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;
- [X] 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;
- [X] automatic extension;
- [ ] the DFVC program;
- [ ] special extension (enter description)

Part II Basic Plan Information—enter all requested information

1a Name of plan
RTT USA INC 401K PROFIT SHARING PLAN & TRUST

1b Three-digit plan number (PN) ▶ 001

1c Effective date of plan 01/01/2007

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

400 WEST FOURTH STREET
4TH FLOOR
ROYAL OAK, MI 48067

2b Employer Identification Number (EIN)
20-2394780

2c Plan Sponsor's telephone number
248-544-4022

2d Business code (see instructions)
541990

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.	10/27/2015	TRACY A GREENE
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	Filed with authorized/valid electronic signature.	10/27/2015	TRACY A GREENE
	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**	184
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)**	149
a(2) Total number of active participants at the end of the plan year	**6a(2)**	129
b Retired or separated participants receiving benefits	**6b**	0
c Other retired or separated participants entitled to future benefits	**6c**	54
d Subtotal. Add lines **6a(2)**, **6b**, and **6c**.	**6d**	183
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	**6e**	0
f Total. Add lines **6d** and **6e**.	**6f**	183
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**	170
h Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested	**6h**	0
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	**7**	

8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions:
2E 2F 2G 2J 2K 2T 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)** [ ] ___ **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
RTT USA INC 401K PROFIT SHARING PLAN & TRUST

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
RTT USA INC

D Employer Identification Number (EIN)
20-2394780

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

ALLIANCEBERNSTEIN L.P.

13-4064930

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

ALLIANZ GLOBAL INVESTORS DISTRIBUTO

1345 AVENUE OF THE AMERICAS
NEW YORK, NY 10105

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

BLACKROCK INVESTMENTS, INC.

23-2784752

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

DEAWM DISTRIBUTORS, INC.

36-3976708

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

FIDELITY DISTRIBUTORS CORP.

500 SALEM STREET
MAIL ZONE O3N
SMITHFIELD, RI 02917

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

FRANKLIN TEMPLETON DISTRIBUTORS, IN

100 FOUNTAIN PARKWAY
ST. PETERSBURG, FL 33716

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

HARTFORD INVESTMENT FINANCIAL SERVI

201 HOPMEADOW STREET
SIMSBURY, CT 06089

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

INVESCO DISTRIBUTORS, INC.

74-1894784

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

J.P. MORGAN INVESTMENT MANAGEMENT I

13-3200244

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

MFS FUND DISTRIBUTORS, INC.

04-2747644

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

NYLIFE DISTRIBUTORS, LLC

169 LACKAWANNA AVENUE
PARSIPPANY, NJ 07054

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

OPPENHEIMER FUNDS INC.

13-2527171

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

PHOENIX - VIRTUS

56 PROSPECT STREET
PO BOX 150480
HARTFORD, CT 06115

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

PRUDENTIAL INVESTMENTS LLC

22-3468527

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

PUTNAM RETAIL MANAGEMENT

ONE POST OFFICE SQUARE
BOSTON, MA 02109

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

T. ROWE PRICE

100 EAST PRATT STREET
BALTIMORE, MD 21202

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

THORNBURG SECURITIES CORPORATION

2300 NORTH RIDGETOP RD.
SANTA FE, NM 87506

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

VICTORY CAPITAL MANAGEMENT

13-2700161

(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)

ADP, LLC

13-3036745

(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?
37 50 15 64	RECORD KEEPER	1650	Yes [X] No [ ]	Yes [X] No [ ]	0	Yes [ ] No [X]

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

STATE STREET CORPORATION

04-1867445

(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?
21 99	DIRECTED TRUSTEE/CUSTODIA	0	Yes [X] No [ ]	Yes [X] No [ ]	500	Yes [ ] No [X]

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

ADP BROKER-DEALER

22-3319984

(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?
63 60 59 49 99	RECORD KEEPER	0	Yes [X] No [ ]	Yes [ ] No [X]	0	Yes [X] 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)

EDWARD JONES

5984 LIVERNOIS RD
TROY, MI 48098

(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?
49 99	ADVISOR	0	Yes [X] No [ ]	Yes [ ] No [X]	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 [ ]

(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
EDWARD JONES	99	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.
ADP BROKER-DEALER 22-3319984	0.0025 BASIS POINTS

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
ADP BROKER-DEALER	63 60 59	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.
ALLIANCEBERNSTEIN L.P. 13-4064930	ANNUAL RATE 0.00250 OF AVERAGE DAILY ASSETS

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
ADP BROKER-DEALER	63 60 59	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
ALLIANZ GLOBAL INVESTORS DISTRIBUTO 1345 AVENUE OF THE AMERICAS NEW YORK, NY 10105	ANNUAL RATE 0.00250 OF AVERAGE DAILY ASSETS ANNUAL RATE 0.00200 OF AVERAGE DAILY ASSETS ANNUAL RATE 0.00250 OF AVERAGE DAILY ASSETS ANNUAL RATE 0.00200 OF AVERAGE DAILY ASSETS

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
ADP BROKER-DEALER	63 60 59	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.
BLACKROCK INVESTMENTS, INC. 23-2784752	ANNUAL RATE 0.00250 OF AVERAGE DAILY ASSETS ANNUAL RATE 0.00250 OF AVERAGE DAILY ASSETS ANNUAL RATE 0.00250 OF AVERAGE DAILY ASSETS

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
ADP BROKER-DEALER	63 60 59	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.
DEAWM DISTRIBUTORS, INC. 36-3976708	ANNUAL RATE 0.00250 OF AVERAGE DAILY ASSETS

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
ADP BROKER-DEALER	63 60 59	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.
FIDELITY DISTRIBUTORS CORP. 500 SALEM STREET MAIL ZONE O3N SMITHFIELD, RI 02917	ANNUAL RATE 0.00500 OF AVERAGE DAILY ASSETS ANNUAL RATE 0.00250 OF AVERAGE DAILY ASSETS

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
ADP BROKER-DEALER	63 60 59	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.
FRANKLIN TEMPLETON DISTRIBUTORS, IN 100 FOUNTAIN PARKWAY ST. PETERSBURG, FL 33716	ANNUAL RATE 0.00250 OF AVERAGE DAILY ASSETS ANNUAL RATE 0.00500 OF AVERAGE DAILY ASSETS ANNUAL RATE 0.00250 OF AVERAGE DAILY ASSETS ANNUAL RATE 0.00250 OF AVERAGE DAILY ASSETS

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
ADP BROKER-DEALER	63 60 59	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.
HARTFORD INVESTMENT FINANCIAL SERVI 201 HOPMEADOW STREET SIMSBURY, CT 06089	ANNUAL RATE 0.00250 OF AVERAGE DAILY ASSETS ANNUAL RATE 0.00250 OF AVERAGE DAILY ASSETS

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
ADP BROKER-DEALER	63 60 59	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.
INVESCO DISTRIBUTORS, INC. 74-1894784	ANNUAL RATE 0.00250 OF AVERAGE DAILY ASSETS ANNUAL RATE 0.00250 OF AVERAGE DAILY ASSETS

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
ADP BROKER-DEALER	63 60 59	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.
J.P. MORGAN INVESTMENT MANAGEMENT I 13-3200244	ANNUAL RATE 0.00250 OF AVERAGE DAILY ASSETS

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
ADP BROKER-DEALER	63 60 59	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.
MFS FUND DISTRIBUTORS, INC. 04-2747644	ANNUAL RATE 0.00500 OF AVERAGE DAILY ASSETS ANNUAL RATE 0.00150 OF AVERAGE DAILY ASSETS

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
ADP BROKER-DEALER	63 60 59	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.
NYLIFE DISTRIBUTORS, LLC 169 LACKAWANNA AVENUE PARSIPPANY, NJ 07054	ANNUAL RATE 0.00250 OF AVERAGE DAILY ASSETS

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
ADP BROKER-DEALER	63 60 59	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.
OPPENHEIMER FUNDS INC. 13-2527171	ANNUAL RATE 0.00250 OF AVERAGE DAILY ASSETS ANNUAL RATE 0.00250 OF AVERAGE DAILY ASSETS

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
ADP BROKER-DEALER	63 60 59	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.
PHOENIX - VIRTUS 56 PROSPECT STREET PO BOX 150480 HARTFORD, CT 06115	ANNUAL RATE 0.00250 OF AVERAGE DAILY ASSETS

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
ADP BROKER-DEALER	63 60 59	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.
PRUDENTIAL INVESTMENTS LLC 22-3468527	ANNUAL RATE 0.00250 OF AVERAGE DAILY ASSETS ANNUAL RATE 0.00250 OF AVERAGE DAILY ASSETS ANNUAL RATE 0.00250 OF AVERAGE DAILY ASSETS

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
ADP BROKER-DEALER	63 60 59	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.
PUTNAM RETAIL MANAGEMENT ONE POST OFFICE SQUARE BOSTON, MA 02109	ANNUAL RATE 0.00250 OF AVERAGE DAILY ASSETS

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
ADP BROKER-DEALER	99	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.
STATE STREET CORPORATION 04-1867445	ANNUAL RATE 0.00004 OF AVERAGE DAILY ASSETS

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
ADP BROKER-DEALER	63 60 59	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
T. ROWE PRICE 100 EAST PRATT STREET BALTIMORE, MD 21202	ANNUAL RATE 0.00500 OF AVERAGE DAILY ASSETS ANNUAL RATE 0.00150 OF AVERAGE DAILY ASSETS ANNUAL RATE 0.00500 OF AVERAGE DAILY ASSETS ANNUAL RATE 0.00150 OF AVERAGE DAILY ASSETS ANNUAL RATE 0.00500 OF AVERAGE DAILY ASSETS

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
ADP BROKER-DEALER	63 60 59	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.
THORNBURG SECURITIES CORPORATION 2300 NORTH RIDGETOP RD. SANTA FE, NM 87506	ANNUAL RATE 0.00250 OF AVERAGE DAILY ASSETS

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
ADP BROKER-DEALER	63 60 59	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.
VICTORY CAPITAL MANAGEMENT 13-2700161	ANNUAL RATE 0.00250 OF AVERAGE DAILY ASSETS

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

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

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

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

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

(complete as many entries as needed)

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE D (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

DFE/Participating Plan Information

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

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

OMB No. 1210-0110

2014

This Form is Open to Public Inspection.

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

A Name of plan
RTT USA INC 401K PROFIT SHARING PLAN & TRUST

B Three-digit plan number (PN) ▶ 001

C Plan or DFE sponsor's name as shown on line 2a of Form 5500
RTT USA INC

D Employer Identification Number (EIN)
20-2394780

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: SSGA CASH SERIES US GOVT L

b Name of sponsor of entity listed in (a): STATE STREET BANK & TRUST CO

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)
90-0337987-000	C	69048

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
RTT USA INC 401K PROFIT SHARING PLAN & TRUST

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
RTT USA INC

D Employer Identification Number (EIN)
20-2394780

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		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)		
(2) Participant contributions	1b(2)		
(3) Other	1b(3)		
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	111035	69048
(2) U.S. Government securities	1c(2)		
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)		
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)	49086	84615
(9) Value of interest in common/collective trusts	1c(9)		
(10) Value of interest in pooled separate accounts	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	2302901	3632383
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other	1c(15)		

			(a) Beginning of Year	(b) End of Year
1d	Employer-related investments:			
	(1) Employer securities	1d(1)		
	(2) Employer real property	1d(2)		
e	Buildings and other property used in plan operation	1e		
f	Total assets (add all amounts in lines 1a through 1e)	1f	2463022	3786046
	Liabilities			
g	Benefit claims payable	1g		
h	Operating payables	1h		
i	Acquisition indebtedness	1i		
j	Other liabilities	1j		
k	Total liabilities (add all amounts in lines 1g through1j)	1k	0	0
	Net Assets			
l	Net assets (subtract line 1k from line 1f)	1l	2463022	3786046

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)	378998	
	(B) Participants	2a(1)(B)	753642	
	(C) Others (including rollovers)	2a(1)(C)	351954	
	(2) Noncash contributions	2a(2)		
	(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		1484594
b	**Earnings on investments:**			
	(1) Interest:			
	(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	42	
	(B) U.S. Government securities	2b(1)(B)		
	(C) Corporate debt instruments	2b(1)(C)		
	(D) Loans (other than to participants)	2b(1)(D)		
	(E) Participant loans	2b(1)(E)	2832	
	(F) Other	2b(1)(F)		
	(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		2874
	(2) Dividends: **(A)** Preferred stock	2b(2)(A)		
	(B) Common stock	2b(2)(B)		
	(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	244867	
	(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		244867
	(3) Rents	2b(3)		
	(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	2b(4)(A)		
	(B) Aggregate carrying amount (see instructions)	2b(4)(B)		
	(C) Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result	2b(4)(C)		0
	(5) Unrealized appreciation (depreciation) of assets: **(A)** Real estate	2b(5)(A)		
	(B) Other	2b(5)(B)		
	(C) Total unrealized appreciation of assets. Add lines **2b(5)(A)** and **(B)**	2b(5)(C)		0

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		-127613
c Other income	2c		
d Total income. Add all **income** amounts in column (b) and enter total	2d		1604722
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	271407	
(2) To insurance carriers for the provision of benefits	2e(2)		
(3) Other	2e(3)		
(4) Total benefit payments. Add lines **2e(1)** through **(3)**	2e(4)		271407
f Corrective distributions (see instructions)	2f		1369
g Certain deemed distributions of participant loans (see instructions)	2g		7272
h Interest expense	2h		
i Administrative expenses: **(1)** Professional fees	2i(1)		
(2) Contract administrator fees	2i(2)		
(3) Investment advisory and management fees	2i(3)		
(4) Other	2i(4)	1650	
(5) Total administrative expenses. Add lines **2i(1)** through **(4)**	2i(5)		1650
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		281698
Net Income and Reconciliation			
k Net income (loss). Subtract line **2j** from line **2d**	2k		1323024
l Transfers of assets:			
(1) To this plan	2l(1)		0
(2) From this plan	2l(2)		0

Part III Accountant's Opinion

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

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

(1) [ ] Unqualified **(2)** [ ] Qualified **(3)** [X] Disclaimer **(4)** [ ] Adverse

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

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

(1) Name: BDO USA LLP **(2)** EIN: 13-5381590

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

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

Part IV Compliance Questions

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

During the plan year:

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

			Yes	No	Amount
c	Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)	4c		X	
d	Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)	4d		X	
e	Was this plan covered by a fidelity bond?	4e	X		247000
f	Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?	4f		X	
g	Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?	4g		X	
h	Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?	4h		X	
i	Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	4i	X		
j	Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked, and see instructions for format requirements.)	4j		X	
k	Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?	4k		X	
l	Has the plan failed to provide any benefit when due under the plan?	4l		X	
m	If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	4m		X	
n	If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.	4n			

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

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

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

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

Part V Trust Information (optional)

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

SCHEDULE R (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Retirement Plan Information

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

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

OMB No. 1210-0110

2014

This Form is Open to Public Inspection.

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

A Name of plan
RTT USA INC 401K PROFIT SHARING PLAN & TRUST

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
RTT USA INC

D Employer Identification Number (EIN)
20-2394780

Part I Distributions

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

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

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

EIN(s): 57-1198022

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):

RTT USA, Inc. 401(K) Profit Sharing Plan & Trust

Financial Statements
(and supplemental schedule)
Years Ended December 31, 2014 and 2013

The report accompanying these financial statements was issued by BDO USA, LLP, a Delaware limited liability partnership and the U.S. member of BDO International Limited, a UK company limited by guarantee, and forms part of the international BDO network of independent member firms.

RTT USA, Inc. 401(K) Profit Sharing Plan & Trust

Financial Statements
(and supplemental schedules)
Years Ended December 31, 2014 and 2013

RTT USA, Inc. 401(K) Profit Sharing Plan & Trust

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Troy, MI 48084-0178

Independent Auditor's Report

Plan Administrator
RTT USA, Inc. 401(K) Profit Sharing Plan & Trust
Royal Oak, Michigan

Report on the Financial Statements

We were engaged to audit the accompanying financial statements of RTT USA, Inc. 401(k) Profit Sharing Plan & Trust (the "Plan"), which comprise the statements of net assets available for benefits as of December 31, 2014 and 2013, and the related statements of changes in net assets available for benefits for the years then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

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

Auditor's Responsibility

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

Basis for Disclaimer of Opinion

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

BDO USA, LLP, a Delaware limited liability partnership, is the U.S. member of BDO International Limited, a UK company limited by guarantee, and forms part of the international BDO network of independent member firms.

BDO is the brand name for the BDO network and for each of the BDO Member Firms.

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

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

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

BDO USA, LLP

October 23, 2015
Troy, Michigan

Financial Statements

RTT USA, Inc. 401(K) Profit Sharing Plan & Trust

Statements of Net Assets Available for Benefits

December 31,	**2014**	2013
Assets		
Investments, at fair value		
Mutual funds	**$ 3,632,383**	$2,302,901
Common collective trust	**69,048**	111,035
Total Investments	**3,701,431**	2,413,936
Notes Receivable From Participants	**84,615**	49,086
Contributions Receivable		
Participant contributions	**26,850**	6,794
Employer contributions	**12,794**	308
Total Contributions Receivable	**39,644**	7,102
Net Assets Available for Benefits	**$ 3,825,690**	$2,470,124

See accompanying notes to financial statements.

RTT USA, Inc. 401(K) Profit Sharing Plan & Trust

Statements of Changes in Net Assets Available for Benefits

Year ended December 31,	**2014**	2013
Contributions		
Participant	**$ 773,698**	$ 606,847
Employer	**391,484**	312,493
Rollovers from other qualified plans	**351,954**	32,817
Total Contributions	**1,517,136**	952,157
Investment Income		
Net (depreciation) appreciation in fair value of investments	**(127,571)**	251,604
Interest and dividends	**244,867**	71,095
Total Investment Income	**117,296**	322,699
Interest - Notes Receivable from Participants	**2,832**	1,729
Total Income	**1,637,264**	1,276,585
Deductions		
Benefit payments to participants and beneficiaries	**280,048**	110,694
Administrative expenses	**1,650**	997
Total Deductions	**281,698**	111,691
Net Increase in Net Assets Available for Benefits	**1,355,566**	1,164,894
Net Assets Available for Benefits, beginning of year	**2,470,124**	1,305,230
Net Assets Available for Benefits, end of year	**$ 3,825,690**	$2,470,124

See accompanying notes to financial statements.

1. Description of the Plan

The following description of the RTT USA, Inc. 401(K) Profit Sharing Plan & Trust (the "Plan") is provided for general informational purposes only. Participants should refer to the Plan agreement for a more complete description of the Plan's provisions.

General

Effective January 1, 2007, RTT USA, Inc. (the "Company") established a 401(k) profit sharing plan (the "Plan"). The Plan is a defined contribution plan within the provisions of the Employee Retirement Income Security Act of 1974 ("ERISA").

Effective January 1, 2012, the Company adopted a Section 401(k) safe harbor design for the Plan, whereby the Plan automatically complies with the nondiscrimination requirements of Section 401 of the Internal Revenue Code ("IRC").

Effective January 1, 2013, the Company amended and restated a Section 401(k) safe harbor design for the Plan, whereby the Plan automatically complies with the nondiscrimination requirements of Section 401 of the Internal Revenue Code ("IRC"). The Plan also contracted with ADP Retirement Services to provide Plan administration services and State Street Bank & Trust Company to act as Plan trustee and asset custodian. Due to this transaction, the Plan initiated a black-out period from January 1, 2013 to March 2, 2013 to allow for the migration of the Plan Platform and assets to the new provider.

Eligibility

Upon attaining the age of 21, employees are eligible to participate in the Plan and receive employer matching and profit sharing contributions immediately upon employment with the Company, except employees covered by a collective bargaining agreement.

Contributions

The Plan allows for voluntary contributions by eligible employees of the Company. Participant contributions are made through authorized payroll deductions on a pretax basis, which may be from 1% to 90% of their annual compensation, as defined in the Plan agreement. Participant contributions may not exceed the limits prescribed in the IRC.

Under the safe harbor plan, the Company will match 100% of the first 3% of the compensation that a participant contributes to the Plan and 50% on the next 2% of participant's compensation which is deferred as an elective deferral.

Profit sharing contributions may be made at the discretion of the Company.

Participant Accounts

Each participant's account is credited with the participant's contributions and allocations of (a) the Company's matching contributions, (b) the Company's discretionary contribution, and (c) plan earnings, and is charged with an allocation of Plan losses and administrative expenses. Allocations are based on participant earnings or account balances, as defined in the Plan agreement. Participants direct the investment of their accounts among the investment funds offered by the Plan. The benefit to which a participant is entitled is the benefit that can be provided from the participant's account.

Forfeitures

Forfeitures arising from terminated participants with less than a fully vested interest in the Plan may, at the employer's discretion, be applied first to pay administrative expenses or applied to the restoration of participants' accounts. Any remaining forfeitures shall be used to reduce employer matching contributions and/or employer profit sharing contributions for the year in which the forfeitures arose or, if necessary, any subsequent year following the year in which the forfeitures arose. Forfeited balances of $42 and $1,477 were allocated to participant accounts during 2014 and 2013, respectively. There were no unallocated forfeitures in the Plan as of December 31, 2014 and 2013.

Vesting

Participants are immediately 100% vested in their contributions, employer matching contributions, and any employer profit sharing or qualified non-elective contributions plus actual earnings thereon.

Benefits

Distributions from the Plan are made to participants or their beneficiaries upon termination of employment, attainment of age 59½, or upon disability or death. Participants are also able to receive loans from the Plan, limited to terms specified in the Plan.

Administrative Expenses

The Company pays the administrative expenses of the Plan associated with any professional services provided to the Plan. Administrative expenses recorded in the Plan include various third party administrator fees.

Notes Receivable From Participants

Participants may borrow from their fund accounts a minimum of $500 up to a maximum equal to the lesser of $50,000 or 50% of their vested account balance. General purpose loans must be repaid within 5 years and loans used for the purchase of a principal residence can be repaid over a period of up to 30 years. The loans are secured by the balance of participant's account and bear interest at the prime rate plus 2% at December 31, 2014 and 2013. Current interest rates range from 4.25% to 5.25%. Principal and interest are paid ratably through payroll deductions over a period not to exceed five years, unless the loan is used to purchase a primary residence in which case the loan term may not exceed thirty years.

2. Summary of Significant Accounting Policies

Basis of Presentation

The accompanying financial statements of the Plan have been prepared on the accrual basis of accounting and in accordance with accounting principles generally accepted in the United States of America ("U.S. GAAP").

Investment Valuation, Transactions and Income Recognition

The Plan presents in the Statements of Changes in Net Assets Available for Benefits the net appreciation (depreciation) in the fair value of its investments which consists of the realized gains or losses and the unrealized appreciation (depreciation) on those investments.

Investments are valued at fair value, as determined and certified by the trustees, as of the end of each year. The fair value of a financial instrument is the amount that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date (the exit price). Following is a description of the valuation methodologies used for assets measured at fair value.

Mutual Funds and Money Market Funds - Mutual funds and money market funds represent investments with various investment managers. The fair value of these investments are determined by reference to the fund's underlying assets, which are principally marketable equity and fixed income securities. Shares held in mutual funds and money market funds traded on national securities exchanges are valued at the net asset value as of December 31, 2014 and 2013.

Equity securities for which market quotations are available are valued at the last reported sales price or official closing price on the primary market or exchange in which they trade. Debt securities are valued at the last quoted bid provided by an independent pricing service that are based on transactions in debt obligations, quotations from bond dealers, market transactions in comparable securities and various other relationships between securities. When prices are not readily available for any security, the security's fair value is determined in accordance with the procedures approved by the fund's Board of Directors.

Common Collective Trust - Common collective trust ("CCT") are valued at the net asset value ("NAV") of units of a bank collective trust. The NAV, as provided by the trustee, is used as a practical expedient to estimate fair value. The NAV is based on the fair value of the underlying investments held by the CCT less its liabilities. This practical expedient is not used when it is determined to be probable that the CCT will sell the investment for an amount different than the reported NAV. Participant transactions (purchased and sales) may occur daily. Were the Plan to initiate a full redemption of the CCT, the investment advisor reserves the right to temporarily delay withdrawal from the CCT in order to ensure that securities liquidations will be carried out in an orderly business manner.

The Plan has an investment in the State Street Global Advisors ("SSgA") Cash Series U.S. Government Fund (the "Fund") which was formed by State Street Bank under the State Street Bank and Trust Company Investment Funds for Tax Exempt Retirement Plans Declaration of Trust ("Trust").

State Street Bank is Trustee, Custodian, and Recordkeeper of the Fund and, as Trustee, has exclusive management and control of the Trust. SSgA, a division of State Street Bank, is the Fund's Investment Manager. The Fund seeks to maximize current income, to the extent consistent with the preservation of capital and liquidity and the maintenance of a stable $1.00 per unit NAV, by investing in U.S. government securities and repurchase agreement collateralized by U.S. government securities. However, there is no assurance the Fund will be able to maintain a stable NAV per share.

The Fund shall invest substantially all of its investable assets in the State Street U.S. Government Money Market Portfolio ("Portfolio"), a money market fund managed by an affiliate of the trustee and registered with the Securities and Exchange Commission as part of the State Street Master Funds. The Investment objective and policies are substantially similar to those of the Funds. The value of the Fund's investment in the Portfolio reflects the Fund's proportionate interest in the net assets of that Portfolio (5.73% at December 31, 2014). The performance of the Fund is directly affected by the performance of the Portfolio.

Investment transactions are reflected on a trade-data basis. Investment income is recognized when earned. Gains and losses on investments are based on average costs. Dividend income is recorded on the ex-dividend date. Capital gain distributions are included in dividend income. Income from other investments is recorded as earned on an accrual basis.

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.

Payment of Benefits

Benefits are recorded when paid.

Use of Estimates

The preparation of financial statements in conformity with U.S. GAAP requires the Plan administrator to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results may differ from those estimates.

Reclassification

Certain items contained within the prior year's financial statements have been reclassified to conform to the current reporting period.

Notes Receivable from Participants

Notes receivable from participants are measured at the unpaid principal balance plus any unpaid accrued interest. Interest income is recorded on the accrual basis. Related fees are recorded in administrative expenses and are expensed as incurred. If a participant ceases to make loan repayments and the Plan administrator deems the participant loan to be in default, the participant loan balance is reduced, and a benefit payment is recorded.

Risks and Uncertainties

The Plan provides for various investment options. Investments are exposed to various risks, such as interest rate, credit and overall market volatility. Due to the level of risk associated with certain investments and the level of uncertainty related to changes in the value of investments, it is at least reasonably possible that changes in risks and values of investments in the near term would materially affect participants' account balances and the amounts reported in the Statements of Net Assets Available for Benefits and the Statements of Changes in Net Assets Available for Benefits.

3. Information Certified by the Plan's Trustee

The Plan administrator has elected the method of annual reporting compliance permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Accordingly, the trustee has certified that the following data included in the accompanying financial statements and supplemental schedule is complete and accurate.

December 31,	**2014**	2013
Mutual funds	**$ 3,632,383**	$ 2,302,901
Common collective trusts	**69,048**	111,035

Year ended December 31,	**2014**	2013
Net (depreciation) appreciation in fair value of investments	**$ (127,571)**	$ 251,605
Interest and dividends	**244,867**	71,095

The Plan's independent accountants did not perform auditing procedures with respect to this information, except for comparing such information to the related information included in the financial statements and supplemental schedules.

4. Investments

The fair market value of individual investments that represent 5% or more of the Plan's net assets available for benefits as of December 31:

December 31,	**2014**	2013
Mutual Funds		
T. Rowe Price Retirement 2040	**$ 268,072**	$ 190,573
Hartford Capital Appreciation	**251,764**	137,535
Invesco Van Kampen Comstock	**236,084**	148,988
Franklin Rising Dividends	**225,527**	148,124
T. Rowe Price Retirement 2050	**194,540**	*
PIMCO Total Return Fund A	*	146,755

* Amount did not represent 5% of net assets available for benefits as of the applicable year end.

5. Fair Value Measurements

Accounting Standards Codification ("ASC") 820, *Fair Value Measurements and Disclosures*, provides the framework for measuring fair value. The 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 are described below:

Basis of Fair Value Measurement

Level 1 - Unadjusted quoted prices in active markets that are accessible at the measurement date for identical, unrestricted assets or liabilities;

Level 2 - Quoted prices in markets that are not considered to be active or financial instruments for which all significant inputs are observable, either directly or indirectly;

Level 3 - Prices or valuations that require inputs that are both significant to the fair value measurement and unobservable.

The following tables set forth by level within the fair value hierarchy the Plan investment assets at fair value, as of December 31, 2014 and 2013, respectively. Assets are classified in their entirety based on the lowest level of input that is significant to the fair value measurement.

	Investment Assets at Fair Value as of December 31, **2014**			
	Level 1	Level 2	Level 3	Total
Common Collective Trust	$ -	$ 69,048	$ -	$ 69,048
Mutual Funds				
Growth	1,146,945	-	-	1,146,945
Growth and income	613,863	-	-	613,863
Income	613,547	-	-	613,547
Aggressive	608,665	-	-	608,665
Target date	649,363	-	-	649,363
Total Investments at Fair Value	$ 3,632,383	$ 69,048	$ -	$ 3,701,431

	Investment Assets at Fair Value as of December 31, 2013			
	Level 1	Level 2	Level 3	Total
Common Collective Trust	$ -	$ 111,035	$ -	$ 111,035
Mutual Funds				
Growth	659,629	-	-	659,629
Growth and income	403,784	-	-	403,784
Income	414,894	-	-	414,894
Aggressive	390,448	-	-	390,448
Target date	434,146	-	-	434,146
Total Investments at Fair Value	$ 2,302,901	$ 111,035	$ -	$ 2,413,936

6. Plan Termination

Although it has not expressed an intent to do so, the Company has the right under the Plan to discontinue its contributions at any time and to terminate the Plan at any time subject to the provisions of ERISA. In the event of Plan termination, participants would become 100% vested in their employer contributions.

7. Income Tax Status

On March 31, 2008, the Internal Revenue Service ("IRS") stated that the prototype plan adopted by the Plan, as then designed, qualifies under Section 401(a) of the Internal Revenue Code ("IRC") and is exempt from federal income tax. The Plan has not filed for its own determination letter from the IRS. The Plan has been amended since receiving the opinion letter, including amendments made to comply with recent law changes. However, the Plan administrator believes the Plan has continued to operate in compliance with the applicable requirements of the IRC since the date of the opinion letter.

Accounting principles generally accepted in the United States of America require Plan management to evaluate tax positions taken by the Plan and recognize a tax liability (or asset) if the Plan has taken an uncertain position that more likely than not would not be sustained upon examination by the Internal Revenue Service. The Plan administrator has analyzed the tax positions taken by the Plan and has concluded that as of December 31, 2014, there are no uncertain positions taken or expected to be taken that would require recognition of a liability (or asset) or disclosure in the financial statements. The Plan is subject to routine audits by taxing jurisdictions; however, there currently are no audits for any tax periods in progress. The prior three years income tax returns are subject to review by the Internal Revenue Service.

8. Nonexempt Transactions

The Company determined that certain employee deferrals had not been remitted to the Plan within the required time period according to Department of Labor regulations. The amount reported for the year ended December 31, 2011 was $2,710. The principal amount reported for 2011 was remitted to the Plan in 2011. The lost earnings of $11.49 was calculated with a recovery date of March 8, 2011 and were remitted to the Plan on October 14, 2014. The Company filed the return of excise taxes related to employee benefit plans, Form 5330, in October 2013.

9. Reconciliation of Form 5500 to the Financial Statements

The following is a reconciliation of Net Assets Available for Benefits, per the financial statements to the Form 5500:

December 31,	**2014**	2013
Net Assets Available for Benefits, per financial statements	**$ 3,825,690**	$ 2,470,124
Employee and employer contribution receivables	**(39,644)**	(7,102)
Net Assets Available for Benefits, per Form 5500	**$ 3,786,046**	$ 2,463,022

The following is a reconciliation of Total Income, per the financial statements to the Form 5500 for the year ended December 31, 2014:

Year ended December 31,	**2014**	2013
Total Income, per financial statements	**$ 1,637,264**	$ 1,276,510
Employee and employer contribution receivables as of December 31, 2013 and 2012, respectively	**7,102**	-
Employee and employer contribution receivables as of December 31, 2014 and 2013, respectively	**(39,644)**	(7,102)
Total Income, per Form 5500	**$ 1,604,722**	$ 1,269,408

10. Subsequent Events

The financial statements and related disclosures include an evaluation of events up to and including October 23, 2015, which is the date the financial statements were available to be issued.

On December 5, 2013, Dassault Systemes acquired an 84% controlling interest in RTT USA, Inc. Effective June 1, 2015, RTT USA, Inc. 401(k) Profit Sharing Plan and Trust merged with the Dassault Systemes Employee Savings Plan Plus with the latter being the surviving plan.

Supplemental Schedules

RTT USA, Inc. 401(K) Profit Sharing Plan & Trust

Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
December 31, 2014

EIN: 20-2394780
Plan Number: 001

(a)	(b) Identity of Issue or Borrower	(c) Description of Investment	(d) Cost	(e) Current Value
	Common Collective Trusts			
*	SSGA Cash Series	US Govt L	a	$ 69,048
	Mutual Funds			
	T. Rowe Price	Retirement 2040	a	$ 268,072
	Hartford	Capital Appreciation	a	251,764
	Invesco	Van Kampen Comstock	a	236,084
	Franklin	Rising Dividends	a	225,527
	T. Rowe Price	Retirement 2050	a	194,540
	Munder	Mid-Cap Core Growth	a	161,523
	Hartford	Dividend & Growth	a	152,199
	T. Rowe Price	Retirement 2030	a	145,095
	PIMCO	Total Return Fund	a	143,857
	T. Rowe Price	Growth Stock Fund	a	143,296
	Franklin	Small Cap Value FD	a	139,680
	BlackRock	Global Allocation	a	134,574
	BlackRock	Equity Dividend	a	132,968
	BlackRock	Capital Appreciation	a	125,844
	Fidelity	Advisor Small Cap	a	99,311
	Prudential	High Yield	a	97,283
	MFS	Value Fund	a	92,612
	DWS	Unconstrained Income	a	90,577
	AllianceBernstein	Global Bond	a	86,830
	Prudential	Short-term Corp Bond	a	86,463
	Jennison	Natural Resources	a	81,409
	Virtus	Foreign Opportunities	a	80,403
	Mainstay	ICAP International	a	79,602
	Franklin	Mutual Global Discovery	a	70,821
	Oppenheimer	Global Strategic Income	a	65,281
	Thornburg	International Value	a	62,102
	Putnam	International Capital Opportunities	a	47,089
	T. Rowe Price	Retirement 2020	a	41,656
	Invesco	Energy	a	33,686
	PIMCO	Real Return Fund	a	30,837
	Oppenheimer	Gold & Special Minerals Fund	a	18,979
	JP Morgan	Government Bond Fund	a	12,419
	Total Mutual Funds			$ 3,632,383
*	**Notes Receivable From Participants**	Notes receivable from participants, interest rate at 4.25% - 5.25%, secured by participants' remaining account balances, maturing through 2019	-0-	$ 84,615

* - A party-in-interest as defined by ERISA.
a - The cost of participant-directed investments is not required to be disclosed.

RTT USA, Inc. 401(K) Profit Sharing Plan & Trust

Schedule H, Line 4a - Schedule of Delinquent Participant Contributions
For the Year Ended December 31, 2014

Employer Identification Number: 20-2394780
Plan Number: 001

	Totals That Constitute Nonexempt Prohibited Transactions			
	Contributions Not Corrected	Contributions Corrected Outside VFCP*	Contributions Pending Correction in VFCP*	Total Fully Corrected Under VFCP* and PTE 2002-51
2011 participant contributions transferred late to Plan	$ -	$ 2,710	$ -	$ -

*Voluntary Fiduciary Correction Program (DOL)

Schedule C, Line 2(h) Formula Description

For those service providers listed on Line 2 for which Line 2(h) has been checked "yes":

For a description of indirect compensation received by service providers listed on Line 2 that was disclosed as a formula, please see Line 3(e). Please note: If indirect compensation disclosed as a formula was received by a service provider from more than one source, there will be multiple Lines 3(e) for that service provider.

RTT USA, Inc. 401(K) Profit Sharing Plan & Trust

Financial Statements
(and supplemental schedule)
Years Ended December 31, 2014 and 2013

The report accompanying these financial statements was issued by BDO USA, LLP, a Delaware limited liability partnership and the U.S. member of BDO International Limited, a UK company limited by guarantee, and forms part of the international BDO network of independent member firms.

RTT USA, Inc. 401(K) Profit Sharing Plan & Trust

Financial Statements
(and supplemental schedules)
Years Ended December 31, 2014 and 2013

RTT USA, Inc. 401(K) Profit Sharing Plan & Trust

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Independent Auditor's Report

Plan Administrator
RTT USA, Inc. 401(K) Profit Sharing Plan & Trust
Royal Oak, Michigan

Report on the Financial Statements

We were engaged to audit the accompanying financial statements of RTT USA, Inc. 401(k) Profit Sharing Plan & Trust (the "Plan"), which comprise the statements of net assets available for benefits as of December 31, 2014 and 2013, and the related statements of changes in net assets available for benefits for the years then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

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

Auditor's Responsibility

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

Basis for Disclaimer of Opinion

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

BDO USA, LLP, a Delaware limited liability partnership, is the U.S. member of BDO International Limited, a UK company limited by guarantee, and forms part of the international BDO network of independent member firms.

BDO is the brand name for the BDO network and for each of the BDO Member Firms.

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

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

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

BDO USA, LLP

October 23, 2015
Troy, Michigan

Financial Statements

RTT USA, Inc. 401(K) Profit Sharing Plan & Trust

Statements of Net Assets Available for Benefits

December 31,	**2014**	2013
Assets		
Investments, at fair value		
Mutual funds	**$ 3,632,383**	$2,302,901
Common collective trust	**69,048**	111,035
Total Investments	**3,701,431**	2,413,936
Notes Receivable From Participants	**84,615**	49,086
Contributions Receivable		
Participant contributions	**26,850**	6,794
Employer contributions	**12,794**	308
Total Contributions Receivable	**39,644**	7,102
Net Assets Available for Benefits	**$ 3,825,690**	$2,470,124

See accompanying notes to financial statements.

RTT USA, Inc. 401(K) Profit Sharing Plan & Trust

Statements of Changes in Net Assets Available for Benefits

Year ended December 31,	**2014**	2013
Contributions		
Participant	**$ 773,698**	$ 606,847
Employer	**391,484**	312,493
Rollovers from other qualified plans	**351,954**	32,817
Total Contributions	**1,517,136**	952,157
Investment Income		
Net (depreciation) appreciation in fair value of investments	**(127,571)**	251,604
Interest and dividends	**244,867**	71,095
Total Investment Income	**117,296**	322,699
Interest - Notes Receivable from Participants	**2,832**	1,729
Total Income	**1,637,264**	1,276,585
Deductions		
Benefit payments to participants and beneficiaries	**280,048**	110,694
Administrative expenses	**1,650**	997
Total Deductions	**281,698**	111,691
Net Increase in Net Assets Available for Benefits	**1,355,566**	1,164,894
Net Assets Available for Benefits, beginning of year	**2,470,124**	1,305,230
Net Assets Available for Benefits, end of year	**$ 3,825,690**	$2,470,124

See accompanying notes to financial statements.

1. Description of the Plan

The following description of the RTT USA, Inc. 401(K) Profit Sharing Plan & Trust (the "Plan") is provided for general informational purposes only. Participants should refer to the Plan agreement for a more complete description of the Plan's provisions.

General

Effective January 1, 2007, RTT USA, Inc. (the "Company") established a 401(k) profit sharing plan (the "Plan"). The Plan is a defined contribution plan within the provisions of the Employee Retirement Income Security Act of 1974 ("ERISA").

Effective January 1, 2012, the Company adopted a Section 401(k) safe harbor design for the Plan, whereby the Plan automatically complies with the nondiscrimination requirements of Section 401 of the Internal Revenue Code ("IRC").

Effective January 1, 2013, the Company amended and restated a Section 401(k) safe harbor design for the Plan, whereby the Plan automatically complies with the nondiscrimination requirements of Section 401 of the Internal Revenue Code ("IRC"). The Plan also contracted with ADP Retirement Services to provide Plan administration services and State Street Bank & Trust Company to act as Plan trustee and asset custodian. Due to this transaction, the Plan initiated a black-out period from January 1, 2013 to March 2, 2013 to allow for the migration of the Plan Platform and assets to the new provider.

Eligibility

Upon attaining the age of 21, employees are eligible to participate in the Plan and receive employer matching and profit sharing contributions immediately upon employment with the Company, except employees covered by a collective bargaining agreement.

Contributions

The Plan allows for voluntary contributions by eligible employees of the Company. Participant contributions are made through authorized payroll deductions on a pretax basis, which may be from 1% to 90% of their annual compensation, as defined in the Plan agreement. Participant contributions may not exceed the limits prescribed in the IRC.

Under the safe harbor plan, the Company will match 100% of the first 3% of the compensation that a participant contributes to the Plan and 50% on the next 2% of participant's compensation which is deferred as an elective deferral.

Profit sharing contributions may be made at the discretion of the Company.

Participant Accounts

Each participant's account is credited with the participant's contributions and allocations of (a) the Company's matching contributions, (b) the Company's discretionary contribution, and (c) plan earnings, and is charged with an allocation of Plan losses and administrative expenses. Allocations are based on participant earnings or account balances, as defined in the Plan agreement. Participants direct the investment of their accounts among the investment funds offered by the Plan. The benefit to which a participant is entitled is the benefit that can be provided from the participant's account.

Forfeitures

Forfeitures arising from terminated participants with less than a fully vested interest in the Plan may, at the employer's discretion, be applied first to pay administrative expenses or applied to the restoration of participants' accounts. Any remaining forfeitures shall be used to reduce employer matching contributions and/or employer profit sharing contributions for the year in which the forfeitures arose or, if necessary, any subsequent year following the year in which the forfeitures arose. Forfeited balances of $42 and $1,477 were allocated to participant accounts during 2014 and 2013, respectively. There were no unallocated forfeitures in the Plan as of December 31, 2014 and 2013.

Vesting

Participants are immediately 100% vested in their contributions, employer matching contributions, and any employer profit sharing or qualified non-elective contributions plus actual earnings thereon.

Benefits

Distributions from the Plan are made to participants or their beneficiaries upon termination of employment, attainment of age 59½, or upon disability or death. Participants are also able to receive loans from the Plan, limited to terms specified in the Plan.

Administrative Expenses

The Company pays the administrative expenses of the Plan associated with any professional services provided to the Plan. Administrative expenses recorded in the Plan include various third party administrator fees.

Notes Receivable From Participants

Participants may borrow from their fund accounts a minimum of $500 up to a maximum equal to the lesser of $50,000 or 50% of their vested account balance. General purpose loans must be repaid within 5 years and loans used for the purchase of a principal residence can be repaid over a period of up to 30 years. The loans are secured by the balance of participant's account and bear interest at the prime rate plus 2% at December 31, 2014 and 2013. Current interest rates range from 4.25% to 5.25%. Principal and interest are paid ratably through payroll deductions over a period not to exceed five years, unless the loan is used to purchase a primary residence in which case the loan term may not exceed thirty years.

2. Summary of Significant Accounting Policies

Basis of Presentation

The accompanying financial statements of the Plan have been prepared on the accrual basis of accounting and in accordance with accounting principles generally accepted in the United States of America ("U.S. GAAP").

Investment Valuation, Transactions and Income Recognition

The Plan presents in the Statements of Changes in Net Assets Available for Benefits the net appreciation (depreciation) in the fair value of its investments which consists of the realized gains or losses and the unrealized appreciation (depreciation) on those investments.

Investments are valued at fair value, as determined and certified by the trustees, as of the end of each year. The fair value of a financial instrument is the amount that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date (the exit price). Following is a description of the valuation methodologies used for assets measured at fair value.

Mutual Funds and Money Market Funds - Mutual funds and money market funds represent investments with various investment managers. The fair value of these investments are determined by reference to the fund's underlying assets, which are principally marketable equity and fixed income securities. Shares held in mutual funds and money market funds traded on national securities exchanges are valued at the net asset value as of December 31, 2014 and 2013.

Equity securities for which market quotations are available are valued at the last reported sales price or official closing price on the primary market or exchange in which they trade. Debt securities are valued at the last quoted bid provided by an independent pricing service that are based on transactions in debt obligations, quotations from bond dealers, market transactions in comparable securities and various other relationships between securities. When prices are not readily available for any security, the security's fair value is determined in accordance with the procedures approved by the fund's Board of Directors.

Common Collective Trust - Common collective trust ("CCT") are valued at the net asset value ("NAV") of units of a bank collective trust. The NAV, as provided by the trustee, is used as a practical expedient to estimate fair value. The NAV is based on the fair value of the underlying investments held by the CCT less its liabilities. This practical expedient is not used when it is determined to be probable that the CCT will sell the investment for an amount different than the reported NAV. Participant transactions (purchased and sales) may occur daily. Were the Plan to initiate a full redemption of the CCT, the investment advisor reserves the right to temporarily delay withdrawal from the CCT in order to ensure that securities liquidations will be carried out in an orderly business manner.

The Plan has an investment in the State Street Global Advisors ("SSgA") Cash Series U.S. Government Fund (the "Fund") which was formed by State Street Bank under the State Street Bank and Trust Company Investment Funds for Tax Exempt Retirement Plans Declaration of Trust ("Trust").

State Street Bank is Trustee, Custodian, and Recordkeeper of the Fund and, as Trustee, has exclusive management and control of the Trust. SSgA, a division of State Street Bank, is the Fund's Investment Manager. The Fund seeks to maximize current income, to the extent consistent with the preservation of capital and liquidity and the maintenance of a stable $1.00 per unit NAV, by investing in U.S. government securities and repurchase agreement collateralized by U.S. government securities. However, there is no assurance the Fund will be able to maintain a stable NAV per share.

The Fund shall invest substantially all of its investable assets in the State Street U.S. Government Money Market Portfolio ("Portfolio"), a money market fund managed by an affiliate of the trustee and registered with the Securities and Exchange Commission as part of the State Street Master Funds. The Investment objective and policies are substantially similar to those of the Funds. The value of the Fund's investment in the Portfolio reflects the Fund's proportionate interest in the net assets of that Portfolio (5.73% at December 31, 2014). The performance of the Fund is directly affected by the performance of the Portfolio.

Investment transactions are reflected on a trade-data basis. Investment income is recognized when earned. Gains and losses on investments are based on average costs. Dividend income is recorded on the ex-dividend date. Capital gain distributions are included in dividend income. Income from other investments is recorded as earned on an accrual basis.

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.

Payment of Benefits

Benefits are recorded when paid.

Use of Estimates

The preparation of financial statements in conformity with U.S. GAAP requires the Plan administrator to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results may differ from those estimates.

Reclassification

Certain items contained within the prior year's financial statements have been reclassified to conform to the current reporting period.

Notes Receivable from Participants

Notes receivable from participants are measured at the unpaid principal balance plus any unpaid accrued interest. Interest income is recorded on the accrual basis. Related fees are recorded in administrative expenses and are expensed as incurred. If a participant ceases to make loan repayments and the Plan administrator deems the participant loan to be in default, the participant loan balance is reduced, and a benefit payment is recorded.

Risks and Uncertainties

The Plan provides for various investment options. Investments are exposed to various risks, such as interest rate, credit and overall market volatility. Due to the level of risk associated with certain investments and the level of uncertainty related to changes in the value of investments, it is at least reasonably possible that changes in risks and values of investments in the near term would materially affect participants' account balances and the amounts reported in the Statements of Net Assets Available for Benefits and the Statements of Changes in Net Assets Available for Benefits.

3. Information Certified by the Plan's Trustee

The Plan administrator has elected the method of annual reporting compliance permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Accordingly, the trustee has certified that the following data included in the accompanying financial statements and supplemental schedule is complete and accurate.

December 31,	**2014**	2013
Mutual funds	**$ 3,632,383**	$ 2,302,901
Common collective trusts	**69,048**	111,035

Year ended December 31,	**2014**	2013
Net (depreciation) appreciation in fair value of investments	**$ (127,571)**	$ 251,605
Interest and dividends	**244,867**	71,095

The Plan's independent accountants did not perform auditing procedures with respect to this information, except for comparing such information to the related information included in the financial statements and supplemental schedules.

4. Investments

The fair market value of individual investments that represent 5% or more of the Plan's net assets available for benefits as of December 31:

December 31,	**2014**	2013
Mutual Funds		
T. Rowe Price Retirement 2040	**$ 268,072**	$ 190,573
Hartford Capital Appreciation	**251,764**	137,535
Invesco Van Kampen Comstock	**236,084**	148,988
Franklin Rising Dividends	**225,527**	148,124
T. Rowe Price Retirement 2050	**194,540**	*
PIMCO Total Return Fund A	*	146,755

* Amount did not represent 5% of net assets available for benefits as of the applicable year end.

5. Fair Value Measurements

Accounting Standards Codification ("ASC") 820, *Fair Value Measurements and Disclosures*, provides the framework for measuring fair value. The 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 are described below:

Basis of Fair Value Measurement

Level 1 - Unadjusted quoted prices in active markets that are accessible at the measurement date for identical, unrestricted assets or liabilities;

Level 2 - Quoted prices in markets that are not considered to be active or financial instruments for which all significant inputs are observable, either directly or indirectly;

Level 3 - Prices or valuations that require inputs that are both significant to the fair value measurement and unobservable.

The following tables set forth by level within the fair value hierarchy the Plan investment assets at fair value, as of December 31, 2014 and 2013, respectively. Assets are classified in their entirety based on the lowest level of input that is significant to the fair value measurement.

	Investment Assets at Fair Value as of December 31, **2014**			
	Level 1	Level 2	Level 3	Total
Common Collective Trust	$ -	$ 69,048	$ -	$ 69,048
Mutual Funds				
Growth	1,146,945	-	-	1,146,945
Growth and income	613,863	-	-	613,863
Income	613,547	-	-	613,547
Aggressive	608,665	-	-	608,665
Target date	649,363	-	-	649,363
Total Investments at Fair Value	$ 3,632,383	$ 69,048	$ -	$ 3,701,431

	Investment Assets at Fair Value as of December 31, 2013			
	Level 1	Level 2	Level 3	Total
Common Collective Trust	$ -	$ 111,035	$ -	$ 111,035
Mutual Funds				
Growth	659,629	-	-	659,629
Growth and income	403,784	-	-	403,784
Income	414,894	-	-	414,894
Aggressive	390,448	-	-	390,448
Target date	434,146	-	-	434,146
Total Investments at Fair Value	$ 2,302,901	$ 111,035	$ -	$ 2,413,936

6. Plan Termination

Although it has not expressed an intent to do so, the Company has the right under the Plan to discontinue its contributions at any time and to terminate the Plan at any time subject to the provisions of ERISA. In the event of Plan termination, participants would become 100% vested in their employer contributions.

7. Income Tax Status

On March 31, 2008, the Internal Revenue Service ("IRS") stated that the prototype plan adopted by the Plan, as then designed, qualifies under Section 401(a) of the Internal Revenue Code ("IRC") and is exempt from federal income tax. The Plan has not filed for its own determination letter from the IRS. The Plan has been amended since receiving the opinion letter, including amendments made to comply with recent law changes. However, the Plan administrator believes the Plan has continued to operate in compliance with the applicable requirements of the IRC since the date of the opinion letter.

Accounting principles generally accepted in the United States of America require Plan management to evaluate tax positions taken by the Plan and recognize a tax liability (or asset) if the Plan has taken an uncertain position that more likely than not would not be sustained upon examination by the Internal Revenue Service. The Plan administrator has analyzed the tax positions taken by the Plan and has concluded that as of December 31, 2014, there are no uncertain positions taken or expected to be taken that would require recognition of a liability (or asset) or disclosure in the financial statements. The Plan is subject to routine audits by taxing jurisdictions; however, there currently are no audits for any tax periods in progress. The prior three years income tax returns are subject to review by the Internal Revenue Service.

8. Nonexempt Transactions

The Company determined that certain employee deferrals had not been remitted to the Plan within the required time period according to Department of Labor regulations. The amount reported for the year ended December 31, 2011 was $2,710. The principal amount reported for 2011 was remitted to the Plan in 2011. The lost earnings of $11.49 was calculated with a recovery date of March 8, 2011 and were remitted to the Plan on October 14, 2014. The Company filed the return of excise taxes related to employee benefit plans, Form 5330, in October 2013.

9. Reconciliation of Form 5500 to the Financial Statements

The following is a reconciliation of Net Assets Available for Benefits, per the financial statements to the Form 5500:

December 31,	**2014**	2013
Net Assets Available for Benefits, per financial statements	**$ 3,825,690**	$ 2,470,124
Employee and employer contribution receivables	**(39,644)**	(7,102)
Net Assets Available for Benefits, per Form 5500	**$ 3,786,046**	$ 2,463,022

The following is a reconciliation of Total Income, per the financial statements to the Form 5500 for the year ended December 31, 2014:

Year ended December 31,	**2014**	2013
Total Income, per financial statements	**$ 1,637,264**	$ 1,276,510
Employee and employer contribution receivables as of December 31, 2013 and 2012, respectively	**7,102**	-
Employee and employer contribution receivables as of December 31, 2014 and 2013, respectively	**(39,644)**	(7,102)
Total Income, per Form 5500	**$ 1,604,722**	$ 1,269,408

10. Subsequent Events

The financial statements and related disclosures include an evaluation of events up to and including October 23, 2015, which is the date the financial statements were available to be issued.

On December 5, 2013, Dassault Systemes acquired an 84% controlling interest in RTT USA, Inc. Effective June 1, 2015, RTT USA, Inc. 401(k) Profit Sharing Plan and Trust merged with the Dassault Systemes Employee Savings Plan Plus with the latter being the surviving plan.

Supplemental Schedules

RTT USA, Inc. 401(K) Profit Sharing Plan & Trust

Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
December 31, 2014

EIN: 20-2394780
Plan Number: 001

(a)	(b) Identity of Issue or Borrower	(c) Description of Investment	(d) Cost	(e) Current Value
	Common Collective Trusts			
*	SSGA Cash Series	US Govt L	a	$ 69,048
	Mutual Funds			
	T. Rowe Price	Retirement 2040	a	$ 268,072
	Hartford	Capital Appreciation	a	251,764
	Invesco	Van Kampen Comstock	a	236,084
	Franklin	Rising Dividends	a	225,527
	T. Rowe Price	Retirement 2050	a	194,540
	Munder	Mid-Cap Core Growth	a	161,523
	Hartford	Dividend & Growth	a	152,199
	T. Rowe Price	Retirement 2030	a	145,095
	PIMCO	Total Return Fund	a	143,857
	T. Rowe Price	Growth Stock Fund	a	143,296
	Franklin	Small Cap Value FD	a	139,680
	BlackRock	Global Allocation	a	134,574
	BlackRock	Equity Dividend	a	132,968
	BlackRock	Capital Appreciation	a	125,844
	Fidelity	Advisor Small Cap	a	99,311
	Prudential	High Yield	a	97,283
	MFS	Value Fund	a	92,612
	DWS	Unconstrained Income	a	90,577
	AllianceBernstein	Global Bond	a	86,830
	Prudential	Short-term Corp Bond	a	86,463
	Jennison	Natural Resources	a	81,409
	Virtus	Foreign Opportunities	a	80,403
	Mainstay	ICAP International	a	79,602
	Franklin	Mutual Global Discovery	a	70,821
	Oppenheimer	Global Strategic Income	a	65,281
	Thornburg	International Value	a	62,102
	Putnam	International Capital Opportunities	a	47,089
	T. Rowe Price	Retirement 2020	a	41,656
	Invesco	Energy	a	33,686
	PIMCO	Real Return Fund	a	30,837
	Oppenheimer	Gold & Special Minerals Fund	a	18,979
	JP Morgan	Government Bond Fund	a	12,419
	Total Mutual Funds			$ 3,632,383
*	**Notes Receivable From Participants**	Notes receivable from participants, interest rate at 4.25% - 5.25%, secured by participants' remaining account balances, maturing through 2019	-0-	$ 84,615

* - A party-in-interest as defined by ERISA.
a - The cost of participant-directed investments is not required to be disclosed.

RTT USA, Inc. 401(K) Profit Sharing Plan & Trust

Schedule H, Line 4a - Schedule of Delinquent Participant Contributions
For the Year Ended December 31, 2014

Employer Identification Number: 20-2394780
Plan Number: 001

	Totals That Constitute Nonexempt Prohibited Transactions			
	Contributions Not Corrected	Contributions Corrected Outside VFCP*	Contributions Pending Correction in VFCP*	Total Fully Corrected Under VFCP* and PTE 2002-51
2011 participant contributions transferred late to Plan	$ -	$ 2,710	$ -	$ -

*Voluntary Fiduciary Correction Program (DOL)

October 26, 2015

To Whom It May Concern,

Our form 5500 was due on 10/15/2015 however, we were unable to file the return on that date due to the fact that the record keeper, ADP, was unresponsive to several requests for documentation required for the auditor to complete testing and issue the required financial statements to us in a timely manner. I have proof of all communications with ADP if necessary. As the result of multiple delays on the part of the record keeper, the financial statements that are required to be attached to the form 5500 were not issued until after close of business on Friday, October 23, 2015.

Please feel free to contact me if you have any questions or concerns.

Sincerely,

Tracy A. Greene

Tracy A. Greene
Tracy.greene2@3ds.com
248-544-4022 extension 1124

Attachment to 2014 Form 5500
Schedule H, line 4i - Schedule of Assets (Held at End of Year)

Plan Name RTT USA INC 401K PROFIT SHARING PLAN & TRUST **EIN:** 20-2394780
Plan Sponsor's Name RTT USA INC **PN:** 001

(a)	(b) Identity of issue, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par, or maturity value.	(d) Cost	(e) Current value
	PRU SHORT-TERM CORP BOND - A	REGISTERED INVESTMENT COMPANY		86,463
	MAINSTAY ICAP INTERNATIONAL R2	REGISTERED INVESTMENT COMPANY		79,602
	T.ROWE PRICE RETIREMENT 2040-R	REGISTERED INVESTMENT COMPANY		268,073
	BLACKROCK CAP APPRECIATION A	REGISTERED INVESTMENT COMPANY		125,844
	THORNBURG INTL VALUE - R4	REGISTERED INVESTMENT COMPANY		62,102
	BLACKROCK EQUITY DIVIDEND - A	REGISTERED INVESTMENT COMPANY		132,968
	VICTORY MUNDER MC CORE GRTH A	REGISTERED INVESTMENT COMPANY		161,523

Attachment to 2014 Form 5500
Schedule H, line 4i - Schedule of Assets (Held at End of Year)

Plan Name RTT USA INC 401K PROFIT SHARING PLAN & TRUST **EIN:** 20-2394780
Plan Sponsor's Name RTT USA INC **PN:** 001

(a)	(b) Identity of issue, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par, or maturity value.	(d) Cost	(e) Current value
	OPPENHEIMER GOLD & SPEC MIN -A	REGISTERED INVESTMENT COMPANY		18,979
	FRANKLIN SMALL CAP VALUE FD-A	REGISTERED INVESTMENT COMPANY		139,680
	MFS VALUE FUND - R2	REGISTERED INVESTMENT COMPANY		92,611
	AB GLOBAL BOND A	REGISTERED INVESTMENT COMPANY		86,830
	T. ROWE PRICE GRTH STK FD - R	REGISTERED INVESTMENT COMPANY		143,296
	DEUTSCHE UNCONSTRAINED INC A	REGISTERED INVESTMENT COMPANY		90,577
	HARTFORD DIVIDEND & GROWTH -R4	REGISTERED INVESTMENT COMPANY		152,199

Attachment to 2014 Form 5500
Schedule H, line 4i - Schedule of Assets (Held at End of Year)

Plan Name RTT USA INC 401K PROFIT SHARING PLAN & TRUST **EIN:** 20-2394780
Plan Sponsor's Name RTT USA INC **PN:** 001

(a)	(b) Identity of issue, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par, or maturity value.	(d) Cost	(e) Current value
	INVESCO ENERGY - A	REGISTERED INVESTMENT COMPANY		33,686
	PUTNAM INT CAPITAL OPP -A	REGISTERED INVESTMENT COMPANY		47,089
	PIMCO TOTAL RETURN FUND - A	REGISTERED INVESTMENT COMPANY		143,857
	VIRTUS FOREIGN OPPORT A	REGISTERED INVESTMENT COMPANY		80,403
	PRUDENTIAL HIGH YIELD - A	REGISTERED INVESTMENT COMPANY		97,283
	T.ROWE PRICE RETIREMENT 2020-R	REGISTERED INVESTMENT COMPANY		41,656
	JP MORGAN GOVT BOND FUND - A	REGISTERED INVESTMENT COMPANY		12,419

Attachment to 2014 Form 5500
Schedule H, line 4i - Schedule of Assets (Held at End of Year)

Plan Name RTT USA INC 401K PROFIT SHARING PLAN & TRUST **EIN:** 20-2394780
Plan Sponsor's Name RTT USA INC **PN:** 001

(a)	(b) Identity of issue, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par, or maturity value.	(d) Cost	(e) Current value
	JENNISON NATURAL RESOURCES - A	REGISTERED INVESTMENT COMPANY		81,409
	FRANKLIN RISING DIVIDENDS - A	REGISTERED INVESTMENT COMPANY		225,527
	BLACKROCK GLOBAL ALLOCATION A	REGISTERED INVESTMENT COMPANY		134,574
	PIMCO REAL RETURN FUND - A	REGISTERED INVESTMENT COMPANY		30,837
	T. ROWE PRICE RETIRE 2050 - R	REGISTERED INVESTMENT COMPANY		194,540
	FRANKLIN MUT GLB DISC - R	REGISTERED INVESTMENT COMPANY		70,821
	INVESCO COMSTOCK A	REGISTERED INVESTMENT COMPANY		236,084

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

Plan Name RTT USA INC 401K PROFIT SHARING PLAN & TRUST **EIN:** 20-2394780
Plan Sponsor's Name RTT USA INC **PN:** 001

(a)	(b) Identity of issue, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par, or maturity value.	(d) Cost	(e) Current value
	HARTFORD CAPITAL APPR - R4	REGISTERED INVESTMENT COMPANY		251,764
	FIDELITY ADVISOR SMALL CAP - T	REGISTERED INVESTMENT COMPANY		99,311
	OPPENHEIMER GLBL STRAT INC A	REGISTERED INVESTMENT COMPANY		65,281
	T.ROWE PRICE RETIREMENT 2030-R	REGISTERED INVESTMENT COMPANY		145,095
	PARTICIPANT LOANS	INTEREST RATES (4.25% TO 5.25%)		84,615
	SSGA CASH SERIES US GOVT L	COMMON/COLLECTIVE TRUST		69,048