

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
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Part I	Annual Report Identification Information
For calendar plan year 2015 or fiscal plan year beginning <u>01/01/2015</u> and ending <u>12/31/2015</u>	
A This return/report is for:	☐ a multiemployer plan; ☐ a multiple-employer plan (Filers checking this box must attach a list of participating employer information in accordance with the form instructions); or ☒ a single-employer plan; ☐ a DFE (specify) _____
B This return/report is:	☐ the first return/report; ☐ the final return/report; ☐ an amended return/report; ☐ a short plan year return/report (less than 12 months).
C If the plan is a collectively-bargained plan, check here.	☐
D Check box if filing under:	☒ Form 5558; ☐ automatic extension; ☐ the DFVC program; ☐ special extension (enter description)

Part II	Basic Plan Information —enter all requested information
1a Name of plan <u>HEATRON, INC. SAVINGS PLAN</u>	1b Three-digit plan number (PN) ▶ <u>002</u>
	1c Effective date of plan <u>04/01/1999</u>
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) <u>HEATRON, INC.</u> <u>3000 WILSON</u> <u>LEAVENWORTH, KS 66048</u>	2b Employer Identification Number (EIN) <u>43-1126014</u> 2c Plan Sponsor's telephone number <u>913-651-4420</u> 2d Business code (see instructions) <u>335900</u>

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	<u>Filed with authorized/valid electronic signature.</u>	<u>10/13/2016</u>	<u>BERNARD ROGERS</u>
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	<u>Filed with authorized/valid electronic signature.</u>	<u>10/13/2016</u>	<u>BERNARD ROGERS</u>
	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

For Paperwork Reduction Act Notice and OMB Control Numbers, see the instructions for Form 5500.

Form 5500 (2015)
v. 150123

3a Plan administrator's name and address ☒ Same as Plan Sponsor	3b Administrator's EIN 3c Administrator's telephone number <div style="background-color: #cccccc; height: 40px; width: 100%;"></div>
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: a Sponsor's name	4b EIN 4c PN
5 Total number of participants at the beginning of the plan year	5 1332
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) 1136
a(2) Total number of active participants at the end of the plan year	6a(2) 262
b Retired or separated participants receiving benefits.....	6b 0
c Other retired or separated participants entitled to future benefits.....	6c 487
d Subtotal. Add lines 6a(2) , 6b , and 6c	6d 749
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.....	6e
f Total. Add lines 6d and 6e	6f 749
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item).....	6g 692
h Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested	6h 555
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 2S 2T 3B 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) ☒ 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) ☒ 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) ☒ 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) ☒ H (Financial Information) (2) ☐ I (Financial Information – Small Plan) (3) ☒ <u>1</u> A (Insurance Information) (4) ☒ C (Service Provider Information) (5) ☒ D (DFE/Participating Plan Information) (6) ☐ G (Financial Transaction Schedules)

Part III	Form M-1 Compliance Information (to be completed by welfare benefit plans)
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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 A (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <hr/> <small>Department of Labor Employee Benefits Security Administration</small> <hr/> <small>Pension Benefit Guaranty Corporation</small>	Insurance Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ► File as an attachment to Form 5500. ► Insurance companies are required to provide the information pursuant to ERISA section 103(a)(2).	OMB No. 1210-0110 <hr/> 2015 <hr/> This Form is Open to Public Inspection
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For calendar plan year 2015 or fiscal plan year beginning **01/01/2015** and ending **12/31/2015**

A Name of plan HEATRON, INC. SAVINGS PLAN	B Three-digit plan number (PN) ►	002
C Plan sponsor's name as shown on line 2a of Form 5500 HEATRON, INC.	D Employer Identification Number (EIN) 43-1126014	

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

(a) Name of insurance carrier
JOHN HANCOCK LIFE INSURANCE COMPANY

(b) EIN	(c) NAIC code	(d) Contract or identification number	(e) Approximate number of persons covered at end of policy or contract year	Policy or contract year	
				(f) From	(g) To
01-0233346	65838	83205	728	01/01/2015	12/31/2015

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

(a) Total amount of commissions paid 0	(b) Total amount of fees paid 38076
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3 Persons receiving commissions and fees. (Complete as many entries as needed to report all persons).

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

UBS FINANCIAL SERVICES INC.
1200 HARBOR BOULEVARD
WEEHAWKEN, NJ 07086

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
0	26762	RIA FEES PAID	3

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

BKD, LLP
1201 WALNUT
SUITE 1700
KANSAS CITY, MO 64106

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
0	11314	TPA FEES	5

For Paperwork Reduction Act Notice and OMB Control Numbers, see the instructions for Form 5500.

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

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

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

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

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

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

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

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

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

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

Part II Investment and Annuity Contract Information

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

4 Current value of plan's interest under this contract in the general account at year end	4	
5 Current value of plan's interest under this contract in separate accounts at year end	5	8464389

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

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

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

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

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

b Balance at the end of the previous year	7b	
c Additions: (1) Contributions deposited during the year	7c(1)	
(2) Dividends and credits	7c(2)	
(3) Interest credited during the year	7c(3)	
(4) Transferred from separate account	7c(4)	
(5) Other (specify below)	7c(5)	
▶		
(6) Total additions	7c(6)	
d Total of balance and additions (add lines 7b and 7c(6))	7d	
e Deductions:		
(1) Disbursed from fund to pay benefits or purchase annuities during year	7e(1)	
(2) Administration charge made by carrier	7e(2)	
(3) Transferred to separate account	7e(3)	
(4) Other (specify below)	7e(4)	
▶		
(5) Total deductions	7e(5)	
f Balance at the end of the current year (subtract line 7e(5) from line 7d)	7f	

Part III Welfare Benefit Contract Information

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

8 Benefit and contract type (check all applicable boxes)

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

9 Experience-rated contracts:

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

10 Nonexperience-rated contracts:

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

Specify nature of costs ▶

Part IV Provision of Information

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

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

<div>SCHEDULE C</div> <div>(Form 5500)</div> <div>Department of the Treasury Internal Revenue Service</div> <div>Department of Labor Employee Benefits Security Administration</div> <div>Pension Benefit Guaranty Corporation</div>	<div>Service Provider Information</div> <div>This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA).</div> <div>▶ File as an attachment to Form 5500.</div>	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 HEATRON, INC. SAVINGS PLAN	B Three-digit plan number (PN) ▶	002
C Plan sponsor's name as shown on line 2a of Form 5500 HEATRON, INC.	D Employer Identification Number (EIN) 43-1126014	

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

- a Check "Yes" or "No" to indicate whether you are excluding a person from the remainder of this Part because they received only eligible indirect compensation for which the plan received the required disclosures (see instructions for definitions and conditions)..... ☐ Yes ☒ No
- b If you answered line 1a "Yes," enter the name and EIN or address of each person providing the required disclosures for the service providers who received only eligible indirect compensation. Complete as many entries as needed (see instructions).

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

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

JOHN HANCOCK LIFE INSURANCE COMPANY

01-0233346

(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 28 59 60 62 63 68	RECORDKEEPER	1824	Yes ☒ No ☐	Yes ☒ No ☐		Yes ☐ No ☒

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

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

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

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

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

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

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

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

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

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

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

Part I Service Provider Information (continued)

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE D (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small>	DFE/Participating Plan Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ► File as an attachment to Form 5500.	OMB No. 1210-0110 2015 This Form is Open to Public Inspection.
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For calendar plan year 2015 or fiscal plan year beginning **01/01/2015** and ending **12/31/2015**

A Name of plan HEATRON, INC. SAVINGS PLAN	B Three-digit plan number (PN) ►	002
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 HEATRON, INC.	D Employer Identification Number (EIN) 43-1126014	

Part I	Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs) (Complete as many entries as needed to report all interests in DFEs)
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a Name of MTIA, CCT, PSA, or 103-12 IE: JH THRU 2055 ACTIVE STRATEGY			
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA			
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 92247	
a Name of MTIA, CCT, PSA, or 103-12 IE: JH THRU 2050 ACTIVE STRATEGY			
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA			
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 90358	
a Name of MTIA, CCT, PSA, or 103-12 IE: JH THRU 2045 ACTIVE STRATEGY			
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA			
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 102477	
a Name of MTIA, CCT, PSA, or 103-12 IE: JH THRU 2040 ACTIVE STRATEGY			
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA			
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 53655	
a Name of MTIA, CCT, PSA, or 103-12 IE: JH THRU 2035 ACTIVE STRATEGY			
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA			
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 104127	
a Name of MTIA, CCT, PSA, or 103-12 IE: JH THRU 2030 ACTIVE STRATEGY			
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA			
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 115721	
a Name of MTIA, CCT, PSA, or 103-12 IE: JH THRU 2025 ACTIVE STRATEGY			
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA			
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 202912	

a Name of MTIA, CCT, PSA, or 103-12 IE: JH THRU 2020 ACTIVE STRATEGY		
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 184484

a Name of MTIA, CCT, PSA, or 103-12 IE: JH THRU 2015 ACTIVE STRATEGY		
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 3232

a Name of MTIA, CCT, PSA, or 103-12 IE: JH THRU 2010 ACTIVE STRATEGY		
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 2249

a Name of MTIA, CCT, PSA, or 103-12 IE: JH LS AGG ACTIVE STRATEGY		
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 716572

a Name of MTIA, CCT, PSA, or 103-12 IE: JH LS GROW ACTIVE STRATEGY		
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 1254431

a Name of MTIA, CCT, PSA, or 103-12 IE: JH LS BAL ACTIVE STRATEGY		
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 1191226

a Name of MTIA, CCT, PSA, or 103-12 IE: JH LS MOD ACTIVE STRATEGY		
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 376566

a Name of MTIA, CCT, PSA, or 103-12 IE: JH LS CON ACTIVE STRATEGY		
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 625149

a Name of MTIA, CCT, PSA, or 103-12 IE: NATURAL RESOURCES FUND		
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 18968

a Name of MTIA, CCT, PSA, or 103-12 IE: INTERNATIONAL VALUE FUND		
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 98799

a Name of MTIA, CCT, PSA, or 103-12 IE: T. ROWE PRICE SCI & TECH		
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 242193

a Name of MTIA, CCT, PSA, or 103-12 IE: VANGUARD SMALL CAP GROW INDEX		
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 247283

a Name of MTIA, CCT, PSA, or 103-12 IE: OPPENHEIMER DEVELOPING MKT		
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 50772

a Name of MTIA, CCT, PSA, or 103-12 IE: DFA U.S. SMALL CAP FUND		
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 82465

a Name of MTIA, CCT, PSA, or 103-12 IE: MID CAP STOCK FUND		
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 229281

a Name of MTIA, CCT, PSA, or 103-12 IE: SMALL CAP INDEX FUND		
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 132500

a Name of MTIA, CCT, PSA, or 103-12 IE: EUROPACIFIC GROWTH FUND		
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 59190

a Name of MTIA, CCT, PSA, or 103-12 IE: SMALLCAP WORLD FUND		
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 124183

a Name of MTIA, CCT, PSA, or 103-12 IE: REAL EST. SECURITIES FUND		
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 28410

a Name of MTIA, CCT, PSA, or 103-12 IE: T. ROWE PRICE HEALTH SCI		
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 380094

a Name of MTIA, CCT, PSA, or 103-12 IE: EQUITY INCOME FUND			
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA			
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	183693

a Name of MTIA, CCT, PSA, or 103-12 IE: INVESTMENT COMPANY OF AMERICA			
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA			
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	14766

a Name of MTIA, CCT, PSA, or 103-12 IE: BLACKROCK GLOBAL ALLOCATION			
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA			
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	262078

a Name of MTIA, CCT, PSA, or 103-12 IE: CAPITAL INCOME BUILDER			
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA			
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	15248

a Name of MTIA, CCT, PSA, or 103-12 IE: TEMPLETON GLOBAL BOND FUND			
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA			
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	7191

a Name of MTIA, CCT, PSA, or 103-12 IE: HIGH YIELD FUND			
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA			
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	68350

a Name of MTIA, CCT, PSA, or 103-12 IE: STRATEGIC INCOME OPP FUND			
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA			
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	12002

a Name of MTIA, CCT, PSA, or 103-12 IE: REAL RETURN BOND FUND			
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA			
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	48843

a Name of MTIA, CCT, PSA, or 103-12 IE: ACTIVE BOND FUND			
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA			
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	159216

a Name of MTIA, CCT, PSA, or 103-12 IE: JOHN HANCOCK STABLE VAL			
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA			
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	1038236

a Name of MTIA, CCT, PSA, or 103-12 IE: FINANCIAL INDUSTRIES FUND		
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 94162

a Name of MTIA, CCT, PSA, or 103-12 IE: VANGUARD SMALL CAP VALUE INDEX		
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 2738

a Name of MTIA, CCT, PSA, or 103-12 IE: MID CAP INDEX FUND		
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 112821

a Name of MTIA, CCT, PSA, or 103-12 IE: VALUE FUND		
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 77198

a Name of MTIA, CCT, PSA, or 103-12 IE: CAPITAL WORLD GROWTH & INCOME		
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 32291

a Name of MTIA, CCT, PSA, or 103-12 IE: MID VALUE FUND		
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 9651

a Name of MTIA, CCT, PSA, or 103-12 IE: THE GROWTH FUND OF AMERICA		
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 163915

a Name of MTIA, CCT, PSA, or 103-12 IE: FUNDAMENTAL INVESTORS		
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 81467

a Name of MTIA, CCT, PSA, or 103-12 IE: TOTAL STOCK MARKET INDEX FUND		
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 252483

a Name of MTIA, CCT, PSA, or 103-12 IE: UTILITIES FUND		
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 56732

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

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

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

SCHEDULE H (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	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 HEATRON, INC. SAVINGS PLAN	B Three-digit plan number (PN) ►	002
C Plan sponsor's name as shown on line 2a of Form 5500 HEATRON, INC.	D Employer Identification Number (EIN) 43-1126014	

Part I	Asset and Liability Statement		(a) Beginning of Year	(b) End of Year
1 Current value of plan assets and liabilities at the beginning and end of the plan year. Combine the value of plan assets held in more than one trust. Report the value of the plan's interest in a commingled fund containing the assets of more than one plan on a line-by-line basis unless the value is reportable on lines 1c(9) through 1c(14). Do not enter the value of that portion of an insurance contract which guarantees, during this plan year, to pay a specific dollar benefit at a future date. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 1b(1), 1b(2), 1c(8), 1g, 1h, and 1i. CCTs, PSAs, and 103-12 IEs also do not complete lines 1d and 1e. See instructions.				
	Assets			
a	Total noninterest-bearing cash	1a	47317	98519
b	Receivables (less allowance for doubtful accounts):			
	(1) Employer contributions	1b(1)	0	115240
	(2) Participant contributions	1b(2)		4000
	(3) Other.....	1b(3)		
c	General investments:			
	(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)		
	(2) U.S. Government securities.....	1c(2)		
	(3) Corporate debt instruments (other than employer securities):			
	(A) Preferred	1c(3)(A)		
	(B) All other.....	1c(3)(B)		
	(4) Corporate stocks (other than employer securities):			
	(A) Preferred	1c(4)(A)		
	(B) Common	1c(4)(B)		
	(5) Partnership/joint venture interests	1c(5)		
	(6) Real estate (other than employer real property)	1c(6)		
	(7) Loans (other than to participants)	1c(7)		
	(8) Participant loans	1c(8)	123069	169057
	(9) Value of interest in common/collective trusts.....	1c(9)		
	(10) Value of interest in pooled separate accounts.....	1c(10)	9474630	8464390
	(11) Value of interest in master trust investment accounts	1c(11)		
	(12) Value of interest in 103-12 investment entities	1c(12)		
	(13) Value of interest in registered investment companies (e.g., mutual funds).....	1c(13)		
	(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)		
	(15) Other	1c(15)	672452	1038236

1d Employer-related investments:

		(a) Beginning of Year	(b) End of Year
(1) Employer securities	1d(1)		
(2) Employer real property	1d(2)		
e Buildings and other property used in plan operation	1e		
f Total assets (add all amounts in lines 1a through 1e)	1f	10317468	9889442

Liabilities

g Benefit claims payable	1g		
h Operating payables	1h		
i Acquisition indebtedness	1i		
j Other liabilities.....	1j	3925	0
k Total liabilities (add all amounts in lines 1g through 1j)	1k	3925	0

Net Assets

l Net assets (subtract line 1k from line 1f)	1l	10313543	9889442
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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)	668338	
(B) Participants	2a(1)(B)	1291894	
(C) Others (including rollovers)	2a(1)(C)	517643	
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		2477875
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)		
(B) U.S. Government securities	2b(1)(B)		
(C) Corporate debt instruments	2b(1)(C)		
(D) Loans (other than to participants)	2b(1)(D)	0	
(E) Participant loans	2b(1)(E)	7804	
(F) Other	2b(1)(F)		
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		7804
(2) Dividends: (A) Preferred stock	2b(2)(A)		
(B) Common stock	2b(2)(B)		
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)		
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)		
(B) Aggregate carrying amount (see instructions)	2b(4)(B)		
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)		
(5) Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)		
(B) Other	2b(5)(B)		
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		-54216
c Other income	2c		0
d Total income. Add all income amounts in column (b) and enter total	2d		2431463

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	2822767	
(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)		2822767
f Corrective distributions (see instructions)	2f		25553
g Certain deemed distributions of participant loans (see instructions)	2g		
h Interest expense	2h		
i Administrative expenses: (1) Professional fees	2i(1)	7244	
(2) Contract administrator fees	2i(2)	0	
(3) Investment advisory and management fees	2i(3)		
(4) Other	2i(4)		
(5) Total administrative expenses. Add lines 2i(1) through (4)	2i(5)		7244
j Total expenses. Add all expense amounts in column (b) and enter total	2j		2855564

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		-424101
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) ☒ Disclaimer (4) ☐ Adverse

b Did the accountant perform a limited scope audit pursuant to 29 CFR 2520.103-8 and/or 103-12(d)?

☒ Yes ☐ No

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

(1) Name: RSM US LLP

(2) EIN: 42-0714325

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.)	☒	☐	☐	46169
b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)	☐	☒	☐	

	Yes	No	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.)		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.)		X		
e Was this plan covered by a fidelity bond?	X			500000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		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?		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?		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.)	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.)		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?		X		
l Has the plan failed to provide any benefit when due under the plan?		X		
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)		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.				
o Did the plan trust incur unrelated business taxable income?				
p Were in-service distributions made during the plan year?		X		

5a Has a resolution to terminate the plan been adopted during the plan year or any prior plan year?

If "Yes," enter the amount of any plan assets that reverted to the employer this year. ☐ Yes ☒ No Amount:

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

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

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

Part V Trust Information

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

A Name of plan <u>HEATRON, INC. SAVINGS PLAN</u>	B Three-digit plan number (PN) ▶ <u>002</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>HEATRON, INC.</u>	D Employer Identification Number (EIN) <u>43-1126014</u>

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

1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions.....	1
2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits): EIN(s): <u>01-0233346</u>	
Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.	
3 Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year.....	3

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

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

Part III	Amendments
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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
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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.
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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

For Paperwork Reduction Act Notice and OMB Control Numbers, see the instructions for Form 5500.

Schedule R (Form 5500) 2015
v. 150123

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
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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
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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

Heatron, Inc. Savings Plan

Financial Report
December 31, 2015, and the Period From
October 1, 2014 to December 31, 2014

Contents

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Independent Auditor's Report

To the Plan Participants and the Board of Trustees
Heatron, Inc. Savings Plan
Leavenworth, Kansas

Report on the Financial Statements

We were engaged to audit the accompanying financial statements of Heatron, Inc. Savings Plan (the Plan), which comprise the statements of net assets available for benefits as of December 31, 2015 and 2014, and September 30, 2014; the related statements of changes in net assets available for benefits for the year ended December 31, 2015, and the period from October 1, 2014 to December 31, 2014; and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

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

Auditor's Responsibility

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

Basis for Disclaimer of Opinion

As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the Plan Administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Note 3, which was certified or provided by John Hancock Life Insurance Company (U.S.A.), the custodian of the Plan, except for comparing this information with the related information included in the financial statements. We have been informed by the Plan Administrator that the custodian holds the Plan's assets and executes transactions. The Plan Administrator has obtained certifications from the custodian as of December 31, 2015 and, 2014, and September 30, 2014, and for the year ended December 31, 2015, and the period from October 1, 2014 to December 31, 2014, that the information provided to the Plan Administrator by the custodian is complete and accurate.

Disclaimer of Opinion

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

Emphasis of Matters

As discussed in Note 11 to the financial statements, EC Manufacturing, LLC closed operations during the plan year ended December 31, 2015. This resulted in a partial plan termination.

As discussed in Note 2 to the financial statements, the Plan adopted new accounting guidance related to presentation of fair value of certain investments and disclosure of investments. Prior-year disclosures have also been revised to reflect the retrospective application of adopting these changes in accounting.

Our disclaimer of opinion was not modified with respect to these matters.

Other Matter

The supplemental schedules, Schedule H, Line 4a—Schedule of delinquent participant contributions and Schedule H, Line 4i—Schedule of assets (held at year end) as of or for the year ended December 31, 2015, and as of or for the period from October 1, 2014 to December 31, 2014, 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 purposes of additional analysis and are not a required part of the financial statements. The supplemental schedules are the responsibility of the Plan's management. 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.

Report on Form and Content in Compliance With the Department of Labor's 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 or provided by the custodian, have been audited by us in accordance with auditing standards generally accepted in the United States of America and, in our opinion, are presented in compliance with the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974.

RSM US LLP

Kansas City, Missouri
October 12, 2016

Heatron, Inc. Savings Plan

Statements of Net Assets Available for Benefits December 31, 2015 and 2014, and September 30, 2014

	December 31		September 30,
	2015	2014	2014
Assets:			
Investments, at fair value (Notes 3 and 4):			
Pooled separate accounts	\$ 8,464,390	\$ 9,474,630	\$ 8,785,892
Stable value fund	1,038,236	672,452	668,881
Total investments	9,502,626	10,147,082	9,454,773
Receivables:			
Participant contributions	4,000	-	-
Employer contributions	115,240	-	-
Notes from participants	169,057	123,069	123,990
Total receivables	288,297	123,069	123,990
Noninterest-bearing cash (Note 3)	98,519	47,317	23,319
Net assets available for benefits	\$ 9,889,442	\$ 10,317,468	\$ 9,602,082

See notes to financial statements.

Heatron, Inc. Savings Plan

Statements of Changes in Net Assets Available for Benefits

Year Ended December 31, 2015, and the Period From October 1, 2014 to December 31, 2014

	Year Ended December 31, 2015	Period From October 1, 2014 to December 31, 2014
Additions attributed to:		
Net appreciation (depreciation) in fair value of investments (Note 3)	\$ (54,216)	\$ 166,234
Investment income on notes receivable from participants	7,804	1,251
Contributions:		
Participants	1,287,969	421,945
Employer	668,338	265,691
Rollover	517,643	56,375
	<u>2,473,950</u>	<u>744,011</u>
Total additions	2,427,538	911,496
Deductions:		
Benefits paid to participants	2,848,320	193,852
Administrative expenses (Note 7)	7,244	2,258
Total deductions	2,855,564	196,110
Net increase (decrease)	(428,026)	715,386
Net assets available for benefits:		
Beginning of year	<u>10,317,468</u>	<u>9,602,082</u>
End of year	<u>\$ 9,889,442</u>	<u>\$ 10,317,468</u>

See notes to financial statements.

Heatron, Inc. Savings Plan

Notes to Financial Statements

Note 1. Description of Plan

The following description of the Heatron, Inc. Savings Plan (the Plan) provides only general information. Participants should refer to the plan agreement for a complete description of the Plan's provisions.

General: The Plan is a defined contribution plan established for the benefit of the employees of Heatron, Inc. and EC Manufacturing, LLC, an affiliate of Heatron, Inc. (collectively, the Company). The Plan is intended to satisfy all of the requirements for a qualified retirement plan under the appropriate provisions of the Internal Revenue Code (IRC) and similar state laws. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA).

In September 2015, EC Manufacturing, LLC made a formal decision to close its operations, which resulted in a partial plan termination. See Note 11 for further discussion.

Eligibility: Employees of the Company, with the exception of temporary employees, are eligible to participate in the salary reduction and discretionary matching contributions of the Plan upon employment with the Company. Each new participant who was not a participant on September 30, 2006, and who does not enter into a written salary reduction agreement is automatically enrolled at 3 percent. Also, employees are eligible for a discretionary contribution if made by the Company.

Contributions: Each year participants may make salary reduction contributions to the Plan, subject to provisions of the IRC. Participants who have obtained the age of 50 before the end of the plan year are eligible to make catch-up contributions. The Plan also includes an option for Roth salary reduction contributions. Participants may also contribute amounts representing distributions from other qualified defined benefit or defined contribution plans. Beginning July 19, 2013, the Company approved a discretionary match of 3 percent of eligible wages. This match was effective for the whole plan year ended December 31, 2015, and for the period from October 1, 2014 to December 31, 2014. The Company may also make a nonelective discretionary contribution. For the year ended December 31, 2015, and the period from October 1, 2014 to December 31, 2014, there were no nonelective discretionary contributions made. Contributions are subject to certain limitations.

Investments: Participants have the option of directing their contributions, the allocations of the employer discretionary matching contribution, and the employer discretionary contribution to various accounts managed by John Hancock Life Insurance Company (U.S.A.). Participants may change their options daily via direct phone access or online with John Hancock Life Insurance Company (U.S.A.).

Participant accounts: Each participant's account is credited with the participant's salary reduction contribution, the employer's discretionary matching contribution, the employer's nonelective discretionary contribution (if any), and plan earnings. Allocations are based on participant earnings or account balances, as defined by the Plan. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

Forfeitures: At December 31, 2015 and 2014, and September 30, 2014, forfeited nonvested accounts totaled \$98,519, \$47,317 and \$23,319, respectively. These accounts are used to pay plan administrative expenses and reduce employer contributions. During the year ended December 31, 2015, \$189,095 of forfeitures were used to reduce employer contributions and administrative expenses. During the period from October 1, 2014 to December 31, 2014, no forfeitures were used to reduce employer contributions and administrative expenses.

Heatron, Inc. Savings Plan

Notes to Financial Statements

Note 1. Description of Plan (Continued)

Notes receivable from participants: Participants may borrow from their fund accounts a minimum of \$500 up to a maximum equal to the lesser of \$50,000 or 50 percent of the account balance. These transactions are treated as a transfer to (from) the investment fund from (to) the participant notes receivable fund. The term of the notes receivable cannot exceed five years, except for a notes receivable used to acquire a principal residence. The notes receivable must be adequately secured by the vested account balance and they bear interest at rates ranging from 3.25 percent to 4.25 percent, which are commensurate with local prevailing rates. Principal and interest are paid ratably through payroll deductions. Notes receivable from participants are measured at unpaid principal balance plus any accrued but unpaid interest. Delinquent notes receivable are treated as distributions based on terms of the plan document.

Vesting: Participants are vested immediately in their contributions and earnings thereon. Participants vest in the Company's discretionary matching contribution and nonelective discretionary contributions and earnings thereon based on years of continuous service. A participant is fully vested after three years of credited service, in accordance with the following vesting schedule:

Years of Service	Vesting
Less than 2	0%
2	50%
3	100%

As described in the emphasis-of-matter paragraph in the independent auditor's report, EC Manufacturing, LLC employees affected by the closing became fully vested at 100 percent, regardless of the years of service. See Note 11 for further discussion.

Payment of benefits: On termination of service due to termination, death, retirement, disability or financial hardship, the participant or beneficiary may withdraw the participant's vested balance as a lump-sum payment.

Note 2. Significant Accounting Policies

A summary of the significant accounting policies consistently applied in the preparation of the accompanying financial statements follows.

Basis of accounting: The accompanying financial statements of the Plan are presented on the accrual method of accounting.

Valuation of investments and income recognition: The Plan's investments are stated at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. The Plan's Board of Trustees determine the Plan's valuation policies for utilizing information provided by the investment custodian. See Note 4 for a discussion of fair value measurements.

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

Heatron, Inc. Savings Plan

Notes to Financial Statements

Note 2. Significant Accounting Policies (Continued)

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

Payment of benefits: Benefit payments to participants are recorded when paid.

Recently issued accounting pronouncements: In May 2015, the Financial Accounting Standards Board (FASB) issued Accounting Standards Update (ASU) No. 2015-07, *Fair Value Measurement (Topic 820): Disclosures for Investments in Certain Entities That Calculate Net Asset Value per Share (or Its Equivalent)*. ASU 2015-07 removes the requirement to categorize within the fair value hierarchy all investments for which fair value is measured using the net asset value (NAV) per share practical expedient. However, sufficient information must be provided to permit reconciliation of fair value of assets categorized within the fair value hierarchy to amounts presented in the statement of net assets available for benefits. ASU 2015-07 also removes the requirement to make certain disclosures for all investments that are eligible to be measured at fair value using the NAV per share practical expedient. Upon adoption, ASU 2015-07 shall be applied retrospectively to all periods presented. The Plan adopted ASU 2015-07 for the plan year ended December 31, 2015, and for the period from October 1, 2014 to December 31, 2014. There was no impact to the Plan's financial statements for the adoption of ASU 2015-07 when retrospectively applied to the year ended September 30, 2014.

In July 2015, the FASB issued 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, and (Part III) Measurement Date Practical Expedient (consensus of the FASB Emerging Issues Task Force)*. The purpose of this update is to simplify plan accounting.

- The amendments in Part I of this update designate contract value as the only required measure for direct investments in fully benefit-responsive investment contracts. Fully benefit-responsive investment contracts will be presented at contract value; accordingly, there will no longer be an adjustment from fair value to contract value on the face of the financial statements.
- The amendments in Part II of this update will eliminate the requirements for plans to disclose (1) individual investments that represent 5 percent or more of net assets available for benefits and (2) the net appreciation or depreciation for investments by general type for both participant-directed investments and nonparticipant-directed investments. The net appreciation or depreciation in investments for the period will still be required to be presented in the aggregate. In addition, if an investment is measured using the net asset value per share (or its equivalent) practical expedient in Topic 820 and that investment is in a fund that files a U.S. Department of Labor Form 5500, Annual Return/Report of Employee Benefit Plan, as a direct filing entity, disclosure of that investment's strategy will no longer be required.
- The amendments in Part III of this update reduce complexity in employee benefit plan accounting by providing a practical expedient that permits plans to measure investments and investment-related accounts as of a month-end date that is closest to the plan's fiscal year-end, when the fiscal period does not coincide with month-end.

Heatron, Inc. Savings Plan

Notes to Financial Statements

Note 2. Significant Accounting Policies (Continued)

The update may be adopted in whole or by part (I, II and III), as applicable. The amendments in this update are effective for fiscal years beginning after December 15, 2015. Early adoption is permitted. Upon adoption, the amendments in Parts I and II shall be applied retrospectively to all periods presented; the amendments in Part III shall be applied prospectively. The Plan adopted each part of the amendments in this update for the 2015 plan year, and the amendments in Parts I and II were retrospectively applied to December 31, 2014, and September 30, 2014. Prior-year disclosures in Notes 3 and 4 have been revised to reflect the retrospective application. The impact of adopting these amendments is reflected in the financial statements.

Note 3. Information Certified or Provided by John Hancock Life Insurance Company (U.S.A.)

The following is a summary of the Plan's asset information as of December 31, 2015 and 2014, and September 30, 2014, and for the year ended December 31, 2015, and the period from October 1, 2014 to December 31, 2014, included throughout the Plan's financial statements and supplemental schedules, that was prepared by or derived from information provided by the custodian and furnished to the Plan Administrator. The Plan Administrator has obtained a certification from the custodian that information provided to the Plan Administrator by the custodian related to the following assets is complete and accurate. Accordingly, as permitted by 29 CFR 2520.103-8 of the Department of Labor (DOL)'s Rules and Regulations for Reporting and Disclosure under ERISA, the Plan Administrator instructed the Plan's independent auditors not to perform any auditing procedures with respect to information in Note 4 and the supplemental schedules related to the following assets:

	December 31		September 30,
	2015	2014	2014
Investments:			
Pooled separate accounts	\$ 8,464,390	\$ 9,474,630	\$ 8,785,892
Stable value fund	1,038,236	672,452	668,881

John Hancock Life Insurance Company (U.S.A.) also certified to the completeness and accuracy of \$54,216 of net depreciation and \$166,234 of net appreciation in fair value of investments related to the aforementioned plan assets for the year ended December 31, 2015, and the period from October 1, 2014 to December 31, 2014, respectively.

Heatron, Inc. Savings Plan

Notes to Financial Statements

Note 4. 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 the *FASB Accounting Standards Codification* (ASC) Topic 820 are described below:

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

Level 2: Inputs to the valuation methodology include:

- Quoted prices for similar assets or liabilities in active markets
- Quoted prices for identical or similar assets or liabilities in inactive markets
- Inputs other than quoted prices that are observable for the asset or liability
- Inputs that are derived principally from or corroborated by observable market data by correlation or other means

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

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

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

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, and September 30, 2014.

Pooled separate accounts: Pooled separate accounts are valued based on the NAV of the underlying assets held by the Plan at the end of the plan year.

Stable value fund: Stable value fund is valued at the NAV of the underlying assets held by the Plan at the end of the plan year.

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

Heatron, Inc. Savings Plan

Notes to Financial Statements

Note 4. Fair Value Measurements (Continued)

The following tables set forth by level, within the fair value hierarchy, the Plan's assets at fair value as of December 31, 2015 and 2014, and September 30, 2014.

	Assets at Fair Value as of December 31, 2015			
	Level 1	Level 2	Level 3	Total
Pooled separate accounts	\$ 8,464,390	\$ -	\$ -	\$ 8,464,390
Stable value fund (a)	-	-	-	1,038,236
Total assets at fair value	\$ 8,464,390	\$ -	\$ -	\$ 9,502,626

	Assets at Fair Value as of December 31, 2014			
	Level 1	Level 2	Level 3	Total
Pooled separate accounts	\$ 9,474,630	\$ -	\$ -	\$ 9,474,630
Stable value fund (a)	-	-	-	672,452
Total assets at fair value	\$ 9,474,630	\$ -	\$ -	\$ 10,147,082

	Assets at Fair Value as of September 30, 2014			
	Level 1	Level 2	Level 3	Total
Pooled separate accounts	\$ 8,785,892	\$ -	\$ -	\$ 8,785,892
Stable value fund (a)	-	-	-	668,881
Total assets at fair value	\$ 8,785,892	\$ -	\$ -	\$ 9,454,773

(a) In accordance with ASC Subtopic 820-10, the stable value fund held by the Plan is not classified in the fair value hierarchy table that prioritizes the inputs to valuation techniques used to measure fair value because they are measured at NAV per share as a practical expedient.

Changes in fair value levels: To assess the appropriate classification of investments within the fair value hierarchy, the availability of market data is monitored. Changes in economic conditions or valuation techniques may require the transfer of investments from one fair value level to another. In such instances, the transfer is reported at the beginning of the reporting period.

The Board of Trustees evaluates the significance of transfers between levels based upon the nature of the investment and size of the transfer relative to total net assets available for benefits. For the year ended December 31, 2015, and the period from October 1, 2014 to December 31, 2014, there were no transfers in or out of Level 3.

The following table sets forth additional disclosures of the Plan's investments whose fair value is estimated using NAVs per share (or its equivalent) as of December 31, 2015 and 2014, and September 30, 2014.

Investment	Fair Value			Unfunded Commitment	Redemption Frequency	Redemption Notice Period
	December 31		September 30, 2014			
	2015	2014				
Stable value fund	\$ 1,038,236	\$ 672,452	\$ 668,881	\$ -	Daily	None

Heatron, Inc. Savings Plan

Notes to Financial Statements

Note 5. Administrative Expenses

Certain administrative functions are performed by officers or employees of the Company. No such officer or employee receives compensation from the Plan. Certain other administrative expenses are paid directly by the Company and by the Plan.

Note 6. Income Tax Status

On September 29, 2011, the Plan obtained its latest determination letter, in which the Internal Revenue Service stated that the Plan, as then designed, was in compliance with the applicable requirements of the IRC. Although the Plan has been amended since receiving the determination letter, the Plan Administrator believes that the Plan is designed, and is currently being operated, in compliance with the applicable requirements of the IRC.

Accounting principles generally accepted in the United States of America require plan management to evaluate tax positions taken by the Plan. Management evaluated the Plan's tax positions and concluded that the Plan had maintained its tax-exempt status and had taken no uncertain tax positions that require recognition or disclosure in the financial statements. Therefore, no provision or liability for income taxes has been included in the financial statements.

Note 7. Related-Party Transactions

Certain plan investments are shares of pooled separate accounts and a stable value fund managed by John Hancock Life Insurance Company (U.S.A.). John Hancock Life Insurance Company (U.S.A.) is the custodian as defined by the Plan and, therefore, these transactions qualify as party-in-interest transactions. Fees paid by the Plan for the investment management services are netted against investment income. In addition, other administrative expenses paid to John Hancock Life Insurance Company (U.S.A.) were \$7,244, and \$2,188 for the year ended December 31, 2015, and the period from October 1, 2014 to December 31, 2014, respectively.

Note 8. Plan Termination

Although it has not expressed intent to do so, the Company has the right under the Plan to discontinue its contributions at any time and to terminate or amend the Plan subject to the provisions of ERISA. In the event of plan termination, participants will become 100 percent vested in their discretionary Company contributions.

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 statements of net assets available for benefits.

Note 10. Prohibited Transactions

The Plan Sponsor inadvertently failed to timely deposit \$46,123 and \$46 of participant deferrals within the required time frame as stated by the DOL for the year ended December 31, 2015, and September 30, 2014, respectively. The DOL considers late deposits to be prohibited transactions. The Plan Sponsor will file a Form 5330 and pay the applicable excise tax in 2016 for the 2015 late deposits. The Plan Sponsor filed a Form 5330 and paid the applicable excise tax in 2015 for the 2014 late deposits. Excise tax payments are made from the Plan Sponsor's assets and net from the assets of the Plan.

Heatron, Inc. Savings Plan

Notes to Financial Statements

Note 11. Partial Plan Termination

In 2015, the Company shut down operations of EC Manufacturing, LLC, which resulted in a partial plan termination. This affected 653 participants, 329 of whom have taken distributions of approximately \$1,045,158 as of December 31, 2015. Approximately \$1,179,000 remains payable to affected participants. Those participants affected by the partial plan termination became fully vested in their account balance, and the Plan will restore and distribute \$193,957 to affected participants in 2016 that were previously forfeited in 2015. The Company will contribute \$113,957, in addition to forfeitures, to the Plan for the restoration of forfeitures owed to the affected participants. The amount to be contributed by the Company is shown as an employer receivable on the statement of net assets available for benefits.

Note 12. Reconciliation of the Financial Statements to the Form 5500

The following is a reconciliation of net assets available for benefits per the financial statements as of December 31, 2015 and 2014, and September 30, 2014:

	December 31		September 30,
	2015	2014	2014
Net assets available for benefits per the financial statements	\$ 9,889,442	\$ 10,317,468	\$ 9,602,082
Less other liabilities	-	(3,925)	-
Net assets available for benefits per Form 5500	\$ 9,889,442	\$ 10,313,543	\$ 9,602,082

The following is a reconciliation of the net increase (decrease) in assets available for benefits per the financial statements for the year ended December 31, 2015, and the period from October 1, 2014 to December 31, 2014:

	Year Ended December 31, 2015	Period From October 1, 2014 to December 31, 2014
Net increase (decrease) in net assets available for benefits per the financial statements	\$ (428,026)	\$ 715,386
Participant contributions	3,925	(3,925)
Net increase (decrease) in net assets available for benefits per the Form 5500	\$ (424,101)	\$ 711,461

Note 13. Subsequent Events

The Plan Administrator has evaluated subsequent events through October 12, 2016, the date the financial statements were available to be issued.

Heatron, Inc. Savings Plan
Employer Identification Number 43-1126014, Plan Number 002

Schedule H, Line 4a—Schedule of Delinquent Participant Contributions
Year Ended December 31, 2015

Participant contributions transferred late to Plan: \$ 46,169	Total that constitute prohibited nonexempt transactions: \$ 46,169			
Check here if late participant loan repayments are included: ☐	Contributions Not Corrected	Contributions Corrected Outside of VFCP	Contributions Pending in VFCP	Total fully Corrected Under VFCP and PTE 2002-51
2014	\$ -	\$ 46	\$ -	\$ -
2015	46,123	-	-	-

Participant contributions were not remitted in a timely manner for the year ended September 30, 2014. Form 5330 was filed with applicable excise taxes for the 2014 delinquent contributions in 2015.

Participant contributions were not remitted in a timely manner during the year ended December 31, 2015. Form 5330 will be filed with applicable excise taxes for the 2015 delinquent contributions in 2016.

Heatron, Inc. Savings Plan
Employer Identification Number 43-1126014, Plan Number 002

Schedule H, Line 4a—Schedule of Delinquent Participant Contributions
Period From October 1, 2014 to December 31, 2014

Participant contributions transferred late to Plan: \$ 46	Total that constitute prohibited nonexempt transactions: \$ 46			
Check here if late participant loan repayments are included: []	Contributions Not Corrected	Contributions Corrected Outside of VFCP	Contributions Pending in VFCP	Total fully Corrected Under VFCP and PTE 2002-51

2014	\$ 46	\$ -	\$ -	\$ -
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Participant contributions were not remitted in a timely manner for the year ended September 30, 2014.
Form 5330 will be filed with applicable excise taxes for the 2014 delinquent contributions in 2015.

Heatron, Inc. Savings Plan
Employer Identification Number 43-1126014, Plan Number 002

Schedule H, Line 4i—Schedule of Assets (Held at End of Year)
December 31, 2015

Identity of Issue, Borrower, Lessor or Similar Party	Description of Investment, Including Maturity Date, Rate of Interest, Collateral, Par or Maturity	Fair Value
Pooled separate accounts:		
John Hancock*	Lifestyle Conservative	\$ 625,149
John Hancock*	Lifestyle Moderate	376,566
John Hancock*	Lifestyle Balanced	1,191,226
John Hancock*	Lifestyle Growth	1,254,431
John Hancock*	Lifestyle Aggressive	716,572
John Hancock*	The Investment Company of America	14,766
John Hancock*	The Growth Fund of America	163,915
John Hancock*	Europacific Growth Fund	59,190
John Hancock*	Real Return Bond Fund	48,843
John Hancock*	High Yield Fund	68,350
John Hancock*	Equity Income Fund	183,693
John Hancock*	Value Fund	77,198
John Hancock*	Real Estate Securities Fund	28,410
John Hancock*	Utilities Fund	56,732
John Hancock*	Total Stock Market Index Fund	252,483
John Hancock*	Mid Cap Index Fund	112,821
John Hancock*	International Value Fund	98,799
John Hancock*	Financial Services Fund	94,162
John Hancock*	Natural Resources Fund	18,968
John Hancock*	Mid Cap Stock Fund	229,281
John Hancock*	Small Cap Index Fund	132,500
John Hancock*	Fundamental Investors	81,467
John Hancock*	Mid Value Fund	9,651
John Hancock*	Small Cap Value Index Fund	2,738
John Hancock*	BlackRock Global Allocation Fund	262,078
John Hancock*	Capital World Growth and Income Fund	32,291
John Hancock*	T. Rowe Price Health Sciences Fun	380,094
John Hancock*	Small Cap Growth Index Fund	247,283
John Hancock*	T. Rowe Price Science & Technology Fund	242,193
John Hancock*	Oppenheimer Developing Markets Fund	50,772
John Hancock*	Smallcap World Fund	124,183
John Hancock*	Capital Income Builder	15,248
John Hancock*	Retirement Choices 2010	2,249
John Hancock*	Retirement Choices 2015	3,232
John Hancock*	Retirement Choices 2020	184,484
John Hancock*	Retirement Choices 2025	202,912
John Hancock*	Retirement Choices 2030	115,721
Balance forward		7,760,651

(Continued)

Heatron, Inc. Savings Plan
Employer Identification Number 43-1126014, Plan Number 002

Schedule H, Line 4i—Schedule of Assets (Held at End of Year) (Continued)
December 31, 2015

Identity of Issue, Borrower, Lessor or Similar Party	Description of Investment, Including Maturity Date, Rate of Interest, Collateral, Par or Maturity	Fair Value
Balance forward		\$ 7,760,651
Pooled separate accounts (continued):		
John Hancock*	Retirement Choices 2035	104,127
John Hancock*	Retirement Choices 2040	53,655
John Hancock*	Retirement Choices 2045	102,477
John Hancock*	Retirement Choices 2050	90,358
John Hancock*	Retirement Choices 2055	92,247
John Hancock*	FT GL Bond	7,191
John Hancock*	US Small Cap	82,465
John Hancock*	Strategic Income Opp Fund	12,002
John Hancock*	Active Bond Fund	159,217
		<u>8,464,390</u>
Stable value fund:		
John Hancock*	John Hancock Stable Value	1,038,236
Participants*	Various loans, interest rates ranging from 3.25% to 4.25%, maturity dates through March 2025	<u>169,057</u>
		<u><u>\$ 9,671,683</u></u>

*Represents a party in interest

The accompanying notes to the financial statements are an integral part of this schedule. The above information, except for notes from participants, has been certified by John Hancock Life Insurance Company (U.S.A), the custodian of the Plan, as complete and accurate.

Heatron, Inc. Savings Plan
Employer Identification Number 43-1126014, Plan Number 002

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

Identity of Issue, Borrower, Lessor or Similar Party	Description of Investment, Including Maturity Date, Rate of Interest, Collateral, Par or Maturity	Fair Value
Pooled separate accounts:		
John Hancock*	Lifestyle Conservative	\$ 616,759
John Hancock*	Lifestyle Moderate	427,512
John Hancock*	Lifestyle Balanced	1,036,151
John Hancock*	Lifestyle Growth	1,490,856
John Hancock*	Lifestyle Aggressive	955,460
John Hancock*	The Investment Company of America	42,234
John Hancock*	The Growth Fund of America	205,454
John Hancock*	Europacific Growth Fund	108,846
John Hancock*	Real Return Bond Fund	86,321
John Hancock*	Total Return Fund	121,249
John Hancock*	High Yield Fund	187,234
John Hancock*	Equity Income Fund	244,988
John Hancock*	Value Fund	68,954
John Hancock*	Real Estate Securities Fund	40,374
John Hancock*	Utilities Fund	182,695
John Hancock*	Total Stock Market Index Fund	223,241
John Hancock*	Mid Cap Index Fund	174,471
John Hancock*	International Value Fund	84,753
John Hancock*	Financial Services Fund	31,477
John Hancock*	Natural Resources Fund	39,080
John Hancock*	Mid Cap Stock Fund	266,768
John Hancock*	Small Cap Index Fund	123,383
John Hancock*	Fundamental Investors	92,993
John Hancock*	Mid Value Fund	15,998
John Hancock*	Small Cap Value Index Fund	21,287
John Hancock*	BlackRock Global Allocation Fund	249,120
John Hancock*	Capital World Growth and Income Fund	34,306
John Hancock*	T. Rowe Price Health Sciences Fun	522,647
John Hancock*	Small Cap Growth Index Fund	293,251
John Hancock*	T. Rowe Price Science & Technology Fund	222,477
John Hancock*	Oppenheimer Developing Markets Fund	78,884
John Hancock*	Smallcap World Fund	215,302
John Hancock*	Capital Income Builder	114,173
John Hancock*	Retirement Choices 2010	1,912
John Hancock*	Retirement Choices 2015	1,597
John Hancock*	Retirement Choices 2020	170,871
John Hancock*	Retirement Choices 2025	33,975
Balance forward		8,827,053

(Continued)

Heatron, Inc. Savings Plan
Employer Identification Number 43-1126014, Plan Number 002

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

Identity of Issue, Borrower, Lessor or Similar Party	Description of Investment, Including Maturity Date, Rate of Interest, Collateral, Par or Maturity	Fair Value
Balance forward		\$ 8,827,053
Pooled separate accounts (continued):		
John Hancock*	Retirement Choices 2030	104,984
John Hancock*	Retirement Choices 2035	95,313
John Hancock*	Retirement Choices 2040	62,481
John Hancock*	Retirement Choices 2045	120,417
John Hancock*	Retirement Choices 2050	115,662
John Hancock*	Retirement Choices 2055	47,109
John Hancock*	FT GL Bond	10,261
John Hancock*	US Small Cap	91,307
John Hancock*	Strategic Income Opp Fund	43
		<u>9,474,630</u>
Stable value fund		
John Hancock*	John Hancock Stable Value	672,452
Participants*	Various loans, interest rates ranging from 3.25% to 4.25%, maturity dates through November 2019	<u>123,069</u>
		<u><u>\$ 10,270,151</u></u>

*Represents a party in interest

The accompanying notes to the financial statements are an integral part of this schedule. The above information, except for notes from participants, has been certified by John Hancock Life Insurance Company (U.S.A), the custodian of the Plan, as complete and accurate.

Heatron, Inc. Savings Plan
Employer Identification Number 43-1126014, Plan Number 002

Schedule H, Line 4a—Schedule of Delinquent Participant Contributions
Year Ended December 31, 2015

Participant contributions transferred late to Plan: \$ 46,169	Total that constitute prohibited nonexempt transactions: \$ 46,169			
Check here if late participant loan repayments are included: ☐	Contributions Not Corrected	Contributions Corrected Outside of VFCP	Contributions Pending in VFCP	Total fully Corrected Under VFCP and PTE 2002-51
2014	\$ -	\$ 46	\$ -	\$ -
2015	46,123	-	-	-

Participant contributions were not remitted in a timely manner for the year ended September 30, 2014. Form 5330 was filed with applicable excise taxes for the 2014 delinquent contributions in 2015.

Participant contributions were not remitted in a timely manner during the year ended December 31, 2015. Form 5330 will be filed with applicable excise taxes for the 2015 delinquent contributions in 2016.

Heatron, Inc. Savings Plan
Employer Identification Number 43-1126014, Plan Number 002

Schedule H, Line 4a—Schedule of Delinquent Participant Contributions
Period From October 1, 2014 to December 31, 2014

Participant contributions transferred late to Plan: \$ 46	Total that constitute prohibited nonexempt transactions: \$ 46			
Check here if late participant loan repayments are included: []	Contributions Not Corrected	Contributions Corrected Outside of VFCP	Contributions Pending in VFCP	Total fully Corrected Under VFCP and PTE 2002-51

2014 \$ 46 \$ - \$ - \$ -

Participant contributions were not remitted in a timely manner for the year ended September 30, 2014.
Form 5330 will be filed with applicable excise taxes for the 2014 delinquent contributions in 2015.

Heatron, Inc. Savings Plan

Financial Report
December 31, 2015, and the Period From
October 1, 2014 to December 31, 2014

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Independent Auditor's Report

To the Plan Participants and the Board of Trustees
Heatron, Inc. Savings Plan
Leavenworth, Kansas

Report on the Financial Statements

We were engaged to audit the accompanying financial statements of Heatron, Inc. Savings Plan (the Plan), which comprise the statements of net assets available for benefits as of December 31, 2015 and 2014, and September 30, 2014; the related statements of changes in net assets available for benefits for the year ended December 31, 2015, and the period from October 1, 2014 to December 31, 2014; and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

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

Auditor's Responsibility

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

Basis for Disclaimer of Opinion

As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the Plan Administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Note 3, which was certified or provided by John Hancock Life Insurance Company (U.S.A.), the custodian of the Plan, except for comparing this information with the related information included in the financial statements. We have been informed by the Plan Administrator that the custodian holds the Plan's assets and executes transactions. The Plan Administrator has obtained certifications from the custodian as of December 31, 2015 and, 2014, and September 30, 2014, and for the year ended December 31, 2015, and the period from October 1, 2014 to December 31, 2014, that the information provided to the Plan Administrator by the custodian is complete and accurate.

Disclaimer of Opinion

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

Emphasis of Matters

As discussed in Note 11 to the financial statements, EC Manufacturing, LLC closed operations during the plan year ended December 31, 2015. This resulted in a partial plan termination.

As discussed in Note 2 to the financial statements, the Plan adopted new accounting guidance related to presentation of fair value of certain investments and disclosure of investments. Prior-year disclosures have also been revised to reflect the retrospective application of adopting these changes in accounting.

Our disclaimer of opinion was not modified with respect to these matters.

Other Matter

The supplemental schedules, Schedule H, Line 4a—Schedule of delinquent participant contributions and Schedule H, Line 4i—Schedule of assets (held at year end) as of or for the year ended December 31, 2015, and as of or for the period from October 1, 2014 to December 31, 2014, 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 purposes of additional analysis and are not a required part of the financial statements. The supplemental schedules are the responsibility of the Plan's management. 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.

Report on Form and Content in Compliance With the Department of Labor's 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 or provided by the custodian, have been audited by us in accordance with auditing standards generally accepted in the United States of America and, in our opinion, are presented in compliance with the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974.

RSM US LLP

Kansas City, Missouri
October 12, 2016

Heatron, Inc. Savings Plan

Statements of Net Assets Available for Benefits December 31, 2015 and 2014, and September 30, 2014

	December 31		September 30,
	2015	2014	2014
Assets:			
Investments, at fair value (Notes 3 and 4):			
Pooled separate accounts	\$ 8,464,390	\$ 9,474,630	\$ 8,785,892
Stable value fund	1,038,236	672,452	668,881
Total investments	9,502,626	10,147,082	9,454,773
Receivables:			
Participant contributions	4,000	-	-
Employer contributions	115,240	-	-
Notes from participants	169,057	123,069	123,990
Total receivables	288,297	123,069	123,990
Noninterest-bearing cash (Note 3)	98,519	47,317	23,319
Net assets available for benefits	\$ 9,889,442	\$ 10,317,468	\$ 9,602,082

See notes to financial statements.

Heatron, Inc. Savings Plan

Statements of Changes in Net Assets Available for Benefits

Year Ended December 31, 2015, and the Period From October 1, 2014 to December 31, 2014

	Year Ended December 31, 2015	Period From October 1, 2014 to December 31, 2014
Additions attributed to:		
Net appreciation (depreciation) in fair value of investments (Note 3)	\$ (54,216)	\$ 166,234
Investment income on notes receivable from participants	7,804	1,251
Contributions:		
Participants	1,287,969	421,945
Employer	668,338	265,691
Rollover	517,643	56,375
	<u>2,473,950</u>	<u>744,011</u>
Total additions	2,427,538	911,496
Deductions:		
Benefits paid to participants	2,848,320	193,852
Administrative expenses (Note 7)	7,244	2,258
Total deductions	2,855,564	196,110
Net increase (decrease)	(428,026)	715,386
Net assets available for benefits:		
Beginning of year	<u>10,317,468</u>	<u>9,602,082</u>
End of year	<u>\$ 9,889,442</u>	<u>\$ 10,317,468</u>

See notes to financial statements.

Heatron, Inc. Savings Plan

Notes to Financial Statements

Note 1. Description of Plan

The following description of the Heatron, Inc. Savings Plan (the Plan) provides only general information. Participants should refer to the plan agreement for a complete description of the Plan's provisions.

General: The Plan is a defined contribution plan established for the benefit of the employees of Heatron, Inc. and EC Manufacturing, LLC, an affiliate of Heatron, Inc. (collectively, the Company). The Plan is intended to satisfy all of the requirements for a qualified retirement plan under the appropriate provisions of the Internal Revenue Code (IRC) and similar state laws. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA).

In September 2015, EC Manufacturing, LLC made a formal decision to close its operations, which resulted in a partial plan termination. See Note 11 for further discussion.

Eligibility: Employees of the Company, with the exception of temporary employees, are eligible to participate in the salary reduction and discretionary matching contributions of the Plan upon employment with the Company. Each new participant who was not a participant on September 30, 2006, and who does not enter into a written salary reduction agreement is automatically enrolled at 3 percent. Also, employees are eligible for a discretionary contribution if made by the Company.

Contributions: Each year participants may make salary reduction contributions to the Plan, subject to provisions of the IRC. Participants who have obtained the age of 50 before the end of the plan year are eligible to make catch-up contributions. The Plan also includes an option for Roth salary reduction contributions. Participants may also contribute amounts representing distributions from other qualified defined benefit or defined contribution plans. Beginning July 19, 2013, the Company approved a discretionary match of 3 percent of eligible wages. This match was effective for the whole plan year ended December 31, 2015, and for the period from October 1, 2014 to December 31, 2014. The Company may also make a nonelective discretionary contribution. For the year ended December 31, 2015, and the period from October 1, 2014 to December 31, 2014, there were no nonelective discretionary contributions made. Contributions are subject to certain limitations.

Investments: Participants have the option of directing their contributions, the allocations of the employer discretionary matching contribution, and the employer discretionary contribution to various accounts managed by John Hancock Life Insurance Company (U.S.A.). Participants may change their options daily via direct phone access or online with John Hancock Life Insurance Company (U.S.A.).

Participant accounts: Each participant's account is credited with the participant's salary reduction contribution, the employer's discretionary matching contribution, the employer's nonelective discretionary contribution (if any), and plan earnings. Allocations are based on participant earnings or account balances, as defined by the Plan. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

Forfeitures: At December 31, 2015 and 2014, and September 30, 2014, forfeited nonvested accounts totaled \$98,519, \$47,317 and \$23,319, respectively. These accounts are used to pay plan administrative expenses and reduce employer contributions. During the year ended December 31, 2015, \$189,095 of forfeitures were used to reduce employer contributions and administrative expenses. During the period from October 1, 2014 to December 31, 2014, no forfeitures were used to reduce employer contributions and administrative expenses.

Heatron, Inc. Savings Plan

Notes to Financial Statements

Note 1. Description of Plan (Continued)

Notes receivable from participants: Participants may borrow from their fund accounts a minimum of \$500 up to a maximum equal to the lesser of \$50,000 or 50 percent of the account balance. These transactions are treated as a transfer to (from) the investment fund from (to) the participant notes receivable fund. The term of the notes receivable cannot exceed five years, except for a notes receivable used to acquire a principal residence. The notes receivable must be adequately secured by the vested account balance and they bear interest at rates ranging from 3.25 percent to 4.25 percent, which are commensurate with local prevailing rates. Principal and interest are paid ratably through payroll deductions. Notes receivable from participants are measured at unpaid principal balance plus any accrued but unpaid interest. Delinquent notes receivable are treated as distributions based on terms of the plan document.

Vesting: Participants are vested immediately in their contributions and earnings thereon. Participants vest in the Company's discretionary matching contribution and nonelective discretionary contributions and earnings thereon based on years of continuous service. A participant is fully vested after three years of credited service, in accordance with the following vesting schedule:

Years of Service	Vesting
Less than 2	0%
2	50%
3	100%

As described in the emphasis-of-matter paragraph in the independent auditor's report, EC Manufacturing, LLC employees affected by the closing became fully vested at 100 percent, regardless of the years of service. See Note 11 for further discussion.

Payment of benefits: On termination of service due to termination, death, retirement, disability or financial hardship, the participant or beneficiary may withdraw the participant's vested balance as a lump-sum payment.

Note 2. Significant Accounting Policies

A summary of the significant accounting policies consistently applied in the preparation of the accompanying financial statements follows.

Basis of accounting: The accompanying financial statements of the Plan are presented on the accrual method of accounting.

Valuation of investments and income recognition: The Plan's investments are stated at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. The Plan's Board of Trustees determine the Plan's valuation policies for utilizing information provided by the investment custodian. See Note 4 for a discussion of fair value measurements.

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

Heatron, Inc. Savings Plan

Notes to Financial Statements

Note 2. Significant Accounting Policies (Continued)

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

Payment of benefits: Benefit payments to participants are recorded when paid.

Recently issued accounting pronouncements: In May 2015, the Financial Accounting Standards Board (FASB) issued Accounting Standards Update (ASU) No. 2015-07, *Fair Value Measurement (Topic 820): Disclosures for Investments in Certain Entities That Calculate Net Asset Value per Share (or Its Equivalent)*. ASU 2015-07 removes the requirement to categorize within the fair value hierarchy all investments for which fair value is measured using the net asset value (NAV) per share practical expedient. However, sufficient information must be provided to permit reconciliation of fair value of assets categorized within the fair value hierarchy to amounts presented in the statement of net assets available for benefits. ASU 2015-07 also removes the requirement to make certain disclosures for all investments that are eligible to be measured at fair value using the NAV per share practical expedient. Upon adoption, ASU 2015-07 shall be applied retrospectively to all periods presented. The Plan adopted ASU 2015-07 for the plan year ended December 31, 2015, and for the period from October 1, 2014 to December 31, 2014. There was no impact to the Plan's financial statements for the adoption of ASU 2015-07 when retrospectively applied to the year ended September 30, 2014.

In July 2015, the FASB issued 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, and (Part III) Measurement Date Practical Expedient (consensus of the FASB Emerging Issues Task Force)*. The purpose of this update is to simplify plan accounting.

- The amendments in Part I of this update designate contract value as the only required measure for direct investments in fully benefit-responsive investment contracts. Fully benefit-responsive investment contracts will be presented at contract value; accordingly, there will no longer be an adjustment from fair value to contract value on the face of the financial statements.
- The amendments in Part II of this update will eliminate the requirements for plans to disclose (1) individual investments that represent 5 percent or more of net assets available for benefits and (2) the net appreciation or depreciation for investments by general type for both participant-directed investments and nonparticipant-directed investments. The net appreciation or depreciation in investments for the period will still be required to be presented in the aggregate. In addition, if an investment is measured using the net asset value per share (or its equivalent) practical expedient in Topic 820 and that investment is in a fund that files a U.S. Department of Labor Form 5500, Annual Return/Report of Employee Benefit Plan, as a direct filing entity, disclosure of that investment's strategy will no longer be required.
- The amendments in Part III of this update reduce complexity in employee benefit plan accounting by providing a practical expedient that permits plans to measure investments and investment-related accounts as of a month-end date that is closest to the plan's fiscal year-end, when the fiscal period does not coincide with month-end.

Heatron, Inc. Savings Plan

Notes to Financial Statements

Note 2. Significant Accounting Policies (Continued)

The update may be adopted in whole or by part (I, II and III), as applicable. The amendments in this update are effective for fiscal years beginning after December 15, 2015. Early adoption is permitted. Upon adoption, the amendments in Parts I and II shall be applied retrospectively to all periods presented; the amendments in Part III shall be applied prospectively. The Plan adopted each part of the amendments in this update for the 2015 plan year, and the amendments in Parts I and II were retrospectively applied to December 31, 2014, and September 30, 2014. Prior-year disclosures in Notes 3 and 4 have been revised to reflect the retrospective application. The impact of adopting these amendments is reflected in the financial statements.

Note 3. Information Certified or Provided by John Hancock Life Insurance Company (U.S.A.)

The following is a summary of the Plan's asset information as of December 31, 2015 and 2014, and September 30, 2014, and for the year ended December 31, 2015, and the period from October 1, 2014 to December 31, 2014, included throughout the Plan's financial statements and supplemental schedules, that was prepared by or derived from information provided by the custodian and furnished to the Plan Administrator. The Plan Administrator has obtained a certification from the custodian that information provided to the Plan Administrator by the custodian related to the following assets is complete and accurate. Accordingly, as permitted by 29 CFR 2520.103-8 of the Department of Labor (DOL)'s Rules and Regulations for Reporting and Disclosure under ERISA, the Plan Administrator instructed the Plan's independent auditors not to perform any auditing procedures with respect to information in Note 4 and the supplemental schedules related to the following assets:

	December 31		September 30,
	2015	2014	2014
Investments:			
Pooled separate accounts	\$ 8,464,390	\$ 9,474,630	\$ 8,785,892
Stable value fund	1,038,236	672,452	668,881

John Hancock Life Insurance Company (U.S.A.) also certified to the completeness and accuracy of \$54,216 of net depreciation and \$166,234 of net appreciation in fair value of investments related to the aforementioned plan assets for the year ended December 31, 2015, and the period from October 1, 2014 to December 31, 2014, respectively.

Heatron, Inc. Savings Plan

Notes to Financial Statements

Note 4. 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 the *FASB Accounting Standards Codification* (ASC) Topic 820 are described below:

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

Level 2: Inputs to the valuation methodology include:

- Quoted prices for similar assets or liabilities in active markets
- Quoted prices for identical or similar assets or liabilities in inactive markets
- Inputs other than quoted prices that are observable for the asset or liability
- Inputs that are derived principally from or corroborated by observable market data by correlation or other means

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

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

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

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, and September 30, 2014.

Pooled separate accounts: Pooled separate accounts are valued based on the NAV of the underlying assets held by the Plan at the end of the plan year.

Stable value fund: Stable value fund is valued at the NAV of the underlying assets held by the Plan at the end of the plan year.

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

Heatron, Inc. Savings Plan

Notes to Financial Statements

Note 4. Fair Value Measurements (Continued)

The following tables set forth by level, within the fair value hierarchy, the Plan's assets at fair value as of December 31, 2015 and 2014, and September 30, 2014.

	Assets at Fair Value as of December 31, 2015			
	Level 1	Level 2	Level 3	Total
Pooled separate accounts	\$ 8,464,390	\$ -	\$ -	\$ 8,464,390
Stable value fund (a)	-	-	-	1,038,236
Total assets at fair value	\$ 8,464,390	\$ -	\$ -	\$ 9,502,626

	Assets at Fair Value as of December 31, 2014			
	Level 1	Level 2	Level 3	Total
Pooled separate accounts	\$ 9,474,630	\$ -	\$ -	\$ 9,474,630
Stable value fund (a)	-	-	-	672,452
Total assets at fair value	\$ 9,474,630	\$ -	\$ -	\$ 10,147,082

	Assets at Fair Value as of September 30, 2014			
	Level 1	Level 2	Level 3	Total
Pooled separate accounts	\$ 8,785,892	\$ -	\$ -	\$ 8,785,892
Stable value fund (a)	-	-	-	668,881
Total assets at fair value	\$ 8,785,892	\$ -	\$ -	\$ 9,454,773

(a) In accordance with ASC Subtopic 820-10, the stable value fund held by the Plan is not classified in the fair value hierarchy table that prioritizes the inputs to valuation techniques used to measure fair value because they are measured at NAV per share as a practical expedient.

Changes in fair value levels: To assess the appropriate classification of investments within the fair value hierarchy, the availability of market data is monitored. Changes in economic conditions or valuation techniques may require the transfer of investments from one fair value level to another. In such instances, the transfer is reported at the beginning of the reporting period.

The Board of Trustees evaluates the significance of transfers between levels based upon the nature of the investment and size of the transfer relative to total net assets available for benefits. For the year ended December 31, 2015, and the period from October 1, 2014 to December 31, 2014, there were no transfers in or out of Level 3.

The following table sets forth additional disclosures of the Plan's investments whose fair value is estimated using NAVs per share (or its equivalent) as of December 31, 2015 and 2014, and September 30, 2014.

Investment	Fair Value			Unfunded Commitment	Redemption Frequency	Redemption Notice Period
	December 31		September 30, 2014			
	2015	2014				
Stable value fund	\$ 1,038,236	\$ 672,452	\$ 668,881	\$ -	Daily	None

Heatron, Inc. Savings Plan

Notes to Financial Statements

Note 5. Administrative Expenses

Certain administrative functions are performed by officers or employees of the Company. No such officer or employee receives compensation from the Plan. Certain other administrative expenses are paid directly by the Company and by the Plan.

Note 6. Income Tax Status

On September 29, 2011, the Plan obtained its latest determination letter, in which the Internal Revenue Service stated that the Plan, as then designed, was in compliance with the applicable requirements of the IRC. Although the Plan has been amended since receiving the determination letter, the Plan Administrator believes that the Plan is designed, and is currently being operated, in compliance with the applicable requirements of the IRC.

Accounting principles generally accepted in the United States of America require plan management to evaluate tax positions taken by the Plan. Management evaluated the Plan's tax positions and concluded that the Plan had maintained its tax-exempt status and had taken no uncertain tax positions that require recognition or disclosure in the financial statements. Therefore, no provision or liability for income taxes has been included in the financial statements.

Note 7. Related-Party Transactions

Certain plan investments are shares of pooled separate accounts and a stable value fund managed by John Hancock Life Insurance Company (U.S.A.). John Hancock Life Insurance Company (U.S.A.) is the custodian as defined by the Plan and, therefore, these transactions qualify as party-in-interest transactions. Fees paid by the Plan for the investment management services are netted against investment income. In addition, other administrative expenses paid to John Hancock Life Insurance Company (U.S.A.) were \$7,244, and \$2,188 for the year ended December 31, 2015, and the period from October 1, 2014 to December 31, 2014, respectively.

Note 8. Plan Termination

Although it has not expressed intent to do so, the Company has the right under the Plan to discontinue its contributions at any time and to terminate or amend the Plan subject to the provisions of ERISA. In the event of plan termination, participants will become 100 percent vested in their discretionary Company contributions.

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 statements of net assets available for benefits.

Note 10. Prohibited Transactions

The Plan Sponsor inadvertently failed to timely deposit \$46,123 and \$46 of participant deferrals within the required time frame as stated by the DOL for the year ended December 31, 2015, and September 30, 2014, respectively. The DOL considers late deposits to be prohibited transactions. The Plan Sponsor will file a Form 5330 and pay the applicable excise tax in 2016 for the 2015 late deposits. The Plan Sponsor filed a Form 5330 and paid the applicable excise tax in 2015 for the 2014 late deposits. Excise tax payments are made from the Plan Sponsor's assets and net from the assets of the Plan.

Heatron, Inc. Savings Plan

Notes to Financial Statements

Note 11. Partial Plan Termination

In 2015, the Company shut down operations of EC Manufacturing, LLC, which resulted in a partial plan termination. This affected 653 participants, 329 of whom have taken distributions of approximately \$1,045,158 as of December 31, 2015. Approximately \$1,179,000 remains payable to affected participants. Those participants affected by the partial plan termination became fully vested in their account balance, and the Plan will restore and distribute \$193,957 to affected participants in 2016 that were previously forfeited in 2015. The Company will contribute \$113,957, in addition to forfeitures, to the Plan for the restoration of forfeitures owed to the affected participants. The amount to be contributed by the Company is shown as an employer receivable on the statement of net assets available for benefits.

Note 12. Reconciliation of the Financial Statements to the Form 5500

The following is a reconciliation of net assets available for benefits per the financial statements as of December 31, 2015 and 2014, and September 30, 2014:

	December 31		September 30,
	2015	2014	2014
Net assets available for benefits per the financial statements	\$ 9,889,442	\$ 10,317,468	\$ 9,602,082
Less other liabilities	-	(3,925)	-
Net assets available for benefits per Form 5500	\$ 9,889,442	\$ 10,313,543	\$ 9,602,082

The following is a reconciliation of the net increase (decrease) in assets available for benefits per the financial statements for the year ended December 31, 2015, and the period from October 1, 2014 to December 31, 2014:

	Year Ended December 31, 2015	Period From October 1, 2014 to December 31, 2014
Net increase (decrease) in net assets available for benefits per the financial statements	\$ (428,026)	\$ 715,386
Participant contributions	3,925	(3,925)
Net increase (decrease) in net assets available for benefits per the Form 5500	\$ (424,101)	\$ 711,461

Note 13. Subsequent Events

The Plan Administrator has evaluated subsequent events through October 12, 2016, the date the financial statements were available to be issued.

Heatron, Inc. Savings Plan
Employer Identification Number 43-1126014, Plan Number 002

Schedule H, Line 4a—Schedule of Delinquent Participant Contributions
Year Ended December 31, 2015

Participant contributions transferred late to Plan: \$ 46,169	Total that constitute prohibited nonexempt transactions: \$ 46,169			
Check here if late participant loan repayments are included: ☐	Contributions Not Corrected	Contributions Corrected Outside of VFCP	Contributions Pending in VFCP	Total fully Corrected Under VFCP and PTE 2002-51
2014	\$ -	\$ 46	\$ -	\$ -
2015	46,123	-	-	-

Participant contributions were not remitted in a timely manner for the year ended September 30, 2014.
Form 5330 was filed with applicable excise taxes for the 2014 delinquent contributions in 2015.

Participant contributions were not remitted in a timely manner during the year ended December 31, 2015.
Form 5330 will be filed with applicable excise taxes for the 2015 delinquent contributions in 2016.

Heatron, Inc. Savings Plan
Employer Identification Number 43-1126014, Plan Number 002

Schedule H, Line 4a—Schedule of Delinquent Participant Contributions
Period From October 1, 2014 to December 31, 2014

Participant contributions transferred late to Plan: \$ 46	Total that constitute prohibited nonexempt transactions: \$ 46			
Check here if late participant loan repayments are included: []	Contributions Not Corrected	Contributions Corrected Outside of VFCP	Contributions Pending in VFCP	Total fully Corrected Under VFCP and PTE 2002-51

2014 \$ 46 \$ - \$ - \$ -

Participant contributions were not remitted in a timely manner for the year ended September 30, 2014.
Form 5330 will be filed with applicable excise taxes for the 2014 delinquent contributions in 2015.

Heatron, Inc. Savings Plan
Employer Identification Number 43-1126014, Plan Number 002

Schedule H, Line 4i—Schedule of Assets (Held at End of Year)
December 31, 2015

Identity of Issue, Borrower, Lessor or Similar Party	Description of Investment, Including Maturity Date, Rate of Interest, Collateral, Par or Maturity	Fair Value
Pooled separate accounts:		
John Hancock*	Lifestyle Conservative	\$ 625,149
John Hancock*	Lifestyle Moderate	376,566
John Hancock*	Lifestyle Balanced	1,191,226
John Hancock*	Lifestyle Growth	1,254,431
John Hancock*	Lifestyle Aggressive	716,572
John Hancock*	The Investment Company of America	14,766
John Hancock*	The Growth Fund of America	163,915
John Hancock*	Europacific Growth Fund	59,190
John Hancock*	Real Return Bond Fund	48,843
John Hancock*	High Yield Fund	68,350
John Hancock*	Equity Income Fund	183,693
John Hancock*	Value Fund	77,198
John Hancock*	Real Estate Securities Fund	28,410
John Hancock*	Utilities Fund	56,732
John Hancock*	Total Stock Market Index Fund	252,483
John Hancock*	Mid Cap Index Fund	112,821
John Hancock*	International Value Fund	98,799
John Hancock*	Financial Services Fund	94,162
John Hancock*	Natural Resources Fund	18,968
John Hancock*	Mid Cap Stock Fund	229,281
John Hancock*	Small Cap Index Fund	132,500
John Hancock*	Fundamental Investors	81,467
John Hancock*	Mid Value Fund	9,651
John Hancock*	Small Cap Value Index Fund	2,738
John Hancock*	BlackRock Global Allocation Fund	262,078
John Hancock*	Capital World Growth and Income Fund	32,291
John Hancock*	T. Rowe Price Health Sciences Fun	380,094
John Hancock*	Small Cap Growth Index Fund	247,283
John Hancock*	T. Rowe Price Science & Technology Fund	242,193
John Hancock*	Oppenheimer Developing Markets Fund	50,772
John Hancock*	Smallcap World Fund	124,183
John Hancock*	Capital Income Builder	15,248
John Hancock*	Retirement Choices 2010	2,249
John Hancock*	Retirement Choices 2015	3,232
John Hancock*	Retirement Choices 2020	184,484
John Hancock*	Retirement Choices 2025	202,912
John Hancock*	Retirement Choices 2030	115,721
Balance forward		7,760,651

(Continued)

Heatron, Inc. Savings Plan
Employer Identification Number 43-1126014, Plan Number 002

Schedule H, Line 4i—Schedule of Assets (Held at End of Year) (Continued)
December 31, 2015

Identity of Issue, Borrower, Lessor or Similar Party	Description of Investment, Including Maturity Date, Rate of Interest, Collateral, Par or Maturity	Fair Value
Balance forward		\$ 7,760,651
Pooled separate accounts (continued):		
John Hancock*	Retirement Choices 2035	104,127
John Hancock*	Retirement Choices 2040	53,655
John Hancock*	Retirement Choices 2045	102,477
John Hancock*	Retirement Choices 2050	90,358
John Hancock*	Retirement Choices 2055	92,247
John Hancock*	FT GL Bond	7,191
John Hancock*	US Small Cap	82,465
John Hancock*	Strategic Income Opp Fund	12,002
John Hancock*	Active Bond Fund	159,217
		<u>8,464,390</u>
Stable value fund:		
John Hancock*	John Hancock Stable Value	1,038,236
Participants*	Various loans, interest rates ranging from 3.25% to 4.25%, maturity dates through March 2025	<u>169,057</u>
		<u><u>\$ 9,671,683</u></u>

*Represents a party in interest

The accompanying notes to the financial statements are an integral part of this schedule. The above information, except for notes from participants, has been certified by John Hancock Life Insurance Company (U.S.A), the custodian of the Plan, as complete and accurate.

Heatron, Inc. Savings Plan
Employer Identification Number 43-1126014, Plan Number 002

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

Identity of Issue, Borrower, Lessor or Similar Party	Description of Investment, Including Maturity Date, Rate of Interest, Collateral, Par or Maturity	Fair Value
Pooled separate accounts:		
John Hancock*	Lifestyle Conservative	\$ 616,759
John Hancock*	Lifestyle Moderate	427,512
John Hancock*	Lifestyle Balanced	1,036,151
John Hancock*	Lifestyle Growth	1,490,856
John Hancock*	Lifestyle Aggressive	955,460
John Hancock*	The Investment Company of America	42,234
John Hancock*	The Growth Fund of America	205,454
John Hancock*	Europacific Growth Fund	108,846
John Hancock*	Real Return Bond Fund	86,321
John Hancock*	Total Return Fund	121,249
John Hancock*	High Yield Fund	187,234
John Hancock*	Equity Income Fund	244,988
John Hancock*	Value Fund	68,954
John Hancock*	Real Estate Securities Fund	40,374
John Hancock*	Utilities Fund	182,695
John Hancock*	Total Stock Market Index Fund	223,241
John Hancock*	Mid Cap Index Fund	174,471
John Hancock*	International Value Fund	84,753
John Hancock*	Financial Services Fund	31,477
John Hancock*	Natural Resources Fund	39,080
John Hancock*	Mid Cap Stock Fund	266,768
John Hancock*	Small Cap Index Fund	123,383
John Hancock*	Fundamental Investors	92,993
John Hancock*	Mid Value Fund	15,998
John Hancock*	Small Cap Value Index Fund	21,287
John Hancock*	BlackRock Global Allocation Fund	249,120
John Hancock*	Capital World Growth and Income Fund	34,306
John Hancock*	T. Rowe Price Health Sciences Fun	522,647
John Hancock*	Small Cap Growth Index Fund	293,251
John Hancock*	T. Rowe Price Science & Technology Fund	222,477
John Hancock*	Oppenheimer Developing Markets Fund	78,884
John Hancock*	Smallcap World Fund	215,302
John Hancock*	Capital Income Builder	114,173
John Hancock*	Retirement Choices 2010	1,912
John Hancock*	Retirement Choices 2015	1,597
John Hancock*	Retirement Choices 2020	170,871
John Hancock*	Retirement Choices 2025	33,975
Balance forward		8,827,053

(Continued)

Heatron, Inc. Savings Plan
Employer Identification Number 43-1126014, Plan Number 002

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

Identity of Issue, Borrower, Lessor or Similar Party	Description of Investment, Including Maturity Date, Rate of Interest, Collateral, Par or Maturity	Fair Value
Balance forward		\$ 8,827,053
Pooled separate accounts (continued):		
John Hancock*	Retirement Choices 2030	104,984
John Hancock*	Retirement Choices 2035	95,313
John Hancock*	Retirement Choices 2040	62,481
John Hancock*	Retirement Choices 2045	120,417
John Hancock*	Retirement Choices 2050	115,662
John Hancock*	Retirement Choices 2055	47,109
John Hancock*	FT GL Bond	10,261
John Hancock*	US Small Cap	91,307
John Hancock*	Strategic Income Opp Fund	43
		<u>9,474,630</u>
Stable value fund		
John Hancock*	John Hancock Stable Value	672,452
Participants*	Various loans, interest rates ranging from 3.25% to 4.25%, maturity dates through November 2019	<u>123,069</u>
		<u><u>\$ 10,270,151</u></u>

*Represents a party in interest

The accompanying notes to the financial statements are an integral part of this schedule. The above information, except for notes from participants, has been certified by John Hancock Life Insurance Company (U.S.A), the custodian of the Plan, as complete and accurate.

