEDULE H, PART IV, LINE 4(i)—SCHEDULE OF ASSETS (HELD AT END OF YEAR)

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	MISCELLANEOUS:			
	PARTNERSHIPS:			
	Energy Transfer Equity LP	Energy Transfer Equity LP	^	114,760
	KKR & Co LP	KKR & Co LP	^	35,511
	OCH-Ziff Capital Managmen	OCH-Ziff Capital Managment	^	53,237
	Plains GP Holdings LP-CL	Plains GP Holdings LP-CL A	^	66,769
		TOTAL PARTNERSHIPS		270,277
	OTHER ASSETS -	Total Capital SA		10,175
		TOTAL MISCELLANEOUS		280,452
		PRINCIPAL CASH		-14,033
		TOTAL ASSETS		187,347,049

* Denotes party-in-interest asset.

^ Cost information not provided as assets are part of an individual account plan that participants and beneficiaries directed with respect to assets allocated to his or her account.

See accompanying independent auditors' report (Concluded)

SCHEDULE H, LINE 4i, SCHEDULE OF ASSETS (HELD AT END OF YEAR)*

DECEMBER 31, 2014

*See attached financial statements with auditor's report.