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 10/01/2014 and ending 09/30/2015

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

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

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

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

Part II Basic Plan Information—enter all requested information

1a Name of plan
THE TREMONT GROUP, INC. 401(K) PROFIT SHARING PLAN

1b Three-digit plan number (PN) ▶ 001

1c Effective date of plan 10/24/1990

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

201 EAST STREET
WOODLAND, CA 95776

2b Employer Identification Number (EIN)
68-0230147

2c Plan Sponsor's telephone number
530-662-5442

2d Business code (see instructions)
325300

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.	06/08/2016	WARREN HUTSON
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

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

Preparer's telephone number (optional)

3a Plan administrator's name and address [X] Same as Plan Sponsor	**3b** Administrator's EIN	
	3c Administrator's telephone number	
4 If the name and/or EIN of the plan sponsor has changed since the last return/report filed for this plan, enter the name, EIN and the plan number from the last return/report:	**4b** EIN	
a Sponsor's name	**4c** PN	
5 Total number of participants at the beginning of the plan year	**5**	142
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)**	135
a(2) Total number of active participants at the end of the plan year	**6a(2)**	117
b Retired or separated participants receiving benefits	**6b**	2
c Other retired or separated participants entitled to future benefits	**6c**	15
d Subtotal. Add lines **6a(2)**, **6b**, and **6c**.	**6d**	134
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	**6e**	1
f Total. Add lines **6d** and **6e**.	**6f**	135
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**	135
h Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested	**6h**	2
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	**7**	

8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions:
2E 2J 2K 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)** [ ] **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 10/01/2014 and ending 09/30/2015

A Name of plan	**B** Three-digit plan number (PN) ▶
THE TREMONT GROUP, INC. 401(K) PROFIT SHARING PLAN	001
C Plan sponsor's name as shown on line 2a of Form 5500	**D** Employer Identification Number (EIN)
THE TREMONT GROUP, INC.	68-0230147

Part I Service Provider Information (see instructions)

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

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

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

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

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

MORGAN STANLEY SMITH BARNEY

26-4310632

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
27 33 51 52 72	NONE		Yes ☐ No ☐	Yes ☐ No ☐		Yes ☐ No ☐

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

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

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

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

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

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

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

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

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

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

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

Part I Service Provider Information (continued)

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

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

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

(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 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 10/01/2014 and ending 09/30/2015

A Name of plan
THE TREMONT GROUP, INC. 401(K) PROFIT SHARING PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
THE TREMONT GROUP, INC.

D Employer Identification Number (EIN)
68-0230147

Part I Asset and Liability Statement

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

Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a	0	0
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	494084	726136
(2) Participant contributions	1b(2)	15269	6789
(3) Other	1b(3)		
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	407738	518328
(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)	9013153	8779887
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)		
(9) Value of interest in common/collective trusts	1c(9)		
(10) Value of interest in pooled separate accounts	1c(10)		
(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)	3556438	2669668
(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	13486682	12700808
	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	13486682	12700808

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)	726136	
	(B) Participants	2a(1)(B)	705791	
	(C) Others (including rollovers)	2a(1)(C)	97778	
	(2) Noncash contributions	2a(2)	0	
	(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		1529705
b	**Earnings on investments:**			
	(1) Interest:			
	(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	38	
	(B) U.S. Government securities	2b(1)(B)		
	(C) Corporate debt instruments	2b(1)(C)		
	(D) Loans (other than to participants)	2b(1)(D)		
	(E) Participant loans	2b(1)(E)		
	(F) Other	2b(1)(F)		
	(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		38
	(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)	232713	
	(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		232713
	(3) Rents	2b(3)		
	(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	2b(4)(A)	2743739	
	(B) Aggregate carrying amount (see instructions)	2b(4)(B)	2194570	
	(C) Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result	2b(4)(C)		549169
	(5) Unrealized appreciation (depreciation) of assets: **(A)** Real estate	2b(5)(A)		
	(B) Other	2b(5)(B)	-995241	
	(C) Total unrealized appreciation of assets. Add lines **2b(5)(A)** and **(B)**	2b(5)(C)		-995241

		(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)		-325750
c Other income	2c		89448
d Total income. Add all **income** amounts in column (b) and enter total	2d		1080082
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	1668449	
(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)		1668449
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions)	2g		
h Interest expense	2h		
i Administrative expenses: **(1)** Professional fees	2i(1)		
(2) Contract administrator fees	2i(2)		
(3) Investment advisory and management fees	2i(3)	197507	
(4) Other	2i(4)		
(5) Total administrative expenses. Add lines **2i(1)** through **(4)**	2i(5)		197507
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		1865956
Net Income and Reconciliation			
k Net income (loss). Subtract line **2j** from line **2d**	2k		-785874
l Transfers of assets:			
(1) To this plan	2l(1)		
(2) From this plan	2l(2)		

Part III Accountant's Opinion

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

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

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

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

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

(1) Name: KCOE ISOM, LLP **(2)** EIN: 48-0567703

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		1000000
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 10/01/2014 and ending 09/30/2015

A Name of plan
THE TREMONT GROUP, INC. 401(K) PROFIT SHARING PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
THE TREMONT GROUP, INC.

D Employer Identification Number (EIN)
68-0230147

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): 68-0468835

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):

The Tremont Group, Inc.
401(k) Profit Sharing Plan

Woodland, California

FINANCIAL STATEMENTS AND SUPPLEMENTARY INFORMATION
WITH INDEPENDENT AUDITORS' REPORT

September 30, 2015 and 2014



K·COE
ISOM

The Tremont Group, Inc. 401(k) Profit Sharing Plan

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K·COE ISOM

INDEPENDENT AUDITORS' REPORT

To the Plan Trustees
The Tremont Group, Inc.
401(k) Profit Sharing Plan
Woodland, California

We have audited the accompanying financial statements of The Tremont Group, Inc. 401(k) Profit Sharing Plan (the Plan), which comprise the statements of net assets available for benefits as of September 30, 2015 and 2014; the related statement 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.

Auditors' Responsibility

Our responsibility is to express an opinion on these financial statements based on our audits. We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audits to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditors' judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the plan's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the plan's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the net assets available for benefits of the Plan as of September 30, 2015 and 2014, and the changes in net assets available for benefits for the years ended, in accordance with accounting principles generally accepted in the United States of America.

Report on Supplementary Information

Our audits were conducted for the purpose of forming an opinion on the financial statements as a whole. The supplemental schedule of assets held at end of year as of September 30, 2015, and schedule of assets acquired and disposed of within the plan year for the year ended September 30, 2015, are presented for the purpose of additional analysis and are not a required part of the financial statements, but are supplementary information required by the Department of Labor's (DOL) Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974. Such information is the responsibility of the Plan's management and was derived from, and relates directly to, the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audits of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements, or to the financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the information is fairly stated in all material respects in relation to the financial statements as a whole.

KCoe Isom, LLP

April 13, 2016
Chico, California

FINANCIAL SECTION

The Tremont Group, Inc. 401(k) Profit Sharing Plan

STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS

September 30	2015	2014
ASSETS		
Investments at Fair Value	$ 11,967,883	$ 12,977,329
Receivables		
Employer matching contributions	319,829	294,084
Employer profit sharing contributions	406,308	200,000
Participant contributions	6,789	15,269
Total Receivables	732,926	509,353
NET ASSETS AVAILABLE FOR BENEFITS	$ 12,700,809	$ 13,486,682

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

The Tremont Group, Inc. 401(k) Profit Sharing Plan

STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS

Years Ended September 30	2015	2014
ADDITIONS TO NET ASSETS ATTRIBUTED TO		
Investment Income		
Net appreciation (depreciation) in fair value of investments	$ (970,328)	$ 1,011,313
Interest and dividends	323,199	309,018
Total Investment Income (Loss)	(647,129)	1,320,331
Contributions		
Employer matching contributions	319,829	294,084
Employer profit sharing contributions	406,308	200,000
Participant salary deferrals	705,790	592,610
Participant rollover contributions	97,778	302,704
Total Contributions	1,529,705	1,389,398
TOTAL ADDITIONS	882,576	2,709,729
DEDUCTIONS FROM NET ASSETS ATTRIBUTED TO		
Benefits paid	(1,668,449)	(322,545)
Net Increase (Decrease)	(785,873)	2,387,184
Net Assets Available for Benefits - Beginning of Year	13,486,682	11,099,498
Net Assets Available for Benefits - End of Year	$ 12,700,809	$ 13,486,682

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

1. DESCRIPTION OF PLAN

The following description of The Tremont Group, Inc., 401(k) Profit Sharing Plan (the Plan) provides only general information. Participants should refer to the Plan agreement for a complete description of the Plan's provisions.

General The Plan is a defined contribution plan covering substantially all employees who are age 21 or older and have one year of service with The Tremont Group, Inc., (the Company). The Company is engaged in the retail and wholesale sale of agricultural chemicals and fertilizers. Sales are made primarily to growers and businesses operating in the agricultural industry, located in northern California. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA). The Plan was originally established as of October 24, 1990, and has been subsequently amended and restated. The Plan Trustees are responsible for oversight of the Plan. The Plan Trustees also determine the appropriateness of the Plan's investment offerings and monitor investment performance.

Contributions Participants may elect to contribute to the Plan, in the form of employee 401(k) salary deferral contributions, up to the lesser of 100% of their eligible compensation or the maximum amount allowable by law.

The Company makes safe harbor matching contributions of 100% of each participant's deferral up to 3% of the participant's eligible compensation and 50% of the next 2% of eligible compensation. The Company made safe harbor matching contributions of $319,829 and $294,084, respectively, for the years ended September 30, 2015 and 2014.

Additionally, the Company may make discretionary non-safe harbor matching contributions and discretionary profit sharing contributions to the Plan. No discretionary non-safe harbor matching contributions were made for the years ended September 30, 2015 and 2014. The Company made discretionary profit sharing contributions of $406,308 and $200,000, respectively, for the years ended September 30, 2015 and 2014.

All contributions are invested in a portfolio of investments as directed by the Plan Trustees.

Participant Accounts Each participant's account is credited with the participant's salary deferral contributions, employer contributions, an allocation of Plan earnings, and may be charged with an allocation of administrative expenses. The Company's discretionary profit sharing contribution is allocated in the same ratio that each participant's eligible compensation for the Plan year bears to the total eligible compensation of all participants for the year. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

Vesting Participants are immediately vested in their salary deferral contributions, employer safe harbor matching contributions, and earnings thereon. Discretionary non-safe harbor matching contributions and discretionary profit sharing contributions to the Plan are subject to vesting. Participants vest in these contributions and earnings thereon as follows:

Years of Service	Vested Percentage
Less than 2	0%
2	20%
3	40%
4	60%
5	80%
6	100%

Participants are credited with one year of service for each plan year in which they worked at least 1,000 hours.

Payment of Benefits Withdrawals are allowed in the event of termination, disability, death, retirement, or attainment of age 59 1/2. Depending upon the event, the withdrawal may be subject to early withdrawal penalties imposed by the *Internal Revenue Code* and the *California Revenue and Taxation Code*. Payments are made in the form of a lump-sum distribution or annual installments over a period of time of not more than the participant's life expectancy.

Forfeitures Forfeitures attributable to discretionary non-safe harbor matching and discretionary profit sharing contributions may be used to pay for administrative expenses or reduce future employer safe harbor matching contributions. Forfeited nonvested account balances totaling $1,663 and $4,433 were used to reduce employer safe harbor matching contributions for the years ended September 30, 2015 and 2014, respectively. At September 30, 2015 and 2014, the remaining forfeited nonvested accounts totaled $-0-.

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

2. SIGNIFICANT ACCOUNTING POLICIES

Basis of Accounting The financial statements of the Plan are prepared under the accrual method of accounting.

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

Investment Valuation and Income Recognition Investments are reported at fair value. Fair value is the price that would be received to sell an asset, or paid to transfer a liability, in an orderly transaction between market participants at the measurement date. The Plan Trustees determine the Plan's valuation policies utilizing information provided by the investment advisers and custodian. Fair value measurements are discussed below.

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

Fair Value Measurements Financial Accounting Standards Board (FASB) Accounting Standards Codification (ASC) 820, *Fair Value Measurements and Disclosures*, provides the framework for measuring fair value. That framework provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1 measurements) and the lowest priority to unobservable inputs (Level 3 measurements). The three levels of the fair value hierarchy under FASB ASC 820 are described below:

Level 1: Inputs to the valuation methodology are unadjusted, quoted prices for identical assets or liabilities in active markets that the Plan has the ability to access.

Level 2: Inputs to the valuation methodology include quoted prices for similar assets or liabilities in active markets; quoted prices for identical or similar assets or liabilities in inactive markets; inputs other than quoted prices that are observable for the asset or liability; or inputs that are derived principally from, or corroborated by, observable market data by correlation or other means.

If the asset or liability has a specified (contractual) term, the Level 2 input must be observable for substantially the full term of the asset or liability.

Level 3: Inputs to the valuation methodology are unobservable and significant to the fair value measurement.

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

Following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodologies used during the years ended September 30, 2015 and 2014.

Money Market Funds: These assets are valued at the net asset value (NAV), generally $1 per share, and are reported on the active market on which securities are traded.

Corporate Stocks: These assets are valued at the closing price reported on the active market on which the individual securities are traded.

Mutual Funds: These assets are valued at the NAV reported on the active market on which the securities are traded.

Exchange Traded Funds: These assets are valued at the NAV reported on the active market on which the securities are traded. The valuation occurs throughout the day based on the market value of the underlying securities as well as the market supply and demand for the particular exchange traded fund.

See note 4 for the classification of these assets within the fair value hierarchy.

The methods described above may produce a fair value calculation that may not be indicative of net realizable value or reflective of future fair values. Furthermore, while 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.

Expenses Certain operating expenses of the Plan are deducted from participant accounts and the remaining expenses are paid by the Company. Investment-related expenses are included in net appreciation (depreciation) in fair value of investments.

Subsequent Events Management has evaluated the need for disclosures or adjustments resulting from subsequent events through April 13, 2016, the date the financial statements were available to be issued.

3. IMPLEMENTATION OF NEW ACCOUNTING STANDARD

In July 2015, FASB issued Accounting Standards Update (ASU) 2015-12, *Plan Accounting: Defined Benefit Pension Plans (Topic 960), Defined Contribution Pension Plans (Topic 962), Health and Welfare Benefit Plans (Topic 965): (Part I) Fully Benefit-Responsive Investment Contracts, (Part II) Plan Investment Disclosures, (Part III) Measurement Date Practical Expedient*. This three-part standard simplifies reporting for fully benefit-responsive investment contracts and plan investment disclosures, and provides for a measurement-date practical expedient. Parts I and II are effective for fiscal years beginning after December 15, 2015, and should be applied retrospectively, with early application permitted. Part III is effective for fiscal years beginning after December 15, 2015, and should be applied prospectively, with early application permitted. The Plan has elected to adopt Part II early. Accordingly, the amendments were retrospectively applied resulting in prior-period information that has been adjusted. Parts I and III are not applicable to this Plan.

4. INVESTMENTS

The following tables set forth by level, within the fair value hierarchy, the Plan's investments at fair value.

September 30, 2015	Level 1	Level 2	Level 3	Total
Interest-bearing cash	$ 11,921	$ -	$ -	$ 11,921
Money market funds	506,407	-	-	506,407
Corporate stocks	7,039,159	-	-	7,039,159
Mutual funds	2,669,668	-	-	2,669,668
Exchange traded funds	1,740,728	-	-	1,740,728
Total Assets at Fair Value	$ 11,967,883	$ -	$ -	$ 11,967,883

September 30, 2014	Level 1	Level 2	Level 3	Total
Interest-bearing cash	$ 45,450	$ -	$ -	$ 45,450
Money market funds	362,288	-	-	362,288
Corporate stocks	7,240,303	-	-	7,240,303
Mutual funds	3,556,438	-	-	3,556,438
Exchange traded funds	1,772,850	-	-	1,772,850
Total Assets at Fair Value	$ 12,977,329	$ -	$ -	$ 12,977,329

5. RELATED-PARTY DISCLOSURE

The Company is the administrator of the Plan. The Plan's administrator may designate other persons to carry out the day-to-day operations of the Plan. The Plan has an investment contract with Morgan Stanley Smith Barney. Morgan Stanley Smith Barney, as the Plan's broker, qualifies as a party in interest with respect to the investments managed by them; however, they are exempt from the prohibited transaction rules under ERISA. Fees paid by the Plan for investment management services are included in net appreciation (depreciation) in fair value of investments and amounted to $198,506 and $188,292 for the years ended September 30, 2015 and 2014, respectively.

6. TAX STATUS

The Plan has adopted a prototype, non-standardized profit sharing plan established by Capital Pension Services, Inc (Sponsor). The Sponsor's prototype plan obtained a determination letter on March 31, 2008, in which the Internal Revenue Service stated that the form of the prototype plan, as then designed, is acceptable under Section 401 of the *Internal Revenue Code*. Although the Plan has adopted amendments since adopting the prototype plan, the Plan administrator believes that the Plan is currently designed and being operated in compliance with the applicable requirements of the *Internal Revenue Code* and, therefore, believes that the Plan is qualified, and the related trust is tax-exempt.

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 if the organization has taken an uncertain position that more than likely 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 September 30, 2015, there are no uncertain positions taken, or expected to be taken, that would require recognition of a liability or disclosure in the financial statements. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress. The Plan administrator believes it is no longer subject to income tax examinations for years prior to 2012.

7. RISK AND UNCERTAINTIES

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

SUPPLEMENTARY INFORMATION SECTION

The Tremont Group, Inc. 401(k) Profit Sharing Plan

FORM 5500, SCHEDULE H, LINE 4i – SCHEDULE OF ASSETS HELD AT END OF YEAR
EIN: 68-0230147, PLAN: 001
September 30, 2015

(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
	3M Company	Corporate stock	$ 13,567	$ 17,296
	A A R Corporation	Corporate stock	6,423	4,743
	Abaxis Inc	Corporate stock	4,417	4,487
	Abbott Laboratories	Corporate stock	32,867	36,721
	Abbvie Inc Com	Corporate stock	8,459	13,875
	Ace Ltd	Corporate stock	11,590	16,958
	Actelion Ltd Unspon Adr	Corporate stock	7,970	8,520
	Adecco Sa Unspon Adr	Corporate stock	11,788	10,568
	Adobe Systems	Corporate stock	23,434	32,066
	Adt Corporation Com	Corporate stock	26,306	26,073
	Advanced Semicndctr Eng Sp Adr	Corporate stock	8,356	9,553
	Aercap Holdings N.V.	Corporate stock	4,159	10,134
	Albany Intl A New	Corporate stock	6,005	7,753
	Alexander & Baldwin Inc	Corporate stock	8,814	8,171
	Alexion Pharm Inc	Corporate stock	19,180	25,648
	Alibaba Group Holdings	Corporate stock	20,011	11,912
	Allergan Inc	Corporate stock	47,908	119,596
	Allianz Se Ads	Corporate stock	8,742	10,535
	Allied World Assur Co Hldg Ltd	Corporate stock	6,493	12,024
	Altisource Residential Corp B	Corporate stock	10,774	6,167
	Amazon Com Inc	Corporate stock	31,727	68,593
	Amc Networks Inc Cl A	Corporate stock	9,542	24,731
	Amer Intl Gp Inc New	Corporate stock	28,931	28,978
	American Express Co	Corporate stock	10,244	13,343
	American Tower Reit Com	Corporate stock	16,434	17,596
	Anadarko Pete	Corporate stock	105,588	88,169
	Anheuser Busch Inbev Sa Spon	Corporate stock	24,588	34,235
	Anthem Inc Com	Corporate stock	21,537	21,280
	Aon Plc Shs Cl-A	Corporate stock	9,493	8,418
	Apple Inc	Corporate stock	60,065	89,343
	Arm Holdings Plc Ads	Corporate stock	16,101	15,354
	Artisan Mid Cap Value Adv	Mutual fund	229,939	242,502
	Ashtead Group Plc Adr	Corporate stock	7,695	6,930
	Assa Abloy Ab Unsp Adr	Corporate stock	7,485	13,472
	Assoc British Fds Plc Adr-New	Corporate stock	3,932	8,329
	Athenahealth Inc Com	Corporate stock	9,678	13,202
	Atlantic Tele-Network Inc New	Corporate stock	7,967	8,428
	Autodesk Inc Delaware	Corporate stock	29,136	45,155
	B & G Foods Inc	Corporate stock	7,063	8,675
	Barnes Group Incorporated	Corporate stock	3,145	4,759
	Bayer Ag Spon Adr	Corporate stock	11,046	16,389
	Beacon Roofing Supply Inc	Corporate stock	11,490	10,527
	Balance Forward		$ 950,089	$ 1,181,208

**Party in interest.*

The Tremont Group, Inc. 401(k) Profit Sharing Plan

FORM 5500, SCHEDULE H, LINE 4i – SCHEDULE OF ASSETS HELD AT END OF YEAR
EIN: 68-0230147, PLAN: 001
September 30, 2015
(Continued)

(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
	Balance Brought Forward		$ 950,089	$ 1,181,208
	Bg Group Plc	Corporate stock	7,968	6,731
	Bhp Billiton Ltd	Corporate stock	36,909	15,272
	Biogen Idec Inc	Corporate stock	83,711	122,560
	Biomarin Pharmac Se	Corporate stock	12,972	16,430
	Bio-Techne Corp	Corporate stock	6,303	7,952
	Bnp Paribas Sp Adr Repstg	Corporate stock	9,073	8,726
	Bob Evans Farm Inc	Corporate stock	8,604	7,890
	Boeing Co	Corporate stock	16,960	26,452
	Bridgestone Cp Adr	Corporate stock	10,000	10,376
	Bristol Myers Squibb Co	Corporate stock	45,363	50,320
	British Amer Tob Spon Adr	Corporate stock	13,077	16,732
	Broadcom Corp Cl A	Corporate stock	50,942	79,768
	Brookdale Senior Living Inc	Corporate stock	3,980	4,454
	Bt Gp Plc Spon Adr	Corporate stock	8,143	12,686
	Cabot Microelectronics Corp	Corporate stock	6,645	6,934
	Canadian Natl Railway Co	Corporate stock	7,900	9,763
	Cap Gemini Sa Adr	Corporate stock	8,767	11,917
	Carlsberg As	Corporate stock	10,333	8,294
	Casey's General Stores Inc	Corporate stock	6,005	11,939
	Cass Info Sys Inc	Corporate stock	4,208	5,011
	Cdn Pacific Ry Ltd New	Corporate stock	6,212	6,030
	Celgene Corp	Corporate stock	21,634	27,583
	Cepheid Inc	Corporate stock	12,950	15,142
	Channeladvisor Corp Com	Corporate stock	8,846	1,918
	Check Point Software Tech Ltd	Corporate stock	6,514	12,693
	Cheese Cake Factory Inc	Corporate stock	4,079	6,583
	Chemed Corporation	Corporate stock	5,699	9,610
	Chemours Co Com	Corporate stock	1,689	796
	Chemtura Corp Com New	Corporate stock	6,935	12,307
	Chevron Corp	Corporate stock	25,893	21,298
	China Eastn Airls Ltd Sp Adr H	Corporate stock	10,939	11,220
	China Mobile Ltd	Corporate stock	10,564	12,971
	Chipotle Mexican Grill Inc Com	Corporate stock	12,828	22,328
	Citigroup Inc New	Corporate stock	82,528	76,647
	Citrix Systems Inc	Corporate stock	40,018	44,062
	Clearwater Paper Corp	Corporate stock	8,164	7,369
	Cme Group Inc	Corporate stock	16,093	20,032
	Cms Energy Cp	Corporate stock	17,171	16,954
	Cno Finl Group Inc Com	Corporate stock	2,472	6,772
	Balance Forward		$ 1,609,180	$ 1,953,730

**Party in interest.*

The Tremont Group, Inc. 401(k) Profit Sharing Plan

FORM 5500, SCHEDULE H, LINE 4i – SCHEDULE OF ASSETS HELD AT END OF YEAR
EIN: 68-0230147, PLAN: 001
September 30, 2015
(Continued)

(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
	Balance Brought Forward		$ 1,609,180	$ 1,953,730
	Coca Cola Co	Corporate stock	23,020	23,069
	Comcast Corp Cl A Special New	Corporate stock	75,820	172,865
	Compagnie Fin Richemontag Adr	Corporate stock	9,071	7,411
	Compass Group Plc	Corporate stock	10,748	10,056
	Concho Res Inc	Corporate stock	13,637	10,813
	Conocophillips	Corporate stock	15,785	14,724
	Contl Ag Spons Adr	Corporate stock	6,218	5,768
	Core Mark Holding Inc	Corporate stock	6,013	9,556
	Costar Group Inc	Corporate stock	8,153	11,768
	Costco Wholesale Corp New	Corporate stock	16,698	26,023
	Cree Research Inc	Corporate stock	60,582	46,691
	Cubic Corp	Corporate stock	5,407	4,697
	Cvent Inc Com	Corporate stock	5,105	6,732
	Daikin Inds Ltd Unspon Adr	Corporate stock	7,411	7,401
	Daiwa House Ind Ltd Adr	Corporate stock	14,651	18,667
	Darling International Inc	Corporate stock	8,160	8,430
	Dbs Group Holdings Ltd Sp	Corporate stock	11,931	8,926
	Dewater Inc	Corporate stock	8,047	3,022
	Diageo Plc Spon Adr New	Corporate stock	17,259	15,306
	Digi Intl Inc	Corporate stock	3,782	4,421
	Discovery Communications Ser A	Corporate stock	32,177	27,852
	Dolby Cla A Com Stk	Corporate stock	15,576	15,974
	Dollar Gen Corp New Com	Corporate stock	54,976	52,157
	Dominion Res Inc (New)	Corporate stock	24,911	33,923
	Dorman Products, Inc	Corporate stock	9,775	9,058
	Dow Chemical Co	Corporate stock	11,378	13,483
	Du Pont Ei De Nemours & Co	Corporate stock	31,533	29,643
	Echo Global Logistics Inc	Corporate stock	4,273	4,038
	Encana Corp	Corporate stock	8,590	4,160
	Esterline Technologies Cp	Corporate stock	7,482	8,267
	Eversource Energy Com	Corporate stock	9,741	13,414
	Examworks Group Inc	Corporate stock	9,079	7,076
	Exxon Mobil Corp	Corporate stock	54,028	50,186
	Facebook Inc Cl-A	Corporate stock	29,147	72,370
	Financial Engines	Corporate stock	9,009	7,368
	Fireeye Inc	Corporate stock	18,721	10,596
	Five Below	Corporate stock	7,189	6,380
	Fleetcor Technologies	Corporate stock	17,833	20,505
	Fluor Corp New	Corporate stock	51,957	40,190
	Balance Forward		$ 2,344,053	$ 2,796,716

**Party in interest.*

The Tremont Group, Inc. 401(k) Profit Sharing Plan

FORM 5500, SCHEDULE H, LINE 4i – SCHEDULE OF ASSETS HELD AT END OF YEAR
EIN: 68-0230147, PLAN: 001
September 30, 2015
(Continued)

(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
	Balance Brought Forward		$ 2,344,053	$ 2,796,716
	Forward Air Corp	Corporate stock	4,117	4,232
	Freeport Mcmoran Cp&Gld	Corporate stock	69,121	37,985
	Fresenius Se & Co Spn Adr	Corporate stock	6,980	9,156
	Gap Inc	Corporate stock	21,698	18,098
	General Electric Co	Corporate stock	61,515	65,572
	Gentex Corp	Corporate stock	6,131	9,223
	Gilead Science	Corporate stock	3,903	4,811
	Goldman Sachs Grp Inc	Corporate stock	23,095	21,199
	Google Inc Cl A	Corporate stock	31,814	43,806
	Google Inc-Cl A	Corporate stock	29,936	44,048
	Grand Canyon Ed Inc Com	Corporate stock	10,105	12,347
	Gruma S.A.B. De C.V.	Corporate stock	11,702	12,571
	H&E Equipment Svcs Inc	Corporate stock	6,124	4,932
	Healthstream Inc	Corporate stock	3,936	2,966
	Heico Corp New	Corporate stock	6,480	5,475
	Hlth Care Svc Grp	Corporate stock	9,427	10,447
	Home Depot Inc	Corporate stock	36,382	54,280
	Honeywell International Inc	Corporate stock	23,928	30,301
	Iberia Bk Corp	Corporate stock	9,634	10,012
	Icon Plc	Corporate stock	7,829	10,078
	Illumina Inc	Corporate stock	7,229	22,857
	Immunogen Inc	Corporate stock	23,372	21,110
	Incyte Corp	Corporate stock	3,733	6,399
	Informa Plc	Corporate stock	7,241	9,755
	Innerworkings Inc	Corporate stock	5,500	2,750
	Innophos Hldgs Inc	Corporate stock	2,446	2,141
	Intel Corp	Corporate stock	39,963	45,813
	Interest Bearing Cash	Interest-bearing cash	11,921	11,921
	International Paper Co	Corporate stock	23,033	17,912
	Intl Business Machines Corp	Corporate stock	14,053	10,873
	Invesco Floating Rate Y	Mutual fund	529,308	492,735
	Ipc The Hospitalist Comp Inc	Corporate stock	5,446	9,634
	Ishares Msci Emerging Mkts Etf	Exchange trade fund	237,155	192,124
	Ishares Russell Midcap G Etf	Exchange trade fund	64,098	102,433
	Ishares Russell Midcap V Etf	Exchange trade fund	48,626	71,988
	Isis Pharm Inc	Corporate stock	5,183	25,343
	Itv Plc Unspons Adr	Corporate stock	11,463	10,927
	Japan Tob Inc	Corporate stock	10,982	10,199
	Jd Com Inc Spon Adr Cl A	Corporate stock	20,797	16,678
	Balance Forward		$ 3,799,459	$ 4,291,847

**Party in interest.*

The Tremont Group, Inc. 401(k) Profit Sharing Plan

FORM 5500, SCHEDULE H, LINE 4i – SCHEDULE OF ASSETS HELD AT END OF YEAR
EIN: 68-0230147, PLAN: 001
September 30, 2015
(Continued)

(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
	Balance Brought Forward		$ 3,799,459	$ 4,291,847
	Johnson & Johnson	Corporate stock	23,783	30,806
	Jpmorgan Chase & Co	Corporate stock	65,570	85,053
	Julius Baer Group Ltd Un Adr	Corporate stock	11,518	9,595
	Kasikornbank Pub Co Ltd Unspon	Corporate stock	11,340	7,615
	Kbc Group Nv Unspons Adr	Corporate stock	6,633	6,823
	Kddi Corp Unspon Adr	Corporate stock	19,875	22,413
	Keppel Corp Ltd Adr Sponsored	Corporate stock	13,341	7,805
	Komatsu Ltd Spon Adr New	Corporate stock	8,989	5,077
	Korea Electric Power Corp Ads	Corporate stock	11,289	11,065
	Kroger Co	Corporate stock	41,249	46,891
	Kulicke & Soffa Inds	Corporate stock	11,217	8,078
	L-3 Communications Holding Inc	Corporate stock	50,519	69,819
	Lazard Emerging Markets I	Mutual fund	472,237	348,739
	Liberty Broadband Corp S-A	Corporate stock	560	2,675
	Liberty Broadband Corp S-C	Corporate stock	2,586	6,908
	Liberty Inter Co Venture Ser A	Corporate stock	2,191	6,981
	Liberty Interactive Corp Qvc A	Corporate stock	21,185	40,053
	Liberty Media Corp Ser A	Corporate stock	4,631	10,359
	Liberty Media Corp Ser C	Corporate stock	9,407	20,366
	Linkedin Corp-A	Corporate stock	19,146	30,801
	Lloyds Banking Group Plc	Corporate stock	11,469	13,064
	Lockheed Martin Corp	Corporate stock	30,051	36,487
	Magna International Inc	Corporate stock	11,888	10,562
	Makita Corporation Ltd Adr New	Corporate stock	11,756	10,819
	Manulife Financial Corp	Corporate stock	10,860	8,978
	Marathon Oil Co	Corporate stock	10,928	6,992
	Marathon Petroleum Corp	Corporate stock	19,732	30,578
	Marriott Intl Inc New Cl A	Corporate stock	19,066	22,506
	Masonite Intl Corp New Com	Corporate stock	5,100	5,392
	Mastercard Inc Cl A	Corporate stock	26,030	50,918
	Maximus Inc	Corporate stock	7,173	11,793
	Mc Donalds Corp	Corporate stock	22,641	24,238
	Mcgraw Hill Financial Inc Com	Corporate stock	17,557	16,954
	Mediolanum Spa Unspon Adr	Corporate stock	4,704	4,561
	Mednax Inc	Corporate stock	6,217	10,904
	Medtronic Plc Shs	Corporate stock	36,013	31,328
	Merck & Co Inc New Com	Corporate stock	46,394	43,858
	Metlife Incorporated	Corporate stock	27,737	24,282
	Microsoft Corp	Corporate stock	40,197	45,807
	Balance Forward		$ 4,972,238	$ 5,479,790

**Party in interest.*

The Tremont Group, Inc. 401(k) Profit Sharing Plan

FORM 5500, SCHEDULE H, LINE 4i – SCHEDULE OF ASSETS HELD AT END OF YEAR
EIN: 68-0230147, PLAN: 001
September 30, 2015
(Continued)

(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
	Balance Brought Forward		$ 4,972,238	$ 5,479,790
	Mitsubishi Electric Adr	Corporate stock	11,594	8,065
	Mobile Mini Inc	Corporate stock	4,826	5,111
	Mondelez Intl Inc Com	Corporate stock	12,979	15,701
	Monsanto Co/New	Corporate stock	12,959	10,582
	Monster Beverage Corp New Com	Corporate stock	15,793	15,136
*	Morgan Stanley	Corporate stock	53,145	51,030
	Motorola Solutions In	Corporate stock	16,422	18,257
*	MS Liquid Asset Fund	Money market fund	506,407	506,407
	Mueller Indus Inc	Corporate stock	7,778	9,199
	Murata Manufacturing Co Ltd	Corporate stock	11,200	10,011
	National Oilwell Varco Inc	Corporate stock	30,181	21,385
	Natl Instrums Cp	Corporate stock	11,906	11,199
	Neogen Cp	Corporate stock	6,025	8,188
	Netease.Com Inc Ads	Corporate stock	5,747	12,012
	Netflix Inc	Corporate stock	18,914	38,723
	Nextera Energy Inc Com	Corporate stock	21,817	31,899
	Nike Inc B	Corporate stock	23,241	52,877
	Nippon Telegraph & Telephone Ads	Corporate stock	7,028	10,240
	Noodles & Company Class A	Corporate stock	6,371	3,483
	Northrop Grumman Cp Hldg Co)	Corporate stock	16,101	38,832
	Northwest Bancshares Inc	Corporate stock	10,894	10,569
	Novadaq Tech Inc	Corporate stock	3,937	2,764
	Novartis Ag Adr	Corporate stock	19,663	27,760
	Novo Nordisk A/S Adr	Corporate stock	22,161	33,358
	Now Inc	Corporate stock	21,884	11,100
	Nuance Communications Inc	Corporate stock	22,360	22,541
	Nucor Corporation	Corporate stock	51,193	43,631
	Nxp Semiconductors Nv	Corporate stock	29,930	26,556
	Occidental Petroleum Corp De	Corporate stock	27,370	20,573
	Omega Healthcare Inv Inc	Corporate stock	5,910	8,541
	Omnicell Inc	Corporate stock	5,810	5,722
	Oracle Corp	Corporate stock	22,344	20,227
	O'Reilly Automotive Inc New	Corporate stock	14,905	26,000
	Orix Cop	Corporate stock	13,684	11,233
	Owens Illinois Com New	Corporate stock	7,964	7,045
	Palo Alto Networks Inc	Corporate stock	7,663	6,880
	Pandora A/S Adr	Corporate stock	6,408	11,283
	Pearson Plc Sp Adr	Corporate stock	8,721	7,207
	Pegasystems Inc	Corporate stock	6,462	9,450
	Balance Forward		$ 6,081,935	$ 6,670,567

**Party in interest.*

The Tremont Group, Inc. 401(k) Profit Sharing Plan

FORM 5500, SCHEDULE H, LINE 4i – SCHEDULE OF ASSETS HELD AT END OF YEAR
EIN: 68-0230147, PLAN: 001
September 30, 2015
(Continued)

(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
	Balance Brought Forward		$ 6,081,935	$ 6,670,567
	Pentair Ltd	Corporate stock	23,181	23,632
	Pfizer Inc	Corporate stock	50,885	57,637
	Philip Morris Intl Inc	Corporate stock	14,822	13,645
	Pioneer Floating Rate Y	Mutual fund	527,296	512,902
	Pioneer Mlti Ast Ult Sht Inc Y	Mutual fund	261,517	258,919
	Portland General Elec Co	Corporate stock	4,361	6,211
	Power Integrations Inc	Corporate stock	5,256	5,145
	Pra Group Inc	Corporate stock	7,776	10,372
	Praxair Inc	Corporate stock	19,917	21,187
	Prestige Brands Holdings Inc	Corporate stock	6,951	11,516
	Priceline.Com Inc New	Corporate stock	17,088	32,158
	Procter & Gamble	Corporate stock	39,287	39,207
	Pros Hldg Inc	Corporate stock	6,629	6,199
	Proto Labs	Corporate stock	8,991	10,988
	Prudential Financial Inc	Corporate stock	27,496	28,960
	Prudential Jennison Md Cp Gw Z	Mutual fund	290,930	373,432
	Prudential Plc Adr	Corporate stock	12,676	20,649
	Pt Bk Mandiri Persero Tbk Unsp	Corporate stock	11,530	7,250
	Public Service Enterprise Gp	Corporate stock	15,307	15,810
	Qualcomm Inc	Corporate stock	39,054	28,477
	Quest Diagnostics Inc	Corporate stock	16,857	13,646
	Raytheon Co New	Corporate stock	26,624	48,074
	Red Electrica Corporacion Sa	Corporate stock	7,716	9,362
	Red Hat Inc	Corporate stock	16,976	24,080
	Redwood Trust Inc	Corporate stock	7,466	7,308
	Regeneron Pharm	Corporate stock	21,213	20,001
	Relx Plc Sponsored Adr	Corporate stock	6,022	6,087
	Rexam Plc Sponsadr Comnopa	Corporate stock	9,141	8,521
	Reynolds American Inc	Corporate stock	15,801	16,601
	Ritchie Brothers Auctioneers	Corporate stock	9,063	10,740
	Roche Holdings Adr	Corporate stock	10,263	10,544
	Rollins Inc	Corporate stock	3,779	5,858
	Royal Dutch Shell Plc	Corporate stock	22,751	15,876
	Royal Kpn Nv Spons Adr	Corporate stock	5,044	5,928
	Ryanair Hldgs Plc Adr	Corporate stock	15,435	20,356
	Ryohn Keikaku Co Ltd Adr	Corporate stock	4,192	7,268
	Sabra Health Care Reit Inc	Corporate stock	6,459	5,331
	Salesforce.Com,Inc.	Corporate stock	22,324	32,979
	Sampo Oyj Unspon Adr	Corporate stock	8,578	12,282
	Balance Forward		$ 7,708,589	$ 8,435,705

**Party in interest.*

(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
	Balance Brought Forward		$ 7,708,589	$ 8,435,705
	Sandisk Corp	Corporate stock	59,605	59,220
	Sba Communications Corp	Corporate stock	15,147	15,816
	Schlumberger Ltd	Corporate stock	21,993	15,035
	Sciquest Inc New Com	Corporate stock	6,812	3,850
	Seagate Technology Plc	Corporate stock	33,718	77,728
	Sempra Energy	Corporate stock	9,852	13,928
	Sensient Tech Corp	Corporate stock	5,617	11,402
	Seven & I Hldgs Co Ltd Adr	Corporate stock	11,834	16,067
	Shake Shack Inc Cl A	Corporate stock	5,122	4,076
	Sherwin Williams Company Ohio	Corporate stock	17,999	14,035
	Shire Plc Adr	Corporate stock	52,349	50,076
	Signet Jewelers Limited	Corporate stock	4,388	6,807
	Sk Telecom Co Ltd	Corporate stock	8,152	11,566
	Smc Corp Japan Sponsored Adr	Corporate stock	11,297	9,464
	Softbank Corp Unspons Adr	Corporate stock	17,725	10,973
	Sony Corp Adr 1974 New	Corporate stock	9,849	8,943
	Splunk Inc	Corporate stock	11,884	16,494
	Sps Commerce Inc Com	Corporate stock	6,304	10,930
	Stamps.Com Inc Com New	Corporate stock	2,361	4,515
	Starbucks Corp Washington	Corporate stock	23,510	40,072
	Starz Series A	Corporate stock	5,099	12,696
	Stratasys Ltd Shs	Corporate stock	10,311	6,464
	Sumitomo Mitsui Finl Group Inc	Corporate stock	26,005	27,735
	Sumitomo Mitsui Tr Hldgs Inc	Corporate stock	6,228	4,464
	Suncor Energy Inc New Com	Corporate stock	10,843	9,058
	Suntrust Bks	Corporate stock	40,545	45,582
	Swedbank Ab Spons Adr	Corporate stock	12,420	13,003
	Taiwan Smcndctr Mfg Co Ltd Adr	Corporate stock	8,454	12,035
	Tata Motors Ltd	Corporate stock	8,002	6,728
	Te Connectivity Ltd New	Corporate stock	44,156	81,750
	Telenor Asa Ads	Corporate stock	9,081	7,397
	Tesla Motors Inc	Corporate stock	15,044	22,853
	Teva Pharmaceuticals Adr	Corporate stock	26,010	26,254
	The Advisory Board Co	Corporate stock	11,760	10,474
	Tiffany & Company New	Corporate stock	17,759	13,900
	Tile Shop Hldgs In Com	Corporate stock	4,808	3,594
	Time Warner Inc New	Corporate stock	20,833	16,638
	Tjx Cos Inc New	Corporate stock	10,647	15,855
	Toray Inds Adr	Corporate stock	11,030	11,237
	Balance Forward		$ 8,343,142	$ 9,184,419

**Party in interest.*

The Tremont Group, Inc. 401(k) Profit Sharing Plan

FORM 5500, SCHEDULE H, LINE 4i – SCHEDULE OF ASSETS HELD AT END OF YEAR
EIN: 68-0230147, PLAN: 001
September 30, 2015
(Continued)

(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
	Balance Brought Forward		$ 8,343,142	$ 9,184,419
	Total S A Spon Adr	Corporate stock	32,254	27,720
	Toyota Motor Cp Adr New	Corporate stock	12,015	11,024
	Travelers Companies Inc Com	Corporate stock	21,812	32,845
	Tutor Perini Corp Com	Corporate stock	6,020	4,773
	Twitter Inc	Corporate stock	18,554	19,532
	Tyco International Ltd New	Corporate stock	51,500	62,301
	U S Bancorp Com New	Corporate stock	22,799	30,799
	Ultimate Software Gp Inc	Corporate stock	10,773	19,333
	Under Armour Inc Cl A	Corporate stock	12,197	27,969
	Unifirst Cp	Corporate stock	6,786	9,506
	Unilever Nv Ny Sh New	Corporate stock	6,277	6,754
	Unilever Plc New Ads	Corporate stock	20,190	20,675
	Union Pacific Corp	Corporate stock	17,742	17,859
	United Natural Foods Inc	Corporate stock	8,801	8,247
	United Parcel Service Inc Cl-B	Corporate stock	19,505	21,613
	United Technologies Corp	Corporate stock	16,203	15,128
	Unitedhealth Gp Inc	Corporate stock	68,063	167,750
	Valeo Sponsored Adr	Corporate stock	11,186	19,595
	Validus Holdings Ltd Com	Corporate stock	9,598	12,620
	Vanguard Ftse Developed Mkts E	Exchange trade fund	277,597	286,403
	Vanguard Growth Etf	Exchange trade fund	241,467	390,529
	Vanguard Sm Cap Growth Etf	Exchange trade fund	65,322	98,817
	Vanguard Sm Cap Value Etf	Exchange trade fund	47,310	70,701
	Vanguard Value Etf Index	Exchange trade fund	392,274	527,733
	Verint Systems Inc	Corporate stock	6,391	7,594
	Verizon Communications	Corporate stock	36,595	40,464
	Vertex Pharmaceuticals	Corporate stock	17,880	33,325
	Vestas Wind Systems Ads	Corporate stock	10,874	10,523
	Vinci Sa Adr	Corporate stock	8,033	8,575
	Virtus Insight Emerg Mkts I	Mutual fund	477,002	440,439
	Visa Inc Cl A	Corporate stock	21,911	46,254
	Vivendi Sa Unspon Adr	Corporate stock	7,896	6,968
	Vmware Inc Class A	Corporate stock	9,622	9,612
	Wabco Hldgs Inc	Corporate stock	10,426	10,483
	Walt Disney Co Hldg Co	Corporate stock	17,252	36,894
	Weatherford International Ltd	Corporate stock	89,523	57,359
	Wells Fargo & Co New	Corporate stock	48,575	70,093
	Weyerhaeuser Co	Corporate stock	13,117	14,682
	Wh Group Ltd	Corporate stock	11,055	10,589
	Balance Forward		$ 10,525,539	$ 11,898,499

**Party in interest.*

The Tremont Group, Inc. 401(k) Profit Sharing Plan

FORM 5500, SCHEDULE H, LINE 4i – SCHEDULE OF ASSETS HELD AT END OF YEAR
EIN: 68-0230147, PLAN: 001
September 30, 2015
(Continued)

(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
	Balance Brought Forward		$ 10,525,539	$ 11,898,499
	Wipro Ltd Ads	Corporate stock	11,961	12,106
	Wolseley Plc Adr New	Corporate stock	4,998	8,055
	Wolters Kluwer Nv Spon Adr	Corporate stock	7,970	8,746
	Workday Inc Cl A	Corporate stock	15,800	15,700
	Yy Inc Ads	Corporate stock	11,471	9,054
	Zeltiq Aesthetics Inc Com	Corporate stock	6,038	6,022
	Zurich Insurance Grp Ltd Adr	Corporate stock	11,707	9,701
	Total Assets Held for Investment Purposes		$ 10,595,484	$ 11,967,883

**Party in interest.*

The Tremont Group, Inc. 401(k) Profit Sharing Plan

FORM 5500, SCHEDULE H, LINE 4i – SCHEDULE OF ASSETS ACQUIRED AND DISPOSED OF WITHIN THE PLAN YEAR

EIN: 68-0230147, PLAN: 001

September 30, 2015

(a) Identity of Issue, Borrower, Lessor, or Similar Party	(b) Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value	(c) Costs of Acquisitions	(d) Proceeds of Dispositions
Airbus Group	Corporate stock	$ 140	$ 108
Ambac Finl Group Inc Com New	Corporate stock	1,082	782
Anglo American Plc Adr New	Corporate stock	4,768	1,796
Atlantia Spa Unspons Adr	Corporate stock	872	900
Baidu Inc Ads	Corporate stock	10,116	9,772
Cablevision Systems Corp	Corporate stock	6,325	11,100
California Res Corp Com	Corporate stock	95	56
Canadian Natural Resources Ltd	Corporate stock	2,556	1,297
China Pete & Cheme Cp Ads H Shs	Corporate stock	1,592	1,504
Chubb Corp	Corporate stock	2,241	2,098
Comstock Res Inc	Corporate stock	699	386
Copa Holdings,S.A. Cla A	Corporate stock	1,347	625
Duke Energy Corp New	Corporate stock	2,396	2,533
Dunkin Brands Group Inc	Corporate stock	1,085	964
Fifth 3Rd Bancorp Ohio	Corporate stock	1,329	1,379
Gran Tierra Energy Inc	Corporate stock	4,137	2,136
Hong Kong Exchanges & Clearing	Corporate stock	11,233	13,751
Jgc Corp Unsponsored Adr	Corporate stock	2,212	1,789
Johnson Controls Incorporated	Corporate stock	1,773	1,728
Las Vegas Sands Corporation	Corporate stock	6,577	5,826
Lendingclub Corporation	Corporate stock	1,262	978
Mead Johnson Nutrition Company	Corporate stock	695	679
Media Gen Inc New	Corporate stock	655	511
Methanex Corporation	Corporate stock	1,449	1,013
Michael Kors Holdings Ltd	Corporate stock	1,250	1,251
Pall Corporation	Corporate stock	4,145	5,448
Perrigo Co Ltd	Corporate stock	10,172	9,540
Pt Astra International Tbk Adr	Corporate stock	1,555	1,463
Rex Energy Corp	Corporate stock	1,209	694
Rogers Comm Inc Cl B (Bc)	Corporate stock	2,320	2,022
Rolls Royce Holdings Plc	Corporate stock	3,406	3,492
Sands China Ltd Unsponsore Adr	Corporate stock	3,985	2,927
South32 Ltd Adr	Corporate stock	1,739	1,594
Statoil Asa Adr	Corporate stock	2,706	1,997
Subsea 7 S.A. Sponsored Adr	Corporate stock	3,282	2,231
Swatch Group Ag Adr The Unspon	Corporate stock	894	826
Tata Mtrs Ltd Rt Exp 042715	Corporate stock	-	107
Toronto Dom Bk New	Corporate stock	2,126	1,793
Twenty-First Century Fox Cl A	Corporate stock	1,319	1,288
V F Corporation	Corporate stock	2,041	2,055
Vipshop Hldgs Ltd Ads	Corporate stock	14,458	12,663
Balance Forward		$ 123,243	$ 115,102

The Tremont Group, Inc. 401(k) Profit Sharing Plan

FORM 5500, SCHEDULE H, LINE 4i – SCHEDULE OF ASSETS ACQUIRED AND DISPOSED OF WITHIN THE PLAN YEAR
EIN: 68-0230147, PLAN: 001
September 30, 2015
(Continued)

(a) Identity of Issue, Borrower, Lessor, or Similar Party	(b) Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value	(c) Costs of Acquisitions	(d) Proceeds of Dispositions
Balance Brought Forward		$ 123,243	$ 115,102
Wal Mart Stores Inc	Corporate stock	1,591	1,562
Total Assets Acquired and Disposed of Within the Plan Year		$ 124,834	$ 116,664

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 10/01/2014 and ending 09/30/2015

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

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

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

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

Part II Basic Plan Information—enter all requested information

1a Name of plan
THE TREMONT GROUP, INC. 401(K) PROFIT SHARING PLAN

1b Three-digit plan number (PN) ▶ 001

1c Effective date of plan 10/24/1990

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

201 EAST STREET

WOODLAND CA 95776

2b Employer Identification Number (EIN)
68-0230147

2c Plan Sponsor's telephone number
(530) 662-5442

2d Business code (see instructions)
325300

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	[signature]	12/18/15	LESLIE LYMAN
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

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

Preparer's telephone number (optional)

3a	Plan administrator's name and address [X] Same as Plan Sponsor	**3b**	Administrator's EIN
		3c	Administrator's telephone number
4	If the name and/or EIN of the plan sponsor has changed since the last return/report filed for this plan, enter the name, EIN and the plan number from the last return/report:	**4b**	EIN
a	Sponsor's name	**4c**	PN
5	Total number of participants at the beginning of the plan year	**5**	142
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)**	135
a(2)	Total number of active participants at the end of the plan year	**6a(2)**	117
b	Retired or separated participants receiving benefits	**6b**	2
c	Other retired or separated participants entitled to future benefits	**6c**	15
d	Subtotal. Add lines **6a(2)**, **6b**, and **6c**.	**6d**	134
e	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits	**6e**	1
f	Total. Add lines **6d** and **6e**.	**6f**	135
g	Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**	135
h	Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested	**6h**	2
7	Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	**7**	

8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions:

2E 2J 2K 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		**b General Schedules**		
(1)	[X] **R** (Retirement Plan Information)	(1)	[X]	**H** (Financial Information)
(2)	[ ] **MB** (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary	(2)	[ ]	**I** (Financial Information – Small Plan)
		(3)	[ ]	**A** (Insurance Information)
		(4)	[X]	**C** (Service Provider Information)
(3)	[ ] **SB** (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary	(5)	[ ]	**D** (DFE/Participating Plan Information)
		(6)	[ ]	**G** (Financial Transaction Schedules)

ATTACHMENT TO 2014 FORM 5500
SCHEDULEH

Plan Name: THE TREMONT GROUP, INC. 40l(K) PROFIT SHARING PLAN **EIN:** 94-2045832

Plan Sponsor's Name: THE TREMONT GROUP, INC. **PN:** 001

The required schedule of assets and/or schedule of reportable transactions is included in the accountant's audit report attachment.

ATTACHMENT TO 2014 FORM 5500
SCHEDULEH

Plan Name: THE TREMONT GROUP, INC. 40l(K) PROFIT SHARING PLAN **EIN:** 94-2045832

Plan Sponsor's Name: THE TREMONT GROUP, INC. **PN:** 001

The required schedule of assets and/or schedule of reportable transactions is included in the accountant's audit report attachment.

ATTACHMENT TO 2014 FORM 5500
SCHEDULEH

Plan Name: THE TREMONT GROUP, INC. 40l(K) PROFIT SHARING PLAN **EIN:** 94-2045832

Plan Sponsor's Name: THE TREMONT GROUP, INC. **PN:** 001

The required schedule of assets and/or schedule of reportable transactions is included in the accountant's audit report attachment.

ATTACHMENT TO 2014 FORM 5500
SCHEDULEH

Plan Name: THE TREMONT GROUP, INC. 40l(K) PROFIT SHARING PLAN **EIN:** 94-2045832

Plan Sponsor's Name: THE TREMONT GROUP, INC. **PN:** 001

The required schedule of assets and/or schedule of reportable transactions is included in the accountant's audit report attachment.