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

2015

This Form is Open to Public Inspection

Part I Annual Report Identification Information

For calendar plan year 2015 or fiscal plan year beginning 01/01/2015 and ending 12/31/2015

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:
- [ ] Form 5558;
- [ ] automatic extension;
- [ ] the DFVC program;
- [ ] special extension (enter description)

Part II Basic Plan Information—enter all requested information

1a Name of plan
NES GLOBAL LLC 401(K) PROFIT SHARING PLAN & TRUST

1b Three-digit plan number (PN) ▶ 001

1c Effective date of plan 01/01/2002

2a Plan sponsor's name (employer, if for a single-employer plan)
Mailing address (include room, apt., suite no. and street, or P.O. Box)
City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions)
NES GLOBAL, LLC

800 GESSNER DR, SUITE 310
HOUSTON, TX 77024

2b Employer Identification Number (EIN)
59-3659333

2c Plan Sponsor's telephone number
713-551-4444

2d Business code (see instructions)
541990

Caution: A penalty for the late or incomplete filing of this return/report will be assessed unless reasonable cause is established.

Under penalties of perjury and other penalties set forth in the instructions, I declare that I have examined this return/report, including accompanying schedules, statements and attachments, as well as the electronic version of this return/report, and to the best of my knowledge and belief, it is true, correct, and complete.

SIGN HERE	Filed with authorized/valid electronic signature.	10/12/2016	ANDREW BEACH
	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)

Preparer's telephone number

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**	732
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)**	636
a(2)	Total number of active participants at the end of the plan year	**6a(2)**	532
b	Retired or separated participants receiving benefits	**6b**	0
c	Other retired or separated participants entitled to future benefits	**6c**	50
d	Subtotal. Add lines **6a(2)**, **6b**, and **6c**.	**6d**	582
e	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	**6e**	0
f	Total. Add lines **6d** and **6e**.	**6f**	582
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**	0
7	Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	**7**	

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

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

9a Plan funding arrangement (check all that apply)

(1)	[ ]	Insurance
(2)	[ ]	Code section 412(e)(3) insurance contracts
(3)	[X]	Trust
(4)	[ ]	General assets of the sponsor

9b Plan benefit arrangement (check all that apply)

(1)	[ ]	Insurance
(2)	[ ]	Code section 412(e)(3) insurance contracts
(3)	[X]	Trust
(4)	[ ]	General assets of the sponsor

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

a Pension Schedules

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

b General Schedules

(1)	[X]		**H** (Financial Information)
(2)	[ ]		**I** (Financial Information – Small Plan)
(3)	[ ]	0	**A** (Insurance Information)
(4)	[X]		**C** (Service Provider Information)
(5)	[ ]		**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 2015 Form M-1 annual report. If the plan was not required to file the 2015 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.**	**2015** **This Form is Open to Public Inspection.**

For calendar plan year 2015 or fiscal plan year beginning 01/01/2015 and ending 12/31/2015

A Name of plan
NES GLOBAL LLC 401(K) PROFIT SHARING PLAN & TRUST

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
NES GLOBAL, LLC

D Employer Identification Number (EIN)
59-3659333

Part I Service Provider Information (see instructions)

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

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

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

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WORLD FINANCIAL CENTER
250 VESEY STREET
NEW YORK, NY 10281

13-5674085

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

PAYCHEX SECURITIES CORPORATION

16-1486352

(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)

MERRILL LYNCH, PIERCE, FENNER

4 WORLD FINANCIAL CENTER
250 VESEY STREET
NEW YORK, NY 10281

13-5674085

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
15	BROKERAGE		Yes [X] No [ ]	Yes [ ] No [X]	30909	Yes [ ] No [X]

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

PAYCHEX, INC.

16-1124166

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
15	RECORDKEEPER	2484	Yes [ ] No [X]	Yes [ ] No [X]	0	Yes [ ] No [X]

(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
MERRILL LYNCH, PIERCE, FENNER	52 59 60 63	30909

(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.
MERRILL LYNCH, PIERCE, FENNER 4 WORLD FINANCIAL CENTER 250 VESEY STREET NEW YORK, NY 10281 13-5674085	

(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

2015

This Form is Open to Public Inspection

For calendar plan year 2015 or fiscal plan year beginning 01/01/2015 and ending 12/31/2015

A Name of plan
NES GLOBAL LLC 401(K) PROFIT SHARING PLAN & TRUST

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
NES GLOBAL, LLC

D Employer Identification Number (EIN)
59-3659333

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	
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	0	0
(2) Participant contributions	1b(2)	0	0
(3) Other	1b(3)	0	0
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	0	352277
(2) U.S. Government securities	1c(2)	0	
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)	0	
(B) All other	1c(3)(B)	0	
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)	0	
(B) Common	1c(4)(B)	0	
(5) Partnership/joint venture interests	1c(5)	0	
(6) Real estate (other than employer real property)	1c(6)	0	
(7) Loans (other than to participants)	1c(7)	0	
(8) Participant loans	1c(8)	139453	156271
(9) Value of interest in common/collective trusts	1c(9)	0	0
(10) Value of interest in pooled separate accounts	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)	0	0
(12) Value of interest in 103-12 investment entities	1c(12)	0	0
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	4501694	4759850
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other	1c(15)	0	0

		(a) Beginning of Year	(b) End of Year
1d Employer-related investments:			
(1) Employer securities	1d(1)	0	
(2) Employer real property	1d(2)	0	
e Buildings and other property used in plan operation	1e	0	
f Total assets (add all amounts in lines 1a through 1e)	1f	4641147	5268398
Liabilities			
g Benefit claims payable	1g	0	
h Operating payables	1h	0	
i Acquisition indebtedness	1i	0	
j Other liabilities	1j	0	
k Total liabilities (add all amounts in lines 1g through1j)	1k	0	0
Net Assets			
l Net assets (subtract line 1k from line 1f)	1l	4641147	5268398

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)	0	
(B) Participants	2a(1)(B)	1497778	
(C) Others (including rollovers)	2a(1)(C)	790135	
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		2287913
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	0	
(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)	6570	
(F) Other	2b(1)(F)		
(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		6570
(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)	313108	
(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		313108
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	2b(4)(A)		
(B) Aggregate carrying amount (see instructions)	2b(4)(B)		
(C) Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result	2b(4)(C)		0
(5) Unrealized appreciation (depreciation) of assets: **(A)** Real estate	2b(5)(A)		
(B) Other	2b(5)(B)		
(C) Total unrealized appreciation of assets. Add lines **2b(5)(A)** and **(B)**	2b(5)(C)		0

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		0
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		0
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		0
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		0
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		-524291
c Other income	2c		
d Total income. Add all **income** amounts in column (b) and enter total	2d		2083300
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	1453331	
(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)		1453331
f Corrective distributions (see instructions)	2f		0
g Certain deemed distributions of participant loans (see instructions)	2g		0
h Interest expense	2h		
i Administrative expenses: **(1)** Professional fees	2i(1)		
(2) Contract administrator fees	2i(2)	0	
(3) Investment advisory and management fees	2i(3)		
(4) Other	2i(4)	2718	
(5) Total administrative expenses. Add lines **2i(1)** through **(4)**	2i(5)		2718
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		1456049
Net Income and Reconciliation			
k Net income (loss). Subtract line **2j** from line **2d**	2k		627251
l Transfers of assets:			
(1) To this plan	2l(1)		
(2) From this plan	2l(2)		

Part III Accountant's Opinion

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

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

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

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

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

(1) Name: BRIGGS AND VESELKA CO **(2)** EIN: 74-1769118

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	N/A	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			22486
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	N/A	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		
f	Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?	4f		X		
g	Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?	4g		X		
h	Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?	4h		X		
i	Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	4i	X			
j	Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked, and see instructions for format requirements.)	4j		X		
k	Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?	4k		X		
l	Has the plan failed to provide any benefit when due under the plan?	4l		X		
m	If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	4m		X		
n	If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.	4n		X		
o	Did the plan trust incur unrelated business taxable income?	4o				
p	Were in-service distributions made during the plan year?	4p				

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

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

6c Name of trustee or custodian	**6d** Trustee's or custodian's telephone number

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

2015

This Form is Open to Public Inspection.

For calendar plan year 2015 or fiscal plan year beginning 01/01/2015 and ending 12/31/2015

A Name of plan
NES GLOBAL LLC 401(K) PROFIT SHARING PLAN & TRUST

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
NES GLOBAL, LLC

D Employer Identification Number (EIN)
59-3659333

Part I Distributions

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

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

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

EIN(s): 16-1470238

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):

Part VII IRS Compliance Questions

20a Is the plan a 401(k) plan?	☐ Yes	☐ No
20b If "Yes," how does the 401(k) plan satisfy the nondiscrimination requirements for employee deferrals and employer matching contributions (as applicable) under sections 401(k)(3) and 401(m)(2)?	☐ Design-based safe harbor method	☐ ADP/ACP test
20c If the ADP/ACP test is used, did the 401(k) plan perform ADP/ACP testing for the plan year using the "current year testing method" for nonhighly compensated employees (Treas. Reg sections 1.401(k)-2(a)(2)(ii) and 1.401(m)-2(a)(2)(ii))?	☐ Yes	☐ No
21a Check the box to indicate the method used by the plan to satisfy the coverage requirements under section 410(b):	☐ Ratio percentage test	☐ Average benefit test
21b Does the plan satisfy the coverage and nondiscrimination tests of sections 410(b) and 401(a)(4) by combining this plan with any other plans under the permissive aggregation rules?	☐ Yes	☐ No
22a Has the plan been timely amended for all required tax law changes?	☐ Yes	☐ No ☐ N/A

22b Date the last plan amendment/restatement for the required tax law changes was adopted ____/____/____. Enter the applicable code _____ (See instructions for tax law changes and codes).

22c If the plan sponsor is an adopter of a pre-approved master and prototype (M&P) or volume submitter plan that is subject to a favorable IRS opinion or advisory letter, enter the date of that favorable letter _____/_____/_____ and the letter's serial number _____.

22d If the plan is an individually-designed plan and received a favorable determination letter from the IRS, enter the date of the plan's last favorable determination letter _____/_____/_____.

23 Is the Plan maintained in a U.S. territory (i.e., Puerto Rico (if no election under ERISA section 1022(i)(2) has been made), American Samoa, Guam, the Commonwealth of the Northern Mariana Islands or the U.S. Virgin Islands)?	☐ Yes	☐ No

NES Global, LLC 401(k) Profit Sharing Plan and Trust

Financial Statements and Supplemental Schedules
As of December 31, 2015 and 2014,
and for the Year Ended December 31, 2015

CONTENTS

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Schedule H, Line 4a – Schedule of Delinquent Participant Contributions	13

Schedules other than those listed above are omitted because of the conditions under which they are required.

Briggs & Veselka Co.
A PROFESSIONAL CORPORATION
Certified Public Accountants and Business Advisors

INDEPENDENT AUDITORS' REPORT

To the Plan Administrator of
NES Global, LLC 401(k) Profit Sharing Plan and Trust
Houston, Texas

Reports on the Financial Statements

We were engaged to audit the accompanying financial statements of NES Global, LLC 401(k) Profit Sharing Plan and Trust, which comprise the statements of net assets available for benefits as of December 31, 2015 and 2014, and the related statement of changes in net assets available for benefits for the year ended December 31, 2015, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

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

Auditors' Responsibility

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

Basis for Disclaimer of Opinion

As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in *Note 4*, which was certified by Reliance Trust Company and Mid Atlantic Trust Company, the trustees of the Plan, except for comparing the information with the related information included in the financial statements. We have been informed by the plan administrator that Mid Atlantic Trust Company held the Plan's investment assets and executed investment transactions from December 29, 2014 to December 31, 2015, and that Reliance Trust Company held the Plan's investment assets and executed investment transactions as of December 31, 2014, and for the year ended December 31, 2014. The plan administrator has obtained certifications from the trustees as of and for the years ended December 31, 2015 and 2014, that the information provided to the plan administrator by the trustees is complete and accurate.

To the Plan Administrator of
NES Global, LLC 401(k) Profit Sharing Plan and Trust
Re: Independent Auditors' Report

Disclaimer of Opinion

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

Other Matter

The supplemental schedules of Schedule H, Line 4i – Schedule of Assets (Held at End of Year) as of December 31, 2015, and Schedule H, Line 4a – Schedule of Delinquent Participant Contributions for the year ended December 31, 2015, are required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 and are presented for the purpose of additional analysis and are not a required part of the financial statements. Because of the significance of the matter described in the Basis for Disclaimer of Opinion paragraph, we do not express an opinion on the supplemental schedules referred to above.

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

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



Briggs & Veselka Co.
Houston, Texas

August 25, 2016

NES GLOBAL, LLC 401(K) PROFIT SHARING PLAN AND TRUST
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
DECEMBER 31, 2015 AND 2014

	2015	2014
ASSETS		
Noninterest-bearing cash	**$ -**	$ 4,471,800
Investments at fair value:		
Mutual funds	**4,704,941**	29,894
Money market fund	**348,104**	-
Total investments at fair value	**5,053,045**	29,894
Receivables:		
Participant contributions	**30,457**	8,469
Notes receivable from participants	**156,271**	139,453
Other income	**28,625**	-
Total receivables	**215,353**	147,922
Total assets	**5,268,398**	4,649,616
LIABILITIES		
Excess participant contributions payable	**40,292**	-
Total liabilities	**40,292**	-
NET ASSETS AVAILABLE FOR BENEFITS	**$ 5,228,106**	$ 4,649,616

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

NES GLOBAL, LLC 401(K) PROFIT SHARING PLAN AND TRUST
STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
FOR THE YEAR ENDED DECEMBER 31, 2015

ADDITIONS	
Investment income (loss):	
Net depreciation in fair value of investments	$ (294,382)
Dividends	284,483
Total investment loss	(9,899)
Interest income on notes receivable from participants	6,570
Other income	28,625
Contributions:	
Participants	1,449,017
Rollovers	560,226
Total contributions	2,009,243
Total additions	2,034,539
DEDUCTIONS	
Benefits paid to participants or beneficiaries	1,453,331
Administrative expenses	2,718
Total deductions	1,456,049
Net increase	578,490
Net assets available for benefits, beginning of year	4,649,616
NET ASSETS AVAILABLE FOR BENEFITS, END OF YEAR	$ 5,228,106

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

NOTE 1 – DESCRIPTION OF PLAN

NES Global, LLC 401(k) Profit Sharing Plan and Trust (the Plan) is a qualified retirement plan adopted by NES Global, LLC (the Company) on January 1, 2002 to allow employees to meet their financial needs during their retirement years. The Plan was amended and restated to conform to new tax laws on November 18, 2014. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA).

The summary of significant provisions of the Plan presented below provides only general information. Participants should refer to the basic plan document for a more complete description of the Plan's provisions.

Eligibility – All employees of the Company who are at least age 21 are eligible to become a participant in the Plan.

Contributions – Participants may elect to contribute from 1% to 90% of their eligible compensation as an elective deferral, not to exceed an annual dollar limit which is set by law. Participants who are projected to reach age 50 during a calendar year are eligible to make catch-up contributions. Participants can increase, decrease, suspend, or resume their elective deferrals at any time.

Participants may also make a rollover contribution of benefits to the Plan from eligible retirement plans and certain IRAs.

Participant Accounts – Each participant's account is credited with the participant's contributions, rollovers, and Plan earnings or losses. Participant accounts are charged with an allocation of administrative expenses that are paid by the Plan. Allocations are based on participant earnings, account balances, or specific participant transactions. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

Vesting – Participants are always 100% vested in their contributions plus actual earnings or losses thereon.

Investment Options – Participants direct the investment of contributions into various investment securities offered by the Plan. Each investment security offered has a different investment objective. Participants may change the investment of future contributions or reallocate/transfer existing account balances.

Notes Receivable From Participants – Participants may borrow a portion of their pretax vested account balance. The minimum amount of a loan is $1,000 up to a maximum of $50,000 reduced by the highest outstanding loan balance during the previous one-year period, or 50% of their vested account balance. The loans are adequately secured by the balance in the participant's account and bear a reasonable rate of interest. Principal and interest payments are paid through payroll deductions within 5 years, unless the loan is used to purchase a primary residence.

Payment of Benefits – Upon termination, retirement, disability or death, a participant may elect to receive their vested benefit in a single lump sum payment or have the payment paid as a direct rollover to an IRA or to another employer's tax qualified plan. If the value of the vested account balance is $5,000 or less, but greater than $1,000, and the participant does not elect to receive their vested benefit in the form of a single lump sum payment or rollover, it will automatically be rolled over to an IRA established by an IRA provider selected by the Company. If the value of the participant's vested account balance does not exceed $1,000, a distribution in cash will automatically be made whether consent is received or not.

Participants may withdraw all or part of their vested account balance once they reach age 59½. Hardship withdrawals may also be made to satisfy certain immediate and heavy financial hardship a participant may have.

NOTE 2 – SUMMARY OF ACCOUNTING POLICIES

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

Use of Estimates – The preparation of financial statements in accordance with accounting principles generally accepted in the United States of America (GAAP) requires the Company to make estimates and assumptions that affect the reported amounts of assets and liabilities and changes therein, and disclosure of contingent assets and liabilities. Actual results could differ from 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 and the measurement date. See *Note 3* for discussion of fair value measurements.

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

Notes Receivable From Participants – Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest. Interest income is recorded on the accrual basis. Related fees are recorded as administrative expenses and are expensed when they are incurred. No allowance for credit losses has been recorded as of December 31, 2015 and 2014.

Excess Participant Contributions Payable – Amounts payable to participants for contributions in excess of amounts allowed by the Internal Revenue Service (IRS) are recorded as a liability with a corresponding reduction to contributions.

Benefits Paid – Benefits are recorded when paid.

Administrative Expenses – Certain expenses of maintaining the Plan are paid by the Plan, unless otherwise paid by the Company. Expenses that are paid by the Company are excluded from these financial statements. Fees related to the administration of notes receivable from participants are charged directly to the participant's account and are included in administrative expenses. Investment related expenses are included in net depreciation in fair value of investments.

Subsequent Events – The Plan has evaluated subsequent events through August 25, 2016, the date the financial statements were available to be issued.

Recent Accounting Pronouncements – In May 2015, FASB issued ASU 2015-07, *Fair Value Measurement (Topic 820): Disclosures for Investments in Certain Entities That Calculate Net Asset Value per Share (or its Equivalent)*, which removes the requirement to include investments in the fair value hierarchy for which fair value is measured using the net asset value per share practical expedient. This guidance also removes the requirement to make certain disclosures for all investments that are eligible to be measured at fair value using the net asset value per share practical expedient. The standard is effective for the Plan retrospectively for the year ending December 31, 2015 with early adoption permitted.

In July 2015, FASB released ASU No. 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.* ASU 2015-12 removes the requirement to report fully benefit-responsive investment contracts at fair value with an adjustment to contract value and also simplifies the investment disclosures required for employee benefit plans. This update is effective for fiscal years beginning after December 15, 2015, with early adoption permitted. Parts I and II should be applied retrospectively, while Part III should be applied prospectively.

NOTE 3 – FAIR VALUE MEASUREMENTS

The framework for measuring fair value provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (level 1) and the lowest priority to unobservable inputs (level 3). The three levels of the fair value hierarchy under FASB ASC 820 are described as follows:

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

- **Level 2** – Inputs to the valuation methodology include quoted prices for similar assets or liabilities in 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; inputs that are derived principally from or corroborated by observable market data by correlation or other means. If the asset or liability has a specified (contractual) term, the level 2 input must be observable for substantially the full term of the asset or liability.

- **Level 3** – Inputs to the valuation methodology are unobservable and significant to the fair value measurement.

The asset or liability's fair value measurement level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement. Valuation techniques maximize the use of relevant 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 at December 31, 2015 and 2014.

Mutual Funds – Valued at the daily closing price as reported by the fund. Mutual funds held by the Plan are open-end mutual funds that are registered with the SEC. These funds are required to publish their daily net asset value and to transact at that price. The mutual funds held by the Plan are deemed to be actively traded.

Money Market Fund – Valued using pricing models maximizing the use of observable inputs for similar securities.

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

	2015			
	Level 1	Level 2	Level 3	Total
Mutual funds:				
Equity fund	**$ 2,562,415**	**$ -**	**$ -**	**$ 2,562,415**
International equity fund	**361,161**	**-**	**-**	**361,161**
Fixed income fund	**477,493**	**-**	**-**	**477,493**
Balanced fund	**1,283,249**	**-**	**-**	**1,283,249**
Alternative asset fund	**20,623**	**-**	**-**	**20,623**
Money market fund	**348,104**	**-**	**-**	**348,104**
Total assets at fair value	**$ 5,053,045**	**$ -**	**$ -**	**$ 5,053,045**

	2014			
	Level 1	Level 2	Level 3	Total
Mutual funds:				
Equity fund	$ 12,464	$ -	$ -	$ 12,464
International equity fund	2,083	-	-	2,083
Fixed income fund	4,312	-	-	4,312
Balanced fund	10,972	-	-	10,972
Alternative asset fund	63	-	-	63
Total assets at fair value	$ 29,894	$ -	$ -	$ 29,894

NOTE 4 – INFORMATION CERTIFIED BY THE TRUSTEES

All investments and investment activities included in the accompanying statements of net assets available for benefits as of December 31, 2015 and 2014, *Note 5,* supplemental Schedule H, Line 4i – Schedule of Assets (Held at End of Year) as of December 31, 2015, and the statement of changes in net assets available for benefits for the year ended December 31, 2015, have been certified as complete and accurate by Reliance Trust Company and Mid Atlantic Trust Company, the trustees of the Plan, as permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. The Plan's independent auditors did not perform any auditing procedures with respect to the certified information except for comparing the information to the related information included in the Plan's financial statements and supplemental schedule.

NOTE 5 – INVESTMENTS (UNAUDITED)

The following presents investments that represent 5% or more of the Plan's net assets at December 31, 2015:

BlackRock Retirement Reserves Money Fund	$ 348,104
Invesco Diversified Dividend Fund	424,961
Deutsche S&P 500 Index Fund	609,984
Dreyfus Opportunistic Midcap Value Fund	309,272
American Funds American Balanced Fund	276,548
MFS Lifetime Income Fund	490,669

* Indicates party in interest
** Represents less than 5% of the Plan's net assets as of December 31

During 2015, the Plan's investments in mutual funds (including gains and losses on investments bought and sold, as well as held during the year) depreciated in fair value by $294,382.

NOTE 6 – RELATED PARTY TRANSACTIONS AND PARTY IN INTEREST TRANSACTIONS

Certain Plan investments are managed by the trustees. These transactions qualify as party in interest transactions; however, such transactions are permitted under the provisions of the Plan and are exempt from the prohibited transaction rules under ERISA.

NOTE 7 – PLAN TERMINATION

While the Company hopes and expects to continue the Plan indefinitely, it reserves the right to terminate, discontinue making contributions to, amend, or modify the Plan at any time. Upon termination of the Plan, participants will become 100% vested in their total account balance. The Company will arrange for distributions upon Plan termination as soon as administratively feasible.

NOTE 8 – TAX STATUS

The Company adopted a prototype non-standardized profit sharing plan with CODA. The prototype plan obtained its latest opinion letter on April 10, 2014, in which the IRS stated that the prototype plan, as then designed, was in compliance with the applicable requirements under section 401 of the Internal Revenue Code (IRC). Although the Plan has been amended since receiving the opinion letter, the Company believes that the Plan is designed, and is currently being operated, in compliance with the applicable requirements of the IRC. Therefore, no provision for income taxes has been included in the Plan's financial statements.

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

NOTE 9 – RISKS AND UNCERTAINTIES

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

NOTE 10 – RECONCILIATION OF FINANCIAL STATEMENTS TO FORM 5500

The following is a reconciliation of net assets available for benefits per the financial statements at December 31, 2015 and 2014, to Form 5500:

	2015	2014
Net assets available for benefits per the financial statements	**$ 5,228,106**	$ 4,649,616
Participant contributions receivable	**-**	(8,469)
Excess participant contributions payable	**40,292**	-
Net assets available for benefits per the Form 5500	**$ 5,268,398**	$ 4,641,147

The following is a reconciliation of participants contributions per the financial statements for the year ended December 31, 2015, to Form 5500:

Participants contributions per the financial statements	$ 1,449,017
Add: excess contributions payable at December 31, 2015	40,292
Add: participant contributions receivable at December 31, 2014	8,469
Total participants contributions per Form 5500	$ 1,497,778

NOTE 11 – PROHIBITED TRANSACTIONS

The Company found clerical errors resulting in the failure to remit to Reliance Trust Company certain participant contributions from the years 2014 and 2012 within a timely manner. In 2015, the Company corrected certain participant contributions previously not remitted to the Plan. The Company also made an interest payment to compensate participants for lost investment earnings related to certain prohibited transactions.

NES GLOBAL, LLC 401(K) PROFIT SHARING PLAN AND TRUST
SCHEDULE H, LINE 4i – SCHEDULE OF ASSETS (HELD AT END OF YEAR)
DECEMBER 31, 2015

EIN: 59-3659333
Plan No. 001

(a) Party in Interest	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Description of Investment	(d) Cost	(e) Current Value
	BlackRock Retirement Reserves Money Fund	Money market fund	**	$ 348,104
	Aston/River Road Select Value Fund	Mutual fund	**	59,832
	Invesco Diversified Dividend Fund	Mutual fund	**	424,961
	BlackRock All-Cap Energy & Resources Portfolio	Mutual fund	**	5,845
	Calamos Growth Fund	Mutual fund	**	179,818
	Columbia Seligman Communications and Information Fund	Mutual fund	**	88,263
	Davis Financial Fund	Mutual fund	**	3,466
	Deutsche S&P 500 Index Fund	Mutual fund	**	609,984
	Dreyfus Opportunistic Midcap Value Fund	Mutual fund	**	309,272
	Eagle Small Cap Growth Fund	Mutual fund	**	178,053
	Eaton Vance Atlanta Capital SMID-Cap Fund	Mutual fund	**	175,028
	Eaton Vance Worldwide Health Sciences Fund	Mutual fund	**	144,229
	Franklin Utilities	Mutual fund	**	14,195
	Ivy Global Natural Resources Fund	Mutual fund	**	493
	Janus Triton Fund	Mutual fund	**	80,041
	JPMorgan Small Cap Value Fund	Mutual fund	**	153,504
	Pioneer Fundamental Growth Fund	Mutual fund	**	102,641
	BlackRock Latin America Fund	Mutual fund	**	1,208
	Lazard International Strategic Equity Portfolio	Mutual fund	**	149,144
	MFS International Value Fund	Mutual fund	**	44,767
	MFS Emerging Markets Equity Fund	Mutual fund	**	11,238
	Oppenheimer International Growth Fund	Mutual fund	**	142,744
	Voya Global Real Estate Fund	Mutual fund	**	9,618
	American Century Zero Coupon 2025 Fund	Mutual fund	**	197,607
	Delaware Extended Duration Bond Fund	Mutual fund	**	25,144
	Eaton Vance Floating-Rate & High Income Fund	Mutual fund	**	22,185
	Goldman Sachs Government Income Fund	Mutual fund	**	6,747
	Ivy High Income Fund	Mutual fund	**	30,237
	Loomis Sayles Strategic Income Fund	Mutual fund	**	14,891
	Oppenheimer International Bond Fund	Mutual fund	**	24,280
	PIMCO Total Return Fund	Mutual fund	**	145,259
	PIMCO Real Return Fund	Mutual fund	**	8,566
	TCW Emerging Markets Income Fund	Mutual fund	**	1,298
	American Funds American Balanced Fund	Mutual fund	**	276,548
	American Funds 2060 Target Date Retirement Fund	Mutual fund	**	2,621
	American Funds 2055 Target Date Retirement Fund	Mutual fund	**	351
	American Funds 2050 Target Date Retirement Fund	Mutual fund	**	16,898
	American Funds 2045 Target Date Retirement Fund	Mutual fund	**	70,391
	American Funds 2040 Target Date Retirement Fund	Mutual fund	**	61,841
	American Funds 2035 Target Date Retirement Fund	Mutual fund	**	5,596
	American Funds 2030 Target Date Retirement Fund	Mutual fund	**	59,730
	American Funds 2025 Target Date Retirement Fund	Mutual fund	**	58,934
	American Funds 2020 Target Date Retirement Fund	Mutual fund	**	167,017
	American Funds 2015 Target Date Retirement Fund	Mutual fund	**	60,623
	American Funds 2010 Target Date Retirement Fund	Mutual fund	**	352
	Franklin Convertible Securities Fund	Mutual fund	**	11,678
	MFS Lifetime Income Fund	Mutual fund	**	490,669
	Templeton Hard Currency Fund	Mutual fund	**	18,847

See independent auditors' report.

NES GLOBAL, LLC 401(K) PROFIT SHARING PLAN AND TRUST
SCHEDULE H, LINE 4i – SCHEDULE OF ASSETS (HELD AT END OF YEAR) (CONTINUED)
DECEMBER 31, 2015

EIN: 59-3659333
Plan No. 001

(a) Party in Interest	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Description of Investment	(d) Cost	(e) Current Value
	American Funds AMCAP Fund	Mutual fund	**	19,196
	Deutsche Real Estate Securities Fund	Mutual fund	**	6,852
	Templeton Global Bond Fund	Mutual fund	**	1,279
	ClearBridge Small Cap Growth Fund	Mutual fund	**	6,742
	American Funds New World Fund	Mutual fund	**	2,442
	First Eagle Gold Fund	Mutual fund	**	1,776
*	Participant Loans	Interest rate: 4.25%	-	156,271
	Total assets held for investment purposes			$5,209,316

* Represents party in interest transaction as defined by ERISA
** Historical cost information is not required for participant-directed investments

See independent auditors' report.

NES GLOBAL, LLC 401(K) PROFIT SHARING PLAN AND TRUST
SCHEDULE H, LINE 4a – SCHEDULE OF DELINQUENT PARTICIPANT CONTRIBUTIONS
FOR THE YEAR ENDED DECEMBER 31, 2015

EIN: 59-3659333
Plan No. 001

	Total That Constitutes Nonexempt Prohibited Transactions			
Participant Contributions Transferred Late to Plan	Contributions Not Corrected	Contributions Corrected Outside VFCP	Contributions Pending Correction in VFCP	Total Fully Corrected Under VFCP and PTE 2002-51
Check here if late participant loan repayments are included: ☐				
$ 22,486	$ 4,317	$ 18,169	$ -	$ -

* This represents total amount of contributions that have been withheld from participants, but not remitted timely, into the trust by the Plan sponsor.

See independent auditors' report.

NES Global, LLC 401(k) Profit Sharing Plan and Trust

Financial Statements and Supplemental Schedules
As of December 31, 2015 and 2014,
and for the Year Ended December 31, 2015

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Schedules other than those listed above are omitted because of the conditions under which they are required.

Briggs & Veselka Co.
A PROFESSIONAL CORPORATION
Certified Public Accountants and Business Advisors

INDEPENDENT AUDITORS' REPORT

To the Plan Administrator of
NES Global, LLC 401(k) Profit Sharing Plan and Trust
Houston, Texas

Reports on the Financial Statements

We were engaged to audit the accompanying financial statements of NES Global, LLC 401(k) Profit Sharing Plan and Trust, which comprise the statements of net assets available for benefits as of December 31, 2015 and 2014, and the related statement of changes in net assets available for benefits for the year ended December 31, 2015, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

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

Auditors' Responsibility

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

Basis for Disclaimer of Opinion

As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in *Note 4*, which was certified by Reliance Trust Company and Mid Atlantic Trust Company, the trustees of the Plan, except for comparing the information with the related information included in the financial statements. We have been informed by the plan administrator that Mid Atlantic Trust Company held the Plan's investment assets and executed investment transactions from December 29, 2014 to December 31, 2015, and that Reliance Trust Company held the Plan's investment assets and executed investment transactions as of December 31, 2014, and for the year ended December 31, 2014. The plan administrator has obtained certifications from the trustees as of and for the years ended December 31, 2015 and 2014, that the information provided to the plan administrator by the trustees is complete and accurate.

To the Plan Administrator of
NES Global, LLC 401(k) Profit Sharing Plan and Trust
Re: Independent Auditors' Report

Disclaimer of Opinion

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

Other Matter

The supplemental schedules of Schedule H, Line 4i – Schedule of Assets (Held at End of Year) as of December 31, 2015, and Schedule H, Line 4a – Schedule of Delinquent Participant Contributions for the year ended December 31, 2015, are required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 and are presented for the purpose of additional analysis and are not a required part of the financial statements. Because of the significance of the matter described in the Basis for Disclaimer of Opinion paragraph, we do not express an opinion on the supplemental schedules referred to above.

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

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



Briggs & Veselka Co.
Houston, Texas

August 25, 2016

NES GLOBAL, LLC 401(K) PROFIT SHARING PLAN AND TRUST
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
DECEMBER 31, 2015 AND 2014

	2015	2014
ASSETS		
Noninterest-bearing cash	**$ -**	$ 4,471,800
Investments at fair value:		
Mutual funds	**4,704,941**	29,894
Money market fund	**348,104**	-
Total investments at fair value	**5,053,045**	29,894
Receivables:		
Participant contributions	**30,457**	8,469
Notes receivable from participants	**156,271**	139,453
Other income	**28,625**	-
Total receivables	**215,353**	147,922
Total assets	**5,268,398**	4,649,616
LIABILITIES		
Excess participant contributions payable	**40,292**	-
Total liabilities	**40,292**	-
NET ASSETS AVAILABLE FOR BENEFITS	**$ 5,228,106**	$ 4,649,616

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

NES GLOBAL, LLC 401(K) PROFIT SHARING PLAN AND TRUST
STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
FOR THE YEAR ENDED DECEMBER 31, 2015

ADDITIONS	
Investment income (loss):	
Net depreciation in fair value of investments	$ (294,382)
Dividends	284,483
Total investment loss	(9,899)
Interest income on notes receivable from participants	6,570
Other income	28,625
Contributions:	
Participants	1,449,017
Rollovers	560,226
Total contributions	2,009,243
Total additions	2,034,539
DEDUCTIONS	
Benefits paid to participants or beneficiaries	1,453,331
Administrative expenses	2,718
Total deductions	1,456,049
Net increase	578,490
Net assets available for benefits, beginning of year	4,649,616
NET ASSETS AVAILABLE FOR BENEFITS, END OF YEAR	$ 5,228,106

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

NOTE 1 – DESCRIPTION OF PLAN

NES Global, LLC 401(k) Profit Sharing Plan and Trust (the Plan) is a qualified retirement plan adopted by NES Global, LLC (the Company) on January 1, 2002 to allow employees to meet their financial needs during their retirement years. The Plan was amended and restated to conform to new tax laws on November 18, 2014. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA).

The summary of significant provisions of the Plan presented below provides only general information. Participants should refer to the basic plan document for a more complete description of the Plan's provisions.

Eligibility – All employees of the Company who are at least age 21 are eligible to become a participant in the Plan.

Contributions – Participants may elect to contribute from 1% to 90% of their eligible compensation as an elective deferral, not to exceed an annual dollar limit which is set by law. Participants who are projected to reach age 50 during a calendar year are eligible to make catch-up contributions. Participants can increase, decrease, suspend, or resume their elective deferrals at any time.

Participants may also make a rollover contribution of benefits to the Plan from eligible retirement plans and certain IRAs.

Participant Accounts – Each participant's account is credited with the participant's contributions, rollovers, and Plan earnings or losses. Participant accounts are charged with an allocation of administrative expenses that are paid by the Plan. Allocations are based on participant earnings, account balances, or specific participant transactions. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

Vesting – Participants are always 100% vested in their contributions plus actual earnings or losses thereon.

Investment Options – Participants direct the investment of contributions into various investment securities offered by the Plan. Each investment security offered has a different investment objective. Participants may change the investment of future contributions or reallocate/transfer existing account balances.

Notes Receivable From Participants – Participants may borrow a portion of their pretax vested account balance. The minimum amount of a loan is $1,000 up to a maximum of $50,000 reduced by the highest outstanding loan balance during the previous one-year period, or 50% of their vested account balance. The loans are adequately secured by the balance in the participant's account and bear a reasonable rate of interest. Principal and interest payments are paid through payroll deductions within 5 years, unless the loan is used to purchase a primary residence.

Payment of Benefits – Upon termination, retirement, disability or death, a participant may elect to receive their vested benefit in a single lump sum payment or have the payment paid as a direct rollover to an IRA or to another employer's tax qualified plan. If the value of the vested account balance is $5,000 or less, but greater than $1,000, and the participant does not elect to receive their vested benefit in the form of a single lump sum payment or rollover, it will automatically be rolled over to an IRA established by an IRA provider selected by the Company. If the value of the participant's vested account balance does not exceed $1,000, a distribution in cash will automatically be made whether consent is received or not.

Participants may withdraw all or part of their vested account balance once they reach age 59½. Hardship withdrawals may also be made to satisfy certain immediate and heavy financial hardship a participant may have.

NOTE 2 – SUMMARY OF ACCOUNTING POLICIES

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

Use of Estimates – The preparation of financial statements in accordance with accounting principles generally accepted in the United States of America (GAAP) requires the Company to make estimates and assumptions that affect the reported amounts of assets and liabilities and changes therein, and disclosure of contingent assets and liabilities. Actual results could differ from 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 and the measurement date. See *Note 3* for discussion of fair value measurements.

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

Notes Receivable From Participants – Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest. Interest income is recorded on the accrual basis. Related fees are recorded as administrative expenses and are expensed when they are incurred. No allowance for credit losses has been recorded as of December 31, 2015 and 2014.

Excess Participant Contributions Payable – Amounts payable to participants for contributions in excess of amounts allowed by the Internal Revenue Service (IRS) are recorded as a liability with a corresponding reduction to contributions.

Benefits Paid – Benefits are recorded when paid.

Administrative Expenses – Certain expenses of maintaining the Plan are paid by the Plan, unless otherwise paid by the Company. Expenses that are paid by the Company are excluded from these financial statements. Fees related to the administration of notes receivable from participants are charged directly to the participant's account and are included in administrative expenses. Investment related expenses are included in net depreciation in fair value of investments.

Subsequent Events – The Plan has evaluated subsequent events through August 25, 2016, the date the financial statements were available to be issued.

Recent Accounting Pronouncements – In May 2015, FASB issued ASU 2015-07, *Fair Value Measurement (Topic 820): Disclosures for Investments in Certain Entities That Calculate Net Asset Value per Share (or its Equivalent)*, which removes the requirement to include investments in the fair value hierarchy for which fair value is measured using the net asset value per share practical expedient. This guidance also removes the requirement to make certain disclosures for all investments that are eligible to be measured at fair value using the net asset value per share practical expedient. The standard is effective for the Plan retrospectively for the year ending December 31, 2015 with early adoption permitted.

In July 2015, FASB released ASU No. 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.* ASU 2015-12 removes the requirement to report fully benefit-responsive investment contracts at fair value with an adjustment to contract value and also simplifies the investment disclosures required for employee benefit plans. This update is effective for fiscal years beginning after December 15, 2015, with early adoption permitted. Parts I and II should be applied retrospectively, while Part III should be applied prospectively.

NOTE 3 – FAIR VALUE MEASUREMENTS

The framework for measuring fair value provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (level 1) and the lowest priority to unobservable inputs (level 3). The three levels of the fair value hierarchy under FASB ASC 820 are described as follows:

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

- **Level 2** – Inputs to the valuation methodology include quoted prices for similar assets or liabilities in 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; inputs that are derived principally from or corroborated by observable market data by correlation or other means. If the asset or liability has a specified (contractual) term, the level 2 input must be observable for substantially the full term of the asset or liability.

- **Level 3** – Inputs to the valuation methodology are unobservable and significant to the fair value measurement.

The asset or liability's fair value measurement level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement. Valuation techniques maximize the use of relevant 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 at December 31, 2015 and 2014.

Mutual Funds – Valued at the daily closing price as reported by the fund. Mutual funds held by the Plan are open-end mutual funds that are registered with the SEC. These funds are required to publish their daily net asset value and to transact at that price. The mutual funds held by the Plan are deemed to be actively traded.

Money Market Fund – Valued using pricing models maximizing the use of observable inputs for similar securities.

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

	2015			
	Level 1	Level 2	Level 3	Total
Mutual funds:				
Equity fund	**$ 2,562,415**	**$ -**	**$ -**	**$ 2,562,415**
International equity fund	**361,161**	**-**	**-**	**361,161**
Fixed income fund	**477,493**	**-**	**-**	**477,493**
Balanced fund	**1,283,249**	**-**	**-**	**1,283,249**
Alternative asset fund	**20,623**	**-**	**-**	**20,623**
Money market fund	**348,104**	**-**	**-**	**348,104**
Total assets at fair value	**$ 5,053,045**	**$ -**	**$ -**	**$ 5,053,045**

	2014			
	Level 1	Level 2	Level 3	Total
Mutual funds:				
Equity fund	$ 12,464	$ -	$ -	$ 12,464
International equity fund	2,083	-	-	2,083
Fixed income fund	4,312	-	-	4,312
Balanced fund	10,972	-	-	10,972
Alternative asset fund	63	-	-	63
Total assets at fair value	$ 29,894	$ -	$ -	$ 29,894

NOTE 4 – INFORMATION CERTIFIED BY THE TRUSTEES

All investments and investment activities included in the accompanying statements of net assets available for benefits as of December 31, 2015 and 2014, *Note 5,* supplemental Schedule H, Line 4i – Schedule of Assets (Held at End of Year) as of December 31, 2015, and the statement of changes in net assets available for benefits for the year ended December 31, 2015, have been certified as complete and accurate by Reliance Trust Company and Mid Atlantic Trust Company, the trustees of the Plan, as permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. The Plan's independent auditors did not perform any auditing procedures with respect to the certified information except for comparing the information to the related information included in the Plan's financial statements and supplemental schedule.

NOTE 5 – INVESTMENTS (UNAUDITED)

The following presents investments that represent 5% or more of the Plan's net assets at December 31, 2015:

BlackRock Retirement Reserves Money Fund	$ 348,104
Invesco Diversified Dividend Fund	424,961
Deutsche S&P 500 Index Fund	609,984
Dreyfus Opportunistic Midcap Value Fund	309,272
American Funds American Balanced Fund	276,548
MFS Lifetime Income Fund	490,669

* Indicates party in interest
** Represents less than 5% of the Plan's net assets as of December 31

During 2015, the Plan's investments in mutual funds (including gains and losses on investments bought and sold, as well as held during the year) depreciated in fair value by $294,382.

NOTE 6 – RELATED PARTY TRANSACTIONS AND PARTY IN INTEREST TRANSACTIONS

Certain Plan investments are managed by the trustees. These transactions qualify as party in interest transactions; however, such transactions are permitted under the provisions of the Plan and are exempt from the prohibited transaction rules under ERISA.

NOTE 7 – PLAN TERMINATION

While the Company hopes and expects to continue the Plan indefinitely, it reserves the right to terminate, discontinue making contributions to, amend, or modify the Plan at any time. Upon termination of the Plan, participants will become 100% vested in their total account balance. The Company will arrange for distributions upon Plan termination as soon as administratively feasible.

NOTE 8 – TAX STATUS

The Company adopted a prototype non-standardized profit sharing plan with CODA. The prototype plan obtained its latest opinion letter on April 10, 2014, in which the IRS stated that the prototype plan, as then designed, was in compliance with the applicable requirements under section 401 of the Internal Revenue Code (IRC). Although the Plan has been amended since receiving the opinion letter, the Company believes that the Plan is designed, and is currently being operated, in compliance with the applicable requirements of the IRC. Therefore, no provision for income taxes has been included in the Plan's financial statements.

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NOTE 9 – RISKS AND UNCERTAINTIES

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

NOTE 10 – RECONCILIATION OF FINANCIAL STATEMENTS TO FORM 5500

The following is a reconciliation of net assets available for benefits per the financial statements at December 31, 2015 and 2014, to Form 5500:

	2015	2014
Net assets available for benefits per the financial statements	**$ 5,228,106**	$ 4,649,616
Participant contributions receivable	**-**	(8,469)
Excess participant contributions payable	**40,292**	-
Net assets available for benefits per the Form 5500	**$ 5,268,398**	$ 4,641,147

The following is a reconciliation of participants contributions per the financial statements for the year ended December 31, 2015, to Form 5500:

Participants contributions per the financial statements	$ 1,449,017
Add: excess contributions payable at December 31, 2015	40,292
Add: participant contributions receivable at December 31, 2014	8,469
Total participants contributions per Form 5500	$ 1,497,778

NOTE 11 – PROHIBITED TRANSACTIONS

The Company found clerical errors resulting in the failure to remit to Reliance Trust Company certain participant contributions from the years 2014 and 2012 within a timely manner. In 2015, the Company corrected certain participant contributions previously not remitted to the Plan. The Company also made an interest payment to compensate participants for lost investment earnings related to certain prohibited transactions.

NES GLOBAL, LLC 401(K) PROFIT SHARING PLAN AND TRUST
SCHEDULE H, LINE 4i – SCHEDULE OF ASSETS (HELD AT END OF YEAR)
DECEMBER 31, 2015

EIN: 59-3659333
Plan No. 001

(a) Party in Interest	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Description of Investment	(d) Cost	(e) Current Value
	BlackRock Retirement Reserves Money Fund	Money market fund	**	$ 348,104
	Aston/River Road Select Value Fund	Mutual fund	**	59,832
	Invesco Diversified Dividend Fund	Mutual fund	**	424,961
	BlackRock All-Cap Energy & Resources Portfolio	Mutual fund	**	5,845
	Calamos Growth Fund	Mutual fund	**	179,818
	Columbia Seligman Communications and Information Fund	Mutual fund	**	88,263
	Davis Financial Fund	Mutual fund	**	3,466
	Deutsche S&P 500 Index Fund	Mutual fund	**	609,984
	Dreyfus Opportunistic Midcap Value Fund	Mutual fund	**	309,272
	Eagle Small Cap Growth Fund	Mutual fund	**	178,053
	Eaton Vance Atlanta Capital SMID-Cap Fund	Mutual fund	**	175,028
	Eaton Vance Worldwide Health Sciences Fund	Mutual fund	**	144,229
	Franklin Utilities	Mutual fund	**	14,195
	Ivy Global Natural Resources Fund	Mutual fund	**	493
	Janus Triton Fund	Mutual fund	**	80,041
	JPMorgan Small Cap Value Fund	Mutual fund	**	153,504
	Pioneer Fundamental Growth Fund	Mutual fund	**	102,641
	BlackRock Latin America Fund	Mutual fund	**	1,208
	Lazard International Strategic Equity Portfolio	Mutual fund	**	149,144
	MFS International Value Fund	Mutual fund	**	44,767
	MFS Emerging Markets Equity Fund	Mutual fund	**	11,238
	Oppenheimer International Growth Fund	Mutual fund	**	142,744
	Voya Global Real Estate Fund	Mutual fund	**	9,618
	American Century Zero Coupon 2025 Fund	Mutual fund	**	197,607
	Delaware Extended Duration Bond Fund	Mutual fund	**	25,144
	Eaton Vance Floating-Rate & High Income Fund	Mutual fund	**	22,185
	Goldman Sachs Government Income Fund	Mutual fund	**	6,747
	Ivy High Income Fund	Mutual fund	**	30,237
	Loomis Sayles Strategic Income Fund	Mutual fund	**	14,891
	Oppenheimer International Bond Fund	Mutual fund	**	24,280
	PIMCO Total Return Fund	Mutual fund	**	145,259
	PIMCO Real Return Fund	Mutual fund	**	8,566
	TCW Emerging Markets Income Fund	Mutual fund	**	1,298
	American Funds American Balanced Fund	Mutual fund	**	276,548
	American Funds 2060 Target Date Retirement Fund	Mutual fund	**	2,621
	American Funds 2055 Target Date Retirement Fund	Mutual fund	**	351
	American Funds 2050 Target Date Retirement Fund	Mutual fund	**	16,898
	American Funds 2045 Target Date Retirement Fund	Mutual fund	**	70,391
	American Funds 2040 Target Date Retirement Fund	Mutual fund	**	61,841
	American Funds 2035 Target Date Retirement Fund	Mutual fund	**	5,596
	American Funds 2030 Target Date Retirement Fund	Mutual fund	**	59,730
	American Funds 2025 Target Date Retirement Fund	Mutual fund	**	58,934
	American Funds 2020 Target Date Retirement Fund	Mutual fund	**	167,017
	American Funds 2015 Target Date Retirement Fund	Mutual fund	**	60,623
	American Funds 2010 Target Date Retirement Fund	Mutual fund	**	352
	Franklin Convertible Securities Fund	Mutual fund	**	11,678
	MFS Lifetime Income Fund	Mutual fund	**	490,669
	Templeton Hard Currency Fund	Mutual fund	**	18,847

See independent auditors' report.

NES GLOBAL, LLC 401(K) PROFIT SHARING PLAN AND TRUST
SCHEDULE H, LINE 4i – SCHEDULE OF ASSETS (HELD AT END OF YEAR) (CONTINUED)
DECEMBER 31, 2015

EIN: 59-3659333
Plan No. 001

(a) Party in Interest	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Description of Investment	(d) Cost	(e) Current Value
	American Funds AMCAP Fund	Mutual fund	**	19,196
	Deutsche Real Estate Securities Fund	Mutual fund	**	6,852
	Templeton Global Bond Fund	Mutual fund	**	1,279
	ClearBridge Small Cap Growth Fund	Mutual fund	**	6,742
	American Funds New World Fund	Mutual fund	**	2,442
	First Eagle Gold Fund	Mutual fund	**	1,776
*	Participant Loans	Interest rate: 4.25%	-	156,271
	Total assets held for investment purposes			$5,209,316

* Represents party in interest transaction as defined by ERISA
** Historical cost information is not required for participant-directed investments

See independent auditors' report.

NES GLOBAL, LLC 401(K) PROFIT SHARING PLAN AND TRUST
SCHEDULE H, LINE 4a – SCHEDULE OF DELINQUENT PARTICIPANT CONTRIBUTIONS
FOR THE YEAR ENDED DECEMBER 31, 2015

EIN: 59-3659333
Plan No. 001

	Total That Constitutes Nonexempt Prohibited Transactions			
Participant Contributions Transferred Late to Plan	Contributions Not Corrected	Contributions Corrected Outside VFCP	Contributions Pending Correction in VFCP	Total Fully Corrected Under VFCP and PTE 2002-51
Check here if late participant loan repayments are included: ☐				
$ 22,486	$ 4,317	$ 18,169	$ -	$ -

* This represents total amount of contributions that have been withheld from participants, but not remitted timely, into the trust by the Plan sponsor.

See independent auditors' report.