# Form 5500

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

## Annual Return/Report of Employee Benefit Plan

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

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

OMB Nos. 1210-0110
1210-0089

**2015**

**This Form is Open to Public Inspection**

## Part I Annual Report Identification Information

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

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

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

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

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

## Part II Basic Plan Information—enter all requested information

**1a** Name of plan
HERITAGE BAG COMPANY 401K PLAN

**1b** Three-digit plan number (PN) ▶ 002

**1c** Effective date of plan 09/01/1996

**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)
HERITAGE BAG COMPANY

501 GATEWAY PARKWAY
ROANOKE, TX 75626

**2b** Employer Identification Number (EIN)
75-1425644

**2c** Plan Sponsor's telephone number
214-252-7190

**2d** Business code (see instructions)
326100

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

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

| | | | |
|---|---|---|---|
| **SIGN HERE** | Filed with authorized/valid electronic signature. | 10/13/2016 | APRIL MCINTYRE |
| | **Signature of plan administrator** | Date | Enter name of individual signing as plan administrator |
| **SIGN HERE** | | | |
| | **Signature of employer/plan sponsor** | Date | Enter name of individual signing as employer or plan sponsor |
| **SIGN HERE** | | | |
| | **Signature of DFE** | Date | Enter name of individual signing as DFE |

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

Preparer's telephone number

| | | | |
|---|---|---|---|
| **3a** | Plan administrator's name and address [X] Same as Plan Sponsor | **3b** | Administrator's EIN |
| | | **3c** | Administrator's telephone number |
| **4** | If the name and/or EIN of the plan sponsor has changed since the last return/report filed for this plan, enter the name, EIN and the plan number from the last return/report: | **4b** | EIN |
| **a** | Sponsor's name | **4c** | PN |

| | | | |
|---|---|---|---|
| **5** | Total number of participants at the beginning of the plan year | **5** | 782 |
| **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)** | 667 |
| **a(2)** | Total number of active participants at the end of the plan year | **6a(2)** | 701 |
| **b** | Retired or separated participants receiving benefits | **6b** | 2 |
| **c** | Other retired or separated participants entitled to future benefits | **6c** | 150 |
| **d** | Subtotal. Add lines **6a(2)**, **6b**, and **6c**. | **6d** | 853 |
| **e** | Deceased participants whose beneficiaries are receiving or are entitled to receive benefits. | **6e** | 1 |
| **f** | Total. Add lines **6d** and **6e**. | **6f** | 854 |
| **g** | Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item) | **6g** | 819 |
| **h** | Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested | **6h** | 29 |
| **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:
2F 2G 2J 2R 2S 2T 2E 3D

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

**9a** Plan funding arrangement (check all that apply)

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

**9b** Plan benefit arrangement (check all that apply)

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

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

**a Pension Schedules**

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

**b General Schedules**

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

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

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

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

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

**11c** Enter the Receipt Confirmation Code for the 2015 Form M-1 annual report. If the plan was not required to file the 2015 Form M-1 annual report, enter the Receipt Confirmation Code for the most recent Form M-1 that was required to be filed under the Form M-1 filing requirements. (Failure to enter a valid Receipt Confirmation Code will subject the Form 5500 filing to rejection as incomplete.)

Receipt Confirmation Code_____

| SCHEDULE C (Form 5500) | Service Provider Information | OMB No. 1210-0110 |
|---|---|---|
| Department of the Treasury<br>Internal Revenue Service<br>Department of Labor<br>Employee Benefits Security Administration<br>Pension Benefit Guaranty Corporation | This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA).<br>▶ **File as an attachment to Form 5500.** | **2015**<br>**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
HERITAGE BAG COMPANY 401K PLAN

**B** Three-digit plan number (PN) ▶ 002

**C** Plan sponsor's name as shown on line 2a of Form 5500
HERITAGE BAG COMPANY

**D** Employer Identification Number (EIN)
75-1425644

## Part I Service Provider Information (see instructions)

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

### 1 Information on Persons Receiving Only Eligible Indirect Compensation

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

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

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

FIDELITY INVESTMENTS INSTITUTIONAL

04-2647786

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

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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)

FIDELITY INVESTMENTS INSTITUTIONAL

04-2647786

| (b) Service Code(s) | (c) Relationship to employer, employee organization, or person known to be a party-in-interest | (d) Enter direct compensation paid by the plan. If none, enter -0-. | (e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor) | (f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures? | (g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-. | (h) Did the service provider give you a formula instead of an amount or estimated amount? |
|---|---|---|---|---|---|---|
| 37 60 64 65 71 | RECORDKEEPER | 18957 | Yes [X] No [ ] | Yes [X] No [ ] | 0 | Yes [X] No [ ] |

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

STRATEGIC ADVISORS, INC.

04-2654524

| (b) Service Code(s) | (c) Relationship to employer, employee organization, or person known to be a party-in-interest | (d) Enter direct compensation paid by the plan. If none, enter -0-. | (e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor) | (f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures? | (g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-. | (h) Did the service provider give you a formula instead of an amount or estimated amount? |
|---|---|---|---|---|---|---|
| 27 | ADVISOR | 15975 | Yes [ ] No [X] | 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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(d)** Enter name and EIN (address) of source of indirect compensation | **(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation. |
|---|---|
| AMG YACKTMAN FOCUSED SERVICE CL 800 CONNECTICUT AVE. NORWALK, CT 06854 | 0.40% |

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

| **(d)** Enter name and EIN (address) of source of indirect compensation | **(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation. |
|---|---|
| GLENMEDE SMCAP EQ IS - STATE STREE<br>04-0025081 | 0.15% |

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

| **(d)** Enter name and EIN (address) of source of indirect compensation | **(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation. |
|---|---|
| INVS DIVRS DIVD INV - INVESCO INVE 11 GREENWAY PLAZA, SUITE 100 HOUSTON, TX 77046 | 0.50% |

## Part I Service Provider Information (continued)

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

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

| **(d)** Enter name and EIN (address) of source of indirect compensation | | **(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation. |
|---|---|---|
| PIMCO REAL RTN BD AD - BOSTON FINA | BFDS BUILDING, 30 DAN ROAD<br>CANTON, MA 02021 | 0.25% |

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

| **(d)** Enter name and EIN (address) of source of indirect compensation | | **(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation. |
|---|---|---|
| PRMTRC EMG MKT IS - BNY MELLON INV | P.O. BOX 9793<br>PROVIDENCE, RI 02940 | 0.15% |

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

| **(d)** Enter name and EIN (address) of source of indirect compensation | | **(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation. |
|---|---|---|
| RDGWTH MID CAP VAL I - BOSTON FINA | P.O. BOX 8480<br>BOSTON, MA 02266 | 0.40% |

## Part I Service Provider Information (continued)

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

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

| **(d)** Enter name and EIN (address) of source of indirect compensation | **(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation. |
|---|---|
| TMPL GLOBAL BOND A - FRANKLIN TEMP<br><br>94-3167260 | 0.40% |

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

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

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

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

## Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

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

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

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

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

(complete as many entries as needed)

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

# SCHEDULE D (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

## DFE/Participating Plan Information

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

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

OMB No. 1210-0110

**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
HERITAGE BAG COMPANY 401K PLAN

**B** Three-digit plan number (PN) ▶ 002

**C** Plan or DFE sponsor's name as shown on line 2a of Form 5500
HERITAGE BAG COMPANY

**D** Employer Identification Number (EIN)
75-1425644

## Part I Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs)

(Complete as many entries as needed to report all interests in DFEs)

**a** Name of MTIA, CCT, PSA, or 103-12 IE: MIP CL 1

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

| **c** EIN-PN | **d** Entity code | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) |
|---|---|---|
| 04-3022712-024 | C | 1139369 |

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

# SCHEDULE H (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

# Financial Information

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

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

OMB No. 1210-0110

**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
HERITAGE BAG COMPANY 401K PLAN

**B** Three-digit plan number (PN) ▶ 002

**C** Plan sponsor's name as shown on line 2a of Form 5500
HERITAGE BAG COMPANY

**D** Employer Identification Number (EIN)
75-1425644

## Part I Asset and Liability Statement

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

| Assets | | (a) Beginning of Year | (b) End of Year |
|---|---|---|---|
| **a** Total noninterest-bearing cash | 1a | 0 | 111 |
| **b** Receivables (less allowance for doubtful accounts): | | | |
| **(1)** Employer contributions | 1b(1) | 0 | 0 |
| **(2)** Participant contributions | 1b(2) | 0 | 0 |
| **(3)** Other | 1b(3) | 0 | 0 |
| **c** General investments: | | | |
| **(1)** Interest-bearing cash (include money market accounts & certificates of deposit) | 1c(1) | 1917254 | 2185432 |
| **(2)** U.S. Government securities | 1c(2) | 0 | 0 |
| **(3)** Corporate debt instruments (other than employer securities): | | | |
| **(A)** Preferred | 1c(3)(A) | 0 | 0 |
| **(B)** All other | 1c(3)(B) | 0 | 0 |
| **(4)** Corporate stocks (other than employer securities): | | | |
| **(A)** Preferred | 1c(4)(A) | 0 | 0 |
| **(B)** Common | 1c(4)(B) | 600497 | 304986 |
| **(5)** Partnership/joint venture interests | 1c(5) | 0 | 0 |
| **(6)** Real estate (other than employer real property) | 1c(6) | 0 | 0 |
| **(7)** Loans (other than to participants) | 1c(7) | 0 | 0 |
| **(8)** Participant loans | 1c(8) | 1586354 | 1367779 |
| **(9)** Value of interest in common/collective trusts | 1c(9) | 900180 | 1139369 |
| **(10)** Value of interest in pooled separate accounts | 1c(10) | 0 | 0 |
| **(11)** Value of interest in master trust investment accounts | 1c(11) | 0 | 0 |
| **(12)** Value of interest in 103-12 investment entities | 1c(12) | 0 | 0 |
| **(13)** Value of interest in registered investment companies (e.g., mutual funds) | 1c(13) | 35031817 | 35835409 |
| **(14)** Value of funds held in insurance company general account (unallocated contracts) | 1c(14) | | |
| **(15)** Other | 1c(15) | 0 | 0 |

| | | (a) Beginning of Year | (b) End of Year |
|---|---|---|---|
| **1d** Employer-related investments: | | | |
| **(1)** Employer securities | 1d(1) | 0 | 0 |
| **(2)** Employer real property | 1d(2) | 0 | 0 |
| **e** Buildings and other property used in plan operation | 1e | 0 | 0 |
| **f** Total assets (add all amounts in lines 1a through 1e) | 1f | 40036102 | 40833086 |
| **Liabilities** | | | |
| **g** Benefit claims payable | 1g | 0 | 0 |
| **h** Operating payables | 1h | 0 | 0 |
| **i** Acquisition indebtedness | 1i | 0 | 0 |
| **j** Other liabilities | 1j | 0 | 0 |
| **k** Total liabilities (add all amounts in lines 1g through1j) | 1k | 0 | 0 |
| **Net Assets** | | | |
| **l** Net assets (subtract line 1k from line 1f) | 1l | 40036102 | 40833086 |

## 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) | 839036 | |
| **(B)** Participants | 2a(1)(B) | 2114935 | |
| **(C)** Others (including rollovers) | 2a(1)(C) | 177790 | |
| **(2)** Noncash contributions | 2a(2) | 0 | |
| **(3)** Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)** | 2a(3) | | 3131761 |
| **b Earnings on investments:** | | | |
| **(1)** Interest: | | | |
| **(A)** Interest-bearing cash (including money market accounts and certificates of deposit) | 2b(1)(A) | 294 | |
| **(B)** U.S. Government securities | 2b(1)(B) | 0 | |
| **(C)** Corporate debt instruments | 2b(1)(C) | 0 | |
| **(D)** Loans (other than to participants) | 2b(1)(D) | 0 | |
| **(E)** Participant loans | 2b(1)(E) | 61628 | |
| **(F)** Other | 2b(1)(F) | 0 | |
| **(G)** Total interest. Add lines **2b(1)(A)** through **(F)** | 2b(1)(G) | | 61922 |
| **(2)** Dividends: **(A)** Preferred stock | 2b(2)(A) | 0 | |
| **(B)** Common stock | 2b(2)(B) | 9773 | |
| **(C)** Registered investment company shares (e.g. mutual funds) | 2b(2)(C) | 1777542 | |
| **(D)** Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)** | 2b(2)(D) | | 1787315 |
| **(3)** Rents | 2b(3) | | 0 |
| **(4)** Net gain (loss) on sale of assets: **(A)** Aggregate proceeds | 2b(4)(A) | 683883 | |
| **(B)** Aggregate carrying amount (see instructions) | 2b(4)(B) | 719316 | |
| **(C)** Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result | 2b(4)(C) | | -35433 |
| **(5)** Unrealized appreciation (depreciation) of assets: **(A)** Real estate | 2b(5)(A) | 0 | |
| **(B)** Other | 2b(5)(B) | 26670 | |
| **(C)** Total unrealized appreciation of assets. Add lines **2b(5)(A)** and **(B)** | 2b(5)(C) | | 26670 |

| | | (a) Amount | (b) Total |
|---|---|---|---|
| (6) Net investment gain (loss) from common/collective trusts | 2b(6) | | 4627 |
| (7) Net investment gain (loss) from pooled separate accounts | 2b(7) | | 0 |
| (8) Net investment gain (loss) from master trust investment accounts | 2b(8) | | 0 |
| (9) Net investment gain (loss) from 103-12 investment entities | 2b(9) | | 0 |
| (10) Net investment gain (loss) from registered investment companies (e.g., mutual funds) | 2b(10) | | -1251472 |
| c Other income | 2c | | 0 |
| d Total income. Add all **income** amounts in column (b) and enter total | 2d | | 3725390 |
| **Expenses** | | | |
| e Benefit payment and payments to provide benefits: | | | |
| (1) Directly to participants or beneficiaries, including direct rollovers | 2e(1) | 2887074 | |
| (2) To insurance carriers for the provision of benefits | 2e(2) | 0 | |
| (3) Other | 2e(3) | 0 | |
| (4) Total benefit payments. Add lines **2e(1)** through **(3)** | 2e(4) | | 2887074 |
| f Corrective distributions (see instructions) | 2f | | 0 |
| g Certain deemed distributions of participant loans (see instructions) | 2g | | 6679 |
| h Interest expense | 2h | | 0 |
| i Administrative expenses: (1) Professional fees | 2i(1) | 0 | |
| (2) Contract administrator fees | 2i(2) | 0 | |
| (3) Investment advisory and management fees | 2i(3) | 15975 | |
| (4) Other | 2i(4) | 18678 | |
| (5) Total administrative expenses. Add lines **2i(1)** through **(4)** | 2i(5) | | 34653 |
| j Total expenses. Add all **expense** amounts in column (b) and enter total | 2j | | 2928406 |
| **Net Income and Reconciliation** | | | |
| k Net income (loss). Subtract line **2j** from line **2d** | 2k | | 796984 |
| l Transfers of assets: | | | |
| (1) To this plan | 2l(1) | | 0 |
| (2) From this plan | 2l(2) | | |

## Part III Accountant's Opinion

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

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

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

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

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

**(1)** Name: WEAVER, LLP **(2)** EIN: 75-0786316

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

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

## Part IV Compliance Questions

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

During the plan year:

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

| | | | Yes | No | N/A | Amount |
|---|---|---|---|---|---|---|
| c | Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.) | 4c | | X | | |
| d | Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.) | 4d | | X | | |
| e | Was this plan covered by a fidelity bond? | 4e | X | | | 800000 |
| f | Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty? | 4f | | X | | |
| g | Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser? | 4g | | X | | |
| h | Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser? | 4h | | X | | |
| i | Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.) | 4i | X | | | |
| j | Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked, and see instructions for format requirements.) | 4j | | X | | |
| k | Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC? | 4k | | X | | |
| l | Has the plan failed to provide any benefit when due under the plan? | 4l | | X | | |
| m | If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.) | 4m | | X | | |
| n | If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3. | 4n | | X | | |
| o | Did the plan trust incur unrelated business taxable income? | 4o | | | X | |
| p | Were in-service distributions made during the plan year? | 4p | | | | |

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

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

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

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

## Part V Trust Information

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

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

# SCHEDULE R (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

# Retirement Plan Information

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

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

OMB No. 1210-0110

**2015**

**This Form is Open to Public Inspection.**

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

**A** Name of plan
HERITAGE BAG COMPANY 401K PLAN

**B** Three-digit plan number (PN) ▶ 002

**C** Plan sponsor's name as shown on line 2a of Form 5500
HERITAGE BAG COMPANY

**D** Employer Identification Number (EIN)
75-1425644

## Part I Distributions

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

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

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

EIN(s): 04-6568107

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

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

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

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

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

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

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

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

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

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

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

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

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

## Part III Amendments

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

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

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

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

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

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

## Part V Additional Information for Multiemployer Defined Benefit Pension Plans

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

**a** Name of contributing employer

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

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

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

---

**a** Name of contributing employer

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

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

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

---

**a** Name of contributing employer

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

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

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

---

**a** Name of contributing employer

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

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

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

---

**a** Name of contributing employer

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

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

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

---

**a** Name of contributing employer

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

## Part VII IRS Compliance Questions

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

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

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

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

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

# HERITAGE BAG COMPANY 401 (K) PLAN

## FINANCIAL REPORT AND SUPPLEMENTAL SCHEDULE

## DECEMBER 31, 2015

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* Other schedules required by 29 CFR 2520.103-10 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under Employee Retirement Income Security Act of 1974 have been omitted because they are not applicable.

INDEPENDENT AUDITOR'S REPORT

To the Plan Administrator
Heritage Bag Company 401(k) Plan
Dallas, Texas

**Report on the Financial Statements**

We were engaged to audit the accompanying financial statements of Heritage Bag Company 401(k) Plan (the Plan), which comprise the statements of net assets available for benefits as of December 31, 2015 and 2014, and the related statements of changes in net assets available for benefits for the years then ended, and the related notes to the financial statements.

**Management's Responsibility for the Financial Statements**

Plan 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 audit in accordance with auditing standards generally accepted in the United States of America. Because of the matter described in the Basis for Disclaimer of Opinion paragraph, however, we were not able to obtain sufficient appropriate audit evidence to provide a basis for an audit opinion.

**Basis for Disclaimer of Opinion**

As permitted by 29 CFR 2520.103-8 of the Department of Labor's (DOL) Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the Plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Note 3, which was certified by Fidelity Management Trust Company, the trustee of the Plan, except for comparing the information with the related information included in the financial statements. We have been informed by the Plan administrator that the trustee holds the Plan's investment assets and executes investment transactions. The Plan administrator has obtained a certification from the trustee as of and for the years ended December 31, 2015 and 2014, that the information provided to the plan administrator by the trustee is complete and accurate.

**Disclaimer of Opinion**

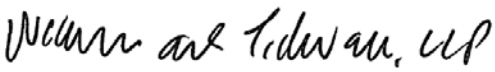
Because of the significance of the matter described in the Basis for Disclaimer of Opinion paragraph, we have not been able to obtain sufficient, appropriate audit evidence to provide a basis for an audit opinion. Accordingly, we do not express an opinion on these financial statements.

**Other Matter**

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

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

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



WEAVER AND TIDWELL, L.L.P.

Dallas, Texas
October 13, 2016

**HERITAGE BAG COMPANY 401(k) PLAN**
**STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS**
**DECEMBER 31, 2015 AND 2014**

| | 2015 | 2014 |
|---|---|---|
| **ASSETS** | | |
| Investments at fair value (Note 3) | $ 39,457,579 | $ 38,436,591 |
| Notes receivable from participants | 1,367,779 | 1,586,354 |
| **Total assets** | 40,825,358 | 40,022,945 |
| **NET ASSETS AVAILABLE FOR BENEFITS** | $ 40,825,358 | $ 40,022,945 |

The Notes to Financial Statements are an integral part of these statements.

**HERITAGE BAG COMPANY 401(k) PLAN**
**STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS**
**YEARS ENDED DECEMBER 31, 2015 AND 2014**

| | 2015 | 2014 |
|---|---|---|
| **ADDITIONS TO NET ASSETS ATTRIBUTED TO:** | | |
| Employer contributions | $ 839,036 | $ 814,709 |
| Employee salary deferral contributions | 2,114,935 | 1,955,036 |
| Employee rollovers | 177,790 | 2,354 |
| Interest and dividend income (Note 3) | 1,782,913 | 1,724,841 |
| Interest - notes receivable from participants | 61,630 | 59,422 |
| Net (depreciation) appreciation in fair value of investments (Note 3) | (1,251,869) | 1,089,053 |
| **Total additions** | 3,724,435 | 5,645,415 |
| **DEDUCTIONS FROM NET ASSETS ATTRIBUTED TO:** | | |
| Distributions to participants | 2,887,370 | 1,386,513 |
| Participant fees | 34,652 | 35,843 |
| **Total deductions** | 2,922,022 | 1,422,356 |
| **NET INCREASE IN NET ASSETS AVAILABLE FOR BENEFITS** | 802,413 | 4,223,059 |
| **NET ASSETS AVAILABLE FOR BENEFITS, BEGINNING OF YEAR** | 40,022,945 | 35,799,886 |
| **NET ASSETS AVAILABLE FOR BENEFITS, END OF YEAR** | $ 40,825,358 | $ 40,022,945 |

The Notes to Financial Statements are an integral part of these statements.

**HERITAGE BAG COMPANY 401(k) PLAN**
**NOTES TO FINANCIAL STATEMENTS**

## NOTE 1. DESCRIPTION OF PLAN

The following description of the Heritage Bag Company (the Company and the Plan Administrator) 401(k) Plan (the Plan) provides only general information. Participants should refer to the Plan agreement for a more complete description of the Plan's provisions.

### General

The Plan is a defined contribution plan established effective September 1, 1996, and covers substantially all employees of the Company. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974, as amended (ERISA).

The Plan established Fidelity Management Trust Company (Fidelity) as the Plan trustee and has adopted the Fidelity Plan document. During 2015 and 2014, all investment transactions were executed by Fidelity.

### Eligibility

The Plan requirements allow employees to be eligible to participate in the Plan after he/she completes three months of service and is at least 18 years of age. Participants are also eligible for qualified non-elective contributions after 3 months of service.

Participants become eligible for Company contributions after completion of one year of credited service with 1,000 hours.

### Contributions

The Plan offers participants the ability to contribute a percentage of their eligible compensation subject to an annual limit, as defined in the Plan document. The Plan allows participants who are age 50 or older to make pre-tax catch-up contributions each year. Catch up contributions may be made in 2015 up to $6,000.

In 2015 and 2014, the Company elected to make safe harbor matching contributions. The Company made matching contributions of 100% of the first 1% of the participant's compensation contributed to the plan and 50% of the next 5% of the participant's compensation contributed to the plan. The safe harbor matching contributions are vested 100% after 2 years of service. Participants may not request a hardship withdrawal of these contributions.

The Company may also designate all or a portion of any matching contribution for a payroll period as a qualified matching contribution to help the Plan pass one or more annually required Internal Revenue Code nondiscrimination tests. Participants are 100% vested in these contributions and may not request a hardship withdrawal of these contributions.

## NOTE 1. DESCRIPTION OF PLAN – CONTINUED

### Contributions – Continued

The Company may make discretionary nonelective contributions. Participants must complete at least 1,000 hours during the plan year and be employed as of the last day of the plan year. The Company may designate all or a portion of a nonelective contribution as qualified nonelective contributions. Participants are 100% vested in these contributions and may not request a hardship withdrawal of these contributions.

During the plan years ended December 31, 2015 and 2014, employer contributions were made from forfeited amounts totaling $9,744 and $175, respectively.

### Investment Options

Upon enrollment in the Plan and throughout the participant's eligible period of employment, each participant may direct his or her employee, Company matching, and Company discretionary contributions, in 1% increments, in several core mutual fund alternatives.

Effective August 5, 2010 the Plan added Fidelity BrokerageLink (BrokerageLink), a self-directed brokerage account. BrokerageLink expands the participant's investment choices and gives the participant the opportunity to more actively manage their contributions. The annual cost for the participant is $50 to participate in BrokerageLink. Certain Fidelity funds carry short-term trading fees which are paid by the participant.

### Participant Accounts

A separate account is maintained for each participant. Each participant's account is credited with the participant's contributions, plan earnings, and allocations of the Company's matching contributions on a monthly basis. The Company's discretionary contributions are credited in the participant's account based on the investment allocation specified by the participant.

### Vesting

The Company's matching contributions and discretionary profit sharing contributions plus actual earnings thereon made before 2012 and nonelective contributions are subject to the following vesting schedule:

| Years of Credited Service | Percentage Vested |
|---|---|
| 2 | 20% |
| 3 | 40% |
| 4 | 66% |
| 5 | 100% |

## NOTE 1. DESCRIPTION OF PLAN – CONTINUED

### Vesting – Continued

In 2012, the Company elected to make safe harbor matching contributions. The safe harbor matching contributions are vested 100% and are non-forfeitable after 2 years of service. Participants are immediately vested in their pretax contributions plus actual earnings thereon.

That portion of a participant's nonvested Company match or Company discretionary contribution account which is forfeited due to termination of employment for reasons other than retirement, disability or death, in any given year, may be used to reduce the Company contributions in the successive year. During the plan years ended December 31, 2015 and 2014, the amount of nonvested forfeitures were $6,177 and $11,549, respectively. For the year ended December 31, 2015 and 2014, the unallocated forfeitures were $17,990 and $11,374, respectively.

### Payment of Benefits

The vested portion of a participant's account balance is paid to the participant or the participant's beneficiary, as appropriate, in a lump sum as of the valuation date following retirement, death, disability or termination of employment.

To the extent a terminated participant's account balance exceeds $5,000 and the participant has not attained age 70-1/2, the participant is allowed to leave funds in the Plan and can continue to earn investment income on the account balance until April 1 of the calendar year following the calendar year during which the participant attains age 70-1/2.

### Notes Receivable from Participants

Participants may borrow a minimum of $1,000 up to a maximum of the lesser of $50,000, reduced by the highest outstanding note balance the employee had in the previous 12 months, or 50% of the current vested account balance. Notes receivable from participants bear interest at the Bank of America Prime Rate plus 1% to be reviewed quarterly, as determined by the Company's Board of Directors. Applicable rates on new notes receivable made during 2015 were 4.25%. Participants may have only one note outstanding at any time. Note repayments, including principal and interest, are made ratably through weekly payroll deductions. Notes are secured by a lien on the participant's account balance in the Plan. The Plan also permits owner-employees the ability to borrow 401(k) dollars similar to all other employees.

## NOTE 2. SUMMARY OF ACCOUNTING POLICIES

### Administrative Expenses

Administrative expenses are paid by the Company on behalf of the Plan.

### Basis of Accounting

The Plan's financial statements are prepared on an accrual basis of accounting.

### Use of Estimates

The preparation of financial statements, in conformity with accounting principles generally accepted in the United States of America, requires management to make estimates and assumptions that affect the reported amounts of net assets and changes therein. Actual results could differ from those estimates. The Plan utilizes various investment instruments. Investment securities, in general, are exposed to various risks, such as interest rate, credit, and overall market volatility. Due to the level of risk associated with certain investment securities, it is reasonably possible that changes in the values of investment securities will occur in the near term and that such changes could materially affect the amounts reported in the statements of net assets available for plan benefits.

### Investment Valuation

Investments of the Plan consist of registered investment company mutual funds. The investments are held by the Trustee and the investments in all of the funds are presented at fair value as determined by the Trustee based on the quoted market prices of the underlying securities within each fund.

### Notes Receivable from Participants

Loans to participants are reported at their unpaid principal balances plus any accrued but unpaid interest.

### Payment of Benefits

Benefits are recorded when paid. At December 31, 2015 and 2014, there were no unprocessed participant benefit payment requests included in net assets.

## NOTE 2. SUMMARY OF ACCOUNTING POLICIES – CONTINUED

### New Accounting Pronouncements

In May 2015, the Financial Accounting Standards Board (FASB) issued Accounting Standards Update (ASU) No. 2015-07, *Disclosure for Investments in Certain Entities that Calculate Net Asset Value per Share (or its Equivalent)*. The ASU impacts reporting entities that measure an investment's fair value using the net asset value per share (or an equivalent) practical expedient. The amendments in ASU No. 2015-07 eliminate the requirement to classify the investment within the fair value hierarchy. In addition, the requirement to make certain disclosures for all investments eligible to be assessed at fair value with the net asset value per share practical expedient has been removed. Instead, such disclosures are restricted only to investments that the entity has elected to measure using the practical expedient. The new guidance is effective for public entities with reporting periods beginning after December 15, 2015 and for all other entities with reporting periods beginning after December 15, 2016. The Company is evaluating the impact of the adoption of this ASU on the Plan financial statements.

In July 2015, 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, (Part III) Measurement Date Practical Expedient*. Part I eliminates the requirements to measure the fair value of fully benefit-responsive investment contracts and provide certain disclosures. Contract value is the only required measure for fully benefit-responsive investment contracts. Part II eliminates the requirements to disclose individual investments that represent 5 percent or more of net assets available for benefits and the net appreciation or depreciation in fair value of investments by general type. Part II also simplifies the level of disaggregation of investments that are measured using fair value.

## NOTE 2. SUMMARY OF ACCOUNTING POLICIES – CONTINUED

### New Accounting Pronouncements – Continued

Plans will continue to disaggregate investments that are measured using fair value by general type; however, plans are no longer required to also disaggregate investment by nature, characteristics and risks. Further, the disclosure of information about fair value measurements shall be provided by general type of plan asset. Part III is not applicable to the Plan. The ASU is effective for fiscal years beginning after December 15, 2015, with early adoption permitted. Parts I and II are to be applied retrospectively. Part III is to be applied prospectively. Management has elected to adopt Parts I and II early. The Plan's early adoption of this guidance in 2015 was applied retrospectively and did not have a material impact on its financial statements.

### Plan Management's Review of Subsequent Events

The Plan has evaluated subsequent events through October 13, 2016, the date the financial statements were available to be issued.

## NOTE 3. INVESTMENTS

The investments included in the December 31, 2015 and 2014 Statements of Net Assets Available for Benefits, the investment activities included in the Statements of Changes in Net Assets Available for Benefits for the years ended December 31, 2015 and 2014, and certain information on investments and investment activities in the notes to the financial statements were prepared in part or entirely from information certified by the Trustee in accordance with 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 information certified includes total investments of $39,457,579 and $38,436,591 at December 31, 2015 and 2014, respectively, and related investment gains of $531,044 and $2,813,894 for the years ended December 31, 2015 and 2014, respectively.

## NOTE 4. FINANCIAL INFORMATION PROVIDED BY THE TRUSTEE (UNAUDITED)

The fair value of investments at December 31, 2015 and 2014, which is reported by the Trustees, is summarized as follows:

| | 2015 | 2014 |
|---|---|---|
| BrokerageLink | $ 750,310 | $ 786,367 |
| Fidelity Capital Appreciation | 1,316,270 | 1,359,242 |
| Fidelity Convertible Securities | 860,231 | 882,128 |
| Fidelity Diversified International | 1,998,485 | 1,628,609 |
| Fidelity Freedom K 2005 | 9,910 | 8,421 |
| Fidelity Freedom K 2010 | 246,210 | 242,813 |
| Fidelity Freedom K 2015 | 384,253 | 763,132 |
| Fidelity Freedom K 2020 | 1,505,821 | 1,398,210 |
| Fidelity Freedom K 2025 | 1,420,203 | 1,026,021 |
| Fidelity Freedom K 2030 | 1,776,473 | 1,613,227 |
| Fidelity Freedom K 2035 | 1,591,870 | 1,415,114 |
| Fidelity Freedom K 2040 | 359,895 | 304,829 |
| Fidelity Freedom K 2045 | 421,365 | 344,884 |
| Fidelity Freedom K 2050 | 284,319 | 235,461 |
| Fidelity Freedom K 2055 | 196,244 | 139,590 |
| Fidelity Freedom K 2060 | 20,141 | 1,213 |
| Fidelity Freedom K Income | 189,001 | 181,946 |
| Fidelity Government Income | 321,447 | 570,118 |
| Fidelity Growth Company | 8,039,701 | 8,148,292 |
| Fidelity Low Priced Stock | 1,902,695 | 1,951,557 |
| Fidelity Mid Cap Stock | 2,008,911 | 2,654,948 |
| Fidelity Real Estate Investment | 644,022 | 501,996 |
| Fidelity Retirement Gov II | 1,763,759 | 1,776,284 |
| Glenmede Small Cap Equity Institutional | 834,313 | 647,842 |
| Invesco Diversified Dividend Investor Class | 2,551,836 | 2,342,978 |
| Managed Income Portfolio | 1,131,641 | 887,023 |
| Parametric Emerging Market International | 282,589 | 242,524 |
| Pimco Real Return Bond AD | 199,789 | 210,028 |
| Ridgeworth Mid Cap Value I | 430,783 | 311,582 |
| Spartan 500 Index Fund Advantage Class | 3,382,903 | 3,214,177 |
| Spartan Extended Market Index Advantage Class | 19,794 | 112,051 |
| Spartan International Index Fund Advantage Class | 567,563 | 740,142 |
| Spartan US Bond Index Advantage Class | 1,864,477 | 1,642,381 |
| Tmpl Global Bond A | 180,355 | 151,461 |
| Total investments | $ 39,457,579 | $ 38,436,591 |
| Notes receivable from participants | $ 1,367,779 | $ 1,586,354 |

## NOTE 4. FINANCIAL INFORMATION PROVIDED BY THE TRUSTEE (UNAUDITED) – CONTINUED

| | 2015 | 2014 |
|---|---|---|
| Interest and dividend income | $ 1,782,913 | $ 1,724,841 |
| Net appreciation (depreciation) in fair value of investments: | | |
| BrokerageLink | (1,919) | 38,668 |
| Fidelity Capital Appreciation | (142,565) | (13,532) |
| Fidelity Convertible Securities | (166,428) | 30,427 |
| Fidelity Diversified International | 23,382 | (120,155) |
| Fidelity Freedom 2000 | - | (115) |
| Fidelity Freedom 2005 | - | 393 |
| Fidelity Freedom 2010 | - | 7,898 |
| Fidelity Freedom 2015 | - | 13,409 |
| Fidelity Freedom 2020 | - | 22,441 |
| Fidelity Freedom 2025 | - | 20,476 |
| Fidelity Freedom 2030 | - | 43,203 |
| Fidelity Freedom 2035 | - | 27,536 |
| Fidelity Freedom 2040 | - | 5,818 |
| Fidelity Freedom 2045 | - | (395) |
| Fidelity Freedom 2050 | - | (2,405) |
| Fidelity Freedom 2055 | - | 6,102 |
| Fidelity Freedom Income | - | (279) |
| Fidelity Freedom K 2005 | (482) | (235) |
| Fidelity Freedom K 2010 | (16,572) | (8,933) |
| Fidelity Freedom K 2015 | (28,034) | (24,658) |
| Fidelity Freedom K 2020 | (80,973) | (47,027) |
| Fidelity Freedom K 2025 | (59,230) | (33,771) |
| Fidelity Freedom K 2030 | (103,126) | (58,677) |
| Fidelity Freedom K 2035 | (91,795) | (52,233) |
| Fidelity Freedom K 2040 | (22,493) | (11,389) |
| Fidelity Freedom K 2045 | (23,555) | (12,610) |
| Fidelity Freedom K 2050 | (16,209) | (8,415) |
| Fidelity Freedom K 2055 | (9,888) | (5,043) |
| Fidelity Freedom K 2060 | (807) | (19) |
| Fidelity Freedom K Income | (7,975) | (2,425) |
| Fidelity Government Income | (6,984) | 11,420 |
| Fidelity Growth Company | 304,214 | 730,184 |
| Fidelity Low Priced Stock | (89,742) | 37,557 |
| Fidelity Mid Cap Stock | (362,960) | (84,701) |
| Fidelity Real Estate Investment Portfolio | (2,004) | 107,515 |
| Fidelity Retirement Money Market | - | 2 |
| Fidelity Small Cap Stock | - | 931 |
| Glenmede Small Cap Equity Institutional | (28,406) | (2,540) |
| Invesco Diversified Dividend Investor Class | (104,396) | 169,818 |
| Parametric Emerging Markets | (53,544) | (18,204) |
| Pimco Real Return Bond AD | (7,272) | (5,852) |
| Ridgeworth Mid Cap Value I | (45,819) | 3,257 |
| Spartan 500 Index Fund Advantage Class | (38,299) | 327,987 |
| Spartan Extended Market Index Advantage Class | (6,512) | 1,087 |
| Spartan International Index Fund Advantage Class | (12,859) | (48,536) |
| Spartan US Bond Index Advantage Class | (36,643) | 53,422 |
| Tmpl Global Bond A | (11,973) | (8,349) |
| Net appreciation (depreciation) in fair value of investments: | (1,251,869) | 1,089,053 |
| Total investment gains | $ 531,044 | $ 2,813,894 |

## NOTE 5. FAIR VALUE MEASUREMENTS

In September 2006, the FASB issued a new standard relating to fair value measurements, Accounting Standards Codification (ASC) 820 (ASC 820), Fair Value Measures and Disclosures (Prior authoritative literature: SFAS No. 157, Fair Value Measurements) which introduces a framework for measuring fair value and expands required disclosure about fair value measurements of assets and liabilities. Fair value measurements guidance defines fair value as the exchange price that would be received for an asset or paid to transfer a liability (an exit price) in the principal or most advantageous market for the asset or liability in an orderly transaction between market participants on the measurement date.

ASC 820 also establishes a fair value hierarchy which requires an entity to maximize the use of observable inputs and minimize the use of unobservable inputs when measuring fair value. The guidance describes three levels of inputs that may be used to measure fair value:

Level 1 inputs: Quoted prices in active markets for identical assets or liabilities.

Level 2 inputs: Observable inputs other than Level 1 prices such as quoted prices for similar assets or liabilities; quoted prices in markets that are not active; or other inputs that are observable or can be corroborated by observable market data for substantially the full term of the assets or liabilities.

Level 3 inputs: Unobservable inputs that are supported by little or no market activity and that are significant to the fair value of the assets or liabilities.

The asset's 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.

### Mutual Funds

Valued at the net asset value (NAV) of shares held by the plan at year end. The money market fund is valued at amortized cost and therefore classified as a level 2 investment.

### Stable Value Fund

Valued at the NAV of the shares held by the Plan at year end, which is based on the fair investments using information reported by the investment advisor at year end.

## NOTE 5. FAIR VALUE MEASUREMENTS – CONTINUED

The following table presents the Plan's fair value hierarchy for the financial assets measured at fair value on a recurring basis as of December 31, 2015:

| | Quoted Prices in Active Markets for Identical Assets (Level 1) | Significant Observable Inputs (Level2) | Significant Unobservable Inputs (Level 3) | Total Fair Value |
|---|---|---|---|---|
| Assets: | | | | |
| Mutual Funds | $ 35,811,869 | $ - | $ - | $ 35,811,869 |
| Brokerage Link Asset | 750,310 | - | - | 750,310 |
| Money Market | | 1,763,759 | - | 1,763,759 |
| Stable Value Fund | | 1,131,641 | - | 1,131,641 |
| Total assets | $ 36,562,179 | $ 2,895,400 | $ - | $ 39,457,579 |

The following table presents the Plan's fair value hierarchy for the financial assets measured at fair value on a recurring basis as of December 31, 2014:

| | Quoted Prices in Active Markets for Identical Assets (Level 1) | Significant Observable Inputs (Level2) | Significant Unobservable Inputs (Level 3) | Total Fair Value |
|---|---|---|---|---|
| Assets: | | | | |
| Mutual funds | $ 34,983,085 | $ - | $ - | $ 34,983,085 |
| Brokerage Link Asset | 790,199 | - | - | 790,199 |
| Money Market | - | 1,776,284 | - | 1,776,284 |
| Stable Value Fund | - | 887,023 | - | 887,023 |
| Total assets | $ 35,773,284 | $ 2,663,307 | $ - | $ 38,436,591 |

## NOTE 5. FAIR VALUE MEASUREMENTS – CONTINUED

### Value of Investments in Entities that Use NAV

The following table summarizes investments measured at fair value based on NAV per share as of December 31, 2015 and 2014, respectively.

| | 2015 | 2014 |
|---|---|---|
| Money Market Fund (a) | | |
| Fair value | $ 1,763,759 | $ 1,776,284 |
| Unfunded commitment | None | None |
| Redemption frequency | Immediate | Immediate |
| Other redemption restrictions | None | None |
| Redemption notice period | None | None |
| Stable value fund | | |
| Fair value | $ 1,131,641 | $ 887,023 |
| Unfunded commitment | None | None |
| Redemption frequency | Immediate | Immediate |
| Other redemption restrictions | None | None |
| Redemption notice period | None | None |

(a) The investment objective of this fund is to seek a high level of current income as is consistent with the security of principal and liquidity.

## NOTE 6. PARTY-IN-INTEREST TRANSACTIONS

Parties-in-interest are defined under Department of Labor Regulations as any fiduciary of the Plan, party rendering services to the Plan, the employer, and certain others. As such, transactions conducted by the trustee qualify as party-in-interest transactions.

## NOTE 7. PLAN TERMINATION

The Company reserves the right to discontinue the Plan at any time. Upon termination, all participants must receive written notice, and all amounts credited to the participants' accounts shall become 100% vested.

## NOTE 8. TAX STATUS

The Plan has obtained a determination letter in which the Internal Revenue Service stated that the Plan, as then designed, was in compliance with the applicable requirements of the Internal Revenue Code.

## NOTE 8. TAX STATUS – CONTINUED

The Plan has been amended since receiving the determination letter. However, the Plan Administrator believes that the Plan is currently designed and being operated in compliance with the applicable requirements of the Internal Revenue Code and is therefore qualified and the related trust is tax-exempt.

The FASB has recently issued guidance in accounting for uncertainties in income taxes which requires that the Plan recognize in its financial statements the financial effects of a tax position, if that position is more likely than not of being sustained upon examination, including resolution of any appeals or litigation processes, based upon the technical merits of the tax position. The new requirements also provide guidance on measurement, classification, interest, penalties and disclosure.

Tax positions taken related to the Plan's tax exempt status, unrelated business activities, taxable income, and deductibility of expenses and other miscellaneous tax positions have been reviewed, and management is of the opinion that material positions taken by the Plan would more likely than not be sustained by examination. Accordingly, the Plan has not recorded an income tax liability for uncertain tax benefits. The entities tax years 2012 and thereafter remain subject to examination.

## NOTE 9. RISKS AND UNCERTAINTIES

The Plan invests in various investment securities that are exposed to various risks such as interest rates, market and credit risks. Market values of investments may decline for a number of reasons, including changes in prevailing market and interest rates, increases in defaults and credit rating downgrades. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in values of investment securities will occur in the near term and that some changes could materially affect participant account balances and the amounts reported in the statements of net assets available for benefits.

## NOTE 10. RECONCILIATION OF THE FINANCIAL STATEMENTS TO FORM 5500

The following is a reconciliation of net assets available for benefits as shown in the financial statements to Form 5500 as of December 31, 2015:

| | |
|---|---|
| Net assets available for benefits per financial statements | $ 40,825,358 |
| Adjustment for fund valued at contract value | 7,728 |
| Net assets available for benefits per Form 5500 | $ 40,833,086 |

The following is a reconciliation of net increase in net assets available for benefits shown in the financial statements to Form 5500 as of December 31, 2015:

| | |
|---|---|
| Net increase in net assets available for benefits per financial statements | $ 802,413 |
| Adjustment for fund valued at contract value | 7,728 |
| Adjustment for prior year contract valuation | (13,157) |
| Net increase in net assets available for benefits per Form 5500 | $ 796,984 |

The following is a reconciliation of net assets available for benefits as shown in the financial statements to Form 5500 as of December 31, 2014:

| | |
|---|---|
| Net assets available for benefits per financial statements | $ 40,022,945 |
| Adjustment for fund valued at contract value | 13,157 |
| Net assets available for benefits per Form 5500 | $ 40,036,102 |

The following is a reconciliation of net increase in net assets available for benefits shown in the financial statements to Form 5500 as of December 31, 2014:

| | |
|---|---|
| Net increase in net assets available for benefits per financial statements | $ 4,223,059 |
| Adjustment for fund valued at contract value | 13,157 |
| Adjustment for prior year contract valuation | (12,822) |
| Net increase in net assets available for benefits per Form 5500 | $ 4,223,394 |

## NOTE 11. SUBSEQUENT EVENTS

### Change in Ownership of Plan Sponsor

Effective April 29, 2016, the Company was acquired by Novolex Holdings, Inc., which resulted in a change in ownership of the Company.

### Plan Merger

On May 18, 2016, the Novolex Investment Committee (Administrative Committee) made the decision to merge the Heritage Bag Company 401(k) Plan into the Novolex Holdings, Inc. 401(k) Plan effective January 1, 2017. The Administrative Committee is authorized to make such decisions by Consent of the Novolex Holdings, Inc. Board of Directors and as permitted by the plan document.

# SUPPLEMENTAL SCHEDULE

**HERITAGE BAG COMPANY 401 (k) PLAN**
**EIN: 75-1425644**
**PLAN NUMBER: 002**
**SCHEDULE H, PART IV, LINE 4i**
**SUPPLEMENTAL SCHEDULE OF ASSETS (HELD AT END OF YEAR)**
**DECEMBER 31, 2015**

| (a) | (b) Identity of Issue, borrower, lessor, or similar party | (c) Description of investment, including maturity date, rate of interest, collateral par, or maturity value | (d) Cost | (e) Current Value |
|---|---|---|---|---|
| * | Fidelity Investments | BrokerageLink | ** | $ 750,310 |
| * | Fidelity Investments | Fidelity Capital Appreciation | ** | 1,316,270 |
| * | Fidelity Investments | Fidelity Convertible Securities | ** | 860,231 |
| * | Fidelity Investments | Fidelity Diversified International | ** | 1,998,485 |
| * | Fidelity Investments | Fidelity Freedom K 2005 | ** | 9,910 |
| * | Fidelity Investments | Fidelity Freedom K 2010 | ** | 246,210 |
| * | Fidelity Investments | Fidelity Freedom K 2015 | ** | 384,253 |
| * | Fidelity Investments | Fidelity Freedom K 2020 | ** | 1,505,821 |
| * | Fidelity Investments | Fidelity Freedom K 2025 | ** | 1,420,203 |
| * | Fidelity Investments | Fidelity Freedom K 2030 | ** | 1,776,473 |
| * | Fidelity Investments | Fidelity Freedom K 2035 | ** | 1,591,870 |
| * | Fidelity Investments | Fidelity Freedom K 2040 | ** | 359,895 |
| * | Fidelity Investments | Fidelity Freedom K 2045 | ** | 421,365 |
| * | Fidelity Investments | Fidelity Freedom K 2050 | ** | 284,319 |
| * | Fidelity Investments | Fidelity Freedom K 2055 | ** | 196,244 |
| * | Fidelity Investments | Fidelity Freedom K 2060 | ** | 20,141 |
| * | Fidelity Investments | Fidelity Freedom K Income | ** | 189,001 |
| * | Fidelity Investments | Fidelity Government Income | ** | 321,447 |
| * | Fidelity Investments | Fidelity Growth Company | ** | 8,039,701 |
| * | Fidelity Investments | Fidelity Low Priced Stock | ** | 1,902,695 |
| * | Fidelity Investments | Fidelity Mid Cap Stock | ** | 2,008,911 |
| * | Fidelity Investments | Fidelity Real Estate Investment | ** | 644,022 |
| * | Fidelity Investments | Fidelity Retirement Gov II | ** | 1,763,759 |
| * | Fidelity Investments | Glenmede Small Cap Equity Institutional | ** | 834,313 |
| * | Fidelity Investments | Invesco Diversified Dividend Investor Class | ** | 2,551,836 |
| * | Fidelity Investments | Managed Income Portfolio | ** | 1,131,641 |
| * | Fidelity Investments | Parametric Emerging Market Institutional | ** | 282,589 |
| * | Fidelity Investments | Pimco Real Return Bond AD | ** | 199,789 |
| * | Fidelity Investments | Ridgeworth Mid Cap Value I | ** | 430,783 |
| * | Fidelity Investments | Spartan 500 Index Fund Advantage Class | ** | 3,382,903 |
| * | Fidelity Investments | Spartan Extended Market Index Advantage Class | ** | 19,794 |
| * | Fidelity Investments | Spartan International Index Fund Advantage Class | ** | 567,563 |
| * | Fidelity Investments | Spartan US Bond Index Advantage Class | ** | 1,864,477 |
| * | Fidelity Investments | Tmpl Global Bond A | ** | 180,355 |
| | Notes receivable from participants | 4.25% to 8.75% interest rates, various maturity dates | -0- | 1,367,779 |
| | | | | $ 40,825,358 |

* Party-in interest
** Historical cost information omitted as it is not required for participant-directed investments.

# HERITAGE BAG COMPANY 401 (K) PLAN

## FINANCIAL REPORT AND SUPPLEMENTAL SCHEDULE

## DECEMBER 31, 2015

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* Other schedules required by 29 CFR 2520.103-10 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under Employee Retirement Income Security Act of 1974 have been omitted because they are not applicable.

INDEPENDENT AUDITOR'S REPORT

To the Plan Administrator
Heritage Bag Company 401(k) Plan
Dallas, Texas

**Report on the Financial Statements**

We were engaged to audit the accompanying financial statements of Heritage Bag Company 401(k) Plan (the Plan), which comprise the statements of net assets available for benefits as of December 31, 2015 and 2014, and the related statements of changes in net assets available for benefits for the years then ended, and the related notes to the financial statements.

**Management's Responsibility for the Financial Statements**

Plan 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 audit in accordance with auditing standards generally accepted in the United States of America. Because of the matter described in the Basis for Disclaimer of Opinion paragraph, however, we were not able to obtain sufficient appropriate audit evidence to provide a basis for an audit opinion.

**Basis for Disclaimer of Opinion**

As permitted by 29 CFR 2520.103-8 of the Department of Labor's (DOL) Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the Plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Note 3, which was certified by Fidelity Management Trust Company, the trustee of the Plan, except for comparing the information with the related information included in the financial statements. We have been informed by the Plan administrator that the trustee holds the Plan's investment assets and executes investment transactions. The Plan administrator has obtained a certification from the trustee as of and for the years ended December 31, 2015 and 2014, that the information provided to the plan administrator by the trustee is complete and accurate.

**Disclaimer of Opinion**

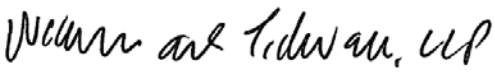
Because of the significance of the matter described in the Basis for Disclaimer of Opinion paragraph, we have not been able to obtain sufficient, appropriate audit evidence to provide a basis for an audit opinion. Accordingly, we do not express an opinion on these financial statements.

**Other Matter**

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

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

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



WEAVER AND TIDWELL, L.L.P.

Dallas, Texas
October 13, 2016

**HERITAGE BAG COMPANY 401(k) PLAN**
**STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS**
**DECEMBER 31, 2015 AND 2014**

| | 2015 | 2014 |
|---|---|---|
| **ASSETS** | | |
| Investments at fair value (Note 3) | $ 39,457,579 | $ 38,436,591 |
| Notes receivable from participants | 1,367,779 | 1,586,354 |
| **Total assets** | 40,825,358 | 40,022,945 |
| **NET ASSETS AVAILABLE FOR BENEFITS** | $ 40,825,358 | $ 40,022,945 |

The Notes to Financial Statements are an integral part of these statements.

**HERITAGE BAG COMPANY 401(k) PLAN**
**STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS**
**YEARS ENDED DECEMBER 31, 2015 AND 2014**

| | 2015 | 2014 |
|---|---|---|
| **ADDITIONS TO NET ASSETS ATTRIBUTED TO:** | | |
| Employer contributions | $ 839,036 | $ 814,709 |
| Employee salary deferral contributions | 2,114,935 | 1,955,036 |
| Employee rollovers | 177,790 | 2,354 |
| Interest and dividend income (Note 3) | 1,782,913 | 1,724,841 |
| Interest - notes receivable from participants | 61,630 | 59,422 |
| Net (depreciation) appreciation in fair value of investments (Note 3) | (1,251,869) | 1,089,053 |
| **Total additions** | 3,724,435 | 5,645,415 |
| **DEDUCTIONS FROM NET ASSETS ATTRIBUTED TO:** | | |
| Distributions to participants | 2,887,370 | 1,386,513 |
| Participant fees | 34,652 | 35,843 |
| **Total deductions** | 2,922,022 | 1,422,356 |
| **NET INCREASE IN NET ASSETS AVAILABLE FOR BENEFITS** | 802,413 | 4,223,059 |
| **NET ASSETS AVAILABLE FOR BENEFITS, BEGINNING OF YEAR** | 40,022,945 | 35,799,886 |
| **NET ASSETS AVAILABLE FOR BENEFITS, END OF YEAR** | $ 40,825,358 | $ 40,022,945 |

The Notes to Financial Statements are an integral part of these statements.

**HERITAGE BAG COMPANY 401(k) PLAN**
**NOTES TO FINANCIAL STATEMENTS**

## NOTE 1. DESCRIPTION OF PLAN

The following description of the Heritage Bag Company (the Company and the Plan Administrator) 401(k) Plan (the Plan) provides only general information. Participants should refer to the Plan agreement for a more complete description of the Plan's provisions.

### General

The Plan is a defined contribution plan established effective September 1, 1996, and covers substantially all employees of the Company. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974, as amended (ERISA).

The Plan established Fidelity Management Trust Company (Fidelity) as the Plan trustee and has adopted the Fidelity Plan document. During 2015 and 2014, all investment transactions were executed by Fidelity.

### Eligibility

The Plan requirements allow employees to be eligible to participate in the Plan after he/she completes three months of service and is at least 18 years of age. Participants are also eligible for qualified non-elective contributions after 3 months of service.

Participants become eligible for Company contributions after completion of one year of credited service with 1,000 hours.

### Contributions

The Plan offers participants the ability to contribute a percentage of their eligible compensation subject to an annual limit, as defined in the Plan document. The Plan allows participants who are age 50 or older to make pre-tax catch-up contributions each year. Catch up contributions may be made in 2015 up to $6,000.

In 2015 and 2014, the Company elected to make safe harbor matching contributions. The Company made matching contributions of 100% of the first 1% of the participant's compensation contributed to the plan and 50% of the next 5% of the participant's compensation contributed to the plan. The safe harbor matching contributions are vested 100% after 2 years of service. Participants may not request a hardship withdrawal of these contributions.

The Company may also designate all or a portion of any matching contribution for a payroll period as a qualified matching contribution to help the Plan pass one or more annually required Internal Revenue Code nondiscrimination tests. Participants are 100% vested in these contributions and may not request a hardship withdrawal of these contributions.

## NOTE 1. DESCRIPTION OF PLAN – CONTINUED

### Contributions – Continued

The Company may make discretionary nonelective contributions. Participants must complete at least 1,000 hours during the plan year and be employed as of the last day of the plan year. The Company may designate all or a portion of a nonelective contribution as qualified nonelective contributions. Participants are 100% vested in these contributions and may not request a hardship withdrawal of these contributions.

During the plan years ended December 31, 2015 and 2014, employer contributions were made from forfeited amounts totaling $9,744 and $175, respectively.

### Investment Options

Upon enrollment in the Plan and throughout the participant's eligible period of employment, each participant may direct his or her employee, Company matching, and Company discretionary contributions, in 1% increments, in several core mutual fund alternatives.

Effective August 5, 2010 the Plan added Fidelity BrokerageLink (BrokerageLink), a self-directed brokerage account. BrokerageLink expands the participant's investment choices and gives the participant the opportunity to more actively manage their contributions. The annual cost for the participant is $50 to participate in BrokerageLink. Certain Fidelity funds carry short-term trading fees which are paid by the participant.

### Participant Accounts

A separate account is maintained for each participant. Each participant's account is credited with the participant's contributions, plan earnings, and allocations of the Company's matching contributions on a monthly basis. The Company's discretionary contributions are credited in the participant's account based on the investment allocation specified by the participant.

### Vesting

The Company's matching contributions and discretionary profit sharing contributions plus actual earnings thereon made before 2012 and nonelective contributions are subject to the following vesting schedule:

| Years of Credited Service | Percentage Vested |
|---|---|
| 2 | 20% |
| 3 | 40% |
| 4 | 66% |
| 5 | 100% |

## NOTE 1. DESCRIPTION OF PLAN – CONTINUED

### Vesting – Continued

In 2012, the Company elected to make safe harbor matching contributions. The safe harbor matching contributions are vested 100% and are non-forfeitable after 2 years of service. Participants are immediately vested in their pretax contributions plus actual earnings thereon.

That portion of a participant's nonvested Company match or Company discretionary contribution account which is forfeited due to termination of employment for reasons other than retirement, disability or death, in any given year, may be used to reduce the Company contributions in the successive year. During the plan years ended December 31, 2015 and 2014, the amount of nonvested forfeitures were $6,177 and $11,549, respectively. For the year ended December 31, 2015 and 2014, the unallocated forfeitures were $17,990 and $11,374, respectively.

### Payment of Benefits

The vested portion of a participant's account balance is paid to the participant or the participant's beneficiary, as appropriate, in a lump sum as of the valuation date following retirement, death, disability or termination of employment.

To the extent a terminated participant's account balance exceeds $5,000 and the participant has not attained age 70-1/2, the participant is allowed to leave funds in the Plan and can continue to earn investment income on the account balance until April 1 of the calendar year following the calendar year during which the participant attains age 70-1/2.

### Notes Receivable from Participants

Participants may borrow a minimum of $1,000 up to a maximum of the lesser of $50,000, reduced by the highest outstanding note balance the employee had in the previous 12 months, or 50% of the current vested account balance. Notes receivable from participants bear interest at the Bank of America Prime Rate plus 1% to be reviewed quarterly, as determined by the Company's Board of Directors. Applicable rates on new notes receivable made during 2015 were 4.25%. Participants may have only one note outstanding at any time. Note repayments, including principal and interest, are made ratably through weekly payroll deductions. Notes are secured by a lien on the participant's account balance in the Plan. The Plan also permits owner-employees the ability to borrow 401(k) dollars similar to all other employees.

## NOTE 2. SUMMARY OF ACCOUNTING POLICIES

### Administrative Expenses

Administrative expenses are paid by the Company on behalf of the Plan.

### Basis of Accounting

The Plan's financial statements are prepared on an accrual basis of accounting.

### Use of Estimates

The preparation of financial statements, in conformity with accounting principles generally accepted in the United States of America, requires management to make estimates and assumptions that affect the reported amounts of net assets and changes therein. Actual results could differ from those estimates. The Plan utilizes various investment instruments. Investment securities, in general, are exposed to various risks, such as interest rate, credit, and overall market volatility. Due to the level of risk associated with certain investment securities, it is reasonably possible that changes in the values of investment securities will occur in the near term and that such changes could materially affect the amounts reported in the statements of net assets available for plan benefits.

### Investment Valuation

Investments of the Plan consist of registered investment company mutual funds. The investments are held by the Trustee and the investments in all of the funds are presented at fair value as determined by the Trustee based on the quoted market prices of the underlying securities within each fund.

### Notes Receivable from Participants

Loans to participants are reported at their unpaid principal balances plus any accrued but unpaid interest.

### Payment of Benefits

Benefits are recorded when paid. At December 31, 2015 and 2014, there were no unprocessed participant benefit payment requests included in net assets.

## NOTE 2. SUMMARY OF ACCOUNTING POLICIES – CONTINUED

### New Accounting Pronouncements

In May 2015, the Financial Accounting Standards Board (FASB) issued Accounting Standards Update (ASU) No. 2015-07, *Disclosure for Investments in Certain Entities that Calculate Net Asset Value per Share (or its Equivalent)*. The ASU impacts reporting entities that measure an investment's fair value using the net asset value per share (or an equivalent) practical expedient. The amendments in ASU No. 2015-07 eliminate the requirement to classify the investment within the fair value hierarchy. In addition, the requirement to make certain disclosures for all investments eligible to be assessed at fair value with the net asset value per share practical expedient has been removed. Instead, such disclosures are restricted only to investments that the entity has elected to measure using the practical expedient. The new guidance is effective for public entities with reporting periods beginning after December 15, 2015 and for all other entities with reporting periods beginning after December 15, 2016. The Company is evaluating the impact of the adoption of this ASU on the Plan financial statements.

In July 2015, 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, (Part III) Measurement Date Practical Expedient*. Part I eliminates the requirements to measure the fair value of fully benefit-responsive investment contracts and provide certain disclosures. Contract value is the only required measure for fully benefit-responsive investment contracts. Part II eliminates the requirements to disclose individual investments that represent 5 percent or more of net assets available for benefits and the net appreciation or depreciation in fair value of investments by general type. Part II also simplifies the level of disaggregation of investments that are measured using fair value.

## NOTE 2. SUMMARY OF ACCOUNTING POLICIES – CONTINUED

### New Accounting Pronouncements – Continued

Plans will continue to disaggregate investments that are measured using fair value by general type; however, plans are no longer required to also disaggregate investment by nature, characteristics and risks. Further, the disclosure of information about fair value measurements shall be provided by general type of plan asset. Part III is not applicable to the Plan. The ASU is effective for fiscal years beginning after December 15, 2015, with early adoption permitted. Parts I and II are to be applied retrospectively. Part III is to be applied prospectively. Management has elected to adopt Parts I and II early. The Plan's early adoption of this guidance in 2015 was applied retrospectively and did not have a material impact on its financial statements.

### Plan Management's Review of Subsequent Events

The Plan has evaluated subsequent events through October 13, 2016, the date the financial statements were available to be issued.

## NOTE 3. INVESTMENTS

The investments included in the December 31, 2015 and 2014 Statements of Net Assets Available for Benefits, the investment activities included in the Statements of Changes in Net Assets Available for Benefits for the years ended December 31, 2015 and 2014, and certain information on investments and investment activities in the notes to the financial statements were prepared in part or entirely from information certified by the Trustee in accordance with 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 information certified includes total investments of $39,457,579 and $38,436,591 at December 31, 2015 and 2014, respectively, and related investment gains of $531,044 and $2,813,894 for the years ended December 31, 2015 and 2014, respectively.

## NOTE 4. FINANCIAL INFORMATION PROVIDED BY THE TRUSTEE (UNAUDITED)

The fair value of investments at December 31, 2015 and 2014, which is reported by the Trustees, is summarized as follows:

| | 2015 | 2014 |
|---|---|---|
| BrokerageLink | $ 750,310 | $ 786,367 |
| Fidelity Capital Appreciation | 1,316,270 | 1,359,242 |
| Fidelity Convertible Securities | 860,231 | 882,128 |
| Fidelity Diversified International | 1,998,485 | 1,628,609 |
| Fidelity Freedom K 2005 | 9,910 | 8,421 |
| Fidelity Freedom K 2010 | 246,210 | 242,813 |
| Fidelity Freedom K 2015 | 384,253 | 763,132 |
| Fidelity Freedom K 2020 | 1,505,821 | 1,398,210 |
| Fidelity Freedom K 2025 | 1,420,203 | 1,026,021 |
| Fidelity Freedom K 2030 | 1,776,473 | 1,613,227 |
| Fidelity Freedom K 2035 | 1,591,870 | 1,415,114 |
| Fidelity Freedom K 2040 | 359,895 | 304,829 |
| Fidelity Freedom K 2045 | 421,365 | 344,884 |
| Fidelity Freedom K 2050 | 284,319 | 235,461 |
| Fidelity Freedom K 2055 | 196,244 | 139,590 |
| Fidelity Freedom K 2060 | 20,141 | 1,213 |
| Fidelity Freedom K Income | 189,001 | 181,946 |
| Fidelity Government Income | 321,447 | 570,118 |
| Fidelity Growth Company | 8,039,701 | 8,148,292 |
| Fidelity Low Priced Stock | 1,902,695 | 1,951,557 |
| Fidelity Mid Cap Stock | 2,008,911 | 2,654,948 |
| Fidelity Real Estate Investment | 644,022 | 501,996 |
| Fidelity Retirement Gov II | 1,763,759 | 1,776,284 |
| Glenmede Small Cap Equity Institutional | 834,313 | 647,842 |
| Invesco Diversified Dividend Investor Class | 2,551,836 | 2,342,978 |
| Managed Income Portfolio | 1,131,641 | 887,023 |
| Parametric Emerging Market International | 282,589 | 242,524 |
| Pimco Real Return Bond AD | 199,789 | 210,028 |
| Ridgeworth Mid Cap Value I | 430,783 | 311,582 |
| Spartan 500 Index Fund Advantage Class | 3,382,903 | 3,214,177 |
| Spartan Extended Market Index Advantage Class | 19,794 | 112,051 |
| Spartan International Index Fund Advantage Class | 567,563 | 740,142 |
| Spartan US Bond Index Advantage Class | 1,864,477 | 1,642,381 |
| Tmpl Global Bond A | 180,355 | 151,461 |
| Total investments | $ 39,457,579 | $ 38,436,591 |
| Notes receivable from participants | $ 1,367,779 | $ 1,586,354 |

## NOTE 4. FINANCIAL INFORMATION PROVIDED BY THE TRUSTEE (UNAUDITED) – CONTINUED

| | 2015 | 2014 |
|---|---|---|
| Interest and dividend income | $ 1,782,913 | $ 1,724,841 |
| Net appreciation (depreciation) in fair value of investments: | | |
| BrokerageLink | (1,919) | 38,668 |
| Fidelity Capital Appreciation | (142,565) | (13,532) |
| Fidelity Convertible Securities | (166,428) | 30,427 |
| Fidelity Diversified International | 23,382 | (120,155) |
| Fidelity Freedom 2000 | - | (115) |
| Fidelity Freedom 2005 | - | 393 |
| Fidelity Freedom 2010 | - | 7,898 |
| Fidelity Freedom 2015 | - | 13,409 |
| Fidelity Freedom 2020 | - | 22,441 |
| Fidelity Freedom 2025 | - | 20,476 |
| Fidelity Freedom 2030 | - | 43,203 |
| Fidelity Freedom 2035 | - | 27,536 |
| Fidelity Freedom 2040 | - | 5,818 |
| Fidelity Freedom 2045 | - | (395) |
| Fidelity Freedom 2050 | - | (2,405) |
| Fidelity Freedom 2055 | - | 6,102 |
| Fidelity Freedom Income | - | (279) |
| Fidelity Freedom K 2005 | (482) | (235) |
| Fidelity Freedom K 2010 | (16,572) | (8,933) |
| Fidelity Freedom K 2015 | (28,034) | (24,658) |
| Fidelity Freedom K 2020 | (80,973) | (47,027) |
| Fidelity Freedom K 2025 | (59,230) | (33,771) |
| Fidelity Freedom K 2030 | (103,126) | (58,677) |
| Fidelity Freedom K 2035 | (91,795) | (52,233) |
| Fidelity Freedom K 2040 | (22,493) | (11,389) |
| Fidelity Freedom K 2045 | (23,555) | (12,610) |
| Fidelity Freedom K 2050 | (16,209) | (8,415) |
| Fidelity Freedom K 2055 | (9,888) | (5,043) |
| Fidelity Freedom K 2060 | (807) | (19) |
| Fidelity Freedom K Income | (7,975) | (2,425) |
| Fidelity Government Income | (6,984) | 11,420 |
| Fidelity Growth Company | 304,214 | 730,184 |
| Fidelity Low Priced Stock | (89,742) | 37,557 |
| Fidelity Mid Cap Stock | (362,960) | (84,701) |
| Fidelity Real Estate Investment Portfolio | (2,004) | 107,515 |
| Fidelity Retirement Money Market | - | 2 |
| Fidelity Small Cap Stock | - | 931 |
| Glenmede Small Cap Equity Institutional | (28,406) | (2,540) |
| Invesco Diversified Dividend Investor Class | (104,396) | 169,818 |
| Parametric Emerging Markets | (53,544) | (18,204) |
| Pimco Real Return Bond AD | (7,272) | (5,852) |
| Ridgeworth Mid Cap Value I | (45,819) | 3,257 |
| Spartan 500 Index Fund Advantage Class | (38,299) | 327,987 |
| Spartan Extended Market Index Advantage Class | (6,512) | 1,087 |
| Spartan International Index Fund Advantage Class | (12,859) | (48,536) |
| Spartan US Bond Index Advantage Class | (36,643) | 53,422 |
| Tmpl Global Bond A | (11,973) | (8,349) |
| Net appreciation (depreciation) in fair value of investments: | (1,251,869) | 1,089,053 |
| Total investment gains | $ 531,044 | $ 2,813,894 |

## NOTE 5. FAIR VALUE MEASUREMENTS

In September 2006, the FASB issued a new standard relating to fair value measurements, Accounting Standards Codification (ASC) 820 (ASC 820), Fair Value Measures and Disclosures (Prior authoritative literature: SFAS No. 157, Fair Value Measurements) which introduces a framework for measuring fair value and expands required disclosure about fair value measurements of assets and liabilities. Fair value measurements guidance defines fair value as the exchange price that would be received for an asset or paid to transfer a liability (an exit price) in the principal or most advantageous market for the asset or liability in an orderly transaction between market participants on the measurement date.

ASC 820 also establishes a fair value hierarchy which requires an entity to maximize the use of observable inputs and minimize the use of unobservable inputs when measuring fair value. The guidance describes three levels of inputs that may be used to measure fair value:

Level 1 inputs: Quoted prices in active markets for identical assets or liabilities.

Level 2 inputs: Observable inputs other than Level 1 prices such as quoted prices for similar assets or liabilities; quoted prices in markets that are not active; or other inputs that are observable or can be corroborated by observable market data for substantially the full term of the assets or liabilities.

Level 3 inputs: Unobservable inputs that are supported by little or no market activity and that are significant to the fair value of the assets or liabilities.

The asset's 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.

### Mutual Funds

Valued at the net asset value (NAV) of shares held by the plan at year end. The money market fund is valued at amortized cost and therefore classified as a level 2 investment.

### Stable Value Fund

Valued at the NAV of the shares held by the Plan at year end, which is based on the fair investments using information reported by the investment advisor at year end.

## NOTE 5. FAIR VALUE MEASUREMENTS – CONTINUED

The following table presents the Plan's fair value hierarchy for the financial assets measured at fair value on a recurring basis as of December 31, 2015:

| | Quoted Prices in Active Markets for Identical Assets (Level 1) | Significant Observable Inputs (Level2) | Significant Unobservable Inputs (Level 3) | Total Fair Value |
|---|---|---|---|---|
| Assets: | | | | |
| Mutual Funds | $ 35,811,869 | $ - | $ - | $ 35,811,869 |
| Brokerage Link Asset | 750,310 | - | - | 750,310 |
| Money Market | | 1,763,759 | - | 1,763,759 |
| Stable Value Fund | | 1,131,641 | - | 1,131,641 |
| Total assets | $ 36,562,179 | $ 2,895,400 | $ - | $ 39,457,579 |

The following table presents the Plan's fair value hierarchy for the financial assets measured at fair value on a recurring basis as of December 31, 2014:

| | Quoted Prices in Active Markets for Identical Assets (Level 1) | Significant Observable Inputs (Level2) | Significant Unobservable Inputs (Level 3) | Total Fair Value |
|---|---|---|---|---|
| Assets: | | | | |
| Mutual funds | $ 34,983,085 | $ - | $ - | $ 34,983,085 |
| Brokerage Link Asset | 790,199 | - | - | 790,199 |
| Money Market | - | 1,776,284 | - | 1,776,284 |
| Stable Value Fund | - | 887,023 | - | 887,023 |
| Total assets | $ 35,773,284 | $ 2,663,307 | $ - | $ 38,436,591 |

## NOTE 5. FAIR VALUE MEASUREMENTS – CONTINUED

### Value of Investments in Entities that Use NAV

The following table summarizes investments measured at fair value based on NAV per share as of December 31, 2015 and 2014, respectively.

| | 2015 | 2014 |
|---|---|---|
| Money Market Fund (a) | | |
| Fair value | $ 1,763,759 | $ 1,776,284 |
| Unfunded commitment | None | None |
| Redemption frequency | Immediate | Immediate |
| Other redemption restrictions | None | None |
| Redemption notice period | None | None |
| Stable value fund | | |
| Fair value | $ 1,131,641 | $ 887,023 |
| Unfunded commitment | None | None |
| Redemption frequency | Immediate | Immediate |
| Other redemption restrictions | None | None |
| Redemption notice period | None | None |

(a) The investment objective of this fund is to seek a high level of current income as is consistent with the security of principal and liquidity.

## NOTE 6. PARTY-IN-INTEREST TRANSACTIONS

Parties-in-interest are defined under Department of Labor Regulations as any fiduciary of the Plan, party rendering services to the Plan, the employer, and certain others. As such, transactions conducted by the trustee qualify as party-in-interest transactions.

## NOTE 7. PLAN TERMINATION

The Company reserves the right to discontinue the Plan at any time. Upon termination, all participants must receive written notice, and all amounts credited to the participants' accounts shall become 100% vested.

## NOTE 8. TAX STATUS

The Plan has obtained a determination letter in which the Internal Revenue Service stated that the Plan, as then designed, was in compliance with the applicable requirements of the Internal Revenue Code.

## NOTE 8. TAX STATUS – CONTINUED

The Plan has been amended since receiving the determination letter. However, the Plan Administrator believes that the Plan is currently designed and being operated in compliance with the applicable requirements of the Internal Revenue Code and is therefore qualified and the related trust is tax-exempt.

The FASB has recently issued guidance in accounting for uncertainties in income taxes which requires that the Plan recognize in its financial statements the financial effects of a tax position, if that position is more likely than not of being sustained upon examination, including resolution of any appeals or litigation processes, based upon the technical merits of the tax position. The new requirements also provide guidance on measurement, classification, interest, penalties and disclosure.

Tax positions taken related to the Plan's tax exempt status, unrelated business activities, taxable income, and deductibility of expenses and other miscellaneous tax positions have been reviewed, and management is of the opinion that material positions taken by the Plan would more likely than not be sustained by examination. Accordingly, the Plan has not recorded an income tax liability for uncertain tax benefits. The entities tax years 2012 and thereafter remain subject to examination.

## NOTE 9. RISKS AND UNCERTAINTIES

The Plan invests in various investment securities that are exposed to various risks such as interest rates, market and credit risks. Market values of investments may decline for a number of reasons, including changes in prevailing market and interest rates, increases in defaults and credit rating downgrades. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in values of investment securities will occur in the near term and that some changes could materially affect participant account balances and the amounts reported in the statements of net assets available for benefits.

## NOTE 10. RECONCILIATION OF THE FINANCIAL STATEMENTS TO FORM 5500

The following is a reconciliation of net assets available for benefits as shown in the financial statements to Form 5500 as of December 31, 2015:

| | |
|---|---|
| Net assets available for benefits per financial statements | $ 40,825,358 |
| Adjustment for fund valued at contract value | 7,728 |
| Net assets available for benefits per Form 5500 | $ 40,833,086 |

The following is a reconciliation of net increase in net assets available for benefits shown in the financial statements to Form 5500 as of December 31, 2015:

| | |
|---|---|
| Net increase in net assets available for benefits per financial statements | $ 802,413 |
| Adjustment for fund valued at contract value | 7,728 |
| Adjustment for prior year contract valuation | (13,157) |
| Net increase in net assets available for benefits per Form 5500 | $ 796,984 |

The following is a reconciliation of net assets available for benefits as shown in the financial statements to Form 5500 as of December 31, 2014:

| | |
|---|---|
| Net assets available for benefits per financial statements | $ 40,022,945 |
| Adjustment for fund valued at contract value | 13,157 |
| Net assets available for benefits per Form 5500 | $ 40,036,102 |

The following is a reconciliation of net increase in net assets available for benefits shown in the financial statements to Form 5500 as of December 31, 2014:

| | |
|---|---|
| Net increase in net assets available for benefits per financial statements | $ 4,223,059 |
| Adjustment for fund valued at contract value | 13,157 |
| Adjustment for prior year contract valuation | (12,822) |
| Net increase in net assets available for benefits per Form 5500 | $ 4,223,394 |

## NOTE 11. SUBSEQUENT EVENTS

### Change in Ownership of Plan Sponsor

Effective April 29, 2016, the Company was acquired by Novolex Holdings, Inc., which resulted in a change in ownership of the Company.

### Plan Merger

On May 18, 2016, the Novolex Investment Committee (Administrative Committee) made the decision to merge the Heritage Bag Company 401(k) Plan into the Novolex Holdings, Inc. 401(k) Plan effective January 1, 2017. The Administrative Committee is authorized to make such decisions by Consent of the Novolex Holdings, Inc. Board of Directors and as permitted by the plan document.

# SUPPLEMENTAL SCHEDULE

**HERITAGE BAG COMPANY 401 (k) PLAN**
**EIN: 75-1425644**
**PLAN NUMBER: 002**
**SCHEDULE H, PART IV, LINE 4i**
**SUPPLEMENTAL SCHEDULE OF ASSETS (HELD AT END OF YEAR)**
**DECEMBER 31, 2015**

| (a) | (b) Identity of Issue, borrower, lessor, or similar party | (c) Description of investment, including maturity date, rate of interest, collateral par, or maturity value | (d) Cost | (e) Current Value |
|---|---|---|---|---|
| * | Fidelity Investments | BrokerageLink | ** | $ 750,310 |
| * | Fidelity Investments | Fidelity Capital Appreciation | ** | 1,316,270 |
| * | Fidelity Investments | Fidelity Convertible Securities | ** | 860,231 |
| * | Fidelity Investments | Fidelity Diversified International | ** | 1,998,485 |
| * | Fidelity Investments | Fidelity Freedom K 2005 | ** | 9,910 |
| * | Fidelity Investments | Fidelity Freedom K 2010 | ** | 246,210 |
| * | Fidelity Investments | Fidelity Freedom K 2015 | ** | 384,253 |
| * | Fidelity Investments | Fidelity Freedom K 2020 | ** | 1,505,821 |
| * | Fidelity Investments | Fidelity Freedom K 2025 | ** | 1,420,203 |
| * | Fidelity Investments | Fidelity Freedom K 2030 | ** | 1,776,473 |
| * | Fidelity Investments | Fidelity Freedom K 2035 | ** | 1,591,870 |
| * | Fidelity Investments | Fidelity Freedom K 2040 | ** | 359,895 |
| * | Fidelity Investments | Fidelity Freedom K 2045 | ** | 421,365 |
| * | Fidelity Investments | Fidelity Freedom K 2050 | ** | 284,319 |
| * | Fidelity Investments | Fidelity Freedom K 2055 | ** | 196,244 |
| * | Fidelity Investments | Fidelity Freedom K 2060 | ** | 20,141 |
| * | Fidelity Investments | Fidelity Freedom K Income | ** | 189,001 |
| * | Fidelity Investments | Fidelity Government Income | ** | 321,447 |
| * | Fidelity Investments | Fidelity Growth Company | ** | 8,039,701 |
| * | Fidelity Investments | Fidelity Low Priced Stock | ** | 1,902,695 |
| * | Fidelity Investments | Fidelity Mid Cap Stock | ** | 2,008,911 |
| * | Fidelity Investments | Fidelity Real Estate Investment | ** | 644,022 |
| * | Fidelity Investments | Fidelity Retirement Gov II | ** | 1,763,759 |
| * | Fidelity Investments | Glenmede Small Cap Equity Institutional | ** | 834,313 |
| * | Fidelity Investments | Invesco Diversified Dividend Investor Class | ** | 2,551,836 |
| * | Fidelity Investments | Managed Income Portfolio | ** | 1,131,641 |
| * | Fidelity Investments | Parametric Emerging Market Institutional | ** | 282,589 |
| * | Fidelity Investments | Pimco Real Return Bond AD | ** | 199,789 |
| * | Fidelity Investments | Ridgeworth Mid Cap Value I | ** | 430,783 |
| * | Fidelity Investments | Spartan 500 Index Fund Advantage Class | ** | 3,382,903 |
| * | Fidelity Investments | Spartan Extended Market Index Advantage Class | ** | 19,794 |
| * | Fidelity Investments | Spartan International Index Fund Advantage Class | ** | 567,563 |
| * | Fidelity Investments | Spartan US Bond Index Advantage Class | ** | 1,864,477 |
| * | Fidelity Investments | Tmpl Global Bond A | ** | 180,355 |
| | Notes receivable from participants | 4.25% to 8.75% interest rates, various maturity dates | -0- | 1,367,779 |
| | | | | $ 40,825,358 |

* Party-in interest
** Historical cost information omitted as it is not required for participant-directed investments.