

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 <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 COADVANTAGE RESOURCES, INC. RETIREMENT SAVINGS 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;">333</td> </tr> <tr> <td colspan="2">1c Effective date of plan 01/01/1998</td> </tr> </table>	1b Three-digit plan number (PN) ▶	333	1c Effective date of plan 01/01/1998	
1b Three-digit plan number (PN) ▶	333				
1c Effective date of plan 01/01/1998					
2a Plan sponsor's name and address; include room or suite number (employer, if for a single-employer plan) COADVANTAGE RESOURCES, INC. 135 W. CENTRAL BLVD. STE 600 ORLANDO, FL 32801	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>2b Employer Identification Number (EIN) 59-3434670</td> </tr> <tr> <td>2c Plan Sponsor's telephone number 407-447-1826</td> </tr> <tr> <td>2d Business code (see instructions) 561300</td> </tr> </table>	2b Employer Identification Number (EIN) 59-3434670	2c Plan Sponsor's telephone number 407-447-1826	2d Business code (see instructions) 561300	
2b Employer Identification Number (EIN) 59-3434670					
2c Plan Sponsor's telephone number 407-447-1826					
2d Business code (see instructions) 561300					

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.	10/15/2015	JEFF SJOBECK, CFO
	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:		4b EIN	
a Sponsor's name		4c PN	
5 Total number of participants at the beginning of the plan year		5	7556
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)	5954
a(2) Total number of active participants at the end of the plan year		6a(2)	6915
b Retired or separated participants receiving benefits		6b	0
c Other retired or separated participants entitled to future benefits.....		6c	1175
d Subtotal. Add lines 6a(2) , 6b , and 6c		6d	8090
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.		6e	0
f Total. Add lines 6d and 6e		6f	8090
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)		6g	3406
h Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested.....		6h	32
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item).....		7	
8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions: 2E 2F 2G 2J 2K 3D 2T			
b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristics Codes in the instructions:			
9a Plan funding arrangement (check all that apply)		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) ☒ Trust		(3) ☒ 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		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) ☒ <u>1</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 A (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Insurance Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500. ▶ Insurance companies are required to provide the information pursuant to ERISA section 103(a)(2).	OMB No. 1210-0110 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 COADVANTAGE RESOURCES, INC. RETIREMENT SAVINGS PLAN	B Three-digit plan number (PN) ▶ 333
C Plan sponsor's name as shown on line 2a of Form 5500 COADVANTAGE RESOURCES, INC.	D Employer Identification Number (EIN) 59-3434670

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

1 Coverage Information:

(a) Name of insurance carrier
TRANSAMERICA FINANCIAL LIFE INSURANCE CO

(b) EIN	(c) NAIC code	(d) Contract or identification number	(e) Approximate number of persons covered at end of policy or contract year	Policy or contract year	
				(f) From	(g) To
36-6071399	70688	932022-000	3406	01/01/2014	12/31/2014

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

(a) Total amount of commissions paid	(b) Total amount of fees paid
52558	

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

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid
MERRILL LYNCH LIFE AGENCY INC G SCOTT BAIRD 4804 DEER LAKE DRIVE E 5TH FLOOR JACKSONVILLE, FL 32246

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
52558			3

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

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

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

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

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

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

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

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

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

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

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

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

Part II Investment and Annuity Contract Information

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

4 Current value of plan's interest under this contract in the general account at year end.....	4	
5 Current value of plan's interest under this contract in separate accounts at year end	5	82526819

6 Contracts With Allocated Funds:**a** State the basis of premium rates ▶

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

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

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

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

b Balance at the end of the previous year.....	7b	10579725
---	-----------	----------

c Additions: (1) Contributions deposited during the year.....	7c(1)	815645	
(2) Dividends and credits	7c(2)	7	
(3) Interest credited during the year	7c(3)	153652	
(4) Transferred from separate account.....	7c(4)	4689489	
(5) Other (specify below)	7c(5)	1190091	
▶ FORF, LOAN, EBA			

(6) Total additions.....	7c(6)	6848884
--------------------------	--------------	---------

d Total of balance and additions (add lines 7b and 7c(6))	7d	17428609
---	-----------	----------

e Deductions:

(1) Disbursed from fund to pay benefits or purchase annuities during year	7e(1)	4539564	
(2) Administration charge made by carrier	7e(2)	9778	
(3) Transferred to separate account.....	7e(3)	3950458	
(4) Other (specify below)	7e(4)	215513	
▶ FEE, FORF, EBA			

(5) Total deductions.....	7e(5)	8715313
---------------------------	--------------	---------

f Balance at the end of the current year (subtract line 7e(5) from line 7d)	7f	8713296
---	-----------	---------

Part III Welfare Benefit Contract Information

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

8 Benefit and contract type (check all applicable boxes)

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

9 Experience-rated contracts:

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

10 Nonexperience-rated contracts:

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

Specify nature of costs ▶

Part IV Provision of Information

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

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

SCHEDULE C (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Service Provider 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 <u>COADVANTAGE RESOURCES, INC. RETIREMENT SAVINGS PLAN</u>	B Three-digit plan number (PN) ▶ <u>333</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>COADVANTAGE RESOURCES, INC.</u>	D Employer Identification Number (EIN) <u>59-3434670</u>

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
TRANSAMERICA FINANCIAL LIFE INSURAN

36-6071399

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

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

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

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

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

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

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

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

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

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

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

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)

TRANSAMERICA FINANCIAL LIFE INSURAN

36-6071399

(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 37 52 62 64 67	RECORDKEEPER	277021	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☐ No ☒

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

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

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

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

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

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

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

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

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

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

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

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

Part III **Termination Information on Accountants and Enrolled Actuaries (see instructions)**
(complete as many entries as needed)

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE D (Form 5500) 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 <u>COADVANTAGE RESOURCES, INC. RETIREMENT SAVINGS PLAN</u>	B Three-digit plan number (PN) ► <u>333</u>
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 <u>COADVANTAGE RESOURCES, INC.</u>	D Employer Identification Number (EIN) <u>59-3434670</u>

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

a Name of MTIA, CCT, PSA, or 103-12 IE: <u>COLUMBIA INTERMEDIATE BOND INV</u>			
b Name of sponsor of entity listed in (a): <u>TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY</u>			
c EIN-PN <u>36-6071399-304</u>	d Entity code <u>P</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>1346563</u>	
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>MORGAN STANLEY GROWTH RET ACCT</u>			
b Name of sponsor of entity listed in (a): <u>TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY</u>			
c EIN-PN <u>36-6071399-305</u>	d Entity code <u>P</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>1269489</u>	
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>MORGAN STANLEY GROWTH OPPORTUN</u>			
b Name of sponsor of entity listed in (a): <u>TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY</u>			
c EIN-PN <u>36-6071399-306</u>	d Entity code <u>P</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>0</u>	
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>WMC QUALITY GROWTH EQUITY RET</u>			
b Name of sponsor of entity listed in (a): <u>TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY</u>			
c EIN-PN <u>36-6071399-307</u>	d Entity code <u>P</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>0</u>	
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>WMC CORE EQUITY RET ACCT</u>			
b Name of sponsor of entity listed in (a): <u>TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY</u>			
c EIN-PN <u>36-6071399-309</u>	d Entity code <u>P</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>0</u>	
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>AEGON BALANCED RET ACCT</u>			
b Name of sponsor of entity listed in (a): <u>TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY</u>			
c EIN-PN <u>36-6071399-310</u>	d Entity code <u>P</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>0</u>	
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>TRANSAMERICA PARTNERS MID GROW</u>			
b Name of sponsor of entity listed in (a): <u>TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY</u>			
c EIN-PN <u>36-6071399-493</u>	d Entity code <u>P</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>0</u>	

a Name of MTIA, CCT, PSA, or 103-12 IE: TRANSAMERICA PARTNERS MID VALU			
b Name of sponsor of entity listed in (a): TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY			
c EIN-PN 36-6071399-495	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	1498521
a Name of MTIA, CCT, PSA, or 103-12 IE: TRANSAMERICA PARTNERS HIGH YIE			
b Name of sponsor of entity listed in (a): TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY			
c EIN-PN 36-6071399-102	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	1299373
a Name of MTIA, CCT, PSA, or 103-12 IE: TEMPLETON FOREIGN RET ACCT			
b Name of sponsor of entity listed in (a): TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY			
c EIN-PN 36-6071399-106	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	435812
a Name of MTIA, CCT, PSA, or 103-12 IE: LOOMIS SAYLES BOND RET ACCT			
b Name of sponsor of entity listed in (a): TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY			
c EIN-PN 36-6071399-107	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	1253599
a Name of MTIA, CCT, PSA, or 103-12 IE: CALVERT EQUITY PORTFOLIO INV A			
b Name of sponsor of entity listed in (a): TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY			
c EIN-PN 36-6071399-109	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	55901
a Name of MTIA, CCT, PSA, or 103-12 IE: FRANKLIN BIOTECHNOLOGY DISCOVE			
b Name of sponsor of entity listed in (a): TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY			
c EIN-PN 36-6071399-110	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	3372023
a Name of MTIA, CCT, PSA, or 103-12 IE: INVESCO SMALL CAP GROWTH INV A			
b Name of sponsor of entity listed in (a): TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY			
c EIN-PN 36-6071399-114	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	904761
a Name of MTIA, CCT, PSA, or 103-12 IE: FIDELITY ADVISOR SMALL CAP INV			
b Name of sponsor of entity listed in (a): TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY			
c EIN-PN 36-6071399-115	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	777750
a Name of MTIA, CCT, PSA, or 103-12 IE: TRANSAMERICA PARTNERS STOCK IN			
b Name of sponsor of entity listed in (a): TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY			
c EIN-PN 36-6071399-139	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	2211961
a Name of MTIA, CCT, PSA, or 103-12 IE: AMERICAN FUNDS FUNDAMENTAL INV			
b Name of sponsor of entity listed in (a): TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY			
c EIN-PN 36-6071399-141	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	2054893

a Name of MTIA, CCT, PSA, or 103-12 IE: AMERICAN FUNDS AMCAP INV ACCT		
b Name of sponsor of entity listed in (a): TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY		
c EIN-PN 36-6071399-146	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 2089842
a Name of MTIA, CCT, PSA, or 103-12 IE: AMERICAN FUNDS GROWTH FUND OF		
b Name of sponsor of entity listed in (a): TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY		
c EIN-PN 36-6071399-147	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 3377838
a Name of MTIA, CCT, PSA, or 103-12 IE: AMERICAN FUNDS NEW PERSPECTIVE		
b Name of sponsor of entity listed in (a): TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY		
c EIN-PN 36-6071399-155	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 1113148
a Name of MTIA, CCT, PSA, or 103-12 IE: AMERICAN FUNDS BALANCED INV AC		
b Name of sponsor of entity listed in (a): TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY		
c EIN-PN 36-6071399-158	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 2522785
a Name of MTIA, CCT, PSA, or 103-12 IE: SSGA RUSSELL SMALL CAP INDEX R		
b Name of sponsor of entity listed in (a): TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY		
c EIN-PN 36-6071399-437	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 1048176
a Name of MTIA, CCT, PSA, or 103-12 IE: SSGA INTERNATIONAL INDEX RET A		
b Name of sponsor of entity listed in (a): TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY		
c EIN-PN 36-6071399-004	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 556392
a Name of MTIA, CCT, PSA, or 103-12 IE: SSGA S&P MID CAP INDEX RET ACC		
b Name of sponsor of entity listed in (a): TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY		
c EIN-PN 36-6071399-438	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 1065400
a Name of MTIA, CCT, PSA, or 103-12 IE: SSGA U.S. BOND INDEX RET ACCT		
b Name of sponsor of entity listed in (a): TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY		
c EIN-PN 36-6071399-416	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 461520
a Name of MTIA, CCT, PSA, or 103-12 IE: AMERICAN CENTURY INFLATION-ADJ		
b Name of sponsor of entity listed in (a): TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY		
c EIN-PN 36-6071399-440	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 268653
a Name of MTIA, CCT, PSA, or 103-12 IE: FRANKLIN UTILITIES INV ACCT		
b Name of sponsor of entity listed in (a): TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY		
c EIN-PN 36-6071399-354	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 603271

a Name of MTIA, CCT, PSA, or 103-12 IE: SSGA RUSSELL SMALL CAP VALUE I		
b Name of sponsor of entity listed in (a): TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY		
c EIN-PN 36-6071399-355	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 515720
a Name of MTIA, CCT, PSA, or 103-12 IE: VANGUARD TARGET RETIREMENT INC		
b Name of sponsor of entity listed in (a): TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY		
c EIN-PN 36-6071399-417	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 1067006
a Name of MTIA, CCT, PSA, or 103-12 IE: VANGUARD TARGET RETIREMENT 201		
b Name of sponsor of entity listed in (a): TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY		
c EIN-PN 36-6071399-356	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 2358696
a Name of MTIA, CCT, PSA, or 103-12 IE: VANGUARD TARGET RETIREMENT 202		
b Name of sponsor of entity listed in (a): TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY		
c EIN-PN 36-6071399-018	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 5497254
a Name of MTIA, CCT, PSA, or 103-12 IE: VANGUARD TARGET RETIREMENT 203		
b Name of sponsor of entity listed in (a): TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY		
c EIN-PN 36-6071399-019	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 5797116
a Name of MTIA, CCT, PSA, or 103-12 IE: VANGUARD TARGET RETIREMENT 204		
b Name of sponsor of entity listed in (a): TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY		
c EIN-PN 36-6071399-295	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 2421021
a Name of MTIA, CCT, PSA, or 103-12 IE: OPPENHEIMER GLOBAL RET ACCT		
b Name of sponsor of entity listed in (a): TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY		
c EIN-PN 36-6071399-035	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 1179562
a Name of MTIA, CCT, PSA, or 103-12 IE: FRANKLIN MUTUAL FINANCIAL SERV		
b Name of sponsor of entity listed in (a): TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY		
c EIN-PN 36-6071399-043	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 80289
a Name of MTIA, CCT, PSA, or 103-12 IE: NUVEEN REAL ESTATE SECURITIES		
b Name of sponsor of entity listed in (a): TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY		
c EIN-PN 36-6071399-083	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 1027551
a Name of MTIA, CCT, PSA, or 103-12 IE: FRANKLIN SMALL CAP VALUE RET A		
b Name of sponsor of entity listed in (a): TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY		
c EIN-PN 36-6071399-086	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 1055361

a Name of MTIA, CCT, PSA, or 103-12 IE: IVY SCIENCE & TECHNOLOGY INV A		
b Name of sponsor of entity listed in (a): TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY		
c EIN-PN 36-6071399-090	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 947874
a Name of MTIA, CCT, PSA, or 103-12 IE: JANUS OVERSEAS RET ACCT		
b Name of sponsor of entity listed in (a): TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY		
c EIN-PN 36-6071399-091	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0
a Name of MTIA, CCT, PSA, or 103-12 IE: OPPENHEIMER INTERNATIONAL BOND		
b Name of sponsor of entity listed in (a): TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY		
c EIN-PN 36-6071399-097	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0
a Name of MTIA, CCT, PSA, or 103-12 IE: VANGUARD SMALL-CAP VALUE INDEX		
b Name of sponsor of entity listed in (a): TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY		
c EIN-PN 36-6071399-133	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0
a Name of MTIA, CCT, PSA, or 103-12 IE: VANGUARD TARGET RETIREMENT 201		
b Name of sponsor of entity listed in (a): TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY		
c EIN-PN 36-6071399-134	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 1239275
a Name of MTIA, CCT, PSA, or 103-12 IE: VANGUARD TARGET RETIREMENT 202		
b Name of sponsor of entity listed in (a): TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY		
c EIN-PN 36-6071399-135	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 5071793
a Name of MTIA, CCT, PSA, or 103-12 IE: VANGUARD TARGET RETIREMENT 203		
b Name of sponsor of entity listed in (a): TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY		
c EIN-PN 36-6071399-163	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 7086688
a Name of MTIA, CCT, PSA, or 103-12 IE: VANGUARD TARGET RETIREMENT 204		
b Name of sponsor of entity listed in (a): TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY		
c EIN-PN 36-6071399-164	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 3351008
a Name of MTIA, CCT, PSA, or 103-12 IE: VANGUARD TARGET RETIREMENT 205		
b Name of sponsor of entity listed in (a): TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY		
c EIN-PN 36-6071399-165	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 960575
a Name of MTIA, CCT, PSA, or 103-12 IE: VANGUARD TOTAL STOCK MARKET IN		
b Name of sponsor of entity listed in (a): TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY		
c EIN-PN 36-6071399-166	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 756963

a Name of MTIA, CCT, PSA, or 103-12 IE: OPPENHEIMER INTERNATIONAL GROW		
b Name of sponsor of entity listed in (a): TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY		
c EIN-PN 36-6071399-168	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 1218211
a Name of MTIA, CCT, PSA, or 103-12 IE: SSGA EMERGING MARKETS INDEX RE		
b Name of sponsor of entity listed in (a): TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY		
c EIN-PN 36-6071399-169	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 301433
a Name of MTIA, CCT, PSA, or 103-12 IE: SSGA RUSSELL LARGE CAP VALUE I		
b Name of sponsor of entity listed in (a): TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY		
c EIN-PN 36-6071399-171	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 351651
a Name of MTIA, CCT, PSA, or 103-12 IE: SSGA RUSSELL SMALL CAP GROWTH		
b Name of sponsor of entity listed in (a): TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY		
c EIN-PN 36-6071399-172	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 20261
a Name of MTIA, CCT, PSA, or 103-12 IE: SSGA RUSSELL LARGE CAP GROWTH		
b Name of sponsor of entity listed in (a): TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY		
c EIN-PN 36-6071399-173	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 374671
a Name of MTIA, CCT, PSA, or 103-12 IE: COLUMBIA MARSICO 21ST CENTURY		
b Name of sponsor of entity listed in (a): TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY		
c EIN-PN 36-6071399-174	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0
a Name of MTIA, CCT, PSA, or 103-12 IE: THORNBURG INTERNATIONAL VALUE		
b Name of sponsor of entity listed in (a): TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY		
c EIN-PN 36-6071399-210	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0
a Name of MTIA, CCT, PSA, or 103-12 IE: BLACKROCK EQUITY DIVIDEND RET		
b Name of sponsor of entity listed in (a): TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY		
c EIN-PN 36-6071399-236	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 2072666
a Name of MTIA, CCT, PSA, or 103-12 IE: INVESCO MID CAP CORE EQUITY RE		
b Name of sponsor of entity listed in (a): TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY		
c EIN-PN 36-6071399-241	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0
a Name of MTIA, CCT, PSA, or 103-12 IE: WELLS FARGO ADVANTAGE PRECIOUS		
b Name of sponsor of entity listed in (a): TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY		
c EIN-PN 36-6071399-272	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 241893

a Name of MTIA, CCT, PSA, or 103-12 IE: RIDGEWORTH MID-CAP VALUE EQUIT			
b Name of sponsor of entity listed in (a): TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY			
c EIN-PN 36-6071399-339	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	1055706
a Name of MTIA, CCT, PSA, or 103-12 IE: NEUBERGER BERMAN GENESIS RET A			
b Name of sponsor of entity listed in (a): TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY			
c EIN-PN 36-6071399-348	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	361397
a Name of MTIA, CCT, PSA, or 103-12 IE: TEMPLETON GLOBAL BOND RET ACCT			
b Name of sponsor of entity listed in (a): TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY			
c EIN-PN 36-6071399-350	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	412273
a Name of MTIA, CCT, PSA, or 103-12 IE: MANNING & NAPIER PRO-MIX CONSE			
b Name of sponsor of entity listed in (a): TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY			
c EIN-PN 36-6071399-385	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	15978
a Name of MTIA, CCT, PSA, or 103-12 IE: MANNING & NAPIER PRO-MIX EXTEN			
b Name of sponsor of entity listed in (a): TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY			
c EIN-PN 36-6071399-386	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	1573
a Name of MTIA, CCT, PSA, or 103-12 IE: MANNING & NAPIER PRO-MIX MAXIM			
b Name of sponsor of entity listed in (a): TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY			
c EIN-PN 36-6071399-387	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	36967
a Name of MTIA, CCT, PSA, or 103-12 IE: MANNING & NAPIER PRO-MIX MODER			
b Name of sponsor of entity listed in (a): TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY			
c EIN-PN 36-6071399-388	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	9549
a Name of MTIA, CCT, PSA, or 103-12 IE: RIDGEWORTH LARGE CAP VALUE EQU			
b Name of sponsor of entity listed in (a): TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY			
c EIN-PN 36-6071399-477	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	1547524
a Name of MTIA, CCT, PSA, or 103-12 IE: WELLS FARGO ADVANTAGE GOVERNME			
b Name of sponsor of entity listed in (a): TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY			
c EIN-PN 36-6071399-507	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	884949
a Name of MTIA, CCT, PSA, or 103-12 IE: CLEARBRIDGE MID CAP CORE RET A			
b Name of sponsor of entity listed in (a): TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY			
c EIN-PN 36-6071399-379	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	1045219

a Name of MTIA, CCT, PSA, or 103-12 IE: VANGUARD TARGET RETIREMENT 205**b** Name of sponsor of entity listed in (a): TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY

c EIN-PN 36-6071399-505	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 422569
--------------------------------	------------------------	--

a Name of MTIA, CCT, PSA, or 103-12 IE: OAKMARK INTERNATIONAL RET ACCT**b** Name of sponsor of entity listed in (a): TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY

c EIN-PN 36-6071399-539	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 604756
--------------------------------	------------------------	--

a Name of MTIA, CCT, PSA, or 103-12 IE: WELLS FARGO ADVANTAGE DISCOVER**b** Name of sponsor of entity listed in (a): TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY

c EIN-PN 36-6071399-546	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 1546313
--------------------------------	------------------------	---

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 <u>01/01/2014</u> and ending <u>12/31/2014</u>		
A Name of plan <u>COADVANTAGE RESOURCES, INC. RETIREMENT SAVINGS PLAN</u>		B Three-digit plan number (PN) ► <u>333</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>COADVANTAGE RESOURCES, INC.</u>		D Employer Identification Number (EIN) <u>59-3434670</u>

Part I	Asset and Liability Statement		(a) Beginning of Year	(b) End of Year
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	Total noninterest-bearing cash	1a		
b	Receivables (less allowance for doubtful accounts):			
	(1) Employer contributions.....	1b(1)	30585	
	(2) Participant contributions.....	1b(2)	113876	
	(3) Other.....	1b(3)		
c	General investments:			
	(1) Interest-bearing cash (include money market accounts & certificates of deposit).....	1c(1)		
	(2) U.S. Government securities	1c(2)		
	(3) Corporate debt instruments (other than employer securities):			
	(A) Preferred	1c(3)(A)		
	(B) All other	1c(3)(B)		
	(4) Corporate stocks (other than employer securities):			
	(A) Preferred	1c(4)(A)		
	(B) Common.....	1c(4)(B)		
	(5) Partnership/joint venture interests	1c(5)		
	(6) Real estate (other than employer real property).....	1c(6)		
	(7) Loans (other than to participants)	1c(7)		
	(8) Participant loans.....	1c(8)	2573147	2766268
	(9) Value of interest in common/collective trusts	1c(9)		
	(10) Value of interest in pooled separate accounts	1c(10)	74378897	82526819
	(11) Value of interest in master trust investment accounts	1c(11)		
	(12) Value of interest in 103-12 investment entities.....	1c(12)		
	(13) Value of interest in registered investment companies (e.g., mutual funds).....	1c(13)		
	(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)	10579725	8713296
	(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	87676230	94006383

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		

Net Assets

l Net assets (subtract line 1k from line 1f)	1l	87676230	94006383
---	-----------	----------	----------

Part II Income and Expense Statement

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

Income**a Contributions:**

		(a) Amount	(b) Total
(1) Received or receivable in cash from: (A) Employers	2a(1)(A)	2258383	
(B) Participants	2a(1)(B)	9314842	
(C) Others (including rollovers)	2a(1)(C)	1335663	
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		12908888

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)	94898	
(F) Other	2b(1)(F)		
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		94898

(2) Dividends: (A) Preferred stock	2b(2)(A)		
(B) Common stock	2b(2)(B)		
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)		
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		

(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)		

(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)		

		(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)		5396549
(8) Net investment gain (loss) from master trust investment accounts.....	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities.....	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds).....	2b(10)		
c Other income.....	2c		165583
d Total income. Add all income amounts in column (b) and enter total.....	2d		18565918

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers.....	2e(1)	24869602	
(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)		24869602
f Corrective distributions (see instructions).....	2f		9890
g Certain deemed distributions of participant loans (see instructions).....	2g		
h Interest expense.....	2h		
i Administrative expenses: (1) Professional fees.....	2i(1)		
(2) Contract administrator fees.....	2i(2)	273344	
(3) Investment advisory and management fees.....	2i(3)		
(4) Other.....	2i(4)		
(5) Total administrative expenses. Add lines 2i(1) through (4).....	2i(5)		273344
j Total expenses. Add all expense amounts in column (b) and enter total.....	2j		25152836

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d.....	2k		-6586918
l Transfers of assets:			
(1) To this plan.....	2l(1)		12917071
(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: VESTAL & WILER

(2) EIN: 59-3198021

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	
4c			
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	
4d			
e Was this plan covered by a fidelity bond?	X		500000
4e			
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	
4f			
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	
4g			
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	
4h			
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		
4i			
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	
4j			
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	
4k			
l Has the plan failed to provide any benefit when due under the plan?.....		X	
4l			
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)		X	
4m			
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 <u>COADVANTAGE RESOURCES, INC. RETIREMENT SAVINGS PLAN</u>	B Three-digit plan number (PN) ▶ <u>333</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>COADVANTAGE RESOURCES, INC.</u>	D Employer Identification Number (EIN) <u>59-3434670</u>

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

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

1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions.....	1
2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits): EIN(s): <u>42-1445542</u>	
Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.	
3 Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year.....	3

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

4 Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)?.....	☐ Yes	☐ No	☐ N/A
If the plan is a defined benefit plan, go to line 8.			
5 If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. Date: Month _____ Day _____ Year _____ If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.			
6 a Enter the minimum required contribution for this plan year (include any prior year accumulated funding deficiency not waived).....	6a		
b Enter the amount contributed by the employer to the plan for this plan year.....	6b		
c Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount)	6c		
If you completed line 6c, skip lines 8 and 9.			
7 Will the minimum funding amount reported on line 6c be met by the funding deadline?.....	☐ Yes	☐ No	☐ N/A
8 If a change in actuarial cost method was made for this plan year pursuant to a revenue procedure or other authority providing automatic approval for the change or a class ruling letter, does the plan sponsor or plan administrator agree with the change?.....	☐ Yes	☐ No	☐ N/A

Part III	Amendments
-----------------	-------------------

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): _____



**CO-ADVANTAGE RESOURCES, INC.
RETIREMENT SAVINGS PLAN**

FINANCIAL STATEMENTS
AND SUPPLEMENTAL SCHEDULE

WITH INDEPENDENT AUDITOR'S REPORT

December 31, 2014 and 2013

CONTENTS

	<i>Page</i>
INDEPENDENT AUDITOR'S REPORT	1
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS	3
STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS	4
NOTES TO FINANCIAL STATEMENTS	5
<u>SUPPLEMENTAL SCHEDULE:</u>	
SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)	14



INDEPENDENT AUDITOR'S REPORT

Co-Advantage Resources, Inc.
Retirement Savings Plan
Orlando, Florida

Report on the Financial Statements

We were engaged to audit the accompanying financial statements of the Co-Advantage Resources, Inc. Retirement Savings Plan (the Plan) which comprise the statements of net assets available for benefits as of December 31, 2014 and 2013, and the related statements of changes in net assets available for benefits for the years then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

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

Auditor's Responsibility

Our responsibility is to express an opinion on these financial statements based on conducting the 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, 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 (DOL'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 Transamerica Financial Life Insurance Company (Transamerica), except for comparing such information with the related information included in the financial statements. We have been informed by the plan administrator that Transamerica holds the Plan's investment assets and executes investment transactions. The plan administrator has obtained certifications from Transamerica as of and for the years ended December 31, 2014 and 2013, that the information provided to the plan administrator by Transamerica 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.

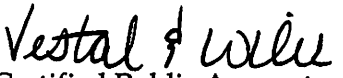
INDEPENDENT AUDITOR'S REPORT - Continued

Other Matter

The supplemental Schedule H, Line 4i, Schedule of Assets (Held at End of Year) as of December 31, 2014 is required by the DOL's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 and is presented for the purpose of additional analysis and is not a required part of the financial statements. Because of the significance of the matter described in the Basis for Disclaimer of Opinion paragraph, we do not express an opinion on the supplemental schedule.

Report on Form and Content in Compliance With the DOL'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 Transamerica, 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 DOL's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974.


Certified Public Accountants

October 15, 2015

CO-ADVANTAGE RESOURCES, INC.
RETIREMENT SAVINGS PLAN

STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS

December 31, 2014 and 2013

ASSETS

	2014	2013
INVESTMENTS, at fair value:		
Insurance company general account	\$ 8,713,296	\$ 10,579,725
Pooled separate accounts	82,526,819	74,378,897
TOTAL INVESTMENTS	91,240,115	84,958,622
RECEIVABLES:		
Participant contributions	158,671	113,876
Employer contributions	210,489	30,585
Notes receivable from participants	2,766,268	2,573,147
TOTAL RECEIVABLES	3,135,428	2,717,608
NET ASSETS AVAILABLE FOR BENEFITS	\$ 94,375,543	\$ 87,676,230

See notes to financial statements.

CO-ADVANTAGE RESOURCES, INC.
RETIREMENT SAVINGS PLAN

STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS

For the Years Ended December 31, 2014 and 2013

	2014	2013
ADDITIONS TO NET ASSETS ATTRIBUTED TO:		
Net appreciation in fair value of investments	\$ 5,545,528	\$ 11,959,014
Other income	5,959	-
Total investment income	5,551,487	11,959,014
Interest income on notes receivable from participants	105,543	113,672
Contributions:		
Participant	9,473,513	8,159,142
Participant rollover	1,335,663	1,173,990
Employer	2,468,872	1,866,835
Total contributions	13,278,048	11,199,967
TOTAL ADDITIONS	18,935,078	23,272,653
DEDUCTIONS FROM NET ASSETS ATTRIBUTED TO:		
Benefits paid to participants	24,879,492	7,897,282
Administrative expenses	273,344	222,624
TOTAL DEDUCTIONS	25,152,836	8,119,906
NET INCREASE (DECREASE)	(6,217,758)	15,152,747
TRANSFERS IN	12,917,071	16,309,873
TRANSFERS OUT	-	(5,392,129)
NET ASSETS AVAILABLE FOR BENEFITS -		
Beginning of year	87,676,230	61,605,739
NET ASSETS AVAILABLE FOR BENEFITS -		
End of year	\$ 94,375,543	\$ 87,676,230

See notes to financial statements.

CO-ADVANTAGE RESOURCES, INC.
RETIREMENT SAVINGS PLAN

NOTES TO FINANCIAL STATEMENTS

For the Years Ended December 31, 2014 and 2013

NOTE 1 PLAN DESCRIPTION

The following description of the Co-Advantage Resources, Inc. Retirement Savings Plan (the Plan) provides only general information. Participants should refer to the Plan agreement for a more complete description of the Plan's provisions.

General - The Plan is a multiple employer defined contribution plan covering eligible employees of Co-Advantage Resources, Inc. (the Principal Participating Employer) and Adopting Employers. Employees are eligible to participate in the Plan based on elections made by the Adopting Employers. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA). The Plan's Investment Committee is responsible for oversight of the Plan, determining the appropriateness of the Plan's investment offerings and monitoring investment performance.

Contributions - Each year, participants may contribute an amount of annual compensation as elected by their Adopting Employer. Participants who have attained age 50 before the end of the Plan year are eligible to make catch-up contributions. Participants may also contribute amounts representing distributions from other qualified defined benefit or defined contribution plans (rollover). Participants direct the investment of their contributions into various investment options offered by the Plan. Each Adopting Employer elects the level of the matching and profit-sharing contributions. Contributions are subject to certain Internal Revenue Service (IRS) limitations.

Participant Accounts - Each participant's account is credited with the participant's contributions and their Adopting Employer's matching contributions, as well as allocations of their Adopting Employer's profit sharing contribution and Plan earnings. Participant accounts are charged with an allocation of administrative expenses that are paid by the Plan. Allocations are based on participant earnings, account balances, or specific participant transactions, as defined. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

Vesting - Participants are immediately vested in their contributions and their Adopting Employer's Safe Harbor contributions, if applicable, plus actual earnings thereon. Vesting in the remainder of their account is based on years of continuous service. A participant generally does not begin to vest until year two (20%) and increases ratably until fully vested in year six.

Notes Receivable From Participants - Participants may borrow from their fund accounts a minimum of \$1,000 up to a maximum equal to the lesser of \$50,000 or 50% of their vested account balance. The loans are secured by the balance in the participant's account. The loan interest rate, determined daily, is generally set at the prime rate plus 1.00%. Principal and interest is paid ratably through regular payroll deductions.

CO-ADVANTAGE RESOURCES, INC.
RETIREMENT SAVINGS PLAN

NOTES TO FINANCIAL STATEMENTS

For the Years Ended December 31, 2014 and 2013

NOTE 1 PLAN DESCRIPTION – Continued

Payment of Benefits – Upon termination of service, a participant may receive the value of the vested interest in his or her account as a lump-sum distribution. Benefit payments for the years ended December 31, 2014 and 2013, include payments of approximately \$10,000 and \$288,000, respectively, made to certain active participants to return to them excess deferral contributions as required to satisfy the relevant nondiscrimination provisions of the Plan for the prior years.

Forfeited Accounts – At December 31, 2014 and 2013, forfeited nonvested accounts totaled approximately \$177,000 and \$152,000, respectively. These accounts will be used to pay administrative expenses or reduce future employer contributions. During 2014 and 2013, the Plan used approximately \$18,000 and \$48,000, respectively, from forfeited nonvested accounts to pay administrative expenses and reduce employer contributions.

NOTE 2 SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

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

Investment contracts held by a defined contribution plan are required to be reported at fair value. However, contract value is the relevant measurement attribute for that portion of the net assets available for benefits of a defined contribution plan attributable to fully benefit-responsive investment contracts. Contract value is the amount participants would receive if they were to initiate permitted transactions under the terms of the Plan. The statements of net assets available for benefits present the fair value of the investment contract which is equivalent to contract value. The statements of changes in net assets available for benefits are prepared using the contract value basis for fully benefit-responsive investment contracts.

Use of Estimates – The preparation of the financial statements in conformity with accounting principles generally accepted in the United States of America (U.S. GAAP) requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and changes therein, and disclosure of contingent assets and liabilities. Actual results could differ from these estimates.

Investment Valuation and Income Recognition – Investments are reported at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. The Plan's Investment Committee determines the Plan's valuation policies utilizing information provided by the investment advisors and insurance company. See Note 5 for discussion of fair value measurements.

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

CO-ADVANTAGE RESOURCES, INC.
RETIREMENT SAVINGS PLAN

NOTES TO FINANCIAL STATEMENTS

For the Years Ended December 31, 2014 and 2013

NOTE 2 SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES – Continued

Payment of Benefits – Benefits are recorded when paid.

Notes Receivable From Participants – Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest. Related fees are recorded as administrative expenses and are expensed when they are incurred. No allowance for credit losses has been recorded as of December 31, 2014 and 2013. If a participant ceases to make loan repayments and the Plan administrator deems the participant loan to be in default, the participant loan balance is reduced and a benefit payment is recorded.

Expenses – Certain expenses of maintaining the Plan are paid by the Adopting Employers and are excluded from these financial statements. Fees related to the administration of notes receivable from participants are charged directly to the participant's account and are included in administrative expenses. Investment related expenses are included in net appreciation of fair value of investments.

Subsequent Events – The Principal Participating Employer has evaluated subsequent events through October 15, 2015, the date which the financial statements were available to be issued.

NOTE 3 CERTIFIED INVESTMENTS

Certain information related to investments and notes receivable from participants disclosed in the accompanying financial statements and supplemental schedule, including investments and notes receivable from participants held at December 31, 2014 and 2013, and net appreciation in fair value of investments, interest and other income for the years ended December 31, 2014 and 2013, was obtained or derived from information supplied to the Plan administrator and certified as complete and accurate by Transamerica Financial Life Insurance Company (Transamerica).

NOTE 4 INVESTMENTS

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

	2014	2013
Transamerica Stable Value Advantage	\$ 8,713,296	\$ 10,579,725
Vanguard Target Retirement 2020	5,071,791	4,090,437
Vanguard Target Retirement 2025	5,497,251	5,513,825
Vanguard Target Retirement 2030	7,086,687	6,071,417
Vanguard Target Retirement 2035	5,797,113	5,065,762

CO-ADVANTAGE RESOURCES, INC.
RETIREMENT SAVINGS PLAN

NOTES TO FINANCIAL STATEMENTS

For the Years Ended December 31, 2014 and 2013

NOTE 4 INVESTMENTS - Continued

During 2014 and 2013, the Plan's investments (including gains and losses on investments bought and sold, as well as those held during the year), appreciated in value as follows:

	2014	2013
Insurance company general account	\$ 159,624	\$ 154,907
Pooled separate accounts	5,385,904	11,804,107
	<u>\$ 5,545,528</u>	<u>\$ 11,959,014</u>

NOTE 5 FAIR VALUE MEASUREMENTS

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

- Level 1 Inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets that the Plan has the ability to access.
- Level 2 Inputs to the valuation methodology include quoted prices for similar assets or liabilities in an active market; quoted prices for identical or similar assets or liabilities in inactive markets; inputs other than quoted prices that are observable for the asset or liability; and inputs that are derived principally from or corroborated by observable market data by correlation or other means. If the asset or liability has a specified (contractual) term, the level 2 input must be observable for substantially the full term of the asset or liability.
- Level 3 Inputs to the valuation methodology are unobservable and significant to the fair value measurement.

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

**CO-ADVANTAGE RESOURCES, INC.
RETIREMENT SAVINGS PLAN**

NOTES TO FINANCIAL STATEMENTS

For the Years Ended December 31, 2014 and 2013

NOTE 5 FAIR VALUE MEASUREMENTS - Continued

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.

Insurance company general account: Valued at contract value. (See note 6).

Pooled separate accounts: Valued at fair value based on the quoted market prices of the underlying mutual funds.

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

The following table sets forth by level, within the fair value hierarchy, the Plan's investments at fair value as of December 31, 2014 and 2013:

Assets at Fair Value as of December 31, 2014

	Level 1	Level 2	Level 3	Total
Insurance company general account	\$ -	\$ 8,713,296	\$ -	\$ 8,713,296
Pooled separate accounts:				
Asset allocation	-	64,067	-	64,067
Bonds	-	5,926,964	-	5,926,964
Hybrid	-	2,522,775	-	2,522,775
Large/mid value equity	-	8,960,328	-	8,960,328
Large/mid blend equity	-	10,000,416	-	10,000,416
Large/mid growth equity	-	8,097,114	-	8,097,114
Small company equity	-	35,272,986	-	35,272,986
International equity	-	5,409,291	-	5,409,291
Specialty	-	6,272,878	-	6,272,878
Total pooled separate accounts	-	82,526,819	-	82,526,819
Total assets at fair value	\$ -	\$ 91,240,115	\$ -	\$ 91,240,115

**CO-ADVANTAGE RESOURCES, INC.
RETIREMENT SAVINGS PLAN**

NOTES TO FINANCIAL STATEMENTS

For the Years Ended December 31, 2014 and 2013

NOTE 5 FAIR VALUE MEASUREMENTS - Continued

Assets at Fair Value as of December 31, 2013

	Level 1	Level 2	Level 3	Total
Insurance company general account	\$ -	\$ 10,579,725	\$ -	\$ 10,579,725
Pooled separate accounts:				
Bonds	-	7,849,670	-	7,849,670
Hybrid	-	2,573,893	-	2,573,893
Large/mid value equity	-	6,624,181	-	6,624,181
Large/mid blend equity	-	8,498,365	-	8,498,365
Large/mid growth equity	-	8,220,870	-	8,220,870
Small company equity	-	31,298,829	-	31,298,829
International equity	-	4,964,110	-	4,964,110
Specialty	-	4,348,979	-	4,348,979
Total pooled separate accounts	-	74,378,897	-	74,378,897
Total assets at fair value	\$ -	\$ 84,958,622	\$ -	\$ 84,958,622

Fair Value of Investments in Entities that Use NAV

The following table summarizes investments measured at fair value based on NAV per share as of December 31, 2014 and 2013:

Investment Type	2014 Fair Value	2013 Fair Value	Unfunded Commitments	Redemption Frequency	Redemption Notice Period
Pooled separate accounts	\$ 82,526,819	\$ 74,378,897	\$ -	Daily	Daily

The pooled separate accounts are made up of sub-accounts that hold different types of investments that have a variety of investment objectives. The Plan's objective is to provide Plan participants with a sufficient variety of investment options to enable participants to achieve their individual goals for retirement. However, there is no assurance that this objective can be achieved. Participants can direct their money into the accounts of their choice.

The Plan invests in a benefit-responsive investment contract with Transamerica. Transamerica maintains the contributions in an insurance company general account. The account is credited with earnings on the underlying investments and charged for participant withdrawals and administrative expenses. The repayment of principal and interest credited to participants holding the investment is a financial obligation of Transamerica. However, if an event should ever occur such that realization of full contract value for a particular investment contract is no longer probable, the investment choice may no longer be considered fully benefit-responsive.

CO-ADVANTAGE RESOURCES, INC.
RETIREMENT SAVINGS PLAN

NOTES TO FINANCIAL STATEMENTS

For the Years Ended December 31, 2014 and 2013

NOTE 6 **INVESTMENT CONTRACT WITH INSURANCE COMPANY**

As described in Note 2, because the investment contract is fully benefit-responsive, contract value is the relevant measurement attribute for that portion of the net assets available for benefits attributable to the investment contract. Contract value, as reported to the Plan by Transamerica, represents contributions made under the contract, plus earnings, less participant withdrawals and administrative expenses. Participants may ordinarily direct the withdrawal or transfer of all or a portion of their investment at contract value.

There are no reserves against contract value for credit risk of the contract issuer or otherwise. The crediting interest rate is based on a formula agreed upon with the issuer, in which all deposits in the investment are credited with the same interest rate on a daily basis, and with no set maturity. Such interest rates are reset monthly and are effective on the first day of each month. The investment contract is not considered to be guaranteed and there is no stated minimum or maximum interest rate.

Since the investment contract is an obligation of Transamerica, the occurrence of an event that limits the ability of the investment to transact at contract value between Transamerica and participants holding the investment is not probable. This investment contract has no stated maturity. The average yields earned by the investment contract for the years ended December 31, are as follows:

Average Yields:	<u>2014</u>	<u>2013</u>
Based on actual earnings	1.60%	1.70%
Based on interest rate credited to participants	1.60%	1.70%

NOTE 7 **RELATED PARTY AND PARTY IN INTEREST TRANSACTIONS**

Certain Plan investments are administered by Transamerica; therefore, these transactions qualify as party-in-interest transactions. Fees incurred by the Plan for contract administration services amounted to \$273,344 and \$222,624 for the years ended December 31, 2014 and 2013, respectively. In addition, Transamerica receives revenue from service providers for services Transamerica provides to the funds. This revenue is used to offset certain amounts owned to Transamerica for its administrative services.

If the revenue received by Transamerica from such service providers exceeds the amount owed, Transamerica remits the excess to the Plan's trust. Such amounts may be applied to pay Plan administrative expenses or allocated to the accounts of the participants. During 2014, excess amounts of approximately \$6,000 were received by the Plan and are included in other income. The Principal Participating Employer may make a payment to Transamerica for administrative expenses not covered by revenue sharing.

CO-ADVANTAGE RESOURCES, INC.
RETIREMENT SAVINGS PLAN

NOTES TO FINANCIAL STATEMENTS

For the Years Ended December 31, 2014 and 2013

NOTE 8 PLAN TERMINATION

Although it has not expressed any intent to do so, the Principal Participating Employer has the right under the Plan to discontinue its contributions at any time and to terminate the Plan subject to the provisions of ERISA. In the event of Plan termination, participants would become 100% vested in the Adopting Employers' contribution portion of their account.

NOTE 9 TAX STATUS

The Plan has been formed utilizing the *Volume Submitter Multiple Employer Profit Sharing 401(k) Plan* sponsored by Transamerica. The prototype plan sponsor, Transamerica, obtained a favorable determination letter dated March 31, 2008; however, such letter is only applicable to Transamerica. The Plan administrator has adopted all plan provisions within the volume submitter document and, although the Plan has been amended since the determination date, believes that the Plan is designed and is currently being operated in compliance with the applicable requirements of the Internal Revenue Code and, therefore, believe that the Plan is qualified, and the related trust is tax-exempt.

U.S. GAAP requires Plan management to evaluate tax positions taken by the Plan and recognize a tax liability if the Plan has taken an uncertain position that more likely than not would not be sustained upon examination by taxing jurisdictions. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress.

NOTE 10 RISKS AND UNCERTAINTIES

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

**CO-ADVANTAGE RESOURCES, INC.
RETIREMENT SAVINGS PLAN**

NOTES TO FINANCIAL STATEMENTS

For the Years Ended December 31, 2014 and 2013

NOTE 11 RECONCILIATION OF FINANCIAL STATEMENTS TO FORM 5500

The following is a reconciliation of net assets available for benefits per the financial statements to the Form 5500 as of December 31:

	2014	2013
	<u> </u>	<u> </u>
Net assets available for benefits per the financial statements	\$ 94,375,543	\$ 87,676,230
Less: contributions receivable	<u>(369,160)</u>	<u>-</u>
Net assets available for benefits per the Form 5500	<u><u>\$ 94,006,383</u></u>	<u><u>\$ 87,676,230</u></u>

The following is a reconciliation of contributions per the financial statements to the Form 5500 for the years ended December 31, 2014 and 2013:

	2014	2013
	<u> </u>	<u> </u>
Contributions per the financial statements	\$ 13,278,048	\$ 11,199,967
Less: contributions receivable - end of year	<u>(369,160)</u>	<u>-</u>
Contributions per the Form 5500	<u><u>\$ 12,908,888</u></u>	<u><u>\$ 11,199,967</u></u>

SUPPLEMENTAL SCHEDULE

CO-ADVANTAGE RESOURCES, INC.
RETIREMENT SAVINGS PLAN

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

December 31, 2014

(a)	(b) Identity of Issue	(c) Description of Investment	(d) Cost	(e) Current Value
*	Transamerica Stable Value Advantage	Insurance Company General Account		\$ 8,713,296
*	America Century Inflation-Adj Bond	Pooled Separate Account		268,652
*	American Funds Fundamental Investors	Pooled Separate Account		2,054,884
*	American Funds AMCAP	Pooled Separate Account		2,089,824
*	American Funds Balanced	Pooled Separate Account		2,522,775
*	American Funds Growth Fund of America	Pooled Separate Account		3,377,819
*	American Funds New Perspective	Pooled Separate Account		1,113,136
*	BlackRock Equity Dividend	Pooled Separate Account		2,072,661
*	Calvert Equity Portfolio	Pooled Separate Account		55,900
*	ClearBridge Mid Cap Core	Pooled Separate Account		1,045,216
*	Columbia Intermediate Bond	Pooled Separate Account		1,346,561
*	Fidelity Advisor Small Cap	Pooled Separate Account		777,738
*	Franklin Biotechnology Discovery	Pooled Separate Account		3,372,018
*	Franklin Small Cap Value	Pooled Separate Account		1,055,358
*	Franklin Utilities	Pooled Separate Account		603,268
*	Invesco Small Cap Growth	Pooled Separate Account		904,752
*	Ivy Science and Technology	Pooled Separate Account		947,873
*	Loomis Sayles Bond	Pooled Separate Account		1,253,594
*	Manning & Napier Pro-Mix Conservative Term	Pooled Separate Account		15,978
*	Manning & Napier Pro-Mix Extended Term	Pooled Separate Account		1,573
*	Manning & Napier Pro-Mix Maximum Term	Pooled Separate Account		36,967
*	Manning & Napier Pro-Mix Moderate Term	Pooled Separate Account		9,549
*	Morgan Stanley Growth	Pooled Separate Account		1,269,487
*	Mutual Financial Services	Pooled Separate Account		80,284
*	Neuberger Berman Genesis	Pooled Separate Account		361,390
*	Nuveen Real Estate Securities	Pooled Separate Account		1,027,545
*	Oakmark International	Pooled Separate Account		604,755
*	Oppenheimer Global	Pooled Separate Account		1,179,561
*	Oppenheimer International Growth	Pooled Separate Account		1,218,208
*	RidgeWorth Large Cap Value Equity	Pooled Separate Account		1,547,513
*	RidgeWorth Mid-Cap Value Equity	Pooled Separate Account		1,055,699
*	SSgA Emerging Markets Index	Pooled Separate Account		301,433
*	SSgA International Index	Pooled Separate Account		556,389
*	SSgA Russell Large Cap Growth Index	Pooled Separate Account		374,671

(Continued)

CO-ADVANTAGE RESOURCES, INC.
RETIREMENT SAVINGS PLAN

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

December 31, 2014

(a)	(b) Identity of Issue	(c) Description of Investment	(d) Cost	(e) Current Value
*	SSgA Russell Large Cap Value Index	Pooled Separate Account		351,650
*	SSgA Russell Small Cap Growth Index	Pooled Separate Account		20,261
*	SSgA Russell Small Cap Index	Pooled Separate Account		1,048,173
*	SSgA Russell Small Cap Value Index	Pooled Separate Account		515,717
*	SSgA S&P Mid Cap Index	Pooled Separate Account		1,065,399
*	SSgA U.S. Bond Index	Pooled Separate Account		461,568
*	Templeton Foreign	Pooled Separate Account		435,809
*	Templeton Global Bond	Pooled Separate Account		412,272
*	Transamerica Partners High Yield Bond	Pooled Separate Account		1,299,371
*	Transamerica Partners Mid Value	Pooled Separate Account		1,498,516
*	Transamerica Partners Stock Index	Pooled Separate Account		2,211,956
*	Vanguard Target Retirement Income	Pooled Separate Account		1,067,004
*	Vanguard Target Retirement 2010	Pooled Separate Account		1,239,275
*	Vanguard Target Retirement 2015	Pooled Separate Account		2,358,692
*	Vanguard Target Retirement 2020	Pooled Separate Account		5,071,791
*	Vanguard Target Retirement 2025	Pooled Separate Account		5,497,251
*	Vanguard Target Retirement 2030	Pooled Separate Account		7,086,687
*	Vanguard Target Retirement 2035	Pooled Separate Account		5,797,113
*	Vanguard Target Retirement 2040	Pooled Separate Account		3,351,008
*	Vanguard Target Retirement 2045	Pooled Separate Account		2,421,021
*	Vanguard Target Retirement 2050	Pooled Separate Account		960,575
*	Vanguard Target Retirement 2055	Pooled Separate Account		422,569
*	Vanguard Total Stock Market Index	Pooled Separate Account		756,962
*	Wells Fargo Advantage Discovery	Pooled Separate Account		1,546,312
*	Wells Fargo Advantage Govt Sec	Pooled Separate Account		884,946
*	Wells Fargo Advantage Precious Metals	Pooled Separate Account		241,890
*	Participant loans	4.00% - 9.25%	-	2,766,268

*Denotes a party-in-interest

Co-Advantage Resources, Inc.
Retirement Savings Plan
EIN 59-3434670, Plan 333
Attachment to 2014 Form 5500
Schedule H

(Concluded)

MULTIPLE-EMPLOYER PLAN PARTICIPATING EMPLOYER INFORMATION

Plan Name: CoAdvantage Resources, Inc. Retirement Savings Plan
Contract Number: 932022
Employer Identification Number: 59-3434670
Plan Identification Number: 333
Plan Year End: December 31, 2014

(a) Name of Participating Employer	(b) Employer Identification Number	(c) Percent of Total Contributions
CoAdvantage Resources, Inc.	59-3435670	7.35%
Niki Bryan, Inc.	59-3132928	0.00%
Arthur's Catering, Inc.	59-2948051	1.36%
Aclarian, Inc.	59-3731475	0.00%
Baywood Technologies, Inc.	59-2751509	0.25%
Brandon Rental Center, Inc.	59-1440555	0.00%
Continental Transfer, LLC	56-2192124	0.00%
Dynamic Ceramics, Inc.	59-1493497	0.00%
Jagged Peak, Inc.	59-3018794	0.00%
Southeastern Systems dba Secom	58-0953298	0.40%
Sherrod Vans of Jacksonville, Inc.	59-3147545	0.10%
SST Group, Inc.	59-3429451	0.00%
TekMethods, LLC	06-1638625	0.00%
The Met, LLC	65-1048549	0.00%
Iheadhunt cc, Inc.	59-3632685	0.00%
Florida Lawyers Mutual Insurance Company	59-2810665	1.10%
Dream RV., Inc.	65-0875412	0.00%
Datastaff, Inc.	56-2088408	0.00%
Data Industries, Ltd.	13-3195477	0.00%
Consolidated Supply Group, Inc.	59-3383385	0.00%
Central Communications Network, Inc.	59-3087065	0.00%
Amazon Hose & Rubber Company	59-0998489	0.00%
i/o Trak a Division of R.D. Lippert & Associates	59-3387748	0.00%
Grand Performer, Inc.	59-3470873	0.00%
Payroll Consultants Group, Inc.	59-3714268	0.00%
Wonder Works, Inc.	59-3434117	0.00%
Lawton Printers, Inc.	59-0897525	0.02%
Technology Management Solutions, Inc.	59-3555119	0.00%
Queen Associates, Inc.	56-2208720	0.00%
Integrity Arts & Technology, Inc.	59-3692239	0.00%
RWB Financial, LLC	41-1977060	0.00%
John L. Brewerton, III P.A.	59-3312923	0.00%
Osceola Mental Health, Inc. dba Park Place Behavioral	59-1677912	0.00%
RX Textiles, Inc.	56-1115913	0.00%

(a) Name of Participating Employer	(b) Employer Identification Number	(c) Percent of Total Contributions
McCumber, Inclan, Daniels, Valdez, Buntz & Ferrera, P.A.	73-1681369	0.00%
Medx Corporation	59-3405347	0.00%
Shells Seafood Restaurants, Inc.	65-0427966	0.00%
Research	17-9117176	0.00%
Bankers Home Mortgage	59-3476518	0.25%
Arribas Brothers Company, Inc.	59-1407214	0.00%
Innovative Service Solutions LLC	40-0001985	0.00%
Nasrallah Fine Architect Design	59-3572579	0.00%
Perez of Florida, Inc.	86-1090999	0.00%
Creative Logix, LLC	20-0424109	0.00%
St. Petersburg Area Chamber of Commerce	59-1493839	0.00%
AXSA Document Solutions, Inc.	59-3456143	0.00%
The Solution Design Group, Inc.	20-1035024	0.00%
Granite Falls Furnace, LLC	41-2079321	0.00%
DFG Management, Inc.	59-3372002	0.00%
Karats & Carats of Maitland, Inc.	59-2690465	0.23%
Servant Investments, LLC	20-2057693	0.00%
Bacia Sardenga, D.V.M. dba Powers Drive Animal Hospital	27-1247598	0.08%
Christian Care Ministry	59-3205097	0.00%
United Heritage Bank	59-3687725	0.00%
Medplex Outpatient Surgery Center, Ltd.	78-0353620	0.64%
Filterworks USA, Inc.	65-0072152	0.00%
Cognoscenti Health Institute	59-3692421	0.00%
Genesis Real Estate Group	58-2522104	0.00%
Orlando Ballet, Inc.	23-7427817	0.00%
Precedent Management Systems, LLC	20-0458110	0.00%
Promo Only, Inc.	59-3145803	0.00%
Lange of Central Florida, Inc. dba Tammy Taylor Nails	59-3072085	0.00%
Fiberglass Pultrusion LLC	20-3450178	0.00%
CLBWA, Inc. dba Lake Region Printing	20-0121672	0.00%
TJF Management Company, Inc.	59-3606364	0.00%
Hatcher Insurance, Inc.	41-2046375	0.00%
XL TechGroup, Inc.	20-1685322	0.00%
Los Angeles Film School, LLC	95-4725723	0.00%
Hac Boys, Inc dba Oboys Real Barbeque	59-3423133	0.00%
Cross, Fernandez & Riley, LLP	59-3651466	0.00%
Highwinds Technology Management, Inc.	20-3505360	0.00%
Nadal Pediatrics	59-3572720	0.00%
The Nassal Company	59-2426138	0.00%
Gentran Corporation	56-1531202	0.00%
Hewitt Financial Consulting, Inc.	59-2922859	0.00%
Omicron Business Services, Inc.	20-8397785	0.00%
Southern Crafted Homes, Inc.	65-0219052	0.00%
Delphi of Florida, Inc.	01-0580124	0.68%
Precision Assessment Technology Corporation	77-0498969	0.00%

(a) Name of Participating Employer	(b) Employer Identification Number	(c) Percent of Total Contributions
Thrive Fitness, LLC	26-0100983	0.00%
SJP Orlando, Inc. dba St. John's Press	41-2044101	0.00%
St. Johns Press Corporation	59-3560640	0.00%
Third Millennium Ministries, Inc.	31-1598585	0.00%
ALLTEC Corporation	56-1906153	0.00%
Silzerlaw Chartered	20-2390413	0.00%
Primrose Center, Inc.	59-0699143	0.00%
Indra Systems, Inc.	81-0549109	0.00%
Summerlin Bend Surgery Center, LLP dba Adult & Children's Surgery Center of SW Florida	65-1005912	0.01%
TyraTech, Inc.	26-0229647	0.00%
Royal Senior Care, LLC	80-0030722	0.00%
Doss Weeks, PA	26-1245389	0.00%
Ellicott City Ambulatory Surgery Center	63-1213860	0.02%
Suntree Country Club	59-3036758	0.00%
RIISnet, LLC	84-1683976	0.00%
Prosero Incorporated	58-2480035	0.00%
Managed Maintenance, Inc.	20-8850642	0.00%
Performance Matters, LLC	20-0026044	2.43%
Visiting Nurse Association of CF	59-2160730	0.00%
Shingle Creek Real Estate Advisory Company, LLC	20-3599153	0.21%
Phillip Roy Financial Services	02-0575182	0.00%
Spinnaker Management Group, LLC	20-5523115	0.00%
Reynolds Alaska, LLC	32-0158416	0.00%
L & S Supplies, LLC	20-8034101	0.00%
TRB Groves, LLC	65-0980306	0.26%
U-Turn Media Corp.	20-1747759	0.00%
MedX Systems, LLC	26-2706252	0.00%
Plaza Downtown Dental, P.A.	22-3967586	0.45%
St. Augustine Surgery Center, LLC	20-4455176	0.00%
Collins Catering & Events, LLC	26-0351959	0.09%
F.J. Nugent & Associates	59-3370448	0.00%
Legacy Hotel Development, LLC	26-3242967	0.00%
Langston, Hess, Augustine, Sojourner & Moyles, P.A.	59-3152951	0.00%
Surgery Center of Key West, LLC	20-5854803	0.00%
Bay Area Physicians Surgery Center	20-0731481	0.00%
Capital Management Associates, LLC	32-0005556	0.00%
PetMed Express, Inc.	65-0680967	0.00%
R. B. Anderson & Associates, Inc.	59-2731413	0.00%
Homeless Emergency Project, Inc.	59-2729694	0.00%
PA LLC	20-5677537	0.00%
Lighting Partners of Central Florida, Inc.	80-0027748	0.00%
North Carolina Mutual Life Insurance Company	56-0340860	0.00%
North American Substation Services	26-1960401	0.00%
Jeffrey's Auto Repair, Inc.	75-1980815	0.04%

(a) Name of Participating Employer	(b) Employer Identification Number	(c) Percent of Total Contributions
Chadwell Supply, Inc.	26-0290810	0.44%
The ALS Association Golden West Chapter	95-4163338	0.64%
Christian Service Center	59-1353031	0.00%
Family Health Center of Greater Orlando, P.A.	65-1185574	0.00%
Gasparilla Island Water Association, Inc.	59-1204602	0.00%
Contractor Equipment Rentals, Inc.	45-0472841	0.00%
Good 2 Go Event Management	20-4979859	0.00%
RDM & B, Inc.	26-1447346	0.00%
Frontline Outreach, Inc.	23-7227148	0.01%
Abbott Printing Co.	59-3027280	0.00%
Regency Plumbing Contractors, LP	26-1650184	0.00%
Proscape Holdings, Inc.	20-2495327	0.66%
Bradham, Benson, Lindsey, Blevins, Bayliss & Wyatt of Florida West Coast, P.L.L.C.	20-3324646	0.04%
DCM, Inc.	11-3372104	0.00%
Collis Roofing, Inc.	32-1441231	0.00%
Mealey Group, Inc.	65-1043421	2.91%
Your Auction, Inc.	01-0750277	0.30%
HLH Associates	22-3604005	0.00%
Whetstone Engineering & Testing, Inc.	65-0461695	0.25%
Industrial Lighting Products, Inc.	59-3699340	0.00%
Graphix Solutions of America, Inc.	11-3657567	0.04%
Donna R Uliva	20-2976098	0.07%
Fudge & McArthur, P.A.	20-0045280	0.67%
Puff N Stuff Catering, LLC	43-1998301	0.29%
DentalPlans.com	65-1134463	0.00%
FS Group, LLC dba Independent Medical Associates	20-4082856	1.15%
GoSolutions, Inc.	59-3699865	0.00%
Health Integrated, Inc.	86-1052333	0.00%
Advanced Drying Systems LLC	26-4116603	0.00%
The Business Group, Inc.	59-2976593	0.00%
Mary Lee DePugh Nursing Home Association	59-1104552	0.00%
Targus Associates, LLC	27-1751226	0.00%
Regency Senior Living, LLC	20-3506919	0.00%
JAL Chemical Co., Inc. dba Teph Seal Auto Appearance	59-2420860	0.00%
Enporion, Inc.	36-4387050	0.00%
LendingClub Corporation	51-0605731	0.00%
GlobalOptions Services, Inc.	27-2895028	5.14%
Rose Rock Monument, Inc.	27-2624127	0.00%
UCF Convocation Corporation	16-1733312	0.73%
NuTech Fire and Security, Inc.	59-2205766	0.00%
Metz & Associates, LLC	20-8684310	0.00%
Rose Ranch Management LLC	74-3067092	0.00%
George Beddie	55-6528633	0.07%
Sassy Business Management, Inc.	27-3356253	0.16%

(a) Name of Participating Employer	(b) Employer Identification Number	(c) Percent of Total Contributions
Total Defense, Inc.	80-0722574	0.00%
myFORBUY.com, Inc.	27-3708849	0.00%
ITNOrlando, Inc.	20-5160870	0.00%
Viking Floor Enterprises, Inc.	76-0454559	0.01%
Overhead Door & Operator Co., Inc.	26-2374952	0.00%
Athletic Management Company	76-0669648	0.50%
Sundy Inn, LC	65-0823780	0.00%
Ecotype Industries, LLC dba Tonertype	27-4350678	0.21%
Pirtek USA, LLC	59-3453133	0.83%
Beta Max, Inc.	59-3179360	0.51%
The Talance Group	26-1775982	0.01%
Bernal LaTour Inc	27-2637254	0.01%
Miracle Dental Lab, LP	76-0700236	0.00%
Middlebrook & Middlebrook, P.A.	65-0823244	0.15%
Creative Environmental Solutions, Inc	59-3226613	0.17%
Insula Apartment Management, LLC	45-2024218	0.08%
Quality First Air Conditioning, Inc.	65-1159912	0.00%
Centra Healthcare Solutions, Inc.	26-4282042	0.36%
JetPay, LLC	75-2913428	0.95%
Pointe Medical Services, Inc.	65-1139580	0.50%
SIU Central, Inc.	20-1655392	0.05%
GPS Insight, LLC	20-3607878	0.00%
Airport Hotel Group, Ltd dba Hampton Inn	65-0851368	0.13%
Brickell Hotel Group LLLP dba Hampton Inn & Suites	59-3639110	0.48%
City Center Hotel Group Ltd dba Hampton Inn - City Center	59-3639111	0.12%
Grove Hotel Group, Ltd dba Hampton Inn - Grove Hotel	65-0502465	0.37%
Pines Hotel Group, Ltd dba Hampton Inn	65-1099486	0.11%
Win Inn Lodging, Ltd dba Wingate by Wyndham-Miramar	65-1099487	0.10%
Loyal Source Government Services, LLC	30-0564703	6.81%
Network Integration Company Partners, Inc. dba NIC Partners	02-0807855	1.35%
Pet Vet Animal Hospitals	74-1889944	0.78%
Xhale, Inc.	20-3397581	0.00%
HyGreen, Inc.	27-1159374	0.01%
ProfitSword, LLC	02-0544332	1.08%
Southern Storage Management Systems, Inc.	65-0272140	0.37%
MSA Annuity, LLC	51-0503284	0.33%
GTMN Partners, LLC	20-2955144	0.04%
George Kostakis, D.D.S., P.A.	59-2916508	0.12%
Metal Cutting Specialists, Inc.	74-2145684	0.70%
Nickel Plate Properties & Management	27-4358336	0.13%
ESCO	34-1671945	0.02%
Tropichem Research Labs, Inc.	65-0125129	0.18%
Khameleon Software, LLC	45-4657919	0.09%
Signature Services Corporation	75-0722111	0.16%
Jessica V. Shellard, CPA, LLC	26-1227430	0.05%

(a) Name of Participating Employer	(b) Employer Identification Number	(c) Percent of Total Contributions
Assurance Biosense, Inc.	45-5416393	0.00%
Atlas Spine, Inc.	33-1131445	0.25%
CORE Realty Holdings Management, Inc.	20-3213310	0.39%
BCS Consulting, Inc. dba Brown Consulting Services	35-2216246	0.00%
GNG, LLC	20-2807296	0.00%
B&T Enterprise Services, Inc. dba 5 Star Auto Repair & Sales	20-3599971	0.03%
Tatianne Cosmetics, Inc.	59-2578556	0.08%
Digital Printing Solutions, Inc.	59-3688718	0.00%
Y.C.C.S. Property Owners Assoc., Inc.	26-3972576	0.14%
The Yacht & Country Club, Inc.	59-1426270	0.51%
Direct Airflow Distributors I, Inc. dba Coastal HVAC Supply	26-2634002	0.48%
Communication Construction Services, Inc.	65-0767680	0.37%
Palm Beach Broadcasting, LLC	45-4518075	1.02%
Big Eye Creative, Inc.	20-0658066	0.24%
Control Communications, Inc.	65-0602414	0.05%
American Solar Energy Society, Inc.	59-1768923	0.00%
Aqua Culture Technologies, Inc.	23-3189319	0.23%
L.R.E. Ground Services, Inc.	59-2932603	1.56%
Securance LLC	03-0392503	0.42%
BroadStar Communications, LLC	27-2890643	0.00%
LDM Products, Inc. dba Subzero Engineering	20-2035653	0.00%
United Ship Service Corp.	65-1013537	0.00%
Security Networks, LLC	65-0988893	0.40%
Senator International Freight Forwarding LLC	65-0914038	0.86%
Transcendent Investment Management, LLC	26-4142422	0.15%
TM Systems, LLC dba The Kitchen	54-2032679	0.02%
JMC Development Corporation	59-1407299	1.31%
DBWPC, Inc.	46-0938295	0.90%
ShareThis, Inc.	20-1536623	0.18%
Parthenon Medical Center	27-4083175	0.26%
Ascent Surgical Partners, LLC	39-1964361	0.08%
Kiz Toys, Inc.	26-1380515	0.54%
GeneLink, Inc.	23-2795613	0.00%
Miller Bros. Giant Tire Service - Orlando, Inc.	59-2902373	0.77%
Landsaw Eyecare	02-0561487	0.00%
Kenneth A. Neifeld, M.D., P.L.	59-3733396	0.00%
Affordable Body Shop, Inc.	01-0562670	0.00%
Miles Grant Country Club, Inc.	59-1573732	0.17%
CFH Group, LLC	14-1878290	1.30%
Potter Golf Instruction, LLC	45-5339089	0.02%
Sunbelt Resources Management dba Florida Barter	59-2225891	0.26%
Ackman Bros. Landscaping, Inc.	59-3652837	0.80%
Pathfinder Business Strategies, LLC	20-0635855	0.42%
Palm Coast Pest Control, Inc.	65-0194846	0.10%
Davidson Media Group, LLC	01-0803559	0.59%

(a) Name of Participating Employer	(b) Employer Identification Number	(c) Percent of Total Contributions
United Way of Lawton - Fort Sill	73-6053875	0.05%
Capital Realty Advisors, Inc.	65-0192168	0.52%
Texas Health Management LLC	46-1274382	0.27%
RedStick Golf Club	91-1941656	0.63%
Worldwide Stone Corp. dba Durango Stone	33-0297934	0.11%
Tiara Condominium Association	59-1749982	0.18%
Holiday Investment Funds, LP dba Westgate Village Apartments	84-1100963	0.08%
Arvada Manor Associates, LLP dba Springwood Retirement	84-1003212	0.19%
Precision Sample, LLC	80-0415463	0.01%
EPC Energy Services, LLC	46-3208960	0.46%
Disability Resource Group, Inc	36-4314570	0.59%
Boston Barricade Company, Inc.	02-0472117	1.17%
Quist Financial, Inc. dba Quist Valuation, Inc.	84-0952849	0.64%
Capri Isles Golf, Inc.	59-1380785	0.52%
Khoury Consulting, Inc. dba Frontline Performance Group	59-3221900	1.09%
Littlestone Management	21-0360065	0.20%
ABP Aventura, Inc. dba Relax The Back	65-0789887	2.21%
Unity Recovery Group, Inc.	45-3844668	2.06%
Miami Mar, Inc.	65-1093286	0.30%
RDP Barricade Company, LLC dba Colorado Barricade Company	46-3000981	0.72%
Pharmacy Development Services, Inc.	16-1627653	1.29%
AmCar Freight, Inc.	65-0820758	0.19%
Springfield Group, LLC dba Springbrooke Retirement Community	26-3462629	0.04%
Star Asset Security, LLC	57-0985679	0.35%
Anthony's, Inc.	59-0626081	0.77%
Engineered Tax Services, Inc.	20-5936724	0.60%
Dervey Distributing Company dba Taylor of the Rockies	84-0718566	0.22%
Van Tibolli Beauty Corp.	26-4133489	0.13%
vitaMedMD, LLC	26-2704476	2.25%
Rado Corporation	59-3482416	0.24%
Moroney's Religious Art, Inc.	59-2166389	0.16%
Advanced Pharmaceutical Consultants, Inc.	59-3186282	0.54%
Concurrent, Inc.	26-2636279	0.42%
Bella-Management LLC	46-4557650	0.32%
Stewart Mining Industries, Inc.	65-0649938	0.35%
Hurricane Grill & Wings dba Wingin' It in Juno LLC	03-0598741	0.02%
Sun-Pac Manufacturing, Inc.	59-3667915	0.00%
Lakeside Family Dentistry	20-8243635	0.09%
Alan R. Heap, D.M.D., P.A.	59-2977900	0.17%
Liberty Investment Properties, Inc.	59-3010842	0.13%
The Foothills Bank, Inc.	86-0884979	0.61%
Direct Mail Impressions, Inc.	65-0124253	0.06%
Air America A/C	55-0856947	0.40%
Cite Partners, LLC	46-5358575	0.01%
ETS Power Group, Inc.	65-0938599	0.13%

(a) Name of Participating Employer	(b) Employer Identification Number	(c) Percent of Total Contributions
Venetian Condominium, Inc.	59-1303036	0.00%
Community Association Management Systems, Inc.	65-0527468	0.00%
EECON Construction Services	20-8863518	0.01%
PEBB Capital Management	46-5680624	0.01%
JP Hose Solutions, LLC dba Pirtek Jersey Village	49-4935774	0.00%
Citizens Bank of Florida	59-0557762	0.00%
Anita International Corporation	65-0861673	0.09%
QC Laboratories, Inc.	59-1095059	0.16%
Security Identification Systems, Corp.	65-0503496	0.00%
BallenIsles Community Association, Inc.	65-0151050	0.07%
CoAdvantage Resources Inc. Retirement Savings Plan	75-3024591	0.06%
P2 Solutions	45-1571958	0.00%
Olympia Hotels Mgmt. dba Safety Harbor Resort & Spa	20-4232722	0.00%
The Cybrix Group, Inc.	13-4228013	0.00%
Thermo King of the Southeast, LLC	20-8432054	0.00%
Orchid Island Golf & Beach Community Association, Inc.	65-0194373	0.00%
Environmental Risk Management, Inc.	65-0922629	0.00%
Golf Agronomics Supply & Handling Co.	65-0241332	0.00%
CoAdvantage Resources Inc. Retirement Savings Plan	20-2047704	0.00%
Human Capital Management, Inc.	65-0970567	0.00%
Keys Insurance Services, Inc.	13-4259726	0.00%
Sweetener Solutions, LLC	42-1554028	0.00%
KOVA Property Management LLC	26-0541246	0.00%
Substance Solutions, Inc.	26-1646246	0.00%
April USA Assistance, Inc.	65-0564647	0.00%
M.C. Miller Co., Inc.	22-1777475	0.00%
H.A.T. Service Corp. dba Arctica Frozen Solutions	35-2171288	0.00%
simpleShow USA Corp.	37-1749888	0.00%
Heafey Bentley Management, LLC	46-1112261	0.00%
Collier Child Care Resources, Inc.	26-2646032	0.00%
Fleet Lease Disposal, Inc.	59-1951844	0.00%
Florida Acquisition & Appraisal, Inc.	59-3331947	0.00%
TaxServ, LLC	54-1792131	0.00%
Professional Management, Inc.	59-1725802	0.00%
Fountainhead Commercial Capital, LLC	47-1912663	0.00%
Surgical Specialists of St. Lucie County, LLC	26-0176703	0.00%
Nelco Realty	20-2392116	0.00%
Airco Mechanical Contractors, Inc.	59-3045554	0.00%
Economic Development Corp of Sarasota County	20-1133191	0.59%
Commercial Concrete Systems, Inc.	65-0229204	0.00%
A. Advocates & Attorneys of Kennedy Law Group, PA	59-3607269	0.03%
American Accounting Service, Inc.	59-2564394	0.00%
Atlanta Wrecker Sales, Inc.	59-3013665	0.00%
Bailey Tax and Accounting, Inc.	59-2980126	0.22%
Barry W. Ellis	46-2645692	0.00%

(a) Name of Participating Employer	(b) Employer Identification Number	(c) Percent of Total Contributions
Bellew Investments, Inc.	59-3319750	0.24%
Bluegrass Industries	65-0704572	0.01%
Boca Bay Master Association, Inc	62-1342782	1.18%
Cardax Pharmaceuticals, Inc.	20-4572086	0.90%
Carlin S. Nightingale	02-8283174	0.00%
Community Action Stops Abuse	59-2114359	0.75%
Chiropractic and Rehabilitation	65-0942780	0.00%
Clifford B. Newton	59-3548888	0.00%
Clifford Medical Billing Specialists, Inc.	59-3705906	0.33%
Country Club Estates Cooperative, Inc.	59-2653265	0.00%
David A. Kinser and Assoc., Inc.	59-3050614	0.05%
Derrick Kinney	45-7654730	0.17%
Douglas C. MacDaid Insurance Agency	59-2220907	0.00%
Elite Air, Inc.	59-3715986	0.00%
Engine Rebuilders Warehouse	59-2028272	0.00%
Gator Harley Davidson, Inc	59-2436286	0.00%
Gino Italian Market & Deli	59-1708665	0.00%
Jeb Stewarts Property	65-0909309	0.00%
Joan's Catering	59-2562095	0.00%
John Cannon Homes, Inc.	65-0773295	0.65%
KGM & Associates	31-1692855	0.00%
LinRene Furniture, Inc.	56-1898671	0.02%
Manatee Surgical Center, Inc.	65-0826479	0.00%
Moss Hill Foliage	59-3017271	0.23%
Mr. Build, Inc.	59-1676854	0.00%
Nilsen Glass Company, Inc.	59-0723445	0.00%
Northlake Animal Hospital	59-1003518	0.00%
Palm Beach Spring Co.	59-0939376	0.21%
Palms Dental, P.A.	65-1142450	0.00%
Par One Construction	59-3125017	0.01%
Parker Merrick Company, Inc.	59-1359485	0.00%
Parsley Construction	59-3007984	0.00%
Phupica Corporation	59-3011310	0.00%
Physician Partners Network, PA	59-3390677	0.00%
Pointe Medical Services, Inc.	65-1139585	0.00%
Ralph J. Schroeder	76-0316541	0.60%
Red Moon Solutions, LLC	20-4002316	0.00%
The Roskamp Foundation Irrevocable Trust dba Roskamp Foundation	65-6206042	0.00%
A-1 Technologies, Inc.	65-0391540	0.00%
Scott, Singleton, Fincher and Co. PC	75-1830742	0.45%
Shelley's Septic Tanks, Inc. dba Shelley's Environmental Systems	59-2923707	0.00%
SMG Property Management, Inc.	52-1653151	0.00%
Smokey Valley Stone Company, Inc.	59-3505180	0.53%
Suncoast Partnership To End Homelessness, Inc.	20-2783762	0.00%

(a) Name of Participating Employer	(b) Employer Identification Number	(c) Percent of Total Contributions
Symbiont Service Corp.	65-0186071	0.99%
The ALS Association Florida Chapter	94-3124732	0.00%
Trace Marketing, Inc.	65-0337837	0.00%
Tropical Taffy	65-0793201	0.00%
Turbine Generator Maintenance, Inc.	59-2637238	0.00%
Van Wezel Foundation, Inc.	59-2807055	0.37%
Visage Hair and Nail Design, Inc.	04-3642520	0.05%
Forest Lake Estates Co-op, Inc.	59-3172338	0.16%
Latitude 18, Inc.	42-1596434	0.00%
Florida Endowment Foundation for Florida's Graduates dba Jobs for Florida's Graduates	59-3580979	0.03%
Technology Transfer Services, Inc.	59-3212478	0.00%
GTMN Partners, LLC	20-2925144	0.00%
Marcadis & Associates, Attorneys at Law	59-2693028	0.00%
Mark Nixon Holdings, LLC	20-3633873	0.00%
Meros, Smith, Lazzara & Olney	59-1458887	0.00%
North Florida Asphalt, Inc.	59-3327393	0.00%
David E. Riggs	46-1859700	0.38%
Robert Feldman dba La Crescenta Insurance Services Corp.	56-0530402	0.00%
Stewart McLauchlan	46-2904454	0.02%
B&Q, Inc.	65-0795012	0.00%
Archer Pharmaceuticals, Inc.	26-2589792	0.00%
NDE Quality Systems, Inc.	76-0499320	0.00%
Akers & Associates Construction	59-3345786	0.00%
Amerisure Business Solutions	65-0327388	0.00%
Boones Wholesale Nursery	59-3056366	0.00%
Club Wellington dba Daughters	59-3525737	0.00%
Electric Power and Service	59-1300538	0.00%
Executive Charters, Inc.	59-3380926	0.00%
Express Office Services & Bay Binder	59-2203782	0.00%
Familiar Face Home Health	65-0982110	0.00%
Fox Group	65-0738403	0.00%
Friends of the DSC	59-2396122	0.00%
Hostess Cake	59-2338796	0.00%
Hyde Park Counseling Center	59-3394757	0.00%
Island Electrical Maintenance	65-0060112	0.00%
J.H. Accounting, Inc.	65-0765391	0.00%
Kent Technologies, Inc.	38-3461451	0.00%
Matthew Kardesch	49-0562786	0.00%
Mobel Americana	59-3236988	0.00%
Moseley Investment Management	65-0195103	0.00%
Mt. Zion Corp. dba McDonald's	58-2120240	0.00%
MTB Enterprises	43-1827456	0.00%
Nicoleigh, Inc. dba McDonalds	58-1952813	0.00%
Prodigy Plumbing Inc.	59-3927668	0.00%

(a) Name of Participating Employer	(b) Employer Identification Number	(c) Percent of Total Contributions
Provident and Brasha Builders, Inc.	75-2852035	0.00%
RMR Dentistry, PA	59-3588041	0.00%
Roberts Painting, LLC	43-1865188	0.00%
Smack II, LLC	58-2393716	0.00%
Statewide Mortgage Funding	59-3137835	0.00%
Suncoast Lamination	65-0284376	0.00%
Texas Masonry	76-0607780	0.00%
Tropical Golf Associates	59-1911045	0.00%
Wiles Road/Cypress Wood Animal Hospital	59-2468749	0.00%
Windy City Enterprises, Inc.	65-0607614	0.00%
Advanced Industrial Technologies	04-2422969	0.00%
Pre Cast Systems	76-0340279	0.00%
Technical Specialties Company, Inc.	13-1910884	0.00%
Puradyn Filter Technologies, Inc.	14-1708543	0.01%
Sheckler Management, Inc.	20-3844617	0.17%
Claws and Paws Animal Hospital	20-4732645	0.26%
Premier Fabricating, LLC	26-2146170	0.00%
Concrete Precast Products, Inc.	27-5549047	0.11%
Spotlight Media Solutions, Inc.	28-2222678	0.16%
Algae-X International Corp.	33-0803440	0.00%
Ash Development, LLC dba Ash Properties	36-4691763	0.22%
Strong Vision Center, P.A.	45-0517417	0.00%
RCB Electric Company, Inc.	56-0195360	0.18%
The Glass Doctor dba Superior Glass Services, Inc.	56-2009952	0.00%
Rockdale Gymnastics, Inc.	58-1560845	0.00%
M & J Plumbing Contractors, Inc.	58-1999558	0.10%
Mossland Farms, Inc.	58-2013632	0.16%
Day Farms, Inc.	58-2069467	0.43%
Kenwat Enterprises dba Servpro of Fayette/South Fulton Counties	58-2433626	0.00%
Crown Electric, Inc.	59-0536600	0.08%
Jungle Queens Inc.	59-0856488	0.04%
Locke Well & Pump Co., Inc. dba Emergency Power	59-1034242	0.27%
GA-MA & Associates, Inc.	59-1636454	0.37%
First Coast Powder Coating, Inc.	59-1660319	0.00%
F & J Specialty Products, Inc.	59-1937255	0.39%
Federal Maintenance, Inc.	59-1991982	0.00%
Hawthorn Suites Golf Resorts	59-2084282	0.00%
Port A Pit, Inc.	59-2120599	0.05%
Trebor Industries, Inc. dba Brownie's Southport Divers, Inc.	59-2126537	0.00%
The Loggerhead Group, Inc.	59-2509906	0.02%
Designer Services of the Treasure Coast	59-2527711	0.23%
Lakes of Delray, Inc	59-2596584	0.34%
Winner's Choice, Inc.	59-2685715	0.00%
After Market Services, Inc. dba Auto Preservation of Florida	59-2733205	0.09%
Smith Security System, Inc	59-2747791	0.02%

(a) Name of Participating Employer	(b) Employer Identification Number	(c) Percent of Total Contributions
Sawyer's, Inc	59-2805574	0.03%
Liberte Management Group OPI, Inc.	59-2835660	0.00%
Lane Electronics & Alarm Systems	59-2907302	0.00%
GTM Enterprises Inc. DBA Emerald Coast Clothing Outlet	59-3099888	0.00%
Pope Enterprises, Inc. dba Accent Signs	59-3286988	0.21%
Black, Holcomb, Smith & Associates, Inc.	59-3291805	0.00%
MG Office Products, Inc.	59-3346026	0.00%
A AAmerican Trailer & Container Leasing, LLC	59-3354575	0.28%
Lakeland Crane Corporation	59-3360542	0.00%
Central Florida Window & Door, LLC	59-3369575	0.04%
Chewco, Inc. dba Maaco Collision Repair & Auto Painting	59-3403138	0.00%
Citrus Pest Management, Inc.	59-3546692	0.16%
Jimmie J. Wilbur, M.D., P.A.	59-3575427	0.22%
Craft Electric, Inc	59-3594710	0.00%
Trinity Villas, Inc.	59-6046993	0.00%
Madden Enterprises, Inc. dba Madden's Ace Hardware	65-0210036	0.34%
Hennessy Dental Laboratory, Inc.	65-0613915	0.00%
The Matrix Financial Group, Inc.	65-0679588	0.30%
Guardian Eye Care Center	65-0747828	0.10%
Lux-Art Silks International, Inc.	65-0950056	0.24%
InterCom Training, Inc.	76-0267027	0.10%
James Kong, P.A. dba Today's Vision	76-0399898	0.27%
William Cole, Inc.	76-0502101	0.24%
Red Stick Golf Club, Inc.	91-1941655	0.00%
Pacesetters, Inc.	59-2387580	0.38%
Que Imaging, Inc.	76-0089621	0.00%
Greater Pompano Beach Chamber of Commerce	59-0601960	0.00%
Hull & Associates, P.C.	74-2048960	0.00%
Halifax Plastics dba Southeastern Plastics, Inc	59-2060393	0.00%
Cypress Communications, Inc.	01-1070790	0.00%
S2 Technology, Inc.	03-0527086	0.00%
General Security & Investigatons, Inc.	11-1111118	0.00%
All Native, LLC Mngt	20-1745204	0.00%
Lawrence Plumbing, Inc.	20-5175557	0.00%
Mid State Drainage Products, Inc.	22-2222225	0.00%
Natural Designs, Admin	22-2222239	0.00%
Consolidated Tire	22-2222262	0.00%
Envirosafe Technologies, Inc.	27-3235240	0.00%
Miller Paint	34-1997605	0.00%
Rent Max, LLC	43-2007005	0.00%
R.D. Graham Electric	56-2240920	0.00%
Peachtree Vending Company, Inc.	58-1598998	0.00%
The Window Gallery, Inc.	58-1708720	0.00%
Holiday Inn Express	58-2186564	0.00%
S.E. Inc.	58-2252705	0.00%

(a) Name of Participating Employer	(b) Employer Identification Number	(c) Percent of Total Contributions
Motorbahn of Roswell, Inc.	58-2522284	0.00%
Dr. Barbara K. Reighard	58-6085356	0.00%
U.S. Awning Company	59-1102104	0.00%
Law Offices of Yanchuck/Berman	59-1280052	0.00%
Engineering Technology of America	59-1931920	0.00%
Halifax Plastics dba Southeastern Plastics, Inc	59-2060393	0.00%
East Coast Service, Inc.	59-2115779	0.00%
Trebor Industries, Inc. dba Brownies Third Lung	59-2126538	0.00%
KRON USA	59-2188119	0.00%
Anastasi Masonry Corp.	59-2324916	0.00%
Ballard Industrial Painting and Sandblasting	59-2331220	0.00%
C & L Transport of Citrus County, Inc.	59-2409875	0.00%
Quick Delivery, Inc.	59-2507278	0.00%
Pot O Gold Productions, Inc.	59-2676595	0.00%
All Service Graphics, Inc.	59-2789825	0.00%
Home Therapeutics Company	59-2847569	0.00%
Florida Tire, Inc.	59-2849827	0.00%
Princeton Construction Company, Inc.	59-2976270	0.00%
Harbor City Provisions, Inc.	59-3054614	0.00%
D & D Battery	59-3086589	0.00%
Certified Enviroment Services Inc.	59-3122438	0.00%
LaBella Sausage, Inc.	59-3140238	0.00%
Kiwi, Inc. dba Park Place Car Wash	59-3259921	0.00%
Nichols Insurance Association	59-3305962	0.00%
Strategic Media, Inc.	59-3351794	0.00%
Ameri-Con, Inc.	59-3412104	0.00%
Southeast Packing Machinery, Inc.	59-3453797	0.00%
DBD Management, Inc. dba Pure Platinum	59-3502432	0.00%
New Ambiance Salon	59-3724709	0.00%
First Choice Industrial	65-0037442	0.00%
Carlucci's Restaurant	65-0298816	0.00%
Universal Petroleum	65-0301736	0.00%
Hollywood Business Council	65-0527355	0.00%
Big Bear Brewing Company	65-0613113	0.00%
Dialtone, Inc.	65-0614739	0.00%
Marine Environmental Partners, Inc.	65-0653967	0.00%
Rusty Anchor Seafood of Key West	65-0703775	0.00%
ABC Discount Appliance, Inc.	65-0831393	0.00%
Offerdahl's Cafe and Grill, Inc.	65-0833145	0.00%
Pamela Ebmeier Montmeny, D.D., P.A. dba Envision Eye Care Center	65-1043992	0.00%

SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES AT END OF YEAR

Plan Name: CoAdvantage Resources, Inc.
Contract #: 932022
EIN: 59-3434670

Plan #: 000
Period: 01/01/2014 - 12/31/2014

(A)	(B)	(C)	(D)	(E)
	Identity of issue, borrower, lessor, or similar a party	Description of investment including maturity date, rate of interest, collateral, par, or maturity value	Cost	Current Value
*	TRANSAMERICA LIFE INSURANCE COMPANY	PARTICIPANT LOANS		\$2,766,268
*	TRANSAMERICA LIFE INSURANCE COMPANY	STABLE VALUE FUND		\$8,713,296
*	TRANSAMERICA LIFE INSURANCE COMPANY	EXPENSE BUDGET ACCOUNT		\$5,959
*	TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY	COLUMBIA INTERMEDIATE BOND INV ACCT	\$1,346,563	\$1,346,563
*	TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY	MORGAN STANLEY GROWTH RET ACCT	\$1,269,489	\$1,269,489
*	TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY	TRANSAMERICA PARTNERS MID VALUE RET ACCT	\$1,498,521	\$1,498,521
*	TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY	TRANSAMERICA PARTNERS HIGH YIELD BOND RET ACCT	\$1,299,373	\$1,299,373
*	TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY	TEMPLETON FOREIGN RET ACCT	\$435,812	\$435,812
*	TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY	LOOMIS SAYLES BOND RET ACCT	\$1,253,599	\$1,253,599
*	TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY	CALVERT EQUITY PORTFOLIO INV ACCT	\$55,901	\$55,901
*	TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY	FRANKLIN BIOTECHNOLOGY DISCOVERY INV ACCT	\$3,372,023	\$3,372,023
*	TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY	INVESCO SMALL CAP GROWTH INV ACCT	\$904,761	\$904,761
*	TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY	FIDELITY ADVISOR SMALL CAP INV ACCT	\$777,750	\$777,750
*	TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY	TRANSAMERICA PARTNERS STOCK INDEX RET ACCT	\$2,211,961	\$2,211,961
*	TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY	AMERICAN FUNDS FUNDAMENTAL INVESTORS INV ACCT	\$2,054,893	\$2,054,893
*	TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY	AMERICAN FUNDS AMCAP INV ACCT	\$2,089,842	\$2,089,842
*	TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY	AMERICAN FUNDS GROWTH FUND OF AMERICA INV ACCT	\$3,377,838	\$3,377,838
*	TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY	AMERICAN FUNDS NEW PERSPECTIVE INV ACCT	\$1,113,148	\$1,113,148
*	TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY	AMERICAN FUNDS BALANCED INV ACCT	\$2,522,785	\$2,522,785
*	TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY	SSGA RUSSELL SMALL CAP INDEX RET ACCT	\$1,048,176	\$1,048,176
*	TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY	SSGA INTERNATIONAL INDEX RET ACCT	\$556,392	\$556,392
*	TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY	SSGA S&P MID CAP INDEX RET ACCT	\$1,065,400	\$1,065,400
*	TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY	SSGA U.S. BOND INDEX RET ACCT	\$461,520	\$461,520
*	TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY	AMERICAN CENTURY INFLATION-ADJUSTED BOND INV ACCT	\$268,653	\$268,653
*	TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY	FRANKLIN UTILITIES INV ACCT	\$603,271	\$603,271
*	TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY	SSGA RUSSELL SMALL CAP VALUE INDEX RET ACCT	\$515,720	\$515,720
*	TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY	VANGUARD TARGET RETIREMENT INCOME RET ACCT	\$1,067,006	\$1,067,006
*	TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY	VANGUARD TARGET RETIREMENT 2015 RET ACCT	\$2,358,696	\$2,358,696
*	TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY	VANGUARD TARGET RETIREMENT 2025 RET ACCT	\$5,497,254	\$5,497,254
*	TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY	VANGUARD TARGET RETIREMENT 2035 RET ACCT	\$5,797,116	\$5,797,116
*	TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY	VANGUARD TARGET RETIREMENT 2045 RET ACCT	\$2,421,021	\$2,421,021
*	TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY	OPPENHEIMER GLOBAL RET ACCT	\$1,179,562	\$1,179,562
*	TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY	FRANKLIN MUTUAL FINANCIAL SERVICES INV ACCT	\$80,289	\$80,289
*	TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY	NUVEEN REAL ESTATE SECURITIES RET ACCT	\$1,027,551	\$1,027,551
*	TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY	FRANKLIN SMALL CAP VALUE RET ACCT	\$1,055,361	\$1,055,361
*	TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY	IVY SCIENCE & TECHNOLOGY INV ACCT	\$947,874	\$947,874