

Form 5500 Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Annual Return/Report of Employee Benefit Plan This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6047(e), 6057(b), and 6058(a) of the Internal Revenue Code (the Code). <p style="text-align: center;">▶ Complete all entries in accordance with the instructions to the Form 5500.</p>	OMB Nos. 1210-0110 1210-0089 <div style="text-align: center; font-size: 1.5em; font-weight: bold;">2014</div> This Form is Open to Public Inspection
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Part I	Annual Report Identification Information
For calendar plan year 2014 or fiscal plan year beginning <u>01/01/2014</u> and ending <u>12/31/2014</u>	
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 ☒ a single-employer plan; ☐ a DFE (specify) _____
B This return/report is:	☐ the first return/report; ☐ the final return/report; ☐ an amended return/report; ☐ a short plan year return/report (less than 12 months).
C If the plan is a collectively-bargained plan, check here.	☐
D Check box if filing under:	☒ Form 5558; ☐ automatic extension; ☐ the DFVC program; ☐ special extension (enter description)

Part II	Basic Plan Information —enter all requested information				
1a Name of plan SENIOR RESOURCE CONNECTION RETIREMENT PLAN	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%;">1b Three-digit plan number (PN) ▶</td> <td style="width: 20%; text-align: center;">002</td> </tr> <tr> <td colspan="2">1c Effective date of plan 01/01/2009</td> </tr> </table>	1b Three-digit plan number (PN) ▶	002	1c Effective date of plan 01/01/2009	
1b Three-digit plan number (PN) ▶	002				
1c Effective date of plan 01/01/2009					
2a Plan sponsor's name and address; include room or suite number (employer, if for a single-employer plan) SENIOR RESOURCE CONNECTION 222 SALEM AVENUE DAYTON, OH 45406	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>2b Employer Identification Number (EIN) 31-0592759</td> </tr> <tr> <td>2c Plan Sponsor's telephone number 937-223-8246</td> </tr> <tr> <td>2d Business code (see instructions) 624100</td> </tr> <tr> <td style="height: 40px;"></td> </tr> </table>	2b Employer Identification Number (EIN) 31-0592759	2c Plan Sponsor's telephone number 937-223-8246	2d Business code (see instructions) 624100	
2b Employer Identification Number (EIN) 31-0592759					
2c Plan Sponsor's telephone number 937-223-8246					
2d Business code (see instructions) 624100					

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.	10/13/2015	LISA GARVIC
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE
Preparer's name (including firm name, if applicable) and address (include room or suite number) (optional)			Preparer's telephone number (optional)

3a Plan administrator's name and address ☒ Same as Plan Sponsor	3b Administrator's EIN 3c Administrator's telephone number <div style="background-color: #cccccc; height: 40px; width: 100%;"></div>
4 If the name and/or EIN of the plan sponsor has changed since the last return/report filed for this plan, enter the name, EIN and the plan number from the last return/report: a Sponsor's name	4b EIN 4c PN
5 Total number of participants at the beginning of the plan year	5 201
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) 194
a(2) Total number of active participants at the end of the plan year	6a(2) 179
b Retired or separated participants receiving benefits	6b 1
c Other retired or separated participants entitled to future benefits.....	6c 11
d Subtotal. Add lines 6a(2) , 6b , and 6c	6d 191
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	6e 0
f Total. Add lines 6d and 6e	6f 191
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	6g 120
h Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested.....	6h 1
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item).....	7
8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions: 2E 2G 2J 2K 2T 3D	
b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristics Codes in the instructions:	
9a Plan funding arrangement (check all that apply) (1) ☐ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor	9b Plan benefit arrangement (check all that apply) (1) ☐ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor
10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)	
a Pension Schedules (1) ☒ R (Retirement Plan Information) (2) ☐ MB (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary (3) ☐ SB (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary	b General Schedules (1) ☒ H (Financial Information) (2) ☐ I (Financial Information – Small Plan) (3) ☐ <u>0</u> A (Insurance Information) (4) ☐ C (Service Provider Information) (5) ☐ 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 H (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	Financial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ► File as an attachment to Form 5500.	<small>OMB No. 1210-0110</small> 2014 This Form is Open to Public Inspection
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For calendar plan year 2014 or fiscal plan year beginning <u>01/01/2014</u> and ending <u>12/31/2014</u>		
A Name of plan <u>SENIOR RESOURCE CONNECTION RETIREMENT PLAN</u>	B Three-digit plan number (PN) ►	<u>002</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>SENIOR RESOURCE CONNECTION</u>	D Employer Identification Number (EIN) <u>31-0592759</u>	

Part I	Asset and Liability Statement		
1 Current value of plan assets and liabilities at the beginning and end of the plan year. Combine the value of plan assets held in more than one trust. Report the value of the plan's interest in a commingled fund containing the assets of more than one plan on a line-by-line basis unless the value is reportable on lines 1c(9) through 1c(14). Do not enter the value of that portion of an insurance contract which guarantees, during this plan year, to pay a specific dollar benefit at a future date. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 1b(1), 1b(2), 1c(8), 1g, 1h, and 1i. CCTs, PSAs, and 103-12 IEs also do not complete lines 1d and 1e. See instructions.			
	Assets	(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a	10	12
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions.....	1b(1)		
(2) Participant contributions.....	1b(2)		
(3) Other.....	1b(3)	0	479
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit).....	1c(1)		
(2) U.S. Government securities	1c(2)		
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common.....	1c(4)(B)		
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property).....	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans.....	1c(8)		
(9) Value of interest in common/collective trusts	1c(9)		
(10) Value of interest in pooled separate accounts	1c(10)	0	0
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities.....	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds).....	1c(13)	450275	503510
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)		
(15) Other.....	1c(15)		

1d Employer-related investments:

		(a) Beginning of Year	(b) End of Year
(1) Employer securities	1d(1)		
(2) Employer real property	1d(2)		
e Buildings and other property used in plan operation	1e		
f Total assets (add all amounts in lines 1a through 1e)	1f	450285	504001

Liabilities

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

Net Assets

l Net assets (subtract line 1k from line 1f)	1l	450285	504001
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Part II Income and Expense Statement

2 Plan income, expenses, and changes in net assets for the year. Include all income and expenses of the plan, including any trust(s) or separately maintained fund(s) and any payments/receipts to/from insurance carriers. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 2a, 2b(1)(E), 2e, 2f, and 2g.

Income

		(a) Amount	(b) Total
a Contributions:			
(1) Received or receivable in cash from: (A) Employers	2a(1)(A)		
(B) Participants	2a(1)(B)	52359	
(C) Others (including rollovers)	2a(1)(C)		
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		52359
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)		
(B) U.S. Government securities	2b(1)(B)		
(C) Corporate debt instruments	2b(1)(C)		
(D) Loans (other than to participants)	2b(1)(D)		
(E) Participant loans	2b(1)(E)		
(F) Other	2b(1)(F)		
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		0
(2) Dividends: (A) Preferred stock	2b(2)(A)		
(B) Common stock	2b(2)(B)		
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	4878	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		4878
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)		
(B) Aggregate carrying amount (see instructions)	2b(4)(B)		
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)		0
(5) Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)		
(B) Other	2b(5)(B)		
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		0

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		19285
c Other income	2c		
d Total income. Add all income amounts in column (b) and enter total	2d		76522

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	15703	
(2) To insurance carriers for the provision of benefits	2e(2)		
(3) Other	2e(3)		
(4) Total benefit payments. Add lines 2e(1) through (3)	2e(4)		15703
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions)	2g		
h Interest expense	2h		
i Administrative expenses: (1) Professional fees	2i(1)	1438	
(2) Contract administrator fees	2i(2)	4255	
(3) Investment advisory and management fees	2i(3)	1410	
(4) Other	2i(4)		
(5) Total administrative expenses. Add lines 2i(1) through (4)	2i(5)		7103
j Total expenses. Add all expense amounts in column (b) and enter total	2j		22806

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		53716
l Transfers of assets:			
(1) To this plan	2l(1)		
(2) From this plan	2l(2)		

Part III Accountant's Opinion

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

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

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

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

☒ Yes ☐ No

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

(1) Name: MATTHEW J SCARR, CPA LLC

(2) EIN: 27-3546363

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

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

Part IV Compliance Questions

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

During the plan year:

- a** Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)
- b** Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)

	Yes	No	Amount
4a		X	
4b		X	

	Yes	No	Amount
c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)		X	
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.).....		X	
e Was this plan covered by a fidelity bond?	X		60000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		X	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?.....		X	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?.....		X	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	X		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked, and see instructions for format requirements.)		X	
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?		X	
l Has the plan failed to provide any benefit when due under the plan?.....		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)		X	
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.			

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

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

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

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

Part V Trust Information (optional)

6a Name of trust

6b Trust's EIN

<div>SCHEDULE R (Form 5500) <div>Department of the Treasury Internal Revenue Service</div><div>Department of Labor Employee Benefits Security Administration</div><div>Pension Benefit Guaranty Corporation</div></div>		<div>Retirement Plan Information</div> <div>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).</div> <div>▶ File as an attachment to Form 5500.</div>		<div>OMB No. 1210-0110</div> <div>2014</div> <div>This Form is Open to Public Inspection.</div>	
For calendar plan year 2014 or fiscal plan year beginning 01/01/2014 and ending 12/31/2014					
A Name of plan SENIOR RESOURCE CONNECTION RETIREMENT PLAN				B Three-digit plan number (PN) ▶ 002	
C Plan sponsor's name as shown on line 2a of Form 5500 SENIOR RESOURCE CONNECTION				D Employer Identification Number (EIN) 31-0592759	
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): 27-3169253					
Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.					
3 Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year.....				3	
Part II Funding Information (If the plan is not subject to the minimum funding requirements of section 412 of the Internal Revenue Code or ERISA section 302, skip this Part)					
4 Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)?..... ☐ Yes ☐ No ☐ N/A					
If the plan is a defined benefit plan, go to line 8.					
5 If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. Date: Month _____ Day _____ Year _____					
If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.					
6 a Enter the minimum required contribution for this plan year (include any prior year accumulated funding deficiency not waived).....				6a	
b Enter the amount contributed by the employer to the plan for this plan year.....				6b	
c Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount)				6c	
If you completed line 6c, skip lines 8 and 9.					
7 Will the minimum funding amount reported on line 6c be met by the funding deadline?..... ☐ Yes ☐ No ☐ N/A					
8 If a change in actuarial cost method was made for this plan year pursuant to a revenue procedure or other authority providing automatic approval for the change or a class ruling letter, does the plan sponsor or plan administrator agree with the change?..... ☐ Yes ☐ No ☐ N/A					
Part III Amendments					
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					
For Paperwork Reduction Act Notice and OMB Control Numbers, see the instructions for Form 5500.				Schedule R (Form 5500) 2014 v. 140124	

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: 0.0% 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): _____

SENIOR RESOURCE CONNECTION RETIREMENT PLAN

Financial Statements and Supplemental Schedule

December 31, 2014 and 2013

with Independent Auditor's Report

SENIOR RESOURCE CONNECTION RETIREMENT PLAN

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Matthew J. Scarr, CPA LLC

Certified Public Accountant

808 East Franklin Street
Centerville, OH 45459-5605
(937) 232-1200
Fax (937) 435-2863

INDEPENDENT AUDITOR'S REPORT

To the Plan Administrator of
Senior Resource Connection Retirement Plan

Report on the Financial Statements

I was engaged to audit the accompanying financial statements of Senior Resource Connection Retirement Plan (the "Plan"), which comprise the statements of net assets available for benefits as of December 31, 2014, and the related statements of changes in net assets available for benefits for the year then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

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

Auditor's Responsibility

My responsibility is to express an opinion on these financial statements based on conducting my audits 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, I was 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 me not to perform, and I did not perform, any auditing procedures with respect to the information summarized in Note 3, which was certified by Mid Atlantic Trust Company, the custodian of the Plan, except for comparing the information with the related information included in the financial statements and supplemental schedule. I have been informed by the plan administrator that the custodian holds the Plan's investment assets and executes investment transactions. The plan administrator has obtained a certification from the custodian as of and for the year ended December 31, 2014, that the information provided to the plan administrator by the custodian is complete and accurate.

Disclaimer of Opinion

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

Other Matter—Supplemental Schedule

The supplemental schedule of assets (held at end of year) 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, I do not express an opinion on the supplemental schedule referred to above.

Other Matter—2013 Financial Statements

The financial statements of the Plan as of December 31, 2013, were audited by predecessor auditors. 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 the predecessor auditors not to perform, and they did not perform, any auditing procedures with respect to the information certified by Mid Atlantic Trust Company, the custodian of the Plan. Their report, dated October 1, 2014, indicated that (a) because of the significance of the information that they did not audit, they were unable to obtain sufficient appropriate audit evidence to provide a basis for an audit opinion and accordingly, they did not express an opinion on the financial statements and (b) the form and content of the information included in the financial statements other than that derived from the information certified by the Trustee, were presented in compliance with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.

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

The form and content of the information included in the financial statements and supplemental schedule, other than that derived from the information certified by the trustee, have been audited by me in accordance with auditing standards generally accepted in the United States of America and, in my 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.

Matthew J. Scarr, CPA LLC

Centerville, Ohio
October 12, 2015

SENIOR RESOURCE CONNECTION RETIREMENT PLAN

Statements of Net Assets Available for Benefits

December 31, 2014 and 2013

	<u>2014</u>	<u>2013</u>
Cash and cash equivalents	<u>\$ 12</u>	<u>10</u>
Receivables, other	<u>479</u>	<u>-</u>
Investments (at fair value):		
Common/collective trust	-	115,176
Registered investment companies	<u>503,510</u>	<u>335,099</u>
	<u>503,510</u>	<u>450,275</u>
Net assets available for benefits	<u><u>\$ 504,001</u></u>	<u><u>450,285</u></u>

See accompanying notes.

SENIOR RESOURCE CONNECTION RETIREMENT PLAN

Statements of Changes in Net Assets Available for Benefits

Years Ended December 31, 2014 and 2013

	<u>2014</u>	<u>2013</u>
Additions to plan assets attributed to:		
Investment income:		
Net change in fair value of assets	\$ 19,285	39,421
interest and dividends	<u>4,878</u>	<u>3,748</u>
	<u>24,163</u>	<u>43,169</u>
Contributions:		
Participant	52,359	58,189
Transferred assets and other	<u>-</u>	<u>8,673</u>
	<u>52,359</u>	<u>66,862</u>
Total additions to plan assets	<u>76,522</u>	<u>110,031</u>
Deductions from plan assets attributed to:		
Benefits paid to participants	15,703	58,649
Administrative expenses	<u>7,103</u>	<u>8,306</u>
Total deductions from plan assets	<u>22,806</u>	<u>66,955</u>
Net increase	53,716	43,076
Net assets available for benefits:		
Beginning of year	<u>450,285</u>	<u>407,209</u>
End of year	<u>\$ 504,001</u>	<u>450,285</u>

See accompanying notes.

SENIOR RESOURCE CONNECTION RETIREMENT PLAN

Notes to Financial Statements

Years Ended December 31, 2014 and 2013

1. DESCRIPTION OF THE PLAN:

The following brief description of the Senior Resource Connection Retirement Plan (the “Plan”) provides only general information. Participants should refer to the Plan document for a more complete description of the Plan’s provisions.

General—The Plan is a defined contribution plan with a profit sharing provision. Employees of Senior Resource Connection (the “Sponsor”), are eligible for entry into the Plan. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA).

Eligibility—Participants may enter the Plan after completing 1,000 hours of service within the twelve months following their date of hire. If a participant does not complete the 1,000 hours within the specified time period, the participant will be subject to a one year service requirement.

Contributions—Participants may contribute a portion of their compensation, subject to certain Internal Revenue Service (“IRS”) limits. Participants who have attained age 50 before the end of the plan year are eligible to make catch-up contributions. Participants are also permitted to make rollover contributions to the Plan of distributions from other qualified plans. Participants direct the investment of their contributions into various investment options offered by the Plan.

The Sponsor may also make discretionary matching contributions and profit sharing contributions to the Plan. The Sponsor did not elect to make either matching or discretionary profit sharing contributions during 2014 and 2013.

Participant accounts—Each participant account is credited with the participant’s contribution, related matching or other employer non-elective contributions, if any, and allocations of the Plan earnings and administrative expenses. The benefit to which a participant is entitled is the amount that can be provided from the participant’s vested account.

Vesting—Participants are immediately vested in their contributions plus earnings thereon. A participant is vested in the employer contribution component of their account (and earnings thereon) after completion of 1,000 hours and three years of service.

Forfeitures—Sponsor contributions are forfeited should a participants terminate employment prior to becoming fully vested. Forfeited amounts are first used to reduce administrative expenses and any remaining forfeitures are used to Sponsor contributions. At December 31, 2014 and 2013, forfeited nonvested accounts totaled \$0 and \$60, respectively. These accounts can be used to offset administrative expenses or Sponsor contributions. During the year ended December 31, 2014 and 2013, \$60 and \$1,667, respectively, of forfeitures were used to offset administrative fees.

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES:

The following are the significant accounting policies of the Plan:

Basis of accounting—The financial statements of the Plan are prepared using the accrual method of accounting.

Asset valuation and income recognition—Assets are valued at fair value. Fair value is reported by Mid Atlantic Trust Company, the custodian, based on the market value of underlying securities. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. See Note 7 for discussion of fair value measurements.

Net appreciation/depreciation in the fair value of assets represents net realized gains/losses on assets sold during the year and net unrealized gains/losses on assets held at the end of the year. These assets, in general, are exposed to various risks, such as interest rate, credit, and overall market volatility. Due to the level of risk associated with certain assets, 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 statements of net assets available for benefits.

A participant may direct the investment of the portion of their account attributable to deferral and matching contributions. Eleven funds are available, which include equity and balanced funds. Participants may change their investment options at any time.

The individual investments that represent five percent or more of the plan's assets as of December 31, 2014 are as follows:

Reliance Trust Stable Value Fd – MetLife Series 25053 Class O	\$ 122,829
Vanguard Target Retirement Income Fund Investor Shares	\$ 29,842
Vanguard Target Retirement 2010 Fund Investor Shares	\$ 35,275
Vanguard Target Retirement 2020 Fund Investor Shares	\$ 102,723
Vanguard Target Retirement 2030 Fund Investor Shares	\$ 85,158
Brinker Capital Conservative ETF Fund	\$ 85,128
Brinker Capital Moderate ETF Fund	\$ 26,362

During the year ended December 31, 2014, the Plan's assets (including those bought, sold, and held during the period) appreciated by \$19,285. During the year ended December 31, 2013, the Plan's assets (including those bought, sold, and held during the period) appreciated by \$39,421.

Withdrawals and payment of benefits—Withdrawals and benefits are recorded upon distribution.

Administrative expenses—The Sponsor pays all administrative expenses for the Plan, except for transaction fees charged to participant accounts and administrative expenses paid from available forfeited funds.

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

Subsequent events—The Sponsor evaluates events and transactions occurring subsequent to the date of the financial statements for matters requiring recognition or disclosure in the financial statements. The accompanying financial statements considered events through October 12, 2015, the date on which the financial statements were available to be issued.

3. INFORMATION CERTIFIED BY THE CUSTODIAN:

All financial data related to investments used in the preparation of the statements of net assets available for benefits, statements of changes in net assets available for benefits and supplemental schedule of assets (held at end of year) have been certified as to accuracy and completeness by the Plan's custodian, Mid Atlantic Trust Company.

4. TAX STATUS:

The Sponsor adopted a prototype non-standardized profit sharing plan with a cash or deferral arrangement which received a favorable opinion letter from the IRS dated March 31, 2008. While the Sponsor has not obtained its own determination letter on the Plan, management believes that the Plan currently is designed and being operating in compliance with the applicable requirements of the Internal Revenue Code. Therefore, no provision for income taxes has been included in the Plan's financial statements.

5. PLAN TERMINATION:

Although it has not expressed any intent to do so, the Sponsor has the right to terminate the Plan subject to the provisions of ERISA. In the event of Plan termination, all benefits will be distributed to participants and beneficiaries in proportion to their respective account balances.

6. RELATED-PARTY TRANSACTIONS:

Certain plan investments are units of exchange traded funds managed by Mid Atlantic Trust Company, which is the custodian as defined by the Plan and, therefore, these transactions qualified as party-in-interest transactions.

7. FAIR VALUE MEASUREMENTS:

Fair values of the Plan's financial assets measured on a recurring basis at December 31, 2014 and 2013 are as follows:

<u>December 31, 2014</u>	<u>Total</u>	<u>Level 1</u>	<u>Level 2</u>	<u>Level 3</u>
Registered investment companies	<u>\$ 503,510</u>	<u>503,510</u>	<u>-</u>	<u>-</u>
<u>December 31, 2013</u>	<u>Total</u>	<u>Level 1</u>	<u>Level 2</u>	<u>Level 3</u>
Common/collective trust	\$ 115,176	-	115,176	-
Registered investment companies	<u>335,099</u>	<u>335,099</u>	<u>-</u>	<u>-</u>
	<u>\$ 450,275</u>	<u>335,099</u>	<u>115,176</u>	<u>-</u>

Level 1: Quoted prices (unadjusted) in active markets for identical assets or liabilities that an entity has the ability to access as of the measurement date.

Level 2: Significant other observable inputs other than the Level 1 prices, such as quoted prices for similar assets or liabilities, quoted prices in markets that are not active, and other inputs that are observable or can be corroborated by observable market data.

Level 3: Significant unobservable inputs that reflect an entity's own assumptions about the assumptions that market participants would use in pricing an asset or liability.

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.

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

Common/collective trust: Valued at the NAV of units of a bank collective trust. The NAV, as provided by the custodian, is used as a practical expedient to estimate fair value. The NAV is based on the fair value of the underlying investments held by the fund less its liabilities. These securities consist primarily of guaranteed investments contracts, synthetic investment contracts, separate accounts, stable value funds, and affiliated collective investment funds. This practical expedient is not used when it is determined to be probable that the fund will sell the investment for an amount different than the reported NAV. Participant transactions (purchases and sales) may occur daily. Were the Plan to initiate a full redemption of the collective trust, the investment adviser reserves the right to temporarily delay withdrawal from the trust in order to ensure that securities liquidation will be carried out in an orderly business manner.

Investment securities are exposed securities are exposed to various risks such as interest rates, market, credit risks. Due to the level of risk associated with certain investment securities will occur in the near term and that such changes could materially affect the amounts reported on the statement of financial position.

SUPPLEMENTAL SCHEDULE

SENIOR RESOURCE CONNECTION RETIREMENT PLAN

EIN #31-0592759 Plan #002

Schedule H, Part 4i - Schedule of Assets (Held at End of Year)

December 31, 2014

(a)	(b)	(c)	(d)	(e)
		Description of investment including maturity date, rate of interest, collateral, par, or maturity value	Cost	Current Value
	Reliance Trust Stable Value Fd - MetLife Series 25053 Class 0	785.7040 mutual fund shares	**	\$ 122,829
	Vanguard Target Retirement Income Fund Investor Shares	2,311.5140 mutual fund shares	**	29,842
	Vanguard Target Retirement 2010 Fund Investor Shares	1,340.2160 mutual fund shares	**	35,275
	Vanguard Target Retirement 2020 Fund Investor Shares	3,609.3830 mutual fund shares	**	102,723
	Vanguard Target Retirement 2050 Fund Investor Shares	11.0760 mutual fund shares	**	328
	Vanguard Target Retirement 2040 Fund Investor Shares	451.5720 mutual fund shares	**	13,439
	Vanguard Target Retirement 2030 Fund Investor Shares	2,932.4500 mutual fund shares	**	85,158
*	Brinker Capital Conservative ETF Fund	8,015.6610 mutual fund shares	**	86,128
*	Brinker Capital Moderate ETF Fund	2,279.2640 mutual fund shares	**	26,362
*	Brinker Capital Aggressive ETF Fund	71.0870 mutual fund shares	**	713
*	Brinker Capital Aggressive Equity ETF Fund	71.0870 mutual fund shares	**	713
				<u>\$ 503,510</u>

* - Party-in-interest.

** - Cost of asset is not necessary to be disclosed as investment is participant directed.

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
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Part I Annual Report Identification Information	
For calendar plan year 2014 or fiscal plan year beginning <u>01/01/2014</u> and ending <u>12/31/2014</u>	
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 ☒ a single-employer plan; ☐ a DFE (specify) ____ B This return/report is: ☐ the first return/report; ☐ the final return/report; ☐ an amended return/report; ☐ a short plan year return/report (less than 12 months). C If the plan is a collectively-bargained plan, check here. ☐ D Check box if filing under: ☒ Form 5558; ☐ automatic extension; ☐ the DFVC program; ☐ special extension (enter description)

Part II Basic Plan Information—enter all requested information	
1a Name of plan SENIOR RESOURCE CONNECTION RETIREMENT PLAN	1b Three-digit plan number (PN) <u>002</u> 1c Effective date of plan 01/01/2009
2a Plan sponsor's name and address; include room or suite number (employer, if for a single-employer plan) SENIOR RESOURCE CONNECTION 222 SALEM AVENUE DAYTON OH 45406	2b Employer Identification Number (EIN) 31-0592759 2c Plan Sponsor's telephone number 937-223-8246 2d Business code (see instructions) 624100

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		<u>10-7-15</u>	Lisa Garvic
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE
Preparer's name (including firm name, if applicable) and address (include room or suite number) (optional)			Preparer's telephone number (optional)

3a Plan administrator's name and address ☒ Same as Plan Sponsor	3b Administrator's EIN 3c Administrator's telephone number
4 If the name and/or EIN of the plan sponsor has changed since the last return/report filed for this plan, enter the name, EIN and the plan number from the last return/report: a Sponsor's name	4b EIN 4c PN
5 Total number of participants at the beginning of the plan year	5 201
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) 194
a(2) Total number of active participants at the end of the plan year	6a(2) 179
b Retired or separated participants receiving benefits	6b 1
c Other retired or separated participants entitled to future benefits	6c 11
d Subtotal. Add lines 6a(2) , 6b , and 6c	6d 191
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	6e 0
f Total. Add lines 6d and 6e	6f 191
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	6g 120
h Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested	6h 1
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	7
8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions: 2E 2G 2J 2K 2T 3D	
b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristics Codes in the instructions:	

9a Plan funding arrangement (check all that apply)	9b Plan benefit arrangement (check all that apply)
(1) ☐ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor	(1) ☐ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor
10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)	
a Pension Schedules	b General Schedules
(1) ☒ R (Retirement Plan Information)	(1) ☒ H (Financial Information)
(2) ☐ MB (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary	(2) ☐ I (Financial Information - Small Plan)
(3) ☐ SB (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary	(3) ☐ A (Insurance Information)
	(4) ☐ C (Service Provider Information)
	(5) ☐ 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 _____

SENIOR RESOURCE CONNECTION RETIREMENT PLAN

Financial Statements and Supplemental Schedule

December 31, 2014 and 2013

with Independent Auditor's Report

SENIOR RESOURCE CONNECTION RETIREMENT PLAN

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Matthew J. Scarr, CPA LLC

Certified Public Accountant

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INDEPENDENT AUDITOR'S REPORT

To the Plan Administrator of
Senior Resource Connection Retirement Plan

Report on the Financial Statements

I was engaged to audit the accompanying financial statements of Senior Resource Connection Retirement Plan (the "Plan"), which comprise the statements of net assets available for benefits as of December 31, 2014, and the related statements of changes in net assets available for benefits for the year then ended, and the related notes to the financial statements.

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Auditor's Responsibility

My responsibility is to express an opinion on these financial statements based on conducting my audits 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, I was not able to obtain sufficient appropriate audit evidence to provide a basis for an audit opinion.

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Disclaimer of Opinion

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

The form and content of the information included in the financial statements and supplemental schedule, other than that derived from the information certified by the trustee, have been audited by me in accordance with auditing standards generally accepted in the United States of America and, in my 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.

Matthew J. Scarr, CPA LLC

Centerville, Ohio
October 12, 2015

SENIOR RESOURCE CONNECTION RETIREMENT PLAN

Statements of Net Assets Available for Benefits

December 31, 2014 and 2013

	<u>2014</u>	<u>2013</u>
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SENIOR RESOURCE CONNECTION RETIREMENT PLAN

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Years Ended December 31, 2014 and 2013

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	<u>24,163</u>	<u>43,169</u>
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Net increase	53,716	43,076
Net assets available for benefits:		
Beginning of year	<u>450,285</u>	<u>407,209</u>
End of year	<u>\$ 504,001</u>	<u>450,285</u>

See accompanying notes.

SENIOR RESOURCE CONNECTION RETIREMENT PLAN

Notes to Financial Statements

Years Ended December 31, 2014 and 2013

1. DESCRIPTION OF THE PLAN:

The following brief description of the Senior Resource Connection Retirement Plan (the “Plan”) provides only general information. Participants should refer to the Plan document for a more complete description of the Plan’s provisions.

General—The Plan is a defined contribution plan with a profit sharing provision. Employees of Senior Resource Connection (the “Sponsor”), are eligible for entry into the Plan. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA).

Eligibility—Participants may enter the Plan after completing 1,000 hours of service within the twelve months following their date of hire. If a participant does not complete the 1,000 hours within the specified time period, the participant will be subject to a one year service requirement.

Contributions—Participants may contribute a portion of their compensation, subject to certain Internal Revenue Service (“IRS”) limits. Participants who have attained age 50 before the end of the plan year are eligible to make catch-up contributions. Participants are also permitted to make rollover contributions to the Plan of distributions from other qualified plans. Participants direct the investment of their contributions into various investment options offered by the Plan.

The Sponsor may also make discretionary matching contributions and profit sharing contributions to the Plan. The Sponsor did not elect to make either matching or discretionary profit sharing contributions during 2014 and 2013.

Participant accounts—Each participant account is credited with the participant’s contribution, related matching or other employer non-elective contributions, if any, and allocations of the Plan earnings and administrative expenses. The benefit to which a participant is entitled is the amount that can be provided from the participant’s vested account.

Vesting—Participants are immediately vested in their contributions plus earnings thereon. A participant is vested in the employer contribution component of their account (and earnings thereon) after completion of 1,000 hours and three years of service.

Forfeitures—Sponsor contributions are forfeited should a participants terminate employment prior to becoming fully vested. Forfeited amounts are first used to reduce administrative expenses and any remaining forfeitures are used to Sponsor contributions. At December 31, 2014 and 2013, forfeited nonvested accounts totaled \$0 and \$60, respectively. These accounts can be used to offset administrative expenses or Sponsor contributions. During the year ended December 31, 2014 and 2013, \$60 and \$1,667, respectively, of forfeitures were used to offset administrative fees.

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES:

The following are the significant accounting policies of the Plan:

Basis of accounting—The financial statements of the Plan are prepared using the accrual method of accounting.

Asset valuation and income recognition—Assets are valued at fair value. Fair value is reported by Mid Atlantic Trust Company, the custodian, based on the market value of underlying securities. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. See Note 7 for discussion of fair value measurements.

Net appreciation/depreciation in the fair value of assets represents net realized gains/losses on assets sold during the year and net unrealized gains/losses on assets held at the end of the year. These assets, in general, are exposed to various risks, such as interest rate, credit, and overall market volatility. Due to the level of risk associated with certain assets, 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 statements of net assets available for benefits.

A participant may direct the investment of the portion of their account attributable to deferral and matching contributions. Eleven funds are available, which include equity and balanced funds. Participants may change their investment options at any time.

The individual investments that represent five percent or more of the plan's assets as of December 31, 2014 are as follows:

Reliance Trust Stable Value Fd – MetLife Series 25053 Class O	\$ 122,829
Vanguard Target Retirement Income Fund Investor Shares	\$ 29,842
Vanguard Target Retirement 2010 Fund Investor Shares	\$ 35,275
Vanguard Target Retirement 2020 Fund Investor Shares	\$ 102,723
Vanguard Target Retirement 2030 Fund Investor Shares	\$ 85,158
Brinker Capital Conservative ETF Fund	\$ 85,128
Brinker Capital Moderate ETF Fund	\$ 26,362

During the year ended December 31, 2014, the Plan's assets (including those bought, sold, and held during the period) appreciated by \$19,285. During the year ended December 31, 2013, the Plan's assets (including those bought, sold, and held during the period) appreciated by \$39,421.

Withdrawals and payment of benefits—Withdrawals and benefits are recorded upon distribution.

Administrative expenses—The Sponsor pays all administrative expenses for the Plan, except for transaction fees charged to participant accounts and administrative expenses paid from available forfeited funds.

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

Subsequent events—The Sponsor evaluates events and transactions occurring subsequent to the date of the financial statements for matters requiring recognition or disclosure in the financial statements. The accompanying financial statements considered events through October 12, 2015, the date on which the financial statements were available to be issued.

3. INFORMATION CERTIFIED BY THE CUSTODIAN:

All financial data related to investments used in the preparation of the statements of net assets available for benefits, statements of changes in net assets available for benefits and supplemental schedule of assets (held at end of year) have been certified as to accuracy and completeness by the Plan's custodian, Mid Atlantic Trust Company.

4. TAX STATUS:

The Sponsor adopted a prototype non-standardized profit sharing plan with a cash or deferral arrangement which received a favorable opinion letter from the IRS dated March 31, 2008. While the Sponsor has not obtained its own determination letter on the Plan, management believes that the Plan currently is designed and being operating in compliance with the applicable requirements of the Internal Revenue Code. Therefore, no provision for income taxes has been included in the Plan's financial statements.

5. PLAN TERMINATION:

Although it has not expressed any intent to do so, the Sponsor has the right to terminate the Plan subject to the provisions of ERISA. In the event of Plan termination, all benefits will be distributed to participants and beneficiaries in proportion to their respective account balances.

6. RELATED-PARTY TRANSACTIONS:

Certain plan investments are units of exchange traded funds managed by Mid Atlantic Trust Company, which is the custodian as defined by the Plan and, therefore, these transactions qualified as party-in-interest transactions.

7. FAIR VALUE MEASUREMENTS:

Fair values of the Plan's financial assets measured on a recurring basis at December 31, 2014 and 2013 are as follows:

<u>December 31, 2014</u>	<u>Total</u>	<u>Level 1</u>	<u>Level 2</u>	<u>Level 3</u>
Registered investment companies	<u>\$ 503,510</u>	<u>503,510</u>	<u>-</u>	<u>-</u>
<u>December 31, 2013</u>	<u>Total</u>	<u>Level 1</u>	<u>Level 2</u>	<u>Level 3</u>
Common/collective trust	\$ 115,176	-	115,176	-
Registered investment companies	<u>335,099</u>	<u>335,099</u>	<u>-</u>	<u>-</u>
	<u>\$ 450,275</u>	<u>335,099</u>	<u>115,176</u>	<u>-</u>

Level 1: Quoted prices (unadjusted) in active markets for identical assets or liabilities that an entity has the ability to access as of the measurement date.

Level 2: Significant other observable inputs other than the Level 1 prices, such as quoted prices for similar assets or liabilities, quoted prices in markets that are not active, and other inputs that are observable or can be corroborated by observable market data.

Level 3: Significant unobservable inputs that reflect an entity's own assumptions about the assumptions that market participants would use in pricing an asset or liability.

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.

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

Common/collective trust: Valued at the NAV of units of a bank collective trust. The NAV, as provided by the custodian, is used as a practical expedient to estimate fair value. The NAV is based on the fair value of the underlying investments held by the fund less its liabilities. These securities consist primarily of guaranteed investments contracts, synthetic investment contracts, separate accounts, stable value funds, and affiliated collective investment funds. This practical expedient is not used when it is determined to be probable that the fund will sell the investment for an amount different than the reported NAV. Participant transactions (purchases and sales) may occur daily. Were the Plan to initiate a full redemption of the collective trust, the investment adviser reserves the right to temporarily delay withdrawal from the trust in order to ensure that securities liquidation will be carried out in an orderly business manner.

Investment securities are exposed securities are exposed to various risks such as interest rates, market, credit risks. Due to the level of risk associated with certain investment securities will occur in the near term and that such changes could materially affect the amounts reported on the statement of financial position.

SUPPLEMENTAL SCHEDULE

SENIOR RESOURCE CONNECTION RETIREMENT PLAN

EIN #31-0592759 Plan #002

Schedule H, Part 4i - Schedule of Assets (Held at End of Year)

December 31, 2014

(a)	(b)	(c)	(d)	(e)
		Description of investment including maturity date, rate of interest, collateral, par, or maturity value	Cost	Current Value
	Reliance Trust Stable Value Fd - MetLife Series 25053 Class 0	785.7040 mutual fund shares	**	\$ 122,829
	Vanguard Target Retirement Income Fund Investor Shares	2,311.5140 mutual fund shares	**	29,842
	Vanguard Target Retirement 2010 Fund Investor Shares	1,340.2160 mutual fund shares	**	35,275
	Vanguard Target Retirement 2020 Fund Investor Shares	3,609.3830 mutual fund shares	**	102,723
	Vanguard Target Retirement 2050 Fund Investor Shares	11.0760 mutual fund shares	**	328
	Vanguard Target Retirement 2040 Fund Investor Shares	451.5720 mutual fund shares	**	13,439
	Vanguard Target Retirement 2030 Fund Investor Shares	2,932.4500 mutual fund shares	**	85,158
*	Brinker Capital Conservative ETF Fund	8,015.6610 mutual fund shares	**	86,128
*	Brinker Capital Moderate ETF Fund	2,279.2640 mutual fund shares	**	26,362
*	Brinker Capital Aggressive ETF Fund	71.0870 mutual fund shares	**	713
*	Brinker Capital Aggressive Equity ETF Fund	71.0870 mutual fund shares	**	713
				<u>\$ 503,510</u>

* - Party-in-interest.

** - Cost of asset is not necessary to be disclosed as investment is participant directed.