Form 5500

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Annual Return/Report of Employee Benefit Plan

This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6047(e), 6057(b), and 6058(a) of the Internal Revenue Code (the Code).

▶ **Complete all entries in accordance with the instructions to the Form 5500.**

OMB Nos. 1210-0110
1210-0089

2014

This Form is Open to Public Inspection

Part I Annual Report Identification Information

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

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

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

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

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

Part II Basic Plan Information—enter all requested information

1a Name of plan
SPECTRUM ORTHOPAEDICS, INC. PROFIT SHARING PLAN AND TRUST

1b Three-digit plan number (PN) ▶ 001

1c Effective date of plan 10/01/1989

2a Plan sponsor's name and address; include room or suite number (employer, if for a single-employer plan)
SPECTRUM ORTHOPAEDICS, INC.

7442 FRANK AVENUE NW
NORTH CANTON, OH 44720

2b Employer Identification Number (EIN)
34-1032526

2c Plan Sponsor's telephone number
330-455-0581

2d Business code (see instructions)
621111

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	MICHELE KOHLER
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

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

Preparer's telephone number (optional)

3a Plan administrator's name and address [X] Same as Plan Sponsor	**3b** Administrator's EIN	
	3c Administrator's telephone number	
4 If the name and/or EIN of the plan sponsor has changed since the last return/report filed for this plan, enter the name, EIN and the plan number from the last return/report:	**4b** EIN	
a Sponsor's name	**4c** PN	
5 Total number of participants at the beginning of the plan year	**5**	209
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)**	160
a(2) Total number of active participants at the end of the plan year	**6a(2)**	138
b Retired or separated participants receiving benefits	**6b**	1
c Other retired or separated participants entitled to future benefits	**6c**	60
d Subtotal. Add lines **6a(2)**, **6b**, and **6c**.	**6d**	199
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	**6e**	1
f Total. Add lines **6d** and **6e**.	**6f**	200
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**	189
h Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested	**6h**	2
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	**7**	

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

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

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

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

a Pension Schedules

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

b General Schedules

- **(1)** [X] **H** (Financial Information)
- **(2)** [ ] **I** (Financial Information – Small Plan)
- **(3)** [ ] 0 **A** (Insurance Information)
- **(4)** [X] **C** (Service Provider Information)
- **(5)** [X] **D** (DFE/Participating Plan Information)
- **(6)** [ ] **G** (Financial Transaction Schedules)

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

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

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

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

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

Receipt Confirmation Code_____

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

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

A Name of plan
SPECTRUM ORTHOPAEDICS, INC. PROFIT SHARING PLAN AND TRUST

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
SPECTRUM ORTHOPAEDICS, INC.

D Employer Identification Number (EIN)
34-1032526

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).. . . . . [X] 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

FIDELITY INVESTMENTS INSTITUTIONAL

04-2647786

(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)

NFP SECURITIES INC

23-2384840

(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?
27 61	ADVISOR	27469	Yes [X] No [ ]	Yes [X] No [ ]	0	Yes [X] No [ ]

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

FIDELITY INVESTMENTS INSTITUTIONAL

04-2647786

(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?
60 64 65	RECORDKEEPER	200	Yes [X] No [ ]	Yes [X] No [ ]	0	Yes [X] No [ ]

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

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

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
NFP SECURITIES INC	61	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
COL MAR FOCUSED EQ Z - COLUMBIA MG 04-2838628	$0-<$3M=1.00%, $3M-<$50M=0.50%, $50M+=0.25%

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
NFP SECURITIES INC	61	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
OPPHMR INTL GRTH Y - OPPENHEIMERFU 13-2953455	$5M+=0.25%

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
ARTISAN MID CAP INV - BOSTON FINAN P.O. BOX 8480 BOSTON, MA 02266	0.25%

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
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
COL MAR FOCUSED EQ Z - COLUMBIA MG 04-2838628	0.25%

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
INVS COMSTOCK Y - INVESCO INVESTME 11 GREENWAY PLAZA, SUITE 100 HOUSTON, TX 77046	0.25%

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
JPM LG CAP GRTH SEL - BOSTON FINAN 330 W. 9TH STREET KANSAS CITY, MO 66160	0.25%

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
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation		**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
OPPHMR INTL GRTH Y - OFI GLOBAL AS	TWO WORLD FINANCIAL CENTER 225 LIBERTY STREET, 14TH FLOOR NEW YORK, NY 10281	0.25%

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation		**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
RS PARTNERS A - BOSTON FINANCIAL D	P.O. BOX 8480 BOSTON, MA 02266	0.25%

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation		**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
RS PARTNERS Y - BOSTON FINANCIAL D	P.O. BOX 8480 BOSTON, MA 02266	0.10%

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
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
SCOUT MID CAP - UMB FUND SERVICES 39-1657495	0.25%

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
TEMPLETON FOREIGN AD - FRANKLIN TE 94-3167260	0.25%

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
TRP DIV GROWTH ADV - T. ROWE PRICE 52-2269240	0.40%

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

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

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

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

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

(complete as many entries as needed)

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE D (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

DFE/Participating Plan Information

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

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

OMB No. 1210-0110

2014

This Form is Open to Public Inspection.

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

A Name of plan
SPECTRUM ORTHOPAEDICS, INC. PROFIT SHARING PLAN AND TRUST

B Three-digit plan number (PN) ▶ 001

C Plan or DFE sponsor's name as shown on line 2a of Form 5500
SPECTRUM ORTHOPAEDICS, INC.

D Employer Identification Number (EIN)
34-1032526

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: FA STABLE VALUE

b Name of sponsor of entity listed in (a): FIDELITY MANAGEMENT TRUST COMPANY

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
04-3022712-026	C	747904

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

SCHEDULE H (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Financial Information

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

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

OMB No. 1210-0110

2014

This Form is Open to Public Inspection

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

A Name of plan
SPECTRUM ORTHOPAEDICS, INC. PROFIT SHARING PLAN AND TRUST

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
SPECTRUM ORTHOPAEDICS, INC.

D Employer Identification Number (EIN)
34-1032526

Part I Asset and Liability Statement

1 Current value of plan assets and liabilities at the beginning and end of the plan year. Combine the value of plan assets held in more than one trust. Report the value of the plan's interest in a commingled fund containing the assets of more than one plan on a line-by-line basis unless the value is reportable on lines 1c(9) through 1c(14). Do not enter the value of that portion of an insurance contract which guarantees, during this plan year, to pay a specific dollar benefit at a future date. **Round off amounts to the nearest dollar.** MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 1b(1), 1b(2), 1c(8), 1g, 1h, and 1i. CCTs, PSAs, and 103-12 IEs also do not complete lines 1d and 1e. See instructions.

Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a	0	0
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	0	0
(2) Participant contributions	1b(2)	0	0
(3) Other	1b(3)	0	0
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	122290	215558
(2) U.S. Government securities	1c(2)	0	0
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)	0	0
(B) All other	1c(3)(B)	0	0
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)	0	0
(B) Common	1c(4)(B)	0	0
(5) Partnership/joint venture interests	1c(5)	0	0
(6) Real estate (other than employer real property)	1c(6)	0	0
(7) Loans (other than to participants)	1c(7)	0	0
(8) Participant loans	1c(8)	0	0
(9) Value of interest in common/collective trusts	1c(9)	559711	747904
(10) Value of interest in pooled separate accounts	1c(10)	0	0
(11) Value of interest in master trust investment accounts	1c(11)	0	0
(12) Value of interest in 103-12 investment entities	1c(12)	0	0
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	12312238	13080546
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other	1c(15)	0	0

		(a) Beginning of Year	(b) End of Year
1d Employer-related investments:			
(1) Employer securities	1d(1)	0	0
(2) Employer real property	1d(2)	0	0
e Buildings and other property used in plan operation	1e	0	0
f Total assets (add all amounts in lines 1a through 1e)	1f	12994239	14044008
Liabilities			
g Benefit claims payable	1g	0	0
h Operating payables	1h	0	0
i Acquisition indebtedness	1i	0	0
j Other liabilities	1j	0	0
k Total liabilities (add all amounts in lines 1g through1j)	1k	0	0
Net Assets			
l Net assets (subtract line 1k from line 1f)	1l	12994239	14044008

Part II Income and Expense Statement

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

Income		(a) Amount	(b) Total
a Contributions:			
(1) Received or receivable in cash from: **(A)** Employers	2a(1)(A)	618735	
(B) Participants	2a(1)(B)	365791	
(C) Others (including rollovers)	2a(1)(C)	0	
(2) Noncash contributions	2a(2)	0	
(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		984526
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	16	
(B) U.S. Government securities	2b(1)(B)	0	
(C) Corporate debt instruments	2b(1)(C)	0	
(D) Loans (other than to participants)	2b(1)(D)	0	
(E) Participant loans	2b(1)(E)	0	
(F) Other	2b(1)(F)	0	
(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		16
(2) Dividends: **(A)** Preferred stock	2b(2)(A)	0	
(B) Common stock	2b(2)(B)	0	
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	822191	
(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		822191
(3) Rents	2b(3)		0
(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	2b(4)(A)	0	
(B) Aggregate carrying amount (see instructions)	2b(4)(B)	0	
(C) Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result	2b(4)(C)		0
(5) Unrealized appreciation (depreciation) of assets: **(A)** Real estate	2b(5)(A)	0	
(B) Other	2b(5)(B)	0	
(C) Total unrealized appreciation of assets. Add lines **2b(5)(A)** and **(B)**	2b(5)(C)		0

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		-2390
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		0
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		0
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		0
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		-46302
c Other income	2c		0
d Total income. Add all **income** amounts in column (b) and enter total	2d		1758041
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	680600	
(2) To insurance carriers for the provision of benefits	2e(2)	0	
(3) Other	2e(3)	0	
(4) Total benefit payments. Add lines **2e(1)** through **(3)**	2e(4)		680600
f Corrective distributions (see instructions)	2f		0
g Certain deemed distributions of participant loans (see instructions)	2g		0
h Interest expense	2h		0
i Administrative expenses: **(1)** Professional fees	2i(1)	0	
(2) Contract administrator fees	2i(2)	0	
(3) Investment advisory and management fees	2i(3)	0	
(4) Other	2i(4)	27672	
(5) Total administrative expenses. Add lines **2i(1)** through **(4)**	2i(5)		27672
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		708272
Net Income and Reconciliation			
k Net income (loss). Subtract line **2j** from line **2d**	2k		1049769
l Transfers of assets:			
(1) To this plan	2l(1)		0
(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)** [X] Disclaimer **(4)** [ ] Adverse

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

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

(1) Name: THE 415 GROUP **(2)** EIN: 34-1341400

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

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

Part IV Compliance Questions

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

During the plan year:

		Yes	No	Amount
a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)	4a	X		3899
b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)	4b		X	

			Yes	No	Amount
c	Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)	4c		X	
d	Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)	4d		X	
e	Was this plan covered by a fidelity bond?	4e	X		500000
f	Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?	4f		X	
g	Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?	4g		X	
h	Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?	4h		X	
i	Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	4i	X		
j	Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked, and see instructions for format requirements.)	4j		X	
k	Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?	4k		X	
l	Has the plan failed to provide any benefit when due under the plan?	4l		X	
m	If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	4m		X	
n	If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.	4n		X	

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
SPECTRUM ORTHOPAEDICS, INC. PROFIT SHARING PLAN AND TRUST

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
SPECTRUM ORTHOPAEDICS, INC.

D Employer Identification Number (EIN)
34-1032526

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): 04-6568107

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

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

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

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

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

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

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

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

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

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

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

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

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

Part III Amendments

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

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

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

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

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

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

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

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

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

SPECTRUM ORTHOPAEDICS, INC.
PROFIT SHARING PLAN AND TRUST
(Employer Federal ID #34-1032526, Plan #001)

AUDITED FINANCIAL STATEMENTS
AND SUPPLEMENTAL SCHEDULES

YEARS ENDED DECEMBER 31, 2014 AND 2013

SPECTRUM ORTHOPAEDICS, INC.
PROFIT SHARING PLAN AND TRUST
(Employer Federal ID #34-1032526, Plan #001)

AUDITED FINANCIAL STATEMENTS
AND SUPPLEMENTAL SCHEDULES

YEARS ENDED DECEMBER 31, 2014 AND 2013

TABLE OF CONTENTS

	Page
AUDITED FINANCIAL STATEMENTS:	
Independent Auditors' Report	1
Statements of Net Assets Available for Benefits - (Form 5500 - Schedule H - Part I)	2
Statement of Changes in Net Assets Available for Benefits - (Form 5500 - Schedule H - Part II)	3
Notes to Financial Statements	4-11
SUPPLEMENTAL SCHEDULES:	
Schedule of Delinquent Participant Contributions (Form 5500 – Schedule H – Part IV, Line 4(a)) -	12
Schedule of Assets (Held at End of Year) - (Form 5500 - Schedule H - Part IV, Item 4(i))	13

FOUR•FIFTEEN 415 GROUP
Business Advisors • Certified Public Accountants

INDEPENDENT AUDITORS' REPORT

Board of Directors
Spectrum Orthopaedics, Inc,
Profit Sharing Plan and Trust
Canton, Ohio

Report on the Financial Statements

We were engaged to audit the accompanying financial statements of **Spectrum Orthopaedics, Inc. Profit Sharing Plan and Trust** (Employer Federal ID #34-1032526, Plan #001), which comprise the statements of net assets available for benefits as of **December 31, 2014 and 2013**, and the related statement of changes in net assets available for benefits for the year ended **December 31, 2014**, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

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

Auditors' Responsibility

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

Basis for Disclaimer of Opinion

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

Disclaimer of Opinion

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

Other Matter

The supplemental schedules of Delinquent Participant Contributions and Schedule of Assets (Held at End of Year) for the year ended December 31, 2014, is required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 and is presented for the purpose of additional analysis and is not a required part of the financial statements. Because of the significance of the matter disclosed in the Basis for Disclaimer of Opinion paragraph, we do not express an opinion on the supplemental schedule referred to above.

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

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

Certified Public Accountants

Canton, Ohio
October 15, 2015

SPECTRUM ORTHOPAEDICS, INC.
PROFIT SHARING PLAN AND TRUST
(Employer Federal ID #34-1032526, Plan #001)

STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS

(Form 5500 - Schedule H - Part I)

	December 31, 2014	December 31, 2013
ASSETS:		
Investments, at fair value:		
Registered investment companies	**$ 13,080,546**	$ 12,312,238
Money market fund	**215,558**	122,290
Common collective trust	**747,904**	559,711
Total investments	**14,044,008**	12,994,239
Contribution receivables:		
Employer	**633,559**	614,372
Employees	**95,820**	2,999
Total receivables	**729,379**	617,371
Total assets	**14,773,387**	13,611,610
LIABILITIES	**-**	-
NET ASSETS (at fair value)	**14,773,387**	13,611,610
Adjustment from fair value to contract value for the fully benefit-responsive investment contract	**(13,044)**	(10,654)
NET ASSETS AVAILABLE FOR BENEFITS	**$ 14,760,343**	$ 13,600,956

The accompanying notes are an integral part of these financial statements.

SPECTRUM ORTHOPAEDICS, INC.
PROFIT SHARING PLAN AND TRUST
(Employer Federal ID #34-1032526, Plan #001)

STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS

(Form 5500 - Schedule H - Part II)

	Year Ended December 31, 2014
ADDITIONS TO NET ASSETS ATTRIBUTED TO:	
Investment income:	
Net appreciation (depreciation) in investments including investment income (loss) and realized and unrealized gains (losses) in fair value of investments at quoted market prices:	
Registered investment companies	**$ (46,302)**
Common collective trusts	**(2,390)**
Interest and dividends	**819,817**
	771,125
Contributions:	
Employer	**637,922**
Employees	**458,612**
Rollovers	**-**
	1,096,534
Total additions	**1,867,659**
DEDUCTIONS FROM NET ASSETS ATTRIBUTED TO:	
Benefit payments	**(680,600)**
Administrative expenses	**(27,672)**
Total deductions	**(708,272)**
NET INCREASE	**1,159,387**
NET ASSETS AVAILABLE FOR BENEFITS:	
Beginning of year	**13,600,956**
End of year	**$ 14,760,343**

The accompanying notes are an integral part of these financial statements.

SPECTRUM ORTHOPAEDICS, INC.
PROFIT SHARING PLAN AND TRUST
(Employer Federal ID #34-1032526, Plan #001)

NOTES TO FINANCIAL STATEMENTS

YEARS ENDED DECEMBER 31, 2014 AND 2013

A. DESCRIPTION OF THE PLAN:

The following description of the Spectrum Orthopaedics, Inc. Profit Sharing Plan and Trust (the "Plan") provides only general information. Participants should refer to the Plan agreement and Summary Plan Description for a more complete description of the Plan's provisions.

General - The Plan is a profit sharing plan with a salary deferral feature established for the benefit of the employees of Spectrum Orthopaedics, Inc. ("Plan Sponsor") who must be 21 years of age or older to be eligible for deferral and additionally complete one year of service by the end of a twelve month period, in which they must have completed 1,000 hours of service, to participate in any employer contributions. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 ("ERISA").

Contributions - Each participant is permitted to make elective deferrals up to 100% of their compensation, up to the maximum amount permitted by law and not less than 1% of their compensation, as defined by the Plan. Contributions may be made on a pre-tax basis or on an after tax basis through a Roth deferral option. 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 contribution plans.

The Plan also provides for a Qualified Automatic Contribution Arrangement ("QACA"), unless elected otherwise, and provides for age based funds as the investment default option. As part of the QACA, the Plan Sponsor must make a QACA Nonelective Employer Contribution to each eligible active participant in an amount ranging from 3% to 25% of the active participant's compensation. For the year ended December 31, 2014, the Plan Sponsor elected to contribute 3% for the QACA Nonelective Employer Contribution, which totaled $216,491.

In addition, the Plan Sponsor has the option to make a profit sharing contribution of which the amount is at the discretion of the Plan Sponsor. The discretionary profit sharing contribution was $416,078 for the year ended December 31, 2014. Participants direct the investment of all contributions into certain individual investment options offered by the Plan. All contributions are limited to the maximum allowed as a deduction under the Internal Revenue Code.

Participant Accounts - An account is maintained in the name of each participant. Each participant's account is credited with the participant's contribution, an allocation of the Plan Sponsor's contributions and Plan earnings. The benefit to which a participant is entitled is the benefit that can be provided from the participant's account. As of December 31, 2014 and 2013, approximately $112,443 and $231,603 respectively, was allocated to accounts of persons who have withdrawn from participation in future contributions to the Plan. These participants share in trust earnings and appreciation (depreciation) on investments held in their individual accounts but do not receive any additional contributions.

Investment Options - Upon enrollment in the Plan, a participant may direct employee and employer contributions into various investment options, each with varying investment objectives. Participants may change their investment options any time during the plan year.

A. DESCRIPTION OF THE PLAN (CONTINUED):

Forfeitures - Discretionary contributions and matching contributions that are forfeited will be used to pay for administrative expenses incurred by the Plan. The portion of forfeitures not used to pay administrative expenses may be used to reduce any employer discretionary or matching contributions. During the year ended December 31, 2014 and 2013, $-0- and $8,550, respectively, was paid for administrative expenses from the forfeitures account. As of December 31, 2014 and 2013, forfeitures available were $21,152 and $15,405, respectively.

Payment of Benefits - On termination of service, a participant having a balance of more than $1,000 may elect to receive either a lump-sum or monthly distribution or a direct rollover distribution. A participant having less than a $1,000 balance may take a lump-sum distribution or a direct rollover distribution. If no election is made, a lump sum distribution will automatically be made not less than 30 days and not more than 90 days from the time the participant terminates and receives the proper notice. Non-terminated employees may make withdrawals from their elective deferral account balance as a hardship withdrawal prior to reaching normal retirement age. Hardship withdrawals are subject to additional rules and conditions as outlined in the Plan agreement.

Vesting - A participant is fully vested immediately in elective wage deferrals and amounts rolled over from other plans. Vesting for employer matching contributions and employer discretionary contributions is as follows:

Years of Service	Vesting %
Less than 2	0%
2	100%

B. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES:

Basis of Reporting - The accompanying financial statements were prepared using the accrual method of accounting. The participants' statements, certified trust statements and Annual Return/Report of Employee Benefit Plan - Form 5500 have been prepared on the cash basis of accounting which records certain income when received and expenses when disbursements are made. As such, there are differences between the amounts in the participants' statements, certified trust statements, and Form 5500 and the amounts shown in the financial statements which are principally caused by contributions receivable and the adjustments for the fully benefit-responsive guaranteed investment contract.

Valuation of Investments and Income Recognition - The Plan's investments are stated at fair value as determined by the custodian using quoted market prices and other available information. The Plan's fully benefit-responsive investment contract is valued at contract value (Note D). Purchases and sales of securities are recorded on a trade-date basis. Dividends are recorded on the ex-dividend date. Interest income is recorded on the accrual basis. Net appreciation / depreciation includes the Plan's gains and losses on investments bought and sold as well as held during the year.

Administrative Expenses - Certain administrative expenses of the Plan are paid by the Plan Sponsor.

Payment of Benefits - Benefits are recorded when paid.

B. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONTINUED):

Subsequent Events - The Plan Sponsor has evaluated subsequent events through October 15, 2015, which is the date the financial statements were available to be issued.

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

C. INVESTMENTS:

Information including investments held as shown on the statements of net assets available for benefits, and interest and dividend income and net appreciation in fair value as shown on the statement of changes in net assets available for benefits as of December 31, 2014 and 2013 and for the year ended December 31, 2014, was prepared by or derived from information provided by the Fidelity Management Trust Company ("Fidelity"), the custodian and furnished to the plan administrator. The plan administrator obtained certification of this information from the custodian that the information provided to the plan administrator was complete and accurate. That information, which represents 5% or more of net plan assets and was certified as complete and accurate by the custodian, is summarized as follows:

	December 31, 2014	December 31, 2013
Fidelity Advisor Freedom 2020	$ 2,973,208	$ 2,965,011
Fidelity Advisor New Insights	1,269,845	1,152,605
Oppenheimer International Growth	**	735,635
SPTN 500 Index	1,356,568	1,130,542
Fidelity Advisor Stable Value	734,860	**

** not 5% of assets in specified year

D. GUARANTEED INVESTMENT CONTRACT:

In 2005, the Plan entered into a fully benefit-responsive investment contract with Fidelity. Fidelity maintains the contributions in a general account. The account is credited with earnings on the underlying investments and charged for participant withdrawals and administrative expenses. The guaranteed investment contract issuer is contractually obligated to repay the principal and specified interest rate that is guaranteed to the Plan.

Because the guaranteed 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 guaranteed investment contract. Contract value, as reported to the Plan by Fidelity, represents contributions made under the contract, plus earnings, less participant withdrawals or transfers 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. Such interest rates are reviewed on a quarterly basis for resetting.

D. GUARANTEED INVESTMENT CONTRACT (CONTINUED):

Certain events limit the ability of the Plan to transact at the contract value with the issuer. Such events include the following: (1) amendments to the plan documents (including complete or partial plan termination or merger with another plan), (2) changes to plan's prohibition on competing investment options or deletions of equity wash provisions, (3) bankruptcy of the plan Sponsor or other plan sponsor events (for example, divestitures or spin-offs of a subsidiary) that cause a significant withdrawal from the plan, or (4) the failure of the trust to qualify for exemption from Federal income taxes or any required prohibited transaction under the Employee Retirement Income Security Act of 1974. The plan administrator does not believe that the occurrence of any such valuation event, which would limit the Plan's ability to transact at contract value with participants, is probable. The guaranteed investment contract does not permit Fidelity to terminate the agreement prior to the scheduled maturity date.

The following table sets forth the average yields for the years ended December 31, 2014 and 2013.

	2014	2013
Average yields:		
Based on actual earnings	1.70%	1.70%
Based on interest rate credited to participants	0.99%	1.01%

E. FAIR VALUE MEASUREMENTS:

The authoritative accounting guidance establishes a framework for measuring fair value. That framework provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1 measurements) and the lowest priority to unobservable inputs (Level 3 measurements). The three levels of the fair value hierarchy under the authoritative accounting guidance 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 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.

E. FAIR VALUE MEASUREMENTS (CONTINUED):

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 or 2013.

Registered investment companies: Valued at the closing price reported on the active market on which the individual securities are traded.

Money market fund: Money market accounts are stated at cost, which approximates fair value.

Common collective trust: Valued at net asset value (NAV) by discounting the related cash flows based on current yields of similar instruments with comparable durations considering the credit-worthiness of the issuer.

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 tables set forth by level, within the fair value hierarchy, the Plan's assets at fair value as of December 31, 2014 and 2013:

Assets Measured at Fair Value at December 31, 2014:

	Level 1	Level 2	Level 3	Total
Registered investment companies:				
Large – cap fund	$ 3,999,640	$ -	$ -	$ 3,999,640
Mid – cap fund	1,313,165	-	-	1,313,165
Small – cap fund	285,156	-	-	285,156
International fund	966,088	-	-	966,088
Specialty fund	334,764	-	-	334,764
Blended fund	5,172,973	-	-	5,172,973
Income fund	1,008,760	-	-	1,008,760
Money market funds	215,558	-	-	215,558
	$13,296,104	$ -	$ -	13,296,104
Investments measured at net asset value as a practical expedient:				
Common collective trusts				747,904
Total assets at fair value				$14,044,008

E. FAIR VALUE MEASUREMENTS (CONTINUED):

Assets Measured at Fair Value at December 31, 2013:

	Level 1	Level 2	Level 3	Total
Registered investment companies:				
Large – cap fund	$ 3,490,856	$ -	$ -	$ 3,490,856
Mid – cap fund	1,250,640	-	-	1,250,640
Small – cap fund	349,973	-	-	349,973
International fund	1,043,808	-	-	1,043,808
Specialty fund	295,268	-	-	295,268
Blended fund	4,864,198	-	-	4,864,198
Income fund	1,017,495	-	-	1,017,495
Money market funds	122,290	-	-	122,290
	$12,434,528	$ -	$ -	12,434,528
Investments measured at net asset value as a practical expedient:				
Common collective trusts				559,711
Total assets at fair value				$12,994,239

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

December 31, 2014	Fair Value	Unfunded Commitments	Redemption Frequency (if currently eligible)	Redemption Notice Period
Common collective trusts:				
FA Stable Value Fund	$ 747,904	N/A	Daily	1 day
Total	$ 747,904			

December 31, 2013	Fair Value	Unfunded Commitments	Redemption Frequency (if currently eligible)	Redemption Notice Period
Common collective trusts:				
FA Stable Value Fund	$ 559,711	N/A	Daily	1 day
Total	$ 559,711			

F. PLAN TERMINATION:

Although it has not expressed any intent to do so, the Plan Sponsor 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 will become 100% vested in their accounts.

G. INCOME TAX STATUS:

The Plan has adopted a non-standardized, prototype plan document sponsored by Fidelity Management & Research Co. The prototype plan obtained a determination letter dated March 31, 2008, in which the Internal Revenue Service ("IRS") stated that the prototype plan, as then designed, was in compliance with the applicable requirements of the Internal Revenue Code ("IRC"). The Plan has been amended since receiving the determination letter, however the plan administrator believes that the Plan is designed and currently operating in compliance with the applicable requirements of the IRC.

The authoritative accounting guidance requires the plan administrator to evaluate uncertain tax positions taken by the Plan. The plan administrator is aware of certain operational, plan document, or demographic issues that, if not properly corrected, could be treated by the IRS as qualification failures. The plan administrator will be taking the proper steps to correct these issues. If necessary, the tax qualification issues will be properly resolved directly with the IRS. Accordingly, the plan administrator believes that the Plan will retain its tax-qualified status. In addition, the required nondiscrimination testing related to Code Section 401(k) and 401(m) arrangements, as applicable, has not been completed as of the date of this report. The plan administrator understands that the testing must be completed and any corrective actions required will be taken by December 31, 2015. The Plan has not recognized any interest or penalties related to uncertain tax positions. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress. Currently, the 2011, 2012 and 2013 tax years are open and subject to examination by the Internal Revenue Service.

H. TRANSACTIONS WITH PARTIES-IN-INTEREST:

Fidelity Management Trust Company is the custodian of the Plan and holds all of the Plan's investments. Fidelity Management Trust Company is a party-in-interest of the Plan as defined by ERISA Section 3(14), and accordingly investment transactions in the funds are parties-in-interest transactions. Certain legal and accounting fees and certain administrative expenses relating to the maintenance of participant eligibility records are absorbed by the Company.

I. 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.

J. LOST OPPORTUNITY COST CONTRIBUTIONS:

The Plan made late employee contributions to the Plan during the year ended December 31, 2014. The plan administrator calculated the lost opportunity cost to be $90for those contributions relating to the year ended December 31, 2014. The Company will contribute the lost opportunity cost for the year ended December 31, 2014 to the Plan during 2015. A disclosure has been made on Form 5500, Schedule H, Page 4, line 4a that $900 of 2014 employee contributions were not made within the time period described in 29 CFR 2510.3-102, which is considered a section 4975(a) prohibited transaction.

The Plan made late employee contributions to the Plan during the year ended December 31, 2014. The plan administrator calculated the lost opportunity cost to be $116 for those contributions relating to the year ended December 31, 2014. The Company contributed the lost opportunity cost for the year ended December 31, 2013 to the Plan during 2014.

K. RECONCILIAITON OF FINANCIAL STATEMENTS TO FORM 5500:

The following is a reconciliation of net assets available for benefits per the accompanying financial statements to the amounts reported in Form 5500.

	December 31, 2014	December 31, 2013
Net assets available for benefits as presented in these financial statements	$ 14,760,343	$ 13,600,956
Adjustments for contribution receivables	(729,379)	(617,371)
Adjustment from contract value to fair value for fully benefit-responsive investment contracts	13,044	10,654
Net assets available for benefits as presented on Form 5500	$ 14,044,008	$ 12,994,239

The following is a reconciliation of contributions and net investment gain reported in the accompanying statement of changes in net assets for benefits to the amounts reported in Form 5500.

	Year Ended December 31, 2014	Year Ended December 31, 2013
Net increase in net assets available for benefits as presented in these financial statements	$ 1,159,387	$ 2,648,653
Adjustments for contribution receivables	(107,228)	123,625
Adjustment from contract value to fair value for fully benefit-responsive investment contracts	(2,390)	(5,424)
Net increase in net assets available for benefits as presented on Form 5500	$ 1,049,769	$ 2,766,854

SPECTRUM ORTHOPAEDICS, INC.
PROFIT SHARING PLAN AND TRUST
(Employer Federal ID #34-1032526, Plan #001)

SCHEDULE OF DELINQUENT
PARTICIPANT CONTRIBUTIONS
(Form 5500 - Schedule H - Part IV, Line 4(a))

(See Independent Auditors' Report)

	Total that Constitute Nonexempt Prohibited Transactions				
Participant Contributions Transferred Late to Plan	**Contributions Not Corrected**	**Contributions Corrected Outside VFCP**	**Contributions Pending Correction in VFCP**	**Total Fully Corrected Under VFCP and PTE 2002-51**	**Lost Earnings**
December 31, 2014					
****	$ 900	$ 900	$ -	$ -	$ 90
December 31, 2013					
****	$ -	$ 2,999	$ -	$ 2,999	$ 116

**** Represents there were no late particpant loan repayments included**

SPECTRUM ORTHOPEDICS, INC.
PROFIT SHARING PLAN AND TRUST
(Employer Federal ID #34-1032526, Plan #001)

SCHEDULE OF ASSETS (HELD AT END OF YEAR)
(Form 5500 - Schedule H - Part IV, Item 4(i))

(See Independent Auditors' Report)

December 31, 2014

	(a)	Identity of Issue and description of investment including rate of interest and maturity date (b) and (c)	Principal amount or number of shares (c)	Cost (d)	Current value (e)
		COMMON COLLECTIVE TRUSTS:			
*		Fidelity Advisor Stable Value	734,859.90	**	$ 734,860
		TOTAL COMMON COLLECTIVE TRUSTS			734,860
		REGISTERED INVESTMENT COMPANIES:			
		Fidelity Prime Fund	215,558.28	**	215,558
		Col Mar Focused Equity	16,721.52	**	343,460
		Van Kampen Comstock	24,526.59	**	625,919
		Templeton Foreign	39,850.06	**	273,770
		Scout Mid Cap	36,481.76	**	563,278
		Trp Div Growth	3,659.60	**	132,112
		Oppenheimer International Growth	19,735.42	**	692,318
		Fidelity Advisor Freedom Inc	25.16	**	276
		Fidelity Advisor Leveraged Company Stock	3,789.79	**	215,411
		Fidelity Advisor Technology	9,151.55	**	334,764
		Fidelity Advisor High Income Advantage	11,869.58	**	118,933
		Fidelity Advisor Strategic Income	54,619.18	**	660,346
		Fidelity Advisor Small Cap	5,810.23	**	167,044
		Fidelity Advisor New Insights	46,771.45	**	1,269,845
		Fidelity Advisor Strategic Div Income	27,107.92	**	396,589
		Fidelity Advisor Total Bond	21,527.25	**	229,480
		JPM LG Cap Growth	7,853.67	**	271,737
		SPTN 500 Index	18,621.39	**	1,356,568
		SPTN Mid Cap Index	14,833.12	**	258,838
		Fidelity Advisor Freedom 2010	2,117.59	**	26,512
		Fidelity Advisor Freedom 2015	8,120.72	**	101,671
		Fidelity Advisor Freedom 2020	224,732.31	**	2,973,208
		Fidelity Advisor Freedom 2025	20,920.68	**	272,806
		Fidelity Advisor Freedom 2030	21,330.31	**	295,425
		Fidelity Advisor Freedom 2035	14,169.34	**	187,460
		Fidelity Advisor Freedom 2040	22,083.62	**	313,367
		Fidelity Advisor Freedom 2045	35,440.32	**	387,008
		Fidelity Advisor Freedom 2050	15,988.28	**	173,153
		Fidelity Advisor Freedom 2055	3,908.71	**	45,497
		RS Partners Fund Y	3,696.78	**	118,112
		Artisan Mid Cap Inv	6,065.99	**	275,638
		TOTAL REGISTERED INVESTMENT COMPANIES			13,296,104
		TOTALS			$ 14,030,964

* INDICATES A PARTY-IN-INTEREST

** COSTS HAVE BEEN OMITTED DUE TO PARTICIPANT-DIRECTED TRANSACTIONS UNDER AN INDIVIDUAL ACCOUNT PLAN

SPECTRUM ORTHOPAEDICS, INC.
PROFIT SHARING PLAN AND TRUST
(Employer Federal ID #34-1032526, Plan #001)

AUDITED FINANCIAL STATEMENTS
AND SUPPLEMENTAL SCHEDULES

YEARS ENDED DECEMBER 31, 2014 AND 2013

SPECTRUM ORTHOPAEDICS, INC.
PROFIT SHARING PLAN AND TRUST
(Employer Federal ID #34-1032526, Plan #001)

AUDITED FINANCIAL STATEMENTS
AND SUPPLEMENTAL SCHEDULES

YEARS ENDED DECEMBER 31, 2014 AND 2013

TABLE OF CONTENTS

	Page
AUDITED FINANCIAL STATEMENTS:	
Independent Auditors' Report	1
Statements of Net Assets Available for Benefits - (Form 5500 - Schedule H - Part I)	2
Statement of Changes in Net Assets Available for Benefits - (Form 5500 - Schedule H - Part II)	3
Notes to Financial Statements	4-11
SUPPLEMENTAL SCHEDULES:	
Schedule of Delinquent Participant Contributions (Form 5500 – Schedule H – Part IV, Line 4(a)) -	12
Schedule of Assets (Held at End of Year) - (Form 5500 - Schedule H - Part IV, Item 4(i))	13

FOUR•FIFTEEN 415 GROUP
Business Advisors • Certified Public Accountants

INDEPENDENT AUDITORS' REPORT

Board of Directors
Spectrum Orthopaedics, Inc,
Profit Sharing Plan and Trust
Canton, Ohio

Report on the Financial Statements

We were engaged to audit the accompanying financial statements of **Spectrum Orthopaedics, Inc. Profit Sharing Plan and Trust** (Employer Federal ID #34-1032526, Plan #001), which comprise the statements of net assets available for benefits as of **December 31, 2014 and 2013**, and the related statement of changes in net assets available for benefits for the year ended **December 31, 2014**, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

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

Auditors' Responsibility

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

Basis for Disclaimer of Opinion

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

Disclaimer of Opinion

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

Other Matter

The supplemental schedules of Delinquent Participant Contributions and Schedule of Assets (Held at End of Year) for the year ended December 31, 2014, is required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 and is presented for the purpose of additional analysis and is not a required part of the financial statements. Because of the significance of the matter disclosed in the Basis for Disclaimer of Opinion paragraph, we do not express an opinion on the supplemental schedule referred to above.

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

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

Certified Public Accountants

Canton, Ohio
October 15, 2015

SPECTRUM ORTHOPAEDICS, INC.
PROFIT SHARING PLAN AND TRUST
(Employer Federal ID #34-1032526, Plan #001)

STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS

(Form 5500 - Schedule H - Part I)

	December 31, 2014	December 31, 2013
ASSETS:		
Investments, at fair value:		
Registered investment companies	**$ 13,080,546**	$ 12,312,238
Money market fund	**215,558**	122,290
Common collective trust	**747,904**	559,711
Total investments	**14,044,008**	12,994,239
Contribution receivables:		
Employer	**633,559**	614,372
Employees	**95,820**	2,999
Total receivables	**729,379**	617,371
Total assets	**14,773,387**	13,611,610
LIABILITIES	**-**	-
NET ASSETS (at fair value)	**14,773,387**	13,611,610
Adjustment from fair value to contract value for the fully benefit-responsive investment contract	**(13,044)**	(10,654)
NET ASSETS AVAILABLE FOR BENEFITS	**$ 14,760,343**	$ 13,600,956

The accompanying notes are an integral part of these financial statements.

SPECTRUM ORTHOPAEDICS, INC.
PROFIT SHARING PLAN AND TRUST
(Employer Federal ID #34-1032526, Plan #001)

STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS

(Form 5500 - Schedule H - Part II)

	Year Ended December 31, 2014
ADDITIONS TO NET ASSETS ATTRIBUTED TO:	
Investment income:	
Net appreciation (depreciation) in investments including investment income (loss) and realized and unrealized gains (losses) in fair value of investments at quoted market prices:	
Registered investment companies	**$ (46,302)**
Common collective trusts	**(2,390)**
Interest and dividends	**819,817**
	771,125
Contributions:	
Employer	**637,922**
Employees	**458,612**
Rollovers	**-**
	1,096,534
Total additions	**1,867,659**
DEDUCTIONS FROM NET ASSETS ATTRIBUTED TO:	
Benefit payments	**(680,600)**
Administrative expenses	**(27,672)**
Total deductions	**(708,272)**
NET INCREASE	**1,159,387**
NET ASSETS AVAILABLE FOR BENEFITS:	
Beginning of year	**13,600,956**
End of year	**$ 14,760,343**

The accompanying notes are an integral part of these financial statements.

SPECTRUM ORTHOPAEDICS, INC.
PROFIT SHARING PLAN AND TRUST
(Employer Federal ID #34-1032526, Plan #001)

NOTES TO FINANCIAL STATEMENTS

YEARS ENDED DECEMBER 31, 2014 AND 2013

A. DESCRIPTION OF THE PLAN:

The following description of the Spectrum Orthopaedics, Inc. Profit Sharing Plan and Trust (the "Plan") provides only general information. Participants should refer to the Plan agreement and Summary Plan Description for a more complete description of the Plan's provisions.

General - The Plan is a profit sharing plan with a salary deferral feature established for the benefit of the employees of Spectrum Orthopaedics, Inc. ("Plan Sponsor") who must be 21 years of age or older to be eligible for deferral and additionally complete one year of service by the end of a twelve month period, in which they must have completed 1,000 hours of service, to participate in any employer contributions. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 ("ERISA").

Contributions - Each participant is permitted to make elective deferrals up to 100% of their compensation, up to the maximum amount permitted by law and not less than 1% of their compensation, as defined by the Plan. Contributions may be made on a pre-tax basis or on an after tax basis through a Roth deferral option. 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 contribution plans.

The Plan also provides for a Qualified Automatic Contribution Arrangement ("QACA"), unless elected otherwise, and provides for age based funds as the investment default option. As part of the QACA, the Plan Sponsor must make a QACA Nonelective Employer Contribution to each eligible active participant in an amount ranging from 3% to 25% of the active participant's compensation. For the year ended December 31, 2014, the Plan Sponsor elected to contribute 3% for the QACA Nonelective Employer Contribution, which totaled $216,491.

In addition, the Plan Sponsor has the option to make a profit sharing contribution of which the amount is at the discretion of the Plan Sponsor. The discretionary profit sharing contribution was $416,078 for the year ended December 31, 2014. Participants direct the investment of all contributions into certain individual investment options offered by the Plan. All contributions are limited to the maximum allowed as a deduction under the Internal Revenue Code.

Participant Accounts - An account is maintained in the name of each participant. Each participant's account is credited with the participant's contribution, an allocation of the Plan Sponsor's contributions and Plan earnings. The benefit to which a participant is entitled is the benefit that can be provided from the participant's account. As of December 31, 2014 and 2013, approximately $112,443 and $231,603 respectively, was allocated to accounts of persons who have withdrawn from participation in future contributions to the Plan. These participants share in trust earnings and appreciation (depreciation) on investments held in their individual accounts but do not receive any additional contributions.

Investment Options - Upon enrollment in the Plan, a participant may direct employee and employer contributions into various investment options, each with varying investment objectives. Participants may change their investment options any time during the plan year.

A. DESCRIPTION OF THE PLAN (CONTINUED):

Forfeitures - Discretionary contributions and matching contributions that are forfeited will be used to pay for administrative expenses incurred by the Plan. The portion of forfeitures not used to pay administrative expenses may be used to reduce any employer discretionary or matching contributions. During the year ended December 31, 2014 and 2013, $-0- and $8,550, respectively, was paid for administrative expenses from the forfeitures account. As of December 31, 2014 and 2013, forfeitures available were $21,152 and $15,405, respectively.

Payment of Benefits - On termination of service, a participant having a balance of more than $1,000 may elect to receive either a lump-sum or monthly distribution or a direct rollover distribution. A participant having less than a $1,000 balance may take a lump-sum distribution or a direct rollover distribution. If no election is made, a lump sum distribution will automatically be made not less than 30 days and not more than 90 days from the time the participant terminates and receives the proper notice. Non-terminated employees may make withdrawals from their elective deferral account balance as a hardship withdrawal prior to reaching normal retirement age. Hardship withdrawals are subject to additional rules and conditions as outlined in the Plan agreement.

Vesting - A participant is fully vested immediately in elective wage deferrals and amounts rolled over from other plans. Vesting for employer matching contributions and employer discretionary contributions is as follows:

Years of Service	Vesting %
Less than 2	0%
2	100%

B. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES:

Basis of Reporting - The accompanying financial statements were prepared using the accrual method of accounting. The participants' statements, certified trust statements and Annual Return/Report of Employee Benefit Plan - Form 5500 have been prepared on the cash basis of accounting which records certain income when received and expenses when disbursements are made. As such, there are differences between the amounts in the participants' statements, certified trust statements, and Form 5500 and the amounts shown in the financial statements which are principally caused by contributions receivable and the adjustments for the fully benefit-responsive guaranteed investment contract.

Valuation of Investments and Income Recognition - The Plan's investments are stated at fair value as determined by the custodian using quoted market prices and other available information. The Plan's fully benefit-responsive investment contract is valued at contract value (Note D). Purchases and sales of securities are recorded on a trade-date basis. Dividends are recorded on the ex-dividend date. Interest income is recorded on the accrual basis. Net appreciation / depreciation includes the Plan's gains and losses on investments bought and sold as well as held during the year.

Administrative Expenses - Certain administrative expenses of the Plan are paid by the Plan Sponsor.

Payment of Benefits - Benefits are recorded when paid.

B. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONTINUED):

Subsequent Events - The Plan Sponsor has evaluated subsequent events through October 15, 2015, which is the date the financial statements were available to be issued.

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

C. INVESTMENTS:

Information including investments held as shown on the statements of net assets available for benefits, and interest and dividend income and net appreciation in fair value as shown on the statement of changes in net assets available for benefits as of December 31, 2014 and 2013 and for the year ended December 31, 2014, was prepared by or derived from information provided by the Fidelity Management Trust Company ("Fidelity"), the custodian and furnished to the plan administrator. The plan administrator obtained certification of this information from the custodian that the information provided to the plan administrator was complete and accurate. That information, which represents 5% or more of net plan assets and was certified as complete and accurate by the custodian, is summarized as follows:

	December 31, 2014	December 31, 2013
Fidelity Advisor Freedom 2020	$ 2,973,208	$ 2,965,011
Fidelity Advisor New Insights	1,269,845	1,152,605
Oppenheimer International Growth	**	735,635
SPTN 500 Index	1,356,568	1,130,542
Fidelity Advisor Stable Value	734,860	**

** not 5% of assets in specified year

D. GUARANTEED INVESTMENT CONTRACT:

In 2005, the Plan entered into a fully benefit-responsive investment contract with Fidelity. Fidelity maintains the contributions in a general account. The account is credited with earnings on the underlying investments and charged for participant withdrawals and administrative expenses. The guaranteed investment contract issuer is contractually obligated to repay the principal and specified interest rate that is guaranteed to the Plan.

Because the guaranteed 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 guaranteed investment contract. Contract value, as reported to the Plan by Fidelity, represents contributions made under the contract, plus earnings, less participant withdrawals or transfers 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. Such interest rates are reviewed on a quarterly basis for resetting.

D. GUARANTEED INVESTMENT CONTRACT (CONTINUED):

Certain events limit the ability of the Plan to transact at the contract value with the issuer. Such events include the following: (1) amendments to the plan documents (including complete or partial plan termination or merger with another plan), (2) changes to plan's prohibition on competing investment options or deletions of equity wash provisions, (3) bankruptcy of the plan Sponsor or other plan sponsor events (for example, divestitures or spin-offs of a subsidiary) that cause a significant withdrawal from the plan, or (4) the failure of the trust to qualify for exemption from Federal income taxes or any required prohibited transaction under the Employee Retirement Income Security Act of 1974. The plan administrator does not believe that the occurrence of any such valuation event, which would limit the Plan's ability to transact at contract value with participants, is probable. The guaranteed investment contract does not permit Fidelity to terminate the agreement prior to the scheduled maturity date.

The following table sets forth the average yields for the years ended December 31, 2014 and 2013.

	2014	2013
Average yields:		
Based on actual earnings	1.70%	1.70%
Based on interest rate credited to participants	0.99%	1.01%

E. FAIR VALUE MEASUREMENTS:

The authoritative accounting guidance establishes a framework for measuring fair value. That framework provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1 measurements) and the lowest priority to unobservable inputs (Level 3 measurements). The three levels of the fair value hierarchy under the authoritative accounting guidance 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 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.

E. FAIR VALUE MEASUREMENTS (CONTINUED):

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 or 2013.

Registered investment companies: Valued at the closing price reported on the active market on which the individual securities are traded.

Money market fund: Money market accounts are stated at cost, which approximates fair value.

Common collective trust: Valued at net asset value (NAV) by discounting the related cash flows based on current yields of similar instruments with comparable durations considering the credit-worthiness of the issuer.

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 tables set forth by level, within the fair value hierarchy, the Plan's assets at fair value as of December 31, 2014 and 2013:

Assets Measured at Fair Value at December 31, 2014:

	Level 1	Level 2	Level 3	Total
Registered investment companies:				
Large – cap fund	$ 3,999,640	$ -	$ -	$ 3,999,640
Mid – cap fund	1,313,165	-	-	1,313,165
Small – cap fund	285,156	-	-	285,156
International fund	966,088	-	-	966,088
Specialty fund	334,764	-	-	334,764
Blended fund	5,172,973	-	-	5,172,973
Income fund	1,008,760	-	-	1,008,760
Money market funds	215,558	-	-	215,558
	$13,296,104	$ -	$ -	13,296,104
Investments measured at net asset value as a practical expedient:				
Common collective trusts				747,904
Total assets at fair value				$14,044,008

E. FAIR VALUE MEASUREMENTS (CONTINUED):

Assets Measured at Fair Value at December 31, 2013:

	Level 1	Level 2	Level 3	Total
Registered investment companies:				
Large – cap fund	$ 3,490,856	$ -	$ -	$ 3,490,856
Mid – cap fund	1,250,640	-	-	1,250,640
Small – cap fund	349,973	-	-	349,973
International fund	1,043,808	-	-	1,043,808
Specialty fund	295,268	-	-	295,268
Blended fund	4,864,198	-	-	4,864,198
Income fund	1,017,495	-	-	1,017,495
Money market funds	122,290	-	-	122,290
	$12,434,528	$ -	$ -	12,434,528
Investments measured at net asset value as a practical expedient:				
Common collective trusts				559,711
Total assets at fair value				$12,994,239

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

December 31, 2014	Fair Value	Unfunded Commitments	Redemption Frequency (if currently eligible)	Redemption Notice Period
Common collective trusts:				
FA Stable Value Fund	$ 747,904	N/A	Daily	1 day
Total	$ 747,904			

December 31, 2013	Fair Value	Unfunded Commitments	Redemption Frequency (if currently eligible)	Redemption Notice Period
Common collective trusts:				
FA Stable Value Fund	$ 559,711	N/A	Daily	1 day
Total	$ 559,711			

F. PLAN TERMINATION:

Although it has not expressed any intent to do so, the Plan Sponsor 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 will become 100% vested in their accounts.

G. INCOME TAX STATUS:

The Plan has adopted a non-standardized, prototype plan document sponsored by Fidelity Management & Research Co. The prototype plan obtained a determination letter dated March 31, 2008, in which the Internal Revenue Service ("IRS") stated that the prototype plan, as then designed, was in compliance with the applicable requirements of the Internal Revenue Code ("IRC"). The Plan has been amended since receiving the determination letter, however the plan administrator believes that the Plan is designed and currently operating in compliance with the applicable requirements of the IRC.

The authoritative accounting guidance requires the plan administrator to evaluate uncertain tax positions taken by the Plan. The plan administrator is aware of certain operational, plan document, or demographic issues that, if not properly corrected, could be treated by the IRS as qualification failures. The plan administrator will be taking the proper steps to correct these issues. If necessary, the tax qualification issues will be properly resolved directly with the IRS. Accordingly, the plan administrator believes that the Plan will retain its tax-qualified status. In addition, the required nondiscrimination testing related to Code Section 401(k) and 401(m) arrangements, as applicable, has not been completed as of the date of this report. The plan administrator understands that the testing must be completed and any corrective actions required will be taken by December 31, 2015. The Plan has not recognized any interest or penalties related to uncertain tax positions. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress. Currently, the 2011, 2012 and 2013 tax years are open and subject to examination by the Internal Revenue Service.

H. TRANSACTIONS WITH PARTIES-IN-INTEREST:

Fidelity Management Trust Company is the custodian of the Plan and holds all of the Plan's investments. Fidelity Management Trust Company is a party-in-interest of the Plan as defined by ERISA Section 3(14), and accordingly investment transactions in the funds are parties-in-interest transactions. Certain legal and accounting fees and certain administrative expenses relating to the maintenance of participant eligibility records are absorbed by the Company.

I. 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.

J. LOST OPPORTUNITY COST CONTRIBUTIONS:

The Plan made late employee contributions to the Plan during the year ended December 31, 2014. The plan administrator calculated the lost opportunity cost to be $90for those contributions relating to the year ended December 31, 2014. The Company will contribute the lost opportunity cost for the year ended December 31, 2014 to the Plan during 2015. A disclosure has been made on Form 5500, Schedule H, Page 4, line 4a that $900 of 2014 employee contributions were not made within the time period described in 29 CFR 2510.3-102, which is considered a section 4975(a) prohibited transaction.

The Plan made late employee contributions to the Plan during the year ended December 31, 2014. The plan administrator calculated the lost opportunity cost to be $116 for those contributions relating to the year ended December 31, 2014. The Company contributed the lost opportunity cost for the year ended December 31, 2013 to the Plan during 2014.

K. RECONCILIAITON OF FINANCIAL STATEMENTS TO FORM 5500:

The following is a reconciliation of net assets available for benefits per the accompanying financial statements to the amounts reported in Form 5500.

	December 31, 2014	December 31, 2013
Net assets available for benefits as presented in these financial statements	$ 14,760,343	$ 13,600,956
Adjustments for contribution receivables	(729,379)	(617,371)
Adjustment from contract value to fair value for fully benefit-responsive investment contracts	13,044	10,654
Net assets available for benefits as presented on Form 5500	$ 14,044,008	$ 12,994,239

The following is a reconciliation of contributions and net investment gain reported in the accompanying statement of changes in net assets for benefits to the amounts reported in Form 5500.

	Year Ended December 31, 2014	Year Ended December 31, 2013
Net increase in net assets available for benefits as presented in these financial statements	$ 1,159,387	$ 2,648,653
Adjustments for contribution receivables	(107,228)	123,625
Adjustment from contract value to fair value for fully benefit-responsive investment contracts	(2,390)	(5,424)
Net increase in net assets available for benefits as presented on Form 5500	$ 1,049,769	$ 2,766,854

SPECTRUM ORTHOPAEDICS, INC.
PROFIT SHARING PLAN AND TRUST
(Employer Federal ID #34-1032526, Plan #001)

SCHEDULE OF DELINQUENT
PARTICIPANT CONTRIBUTIONS
(Form 5500 - Schedule H - Part IV, Line 4(a))

(See Independent Auditors' Report)

	Total that Constitute Nonexempt Prohibited Transactions				
Participant Contributions Transferred Late to Plan	**Contributions Not Corrected**	**Contributions Corrected Outside VFCP**	**Contributions Pending Correction in VFCP**	**Total Fully Corrected Under VFCP and PTE 2002-51**	**Lost Earnings**
December 31, 2014					
****	$ 900	$ 900	$ -	$ -	$ 90
December 31, 2013					
****	$ -	$ 2,999	$ -	$ 2,999	$ 116

**** Represents there were no late particpant loan repayments included**

SPECTRUM ORTHOPEDICS, INC.
PROFIT SHARING PLAN AND TRUST
(Employer Federal ID #34-1032526, Plan #001)

SCHEDULE OF ASSETS (HELD AT END OF YEAR)
(Form 5500 - Schedule H - Part IV, Item 4(i))

(See Independent Auditors' Report)

December 31, 2014

	(a)	Identity of Issue and description of investment including rate of interest and maturity date (b) and (c)	Principal amount or number of shares (c)	Cost (d)	Current value (e)
		COMMON COLLECTIVE TRUSTS:			
*		Fidelity Advisor Stable Value	734,859.90	**	$ 734,860
		TOTAL COMMON COLLECTIVE TRUSTS			734,860
		REGISTERED INVESTMENT COMPANIES:			
		Fidelity Prime Fund	215,558.28	**	215,558
		Col Mar Focused Equity	16,721.52	**	343,460
		Van Kampen Comstock	24,526.59	**	625,919
		Templeton Foreign	39,850.06	**	273,770
		Scout Mid Cap	36,481.76	**	563,278
		Trp Div Growth	3,659.60	**	132,112
		Oppenheimer International Growth	19,735.42	**	692,318
		Fidelity Advisor Freedom Inc	25.16	**	276
		Fidelity Advisor Leveraged Company Stock	3,789.79	**	215,411
		Fidelity Advisor Technology	9,151.55	**	334,764
		Fidelity Advisor High Income Advantage	11,869.58	**	118,933
		Fidelity Advisor Strategic Income	54,619.18	**	660,346
		Fidelity Advisor Small Cap	5,810.23	**	167,044
		Fidelity Advisor New Insights	46,771.45	**	1,269,845
		Fidelity Advisor Strategic Div Income	27,107.92	**	396,589
		Fidelity Advisor Total Bond	21,527.25	**	229,480
		JPM LG Cap Growth	7,853.67	**	271,737
		SPTN 500 Index	18,621.39	**	1,356,568
		SPTN Mid Cap Index	14,833.12	**	258,838
		Fidelity Advisor Freedom 2010	2,117.59	**	26,512
		Fidelity Advisor Freedom 2015	8,120.72	**	101,671
		Fidelity Advisor Freedom 2020	224,732.31	**	2,973,208
		Fidelity Advisor Freedom 2025	20,920.68	**	272,806
		Fidelity Advisor Freedom 2030	21,330.31	**	295,425
		Fidelity Advisor Freedom 2035	14,169.34	**	187,460
		Fidelity Advisor Freedom 2040	22,083.62	**	313,367
		Fidelity Advisor Freedom 2045	35,440.32	**	387,008
		Fidelity Advisor Freedom 2050	15,988.28	**	173,153
		Fidelity Advisor Freedom 2055	3,908.71	**	45,497
		RS Partners Fund Y	3,696.78	**	118,112
		Artisan Mid Cap Inv	6,065.99	**	275,638
		TOTAL REGISTERED INVESTMENT COMPANIES			13,296,104
		TOTALS			$ 14,030,964

* INDICATES A PARTY-IN-INTEREST

** COSTS HAVE BEEN OMITTED DUE TO PARTICIPANT-DIRECTED TRANSACTIONS UNDER AN INDIVIDUAL ACCOUNT PLAN

SPECTRUM ORTHOPAEDICS, INC.
PROFIT SHARING PLAN AND TRUST
(Employer Federal ID #34-1032526, Plan #001)

AUDITED FINANCIAL STATEMENTS
AND SUPPLEMENTAL SCHEDULES

YEARS ENDED DECEMBER 31, 2014 AND 2013

SPECTRUM ORTHOPAEDICS, INC.
PROFIT SHARING PLAN AND TRUST
(Employer Federal ID #34-1032526, Plan #001)

AUDITED FINANCIAL STATEMENTS
AND SUPPLEMENTAL SCHEDULES

YEARS ENDED DECEMBER 31, 2014 AND 2013

TABLE OF CONTENTS

	Page
AUDITED FINANCIAL STATEMENTS:	
Independent Auditors' Report	1
Statements of Net Assets Available for Benefits - (Form 5500 - Schedule H - Part I)	2
Statement of Changes in Net Assets Available for Benefits - (Form 5500 - Schedule H - Part II)	3
Notes to Financial Statements	4-11
SUPPLEMENTAL SCHEDULES:	
Schedule of Delinquent Participant Contributions (Form 5500 – Schedule H – Part IV, Line 4(a)) -	12
Schedule of Assets (Held at End of Year) - (Form 5500 - Schedule H - Part IV, Item 4(i))	13

FOUR•FIFTEEN 415 GROUP
Business Advisors • Certified Public Accountants

INDEPENDENT AUDITORS' REPORT

Board of Directors
Spectrum Orthopaedics, Inc,
Profit Sharing Plan and Trust
Canton, Ohio

Report on the Financial Statements

We were engaged to audit the accompanying financial statements of **Spectrum Orthopaedics, Inc. Profit Sharing Plan and Trust** (Employer Federal ID #34-1032526, Plan #001), which comprise the statements of net assets available for benefits as of **December 31, 2014 and 2013**, and the related statement of changes in net assets available for benefits for the year ended **December 31, 2014**, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

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

Auditors' Responsibility

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

Basis for Disclaimer of Opinion

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

Disclaimer of Opinion

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

Other Matter

The supplemental schedules of Delinquent Participant Contributions and Schedule of Assets (Held at End of Year) for the year ended December 31, 2014, is required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 and is presented for the purpose of additional analysis and is not a required part of the financial statements. Because of the significance of the matter disclosed in the Basis for Disclaimer of Opinion paragraph, we do not express an opinion on the supplemental schedule referred to above.

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

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

Certified Public Accountants

Canton, Ohio
October 15, 2015

SPECTRUM ORTHOPAEDICS, INC.
PROFIT SHARING PLAN AND TRUST
(Employer Federal ID #34-1032526, Plan #001)

STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS

(Form 5500 - Schedule H - Part I)

	December 31, 2014	December 31, 2013
ASSETS:		
Investments, at fair value:		
Registered investment companies	**$ 13,080,546**	$ 12,312,238
Money market fund	**215,558**	122,290
Common collective trust	**747,904**	559,711
Total investments	**14,044,008**	12,994,239
Contribution receivables:		
Employer	**633,559**	614,372
Employees	**95,820**	2,999
Total receivables	**729,379**	617,371
Total assets	**14,773,387**	13,611,610
LIABILITIES	**-**	-
NET ASSETS (at fair value)	**14,773,387**	13,611,610
Adjustment from fair value to contract value for the fully benefit-responsive investment contract	**(13,044)**	(10,654)
NET ASSETS AVAILABLE FOR BENEFITS	**$ 14,760,343**	$ 13,600,956

The accompanying notes are an integral part of these financial statements.

SPECTRUM ORTHOPAEDICS, INC.
PROFIT SHARING PLAN AND TRUST
(Employer Federal ID #34-1032526, Plan #001)

STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS

(Form 5500 - Schedule H - Part II)

	Year Ended December 31, 2014
ADDITIONS TO NET ASSETS ATTRIBUTED TO:	
Investment income:	
Net appreciation (depreciation) in investments including investment income (loss) and realized and unrealized gains (losses) in fair value of investments at quoted market prices:	
Registered investment companies	**$ (46,302)**
Common collective trusts	**(2,390)**
Interest and dividends	**819,817**
	771,125
Contributions:	
Employer	**637,922**
Employees	**458,612**
Rollovers	**-**
	1,096,534
Total additions	**1,867,659**
DEDUCTIONS FROM NET ASSETS ATTRIBUTED TO:	
Benefit payments	**(680,600)**
Administrative expenses	**(27,672)**
Total deductions	**(708,272)**
NET INCREASE	**1,159,387**
NET ASSETS AVAILABLE FOR BENEFITS:	
Beginning of year	**13,600,956**
End of year	**$ 14,760,343**

The accompanying notes are an integral part of these financial statements.

SPECTRUM ORTHOPAEDICS, INC.
PROFIT SHARING PLAN AND TRUST
(Employer Federal ID #34-1032526, Plan #001)

NOTES TO FINANCIAL STATEMENTS

YEARS ENDED DECEMBER 31, 2014 AND 2013

A. DESCRIPTION OF THE PLAN:

The following description of the Spectrum Orthopaedics, Inc. Profit Sharing Plan and Trust (the "Plan") provides only general information. Participants should refer to the Plan agreement and Summary Plan Description for a more complete description of the Plan's provisions.

General - The Plan is a profit sharing plan with a salary deferral feature established for the benefit of the employees of Spectrum Orthopaedics, Inc. ("Plan Sponsor") who must be 21 years of age or older to be eligible for deferral and additionally complete one year of service by the end of a twelve month period, in which they must have completed 1,000 hours of service, to participate in any employer contributions. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 ("ERISA").

Contributions - Each participant is permitted to make elective deferrals up to 100% of their compensation, up to the maximum amount permitted by law and not less than 1% of their compensation, as defined by the Plan. Contributions may be made on a pre-tax basis or on an after tax basis through a Roth deferral option. 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 contribution plans.

The Plan also provides for a Qualified Automatic Contribution Arrangement ("QACA"), unless elected otherwise, and provides for age based funds as the investment default option. As part of the QACA, the Plan Sponsor must make a QACA Nonelective Employer Contribution to each eligible active participant in an amount ranging from 3% to 25% of the active participant's compensation. For the year ended December 31, 2014, the Plan Sponsor elected to contribute 3% for the QACA Nonelective Employer Contribution, which totaled $216,491.

In addition, the Plan Sponsor has the option to make a profit sharing contribution of which the amount is at the discretion of the Plan Sponsor. The discretionary profit sharing contribution was $416,078 for the year ended December 31, 2014. Participants direct the investment of all contributions into certain individual investment options offered by the Plan. All contributions are limited to the maximum allowed as a deduction under the Internal Revenue Code.

Participant Accounts - An account is maintained in the name of each participant. Each participant's account is credited with the participant's contribution, an allocation of the Plan Sponsor's contributions and Plan earnings. The benefit to which a participant is entitled is the benefit that can be provided from the participant's account. As of December 31, 2014 and 2013, approximately $112,443 and $231,603 respectively, was allocated to accounts of persons who have withdrawn from participation in future contributions to the Plan. These participants share in trust earnings and appreciation (depreciation) on investments held in their individual accounts but do not receive any additional contributions.

Investment Options - Upon enrollment in the Plan, a participant may direct employee and employer contributions into various investment options, each with varying investment objectives. Participants may change their investment options any time during the plan year.

A. DESCRIPTION OF THE PLAN (CONTINUED):

Forfeitures - Discretionary contributions and matching contributions that are forfeited will be used to pay for administrative expenses incurred by the Plan. The portion of forfeitures not used to pay administrative expenses may be used to reduce any employer discretionary or matching contributions. During the year ended December 31, 2014 and 2013, $-0- and $8,550, respectively, was paid for administrative expenses from the forfeitures account. As of December 31, 2014 and 2013, forfeitures available were $21,152 and $15,405, respectively.

Payment of Benefits - On termination of service, a participant having a balance of more than $1,000 may elect to receive either a lump-sum or monthly distribution or a direct rollover distribution. A participant having less than a $1,000 balance may take a lump-sum distribution or a direct rollover distribution. If no election is made, a lump sum distribution will automatically be made not less than 30 days and not more than 90 days from the time the participant terminates and receives the proper notice. Non-terminated employees may make withdrawals from their elective deferral account balance as a hardship withdrawal prior to reaching normal retirement age. Hardship withdrawals are subject to additional rules and conditions as outlined in the Plan agreement.

Vesting - A participant is fully vested immediately in elective wage deferrals and amounts rolled over from other plans. Vesting for employer matching contributions and employer discretionary contributions is as follows:

Years of Service	Vesting %
Less than 2	0%
2	100%

B. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES:

Basis of Reporting - The accompanying financial statements were prepared using the accrual method of accounting. The participants' statements, certified trust statements and Annual Return/Report of Employee Benefit Plan - Form 5500 have been prepared on the cash basis of accounting which records certain income when received and expenses when disbursements are made. As such, there are differences between the amounts in the participants' statements, certified trust statements, and Form 5500 and the amounts shown in the financial statements which are principally caused by contributions receivable and the adjustments for the fully benefit-responsive guaranteed investment contract.

Valuation of Investments and Income Recognition - The Plan's investments are stated at fair value as determined by the custodian using quoted market prices and other available information. The Plan's fully benefit-responsive investment contract is valued at contract value (Note D). Purchases and sales of securities are recorded on a trade-date basis. Dividends are recorded on the ex-dividend date. Interest income is recorded on the accrual basis. Net appreciation / depreciation includes the Plan's gains and losses on investments bought and sold as well as held during the year.

Administrative Expenses - Certain administrative expenses of the Plan are paid by the Plan Sponsor.

Payment of Benefits - Benefits are recorded when paid.

B. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONTINUED):

Subsequent Events - The Plan Sponsor has evaluated subsequent events through October 15, 2015, which is the date the financial statements were available to be issued.

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

C. INVESTMENTS:

Information including investments held as shown on the statements of net assets available for benefits, and interest and dividend income and net appreciation in fair value as shown on the statement of changes in net assets available for benefits as of December 31, 2014 and 2013 and for the year ended December 31, 2014, was prepared by or derived from information provided by the Fidelity Management Trust Company ("Fidelity"), the custodian and furnished to the plan administrator. The plan administrator obtained certification of this information from the custodian that the information provided to the plan administrator was complete and accurate. That information, which represents 5% or more of net plan assets and was certified as complete and accurate by the custodian, is summarized as follows:

	December 31, 2014	December 31, 2013
Fidelity Advisor Freedom 2020	$ 2,973,208	$ 2,965,011
Fidelity Advisor New Insights	1,269,845	1,152,605
Oppenheimer International Growth	**	735,635
SPTN 500 Index	1,356,568	1,130,542
Fidelity Advisor Stable Value	734,860	**

** not 5% of assets in specified year

D. GUARANTEED INVESTMENT CONTRACT:

In 2005, the Plan entered into a fully benefit-responsive investment contract with Fidelity. Fidelity maintains the contributions in a general account. The account is credited with earnings on the underlying investments and charged for participant withdrawals and administrative expenses. The guaranteed investment contract issuer is contractually obligated to repay the principal and specified interest rate that is guaranteed to the Plan.

Because the guaranteed 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 guaranteed investment contract. Contract value, as reported to the Plan by Fidelity, represents contributions made under the contract, plus earnings, less participant withdrawals or transfers 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. Such interest rates are reviewed on a quarterly basis for resetting.

D. GUARANTEED INVESTMENT CONTRACT (CONTINUED):

Certain events limit the ability of the Plan to transact at the contract value with the issuer. Such events include the following: (1) amendments to the plan documents (including complete or partial plan termination or merger with another plan), (2) changes to plan's prohibition on competing investment options or deletions of equity wash provisions, (3) bankruptcy of the plan Sponsor or other plan sponsor events (for example, divestitures or spin-offs of a subsidiary) that cause a significant withdrawal from the plan, or (4) the failure of the trust to qualify for exemption from Federal income taxes or any required prohibited transaction under the Employee Retirement Income Security Act of 1974. The plan administrator does not believe that the occurrence of any such valuation event, which would limit the Plan's ability to transact at contract value with participants, is probable. The guaranteed investment contract does not permit Fidelity to terminate the agreement prior to the scheduled maturity date.

The following table sets forth the average yields for the years ended December 31, 2014 and 2013.

	2014	2013
Average yields:		
Based on actual earnings	1.70%	1.70%
Based on interest rate credited to participants	0.99%	1.01%

E. FAIR VALUE MEASUREMENTS:

The authoritative accounting guidance establishes a framework for measuring fair value. That framework provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1 measurements) and the lowest priority to unobservable inputs (Level 3 measurements). The three levels of the fair value hierarchy under the authoritative accounting guidance 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 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.

E. FAIR VALUE MEASUREMENTS (CONTINUED):

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 or 2013.

Registered investment companies: Valued at the closing price reported on the active market on which the individual securities are traded.

Money market fund: Money market accounts are stated at cost, which approximates fair value.

Common collective trust: Valued at net asset value (NAV) by discounting the related cash flows based on current yields of similar instruments with comparable durations considering the credit-worthiness of the issuer.

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 tables set forth by level, within the fair value hierarchy, the Plan's assets at fair value as of December 31, 2014 and 2013:

Assets Measured at Fair Value at December 31, 2014:

	Level 1	Level 2	Level 3	Total
Registered investment companies:				
Large – cap fund	$ 3,999,640	$ -	$ -	$ 3,999,640
Mid – cap fund	1,313,165	-	-	1,313,165
Small – cap fund	285,156	-	-	285,156
International fund	966,088	-	-	966,088
Specialty fund	334,764	-	-	334,764
Blended fund	5,172,973	-	-	5,172,973
Income fund	1,008,760	-	-	1,008,760
Money market funds	215,558	-	-	215,558
	$13,296,104	$ -	$ -	13,296,104
Investments measured at net asset value as a practical expedient:				
Common collective trusts				747,904
Total assets at fair value				$14,044,008

E. FAIR VALUE MEASUREMENTS (CONTINUED):

Assets Measured at Fair Value at December 31, 2013:

	Level 1	Level 2	Level 3	Total
Registered investment companies:				
Large – cap fund	$ 3,490,856	$ -	$ -	$ 3,490,856
Mid – cap fund	1,250,640	-	-	1,250,640
Small – cap fund	349,973	-	-	349,973
International fund	1,043,808	-	-	1,043,808
Specialty fund	295,268	-	-	295,268
Blended fund	4,864,198	-	-	4,864,198
Income fund	1,017,495	-	-	1,017,495
Money market funds	122,290	-	-	122,290
	$12,434,528	$ -	$ -	12,434,528
Investments measured at net asset value as a practical expedient:				
Common collective trusts				559,711
Total assets at fair value				$12,994,239

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

December 31, 2014	Fair Value	Unfunded Commitments	Redemption Frequency (if currently eligible)	Redemption Notice Period
Common collective trusts:				
FA Stable Value Fund	$ 747,904	N/A	Daily	1 day
Total	$ 747,904			

December 31, 2013	Fair Value	Unfunded Commitments	Redemption Frequency (if currently eligible)	Redemption Notice Period
Common collective trusts:				
FA Stable Value Fund	$ 559,711	N/A	Daily	1 day
Total	$ 559,711			

F. PLAN TERMINATION:

Although it has not expressed any intent to do so, the Plan Sponsor 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 will become 100% vested in their accounts.

G. INCOME TAX STATUS:

The Plan has adopted a non-standardized, prototype plan document sponsored by Fidelity Management & Research Co. The prototype plan obtained a determination letter dated March 31, 2008, in which the Internal Revenue Service ("IRS") stated that the prototype plan, as then designed, was in compliance with the applicable requirements of the Internal Revenue Code ("IRC"). The Plan has been amended since receiving the determination letter, however the plan administrator believes that the Plan is designed and currently operating in compliance with the applicable requirements of the IRC.

The authoritative accounting guidance requires the plan administrator to evaluate uncertain tax positions taken by the Plan. The plan administrator is aware of certain operational, plan document, or demographic issues that, if not properly corrected, could be treated by the IRS as qualification failures. The plan administrator will be taking the proper steps to correct these issues. If necessary, the tax qualification issues will be properly resolved directly with the IRS. Accordingly, the plan administrator believes that the Plan will retain its tax-qualified status. In addition, the required nondiscrimination testing related to Code Section 401(k) and 401(m) arrangements, as applicable, has not been completed as of the date of this report. The plan administrator understands that the testing must be completed and any corrective actions required will be taken by December 31, 2015. The Plan has not recognized any interest or penalties related to uncertain tax positions. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress. Currently, the 2011, 2012 and 2013 tax years are open and subject to examination by the Internal Revenue Service.

H. TRANSACTIONS WITH PARTIES-IN-INTEREST:

Fidelity Management Trust Company is the custodian of the Plan and holds all of the Plan's investments. Fidelity Management Trust Company is a party-in-interest of the Plan as defined by ERISA Section 3(14), and accordingly investment transactions in the funds are parties-in-interest transactions. Certain legal and accounting fees and certain administrative expenses relating to the maintenance of participant eligibility records are absorbed by the Company.

I. 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.

J. LOST OPPORTUNITY COST CONTRIBUTIONS:

The Plan made late employee contributions to the Plan during the year ended December 31, 2014. The plan administrator calculated the lost opportunity cost to be $90for those contributions relating to the year ended December 31, 2014. The Company will contribute the lost opportunity cost for the year ended December 31, 2014 to the Plan during 2015. A disclosure has been made on Form 5500, Schedule H, Page 4, line 4a that $900 of 2014 employee contributions were not made within the time period described in 29 CFR 2510.3-102, which is considered a section 4975(a) prohibited transaction.

The Plan made late employee contributions to the Plan during the year ended December 31, 2014. The plan administrator calculated the lost opportunity cost to be $116 for those contributions relating to the year ended December 31, 2014. The Company contributed the lost opportunity cost for the year ended December 31, 2013 to the Plan during 2014.

K. RECONCILIAITON OF FINANCIAL STATEMENTS TO FORM 5500:

The following is a reconciliation of net assets available for benefits per the accompanying financial statements to the amounts reported in Form 5500.

	December 31, 2014	December 31, 2013
Net assets available for benefits as presented in these financial statements	$ 14,760,343	$ 13,600,956
Adjustments for contribution receivables	(729,379)	(617,371)
Adjustment from contract value to fair value for fully benefit-responsive investment contracts	13,044	10,654
Net assets available for benefits as presented on Form 5500	$ 14,044,008	$ 12,994,239

The following is a reconciliation of contributions and net investment gain reported in the accompanying statement of changes in net assets for benefits to the amounts reported in Form 5500.

	Year Ended December 31, 2014	Year Ended December 31, 2013
Net increase in net assets available for benefits as presented in these financial statements	$ 1,159,387	$ 2,648,653
Adjustments for contribution receivables	(107,228)	123,625
Adjustment from contract value to fair value for fully benefit-responsive investment contracts	(2,390)	(5,424)
Net increase in net assets available for benefits as presented on Form 5500	$ 1,049,769	$ 2,766,854

SPECTRUM ORTHOPAEDICS, INC.
PROFIT SHARING PLAN AND TRUST
(Employer Federal ID #34-1032526, Plan #001)

SCHEDULE OF DELINQUENT
PARTICIPANT CONTRIBUTIONS
(Form 5500 - Schedule H - Part IV, Line 4(a))

(See Independent Auditors' Report)

	Total that Constitute Nonexempt Prohibited Transactions				
Participant Contributions Transferred Late to Plan	**Contributions Not Corrected**	**Contributions Corrected Outside VFCP**	**Contributions Pending Correction in VFCP**	**Total Fully Corrected Under VFCP and PTE 2002-51**	**Lost Earnings**
December 31, 2014					
****	$ 900	$ 900	$ -	$ -	$ 90
December 31, 2013					
****	$ -	$ 2,999	$ -	$ 2,999	$ 116

**** Represents there were no late particpant loan repayments included**

SPECTRUM ORTHOPEDICS, INC.
PROFIT SHARING PLAN AND TRUST
(Employer Federal ID #34-1032526, Plan #001)

SCHEDULE OF ASSETS (HELD AT END OF YEAR)
(Form 5500 - Schedule H - Part IV, Item 4(i))

(See Independent Auditors' Report)

December 31, 2014

	(a)	Identity of Issue and description of investment including rate of interest and maturity date (b) and (c)	Principal amount or number of shares (c)	Cost (d)	Current value (e)
		COMMON COLLECTIVE TRUSTS:			
*		Fidelity Advisor Stable Value	734,859.90	**	$ 734,860
		TOTAL COMMON COLLECTIVE TRUSTS			734,860
		REGISTERED INVESTMENT COMPANIES:			
		Fidelity Prime Fund	215,558.28	**	215,558
		Col Mar Focused Equity	16,721.52	**	343,460
		Van Kampen Comstock	24,526.59	**	625,919
		Templeton Foreign	39,850.06	**	273,770
		Scout Mid Cap	36,481.76	**	563,278
		Trp Div Growth	3,659.60	**	132,112
		Oppenheimer International Growth	19,735.42	**	692,318
		Fidelity Advisor Freedom Inc	25.16	**	276
		Fidelity Advisor Leveraged Company Stock	3,789.79	**	215,411
		Fidelity Advisor Technology	9,151.55	**	334,764
		Fidelity Advisor High Income Advantage	11,869.58	**	118,933
		Fidelity Advisor Strategic Income	54,619.18	**	660,346
		Fidelity Advisor Small Cap	5,810.23	**	167,044
		Fidelity Advisor New Insights	46,771.45	**	1,269,845
		Fidelity Advisor Strategic Div Income	27,107.92	**	396,589
		Fidelity Advisor Total Bond	21,527.25	**	229,480
		JPM LG Cap Growth	7,853.67	**	271,737
		SPTN 500 Index	18,621.39	**	1,356,568
		SPTN Mid Cap Index	14,833.12	**	258,838
		Fidelity Advisor Freedom 2010	2,117.59	**	26,512
		Fidelity Advisor Freedom 2015	8,120.72	**	101,671
		Fidelity Advisor Freedom 2020	224,732.31	**	2,973,208
		Fidelity Advisor Freedom 2025	20,920.68	**	272,806
		Fidelity Advisor Freedom 2030	21,330.31	**	295,425
		Fidelity Advisor Freedom 2035	14,169.34	**	187,460
		Fidelity Advisor Freedom 2040	22,083.62	**	313,367
		Fidelity Advisor Freedom 2045	35,440.32	**	387,008
		Fidelity Advisor Freedom 2050	15,988.28	**	173,153
		Fidelity Advisor Freedom 2055	3,908.71	**	45,497
		RS Partners Fund Y	3,696.78	**	118,112
		Artisan Mid Cap Inv	6,065.99	**	275,638
		TOTAL REGISTERED INVESTMENT COMPANIES			13,296,104
		TOTALS			$ 14,030,964

* INDICATES A PARTY-IN-INTEREST

** COSTS HAVE BEEN OMITTED DUE TO PARTICIPANT-DIRECTED TRANSACTIONS UNDER AN INDIVIDUAL ACCOUNT PLAN