

Form 5500 Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Annual Return/Report of Employee Benefit Plan This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6047(e), 6057(b), and 6058(a) of the Internal Revenue Code (the Code). ▶ Complete all entries in accordance with the instructions to the Form 5500.	OMB Nos. 1210-0110 1210-0089 2015 This Form is Open to Public Inspection
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Part I	Annual Report Identification Information
For calendar plan year 2015 or fiscal plan year beginning <u>01/01/2015</u> and ending <u>12/31/2015</u>	
A This return/report is for:	☐ a multiemployer plan; ☐ a multiple-employer plan (Filers checking this box must attach a list of participating employer information in accordance with the form instructions); or ☒ a single-employer plan; ☐ a DFE (specify) _____
B This return/report is:	☐ the first return/report; ☐ the final return/report; ☐ an amended return/report; ☐ a short plan year return/report (less than 12 months).
C If the plan is a collectively-bargained plan, check here.	☐
D Check box if filing under:	☒ Form 5558; ☐ automatic extension; ☐ the DFVC program; ☐ special extension (enter description)

Part II	Basic Plan Information —enter all requested information
1a Name of plan <u>FRESH MARK, INC. SALARIED EMPLOYEES' PENSION PLAN</u>	1b Three-digit plan number (PN) ▶ <u>002</u>
	1c Effective date of plan <u>01/01/1961</u>
2a Plan sponsor's name (employer, if for a single-employer plan) Mailing address (include room, apt., suite no. and street, or P.O. Box) City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions) <u>FRESH MARK, INC.</u> <u>1888 SOUTHWAY STREET SE</u> <u>MASSILLON, OH 44646</u>	2b Employer Identification Number (EIN) <u>34-0565220</u> 2c Plan Sponsor's telephone number <u>330-834-3602</u> 2d Business code (see instructions) <u>311610</u>

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

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

SIGN HERE	<u>Filed with authorized/valid electronic signature.</u>	<u>10/14/2016</u>	<u>DAVID COCHENOUR</u>
	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

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

Form 5500 (2015)
v. 150123

3a Plan administrator's name and address ☒ Same as Plan Sponsor	3b Administrator's EIN 3c Administrator's telephone number <div style="background-color: #cccccc; height: 40px; width: 100%;"></div>
4 If the name and/or EIN of the plan sponsor has changed since the last return/report filed for this plan, enter the name, EIN and the plan number from the last return/report: a Sponsor's name	4b EIN 4c PN
5 Total number of participants at the beginning of the plan year	5 368
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 a(2) Total number of active participants at the end of the plan year b Retired or separated participants receiving benefits..... c Other retired or separated participants entitled to future benefits..... d Subtotal. Add lines 6a(2) , 6b , and 6c e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits..... f Total. Add lines 6d and 6e g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item) h Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested	6a(1) 158 6a(2) 151 6b 156 6c 33 6d 340 6e 20 6f 360 6g 6h 0
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	7
8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions: 1A 11 b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristics Codes in the instructions:	
9a Plan funding arrangement (check all that apply) (1) ☐ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor	9b Plan benefit arrangement (check all that apply) (1) ☐ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor
10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)	
a Pension Schedules (1) ☒ R (Retirement Plan Information) (2) ☐ MB (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary (3) ☒ SB (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary	b General Schedules (1) ☒ H (Financial Information) (2) ☐ I (Financial Information – Small Plan) (3) ☐ A (Insurance Information) (4) ☒ C (Service Provider Information) (5) ☐ D (DFE/Participating Plan Information) (6) ☐ G (Financial Transaction Schedules)

Part III	Form M-1 Compliance Information (to be completed by welfare benefit plans)
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11a If the plan provides welfare benefits, was the plan subject to the Form M-1 filing requirements during the plan year? (See instructions and 29 CFR 2520.101-2.) ☐ Yes ☐ No

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

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

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

Receipt Confirmation Code _____

<div>SCHEDULE SB (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation</div>	<div>Single-Employer Defined Benefit Plan Actuarial Information</div> <div>This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6059 of the Internal Revenue Code (the Code).</div> <div>File as an attachment to Form 5500 or 5500-SF.</div>	<div>OMB No. 1210-0110</div> <div>2015</div> <div>This Form is Open to Public Inspection</div>
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For calendar plan year 2015 or fiscal plan year beginning 01/01/2015 and ending 12/31/2015

Round off amounts to nearest dollar.
Caution: A penalty of \$1,000 will be assessed for late filing of this report unless reasonable cause is established.

A Name of plan FRESH MARK, INC. SALARIED EMPLOYEES' PENSION PLAN	B Three-digit plan number (PN) 002
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF FRESH MARK, INC.	D Employer Identification Number (EIN) 34-0565220

E Type of plan: ☒ Single ☐ Multiple-A ☐ Multiple-B **F** Prior year plan size: ☐ 100 or fewer ☐ 101-500 ☒ More than 500

Part I Basic Information

1 Enter the valuation date: Month 01 Day 01 Year 2015			
2 Assets:			
a Market value	2a	39623730	
b Actuarial value	2b	39623730	
3 Funding target/participant count breakdown	(1) Number of participants	(2) Vested Funding Target	(3) Total Funding Target
a For retired participants and beneficiaries receiving payment	178	12393150	12393150
b For terminated vested participants	32	1139159	1139159
c For active participants	158	17658301	18039886
d Total	368	31190610	31572195
4 If the plan is in at-risk status, check the box and complete lines (a) and (b)	☐		
a Funding target disregarding prescribed at-risk assumptions	4a		
b Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been in at-risk status for fewer than five consecutive years and disregarding loading factor	4b		
5 Effective interest rate	5	6.30%	
6 Target normal cost	6	1465182	

Statement by Enrolled Actuary
To the best of my knowledge, the information supplied in this schedule and accompanying schedules, statements and attachments, if any, is complete and accurate. Each prescribed assumption was applied in accordance with applicable law and regulations. In my opinion, each other assumption is reasonable (taking into account the experience of the plan and reasonable expectations) and such other assumptions, in combination, offer my best estimate of anticipated experience under the plan.

SIGN HERE		10/05/2016
Signature of actuary		Date
KEITH J OKRESS		14-06965
Type or print name of actuary		Most recent enrollment number
TOWERS WATSON DELAWARE INC.		216-937-4000
Firm name		Telephone number (including area code)
1001 LAKESIDE AVENUE, SUITE 1500 CLEVELAND, OH 44114		
Address of the firm		

If the actuary has not fully reflected any regulation or ruling promulgated under the statute in completing this schedule, check the box and see instructions ☐

Part II Beginning of Year Carryover and Prefunding Balances		
	(a) Carryover balance	(b) Prefunding balance
7 Balance at beginning of prior year after applicable adjustments (line 13 from prior year)	0	4639319
8 Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	0	0
9 Amount remaining (line 7 minus line 8)	0	4639319
10 Interest on line 9 using prior year's actual return of <u>5.77</u> %	0	267689
11 Prior year's excess contributions to be added to prefunding balance:		
a Present value of excess contributions (line 38a from prior year)		2749231
b(1) Interest on the excess, if any, of line 38a over line 38b from prior year Schedule SB, using prior year's effective interest rate of <u>6.51</u> %		178975
b(2) Interest on line 38b from prior year Schedule SB, using prior year's actual return		0
c Total available at beginning of current plan year to add to prefunding balance.....		2928206
d Portion of (c) to be added to prefunding balance		1600000
12 Other reductions in balances due to elections or deemed elections	0	0
13 Balance at beginning of current year (line 9 + line 10 + line 11d – line 12).....	0	6507008

Part III Funding Percentages		
14 Funding target attainment percentage.....	14	104.89 %
15 Adjusted funding target attainment percentage	15	125.50 %
16 Prior year's funding percentage for purposes of determining whether carryover/prefunding balances may be used to reduce current year's funding requirement.....	16	107.80 %
17 If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage.....	17	%

Part IV Contributions and Liquidity Shortfalls					
18 Contributions made to the plan for the plan year by employer(s) and employees:					
(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees
01/20/2016	330000	0	07/20/2016	330000	0
02/19/2016	330000	0	08/19/2016	330000	0
03/21/2016	330000	0	09/13/2016	360000	0
04/20/2016	330000	0			
05/20/2016	330000	0			
06/20/2016	330000	0			
			Totals ►	18(b)	3000000
				18(c)	0

19 Discounted employer contributions – see instructions for small plan with a valuation date after the beginning of the year:		
a Contributions allocated toward unpaid minimum required contributions from prior years.	19a	0
b Contributions made to avoid restrictions adjusted to valuation date.....	19b	0
c Contributions allocated toward minimum required contribution for current year adjusted to valuation date	19c	2756523
20 Quarterly contributions and liquidity shortfalls:		
a Did the plan have a "funding shortfall" for the prior year? ☐ Yes ☒ No		
b If line 20a is "Yes," were required quarterly installments for the current year made in a timely manner?..... ☐ Yes ☐ No		
c If line 20a is "Yes," see instructions and complete the following table as applicable:		
Liquidity shortfall as of end of quarter of this plan year		
(1) 1st	(2) 2nd	(3) 3rd

Part V Assumptions Used to Determine Funding Target and Target Normal Cost

21 Discount rate:				
a Segment rates:	1st segment: 4.72 %	2nd segment: 6.11 %	3rd segment: 6.81 %	☐ N/A, full yield curve used
b Applicable month (enter code).....				21b 4
22 Weighted average retirement age				22 64
23 Mortality table(s) (see instructions) ☐ Prescribed - combined ☒ Prescribed - separate ☐ Substitute				

Part VI Miscellaneous Items

24 Has a change been made in the non-prescribed actuarial assumptions for the current plan year? If "Yes," see instructions regarding required attachment.	☐ Yes ☒ No
25 Has a method change been made for the current plan year? If "Yes," see instructions regarding required attachment.	☐ Yes ☒ No
26 Is the plan required to provide a Schedule of Active Participants? If "Yes," see instructions regarding required attachment.....	☒ Yes ☐ No
27 If the plan is subject to alternative funding rules, enter applicable code and see instructions regarding attachment.....	27

Part VII Reconciliation of Unpaid Minimum Required Contributions For Prior Years

28 Unpaid minimum required contributions for all prior years	28	0
29 Discounted employer contributions allocated toward unpaid minimum required contributions from prior years (line 19a).....	29	0
30 Remaining amount of unpaid minimum required contributions (line 28 minus line 29)	30	0

Part VIII Minimum Required Contribution For Current Year

31 Target normal cost and excess assets (see instructions):			
a Target normal cost (line 6)	31a	1465182	
b Excess assets, if applicable, but not greater than line 31a	31b	1465182	
32 Amortization installments:	Outstanding Balance	Installment	
a Net shortfall amortization installment	0	0	
b Waiver amortization installment	0	0	
33 If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____) and the waived amount	33	0	
34 Total funding requirement before reflecting carryover/prefunding balances (lines 31a - 31b + 32a + 32b - 33)...	34	0	
	Carryover balance	Prefunding balance	Total balance
35 Balances elected for use to offset funding requirement.....	0	0	0
36 Additional cash requirement (line 34 minus line 35)	36	0	
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)	37	2756523	
38 Present value of excess contributions for current year (see instructions)			
a Total (excess, if any, of line 37 over line 36)	38a	2756523	
b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances	38b	0	
39 Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37)	39	0	
40 Unpaid minimum required contributions for all years.....	40	0	

Part IX Pension Funding Relief Under Pension Relief Act of 2010 (See Instructions)

41 If an election was made to use PRA 2010 funding relief for this plan:			
a Schedule elected	☐ 2 plus 7 years ☐ 15 years		
b Eligible plan year(s) for which the election in line 41a was made	☐ 2008 ☐ 2009 ☐ 2010 ☐ 2011		
42 Amount of acceleration adjustment	42	0	
43 Excess installment acceleration amount to be carried over to future plan years	43	0	

<div>SCHEDULE C</div> <div>(Form 5500)</div> <div>Department of the Treasury Internal Revenue Service</div> <div>Department of Labor Employee Benefits Security Administration</div> <div>Pension Benefit Guaranty Corporation</div>	<div>Service Provider Information</div> <div>This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA).</div> <div>▶ File as an attachment to Form 5500.</div>	OMB No. 1210-0110
		2015
		This Form is Open to Public Inspection.

For calendar plan year 2015 or fiscal plan year beginning 01/01/2015 and ending 12/31/2015		
A Name of plan FRESH MARK, INC. SALARIED EMPLOYEES' PENSION PLAN	B Three-digit plan number (PN) ▶	002
C Plan sponsor's name as shown on line 2a of Form 5500 FRESH MARK, INC.	D Employer Identification Number (EIN) 34-0565220	

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

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

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

JPMORGAN CHASE BANK, N.A.

13-4994650

(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 50	NONE	45812	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

TOWERS WATSON DELAWARE INC.

23-1159360

(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?
11 50	NONE	6951	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

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

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

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

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

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

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

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

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

Part I Service Provider Information (continued)

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE H (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	Financial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ► File as an attachment to Form 5500.	<small>OMB No. 1210-0110</small> 2015 This Form is Open to Public Inspection
For calendar plan year 2015 or fiscal plan year beginning <u>01/01/2015</u> and ending <u>12/31/2015</u>		
A Name of plan <u>FRESH MARK, INC. SALARIED EMPLOYEES' PENSION PLAN</u>	B Three-digit plan number (PN) ►	<u>002</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>FRESH MARK, INC.</u>	D Employer Identification Number (EIN) <u>34-0565220</u>	

Part I	Asset and Liability Statement		(a) Beginning of Year	(b) End of Year
1 Current value of plan assets and liabilities at the beginning and end of the plan year. Combine the value of plan assets held in more than one trust. Report the value of the plan's interest in a commingled fund containing the assets of more than one plan on a line-by-line basis unless the value is reportable on lines 1c(9) through 1c(14). Do not enter the value of that portion of an insurance contract which guarantees, during this plan year, to pay a specific dollar benefit at a future date. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 1b(1), 1b(2), 1c(8), 1g, 1h, and 1i. CCTs, PSAs, and 103-12 IEs also do not complete lines 1d and 1e. See instructions.				
	Assets			
a	Total noninterest-bearing cash	1a		
b	Receivables (less allowance for doubtful accounts):			
	(1) Employer contributions	1b(1)	3126282	3000000
	(2) Participant contributions	1b(2)		
	(3) Other.....	1b(3)	2853	4778
c	General investments:			
	(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	178689	2700330
	(2) U.S. Government securities.....	1c(2)		
	(3) Corporate debt instruments (other than employer securities):			
	(A) Preferred	1c(3)(A)		
	(B) All other.....	1c(3)(B)		
	(4) Corporate stocks (other than employer securities):			
	(A) Preferred	1c(4)(A)		
	(B) Common	1c(4)(B)	2965423	3102767
	(5) Partnership/joint venture interests	1c(5)		
	(6) Real estate (other than employer real property)	1c(6)		
	(7) Loans (other than to participants)	1c(7)		
	(8) Participant loans	1c(8)		
	(9) Value of interest in common/collective trusts.....	1c(9)		
	(10) Value of interest in pooled separate accounts.....	1c(10)		
	(11) Value of interest in master trust investment accounts	1c(11)		
	(12) Value of interest in 103-12 investment entities	1c(12)		
	(13) Value of interest in registered investment companies (e.g., mutual funds).....	1c(13)	33677231	31500245
	(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)		
	(15) Other	1c(15)		

1d Employer-related investments:

		(a) Beginning of Year	(b) End of Year
(1) Employer securities	1d(1)		
(2) Employer real property	1d(2)		
e Buildings and other property used in plan operation	1e		
f Total assets (add all amounts in lines 1a through 1e)	1f	39950478	40308120

Liabilities

g Benefit claims payable	1g		
h Operating payables	1h	21458	2193
i Acquisition indebtedness	1i		
j Other liabilities	1j		
k Total liabilities (add all amounts in lines 1g through 1j)	1k	21458	2193

Net Assets

l Net assets (subtract line 1k from line 1f)	1l	39929020	40305927
---	-----------	----------	----------

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)	3000000	
(B) Participants	2a(1)(B)		
(C) Others (including rollovers)	2a(1)(C)		
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		3000000
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	51349	
(B) U.S. Government securities	2b(1)(B)		
(C) Corporate debt instruments	2b(1)(C)		
(D) Loans (other than to participants)	2b(1)(D)		
(E) Participant loans	2b(1)(E)		
(F) Other	2b(1)(F)		
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		51349
(2) Dividends: (A) Preferred stock	2b(2)(A)		
(B) Common stock	2b(2)(B)	285399	
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	1441912	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		1727311
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)	207539	
(B) Aggregate carrying amount (see instructions)	2b(4)(B)	120067	
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)		87472
(5) Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)		
(B) Other	2b(5)(B)	-94161	
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		-94161

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		-2313281
c Other income	2c		
d Total income. Add all income amounts in column (b) and enter total	2d		2458690

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	1975236	
(2) To insurance carriers for the provision of benefits	2e(2)		
(3) Other	2e(3)		
(4) Total benefit payments. Add lines 2e(1) through (3)	2e(4)		1975236
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions)	2g		
h Interest expense	2h		
i Administrative expenses: (1) Professional fees	2i(1)	42912	
(2) Contract administrator fees	2i(2)		
(3) Investment advisory and management fees	2i(3)	36084	
(4) Other	2i(4)	27551	
(5) Total administrative expenses. Add lines 2i(1) through (4)	2i(5)		106547
j Total expenses. Add all expense amounts in column (b) and enter total	2j		2081783

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		376907
l Transfers of assets:			
(1) To this plan	2l(1)		
(2) From this plan	2l(2)		

Part III Accountant's Opinion

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

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

(1) ☐ Unqualified (2) ☐ Qualified (3) ☒ Disclaimer (4) ☐ Adverse

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

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

(1) Name: ERNST & YOUNG LLP

(2) EIN: 34-6565596

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.)		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.)		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.)		X		
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)		X		
e Was this plan covered by a fidelity bond?	X			1000000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		X		
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?		X		
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?		X		
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	X			
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked, and see instructions for format requirements.)	X			
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?		X		
l Has the plan failed to provide any benefit when due under the plan?		X		
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)				
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.				
o Did the plan trust incur unrelated business taxable income?				
p Were in-service distributions made during the plan year?				

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

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

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

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

Part V Trust Information

6a Name of trust	6b Trust's EIN
6c Name of trustee or custodian	6d Trustee's or custodian's telephone number

SCHEDULE R (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Retirement Plan Information This schedule is required to be filed under section 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110 2015 This Form is Open to Public Inspection.
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For calendar plan year 2015 or fiscal plan year beginning 01/01/2015 and ending 12/31/2015

A Name of plan <u>FRESH MARK, INC. SALARIED EMPLOYEES' PENSION PLAN</u>	B Three-digit plan number (PN) ▶ <u>002</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>FRESH MARK, INC.</u>	D Employer Identification Number (EIN) <u>34-0565220</u>

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	<u>0</u>
2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits): EIN(s): <u>13-6902950</u>		
Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.		
3 Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year.....	3	<u>6</u>

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

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

Part III	Amendments
-----------------	-------------------

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

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

Schedule R (Form 5500) 2015
v. 150123

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

14	Enter the number of participants on whose behalf no contributions were made by an employer as an employer of the participant for:		
	a The current year	14a	
	b The plan year immediately preceding the current plan year	14b	
	c The second preceding plan year	14c	
15	Enter the ratio of the number of participants under the plan on whose behalf no employer had an obligation to make an employer contribution during the current plan year to:		
	a The corresponding number for the plan year immediately preceding the current plan year	15a	
	b The corresponding number for the second preceding plan year	15b	
16	Information with respect to any employers who withdrew from the plan during the preceding plan year:		
	a Enter the number of employers who withdrew during the preceding plan year	16a	
	b If line 16a is greater than 0, enter the aggregate amount of withdrawal liability assessed or estimated to be assessed against such withdrawn employers	16b	
17	If assets and liabilities from another plan have been transferred to or merged with this plan during the plan year, check box and see instructions regarding supplemental information to be included as an attachment. ☐		

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

18	If any liabilities to participants or their beneficiaries under the plan as of the end of the plan year consist (in whole or in part) of liabilities to such participants and beneficiaries under two or more pension plans as of immediately before such plan year, check box and see instructions regarding supplemental information to be included as an attachment ☐
19	If the total number of participants is 1,000 or more, complete lines (a) through (c)
	a Enter the percentage of plan assets held as: Stock: _____% Investment-Grade Debt: _____% High-Yield Debt: _____% Real Estate: _____% Other: _____%
	b Provide the average duration of the combined investment-grade and high-yield debt: ☐ 0-3 years ☐ 3-6 years ☐ 6-9 years ☐ 9-12 years ☐ 12-15 years ☐ 15-18 years ☐ 18-21 years ☐ 21 years or more
	c What duration measure was used to calculate line 19(b)? ☐ Effective duration ☐ Macaulay duration ☐ Modified duration ☐ Other (specify): _____

Part VII	IRS Compliance Questions
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20a Is the plan a 401(k) plan?	☐ Yes	☐ No
20b If "Yes," how does the 401(k) plan satisfy the nondiscrimination requirements for employee deferrals and employer matching contributions (as applicable) under sections 401(k)(3) and 401(m)(2)?	☐ Design-based safe harbor method	☐ ADP/ACP test
20c If the ADP/ACP test is used, did the 401(k) plan perform ADP/ACP testing for the plan year using the "current year testing method" for nonhighly compensated employees (Treas. Reg sections 1.401(k)-2(a)(2)(ii) and 1.401(m)-2(a)(2)(ii))?	☐ Yes	☐ No
21a Check the box to indicate the method used by the plan to satisfy the coverage requirements under section 410(b):	☐ Ratio percentage test	☐ Average benefit test
21b Does the plan satisfy the coverage and nondiscrimination tests of sections 410(b) and 401(a)(4) by combining this plan with any other plans under the permissive aggregation rules?	☐ Yes	☐ No
22a Has the plan been timely amended for all required tax law changes?	☐ Yes	☐ No ☐ N/A
22b Date the last plan amendment/restatement for the required tax law changes was adopted ____/____/____. Enter the applicable code _____. (See instructions for tax law changes and codes).		
22c If the plan sponsor is an adopter of a pre-approved master and prototype (M&P) or volume submitter plan that is subject to a favorable IRS opinion or advisory letter, enter the date of that favorable letter ____/____/____ and the letter's serial number _____.		
22d If the plan is an individually-designed plan and received a favorable determination letter from the IRS, enter the date of the plan's last favorable determination letter ____/____/____.		
23 Is the Plan maintained in a U.S. territory (i.e., Puerto Rico (if no election under ERISA section 1022(i)(2) has been made), American Samoa, Guam, the Commonwealth of the Northern Mariana Islands or the U.S. Virgin Islands)?	☐ Yes	☐ No

FINANCIAL STATEMENTS AND
SUPPLEMENTAL SCHEDULES

Fresh Mark, Inc. Salaried Employees' Pension Plan
Years Ended December 31, 2015 and 2014
With Report of Independent Auditors

Ernst & Young LLP



Building a better
working world

Fresh Mark, Inc.
Salaried Employees' Pension Plan

Financial Statements and Supplemental Schedules

Years Ended December 31, 2015 and 2014

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Report of Independent Auditors

The Plan Administrator
Fresh Mark, Inc. Salaried Employees' Pension Plan

Report on the Financial Statements

We were engaged to audit the accompanying financial statements of the Fresh Mark, Inc. Salaried Employees' Pension 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

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

Auditor's Responsibility

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

Basis for Disclaimer of Opinion

As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the certified investment information described in Note 4, except for comparing such information with the related information included in the financial statements. We have been informed by the plan administrator that the entity that certified the investment information meets the requirements of 29 CFR 2520.103-8. The plan administrator has obtained certifications as of December 31, 2015 and 2014, and for the years then ended, stating that the investment information provided to the plan administrator is complete and accurate.

Disclaimer of Opinion on Financial Statements

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.

Disclaimer of Opinion on Supplemental Schedules

The accompanying supplemental schedules of assets (held at end of year) as of December 31, 2015, and reportable transactions for the year then ended, are presented for purposes of additional analysis and are not a required part of the financial statements but are supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974. Because of the significance of the matter described in the Basis for Disclaimer of Opinion paragraph, we do not express an opinion on the supplemental schedules referred to above.

Report on Compliance of Form and Content With Department of Labor's Rules and Regulations

The form and content of the information included in the financial statements and supplemental schedules, other than that derived from the certified investment information, have been audited by us in accordance with auditing standards generally accepted in the United States 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.

Ernst & Young LLP

October 14, 2016

Fresh Mark, Inc.
Salaried Employees' Pension Plan

Statements of Net Assets Available for Benefits

	December 31	
	2015	2014
Assets		
Investments, at fair value	\$ 37,303,342	\$ 36,821,343
Receivables:		
Employer contributions	3,000,000	3,126,282
Accrued income	4,778	2,853
Total receivables	3,004,778	3,129,135
Total assets	40,308,120	39,950,478
Liabilities		
Accrued administrative expenses	2,193	21,458
Net assets available for benefits	\$ 40,305,927	\$ 39,929,020

See accompanying notes.

Fresh Mark, Inc.
Salaried Employees' Pension Plan

Statements of Changes in Net Assets Available for Benefits

	Year Ended December 31	
	2015	2014
Additions		
Net (depreciation) appreciation in fair value of investments	\$ (2,319,970)	\$ 319,346
Investment income	1,778,660	1,862,313
Contributions from Fresh Mark, Inc.	3,000,000	3,142,106
Total additions	2,458,690	5,323,765
Deductions		
Benefits paid directly to participants	1,975,236	1,761,336
Administrative expenses	106,547	133,478
Total deductions	2,081,783	1,894,814
Net increase	376,907	3,428,951
Net assets available for benefits:		
Beginning of year	39,929,020	36,500,069
End of year	<u>\$ 40,305,927</u>	<u>\$ 39,929,020</u>

See accompanying notes.

Fresh Mark, Inc.
Salaried Employees' Pension Plan

Notes to Financial Statements

December 31, 2015 and 2014

1. Description of the Plan

The Plan is a noncontributory defined benefit plan established for employees of Fresh Mark, Inc. (Company and Plan Sponsor) who are not covered by a collective bargaining agreement, have attained age 21, and have completed one year of credited service. Effective January 1, 2007, the Plan was amended to preclude any employee hired by the Company on or after that date from participating in the Plan. Effective June 1, 2007, the Plan was further amended to preclude the participation of an employee transferred from a division not previously eligible for participating in the Plan who would have otherwise become eligible upon such transfer.

The Company has agreed to voluntarily contribute such additional amounts as are necessary to provide assets sufficient to meet the benefits to be paid to plan members. The Company's present intention is to make annual contributions in amounts sufficient to fund the Plan's current years' service cost and the initial past service cost plus interest over a period of 30 years. The Plan has met the Employee Retirement Income Security Act of 1974 (ERISA) minimum funding requirements for 2015 and 2014.

Although it has not expressed an intention to do so, the Company reserves the right under the Plan to discontinue its contributions at any time and to terminate the Plan subject to the provisions of ERISA. Upon termination, the net assets of the Plan will be allocated for payment to the participants in an order of priority as prescribed by ERISA and its related regulations and the plan document.

Should the Plan terminate at some future time, its net assets generally will not be available on a pro rata basis to provide participants' benefits. Whether a particular participant's accumulated plan benefits will be paid depends on both the priority of those benefits and the level of benefits guaranteed by the Pension Benefit Guaranty Corporation (PBGC) at that time. Some benefits may be fully or partially provided for by the then-existing assets and the PBGC guarantee, while other benefits may not be provided for at all.

Information about the plan agreement, the vesting and benefit provisions, and the PBGC's benefit guarantee is contained in the *Summary Plan Description*. Copies of this document are available from the plan administrator.

Fresh Mark, Inc.
Salaried Employees' Pension Plan

Notes to Financial Statements (continued)

2. Significant Accounting Policies

Investment Valuation

At December 31, 2015 and 2014, the investments of the Fresh Mark, Inc. Salaried Employees' Pension Plan (the Plan) were collectively held in the Fresh Mark, Inc. Salaried Employees' Pension Plan Trust, sponsored by the trustee. Investments held by the Plan are stated at fair value. Refer to Note 5 for further discussion of fair value measurements.

Actuarial Present Value of Accumulated Plan Benefits

Accumulated plan benefits (see Note 3) are those estimated future periodic payments, including lump-sum distributions that are attributable under the Plan's provisions to services rendered by the employees to the valuation date. Accumulated plan benefits include benefits expected to be paid to (a) retired or terminated employees or their beneficiaries, (b) beneficiaries of deceased employees, and (c) present employees or their beneficiaries. Benefits for retired or terminated employees or their beneficiaries are based on each individual's average total compensation during the highest five consecutive years of the ten years preceding retirement. The accumulated plan benefits for active employees are based on their average total compensation during the highest five consecutive years of the ten years preceding the valuation date. Benefits payable under all circumstances – retirement, death, disability, and termination of employment – are included, to the extent they are deemed attributable to employee service rendered to the valuation date.

Use of Estimates

The preparation of financial statements in conformity with generally accepted accounting principles (GAAP) in the United States requires management to make estimates and assumptions that affect the amounts reported in the financial statements and accompanying notes and supplemental schedules. Actual results could differ from those estimates.

Basis of Accounting

The accompanying financial statements of the Plan are prepared using the accrual basis of accounting.

Fresh Mark, Inc.
Salaried Employees' Pension Plan

Notes to Financial Statements (continued)

2. Significant Accounting Policies (continued)

Payment of Benefits

Benefits are recorded when paid.

Plan Amendment

Effective January 1, 2013, the Plan was amended to define the criteria for participants to be eligible to receive a single lump-sum payment option. Participants eligible for normal, early or disability retirement benefit, a participant eligible for a deferred vested pension, or a Spouse who is entitled to a benefit under the Plan are eligible to elect a lump-sum payment option upon commencement of benefits. There was approximately \$649,000 in lump-sum payments paid during 2015 and \$507,000 paid during 2014 specific to the Salaried Employees' Pension Plan.

New Accounting Pronouncements

In May 2015, the FASB issued ASU 2015-07, *Disclosures for Investments in Certain Entities that Calculate Net Asset Value Per Share (or its Equivalent)*. ASU 2015-07 removes the requirement to categorize within the fair value hierarchy investments for which fair values are estimated using the net asset value practical expedient provided by Accounting Standards Codification 820, *Fair Value Measurement*. Disclosures about investments in certain entities that calculate net asset value per share are limited under ASU 2015-07 to those investments for which the entity has elected to estimate the fair value using the net asset value practical expedient. ASU 2015-07 is effective for fiscal years beginning after December 15, 2016, with retrospective application to all periods presented. Early application is permitted. Management is currently evaluating the effect that the provisions of ASU 2015-07 will have on the Plan's financial statements.

In July 2015, the Financial Accounting Standards Board (FASB) issued Accounting Standards Update (ASU) 2015-12, *Plan Accounting: Defined Benefit Pension Plans (Topic 960), Defined Contribution Pension Plans (Topic 962), Health and Welfare Benefit Plans (Topic 965): (Part I) Fully Benefit-Responsive Investment Contracts, (Part II) Plan Investment Disclosures, (Part III) Measurement Date Practical Expedient*. Part I of the ASU 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 of the ASU eliminates the requirements to disclose individual investments that

Fresh Mark, Inc.
Salaried Employees' Pension Plan

Notes to Financial Statements (continued)

2. Significant Accounting Policies (continued)

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. It also simplifies the level of disaggregation of investments that are measured using fair value. Plans will continue to disaggregate investments that are measured using fair value by general type; however, plans are no longer required to also disaggregate investments 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 of the ASU allows a plan with a fiscal year end that doesn't coincide with the end of a calendar month to measure its investments and investment-related accounts using the month end closest to its fiscal year end. The ASU is effective for fiscal years beginning after December 15, 2015. Parts I and III are not applicable to the Plan. Management has elected to adopt ASU 2015-12 early.

Subsequent Events

Management evaluated all activity of the Plan through October 14, 2016, the date the financial statements were available for issuance.

Effective September 1, 2016, the Trustee for the Plan has been changed from JPMorgan Chase Bank, N.A. to Fifth Third Bank.

3. Accumulated Plan Benefits

The Plan's actuary, Towers Watson, estimates the actuarial present value of accumulated plan benefits, which is the amount that results from applying actuarial assumptions to adjust the accumulated plan benefits earned by the participants to reflect the time value of money (through discounts for interest) and the probability of payment (by means of decrements such as for death, disability, withdrawal, or retirement) between the valuation date and the expected date of payment.

Fresh Mark, Inc.
Salaried Employees' Pension Plan

Notes to Financial Statements (continued)

3. Accumulated Plan Benefits (continued)

The accumulated plan benefit information as of December 31, 2014, is as follows:

Actuarial present value of accumulated plan benefits:	
Vested benefits:	
Participants currently receiving payments	\$ 12,543,070
Other participants	18,458,040
Total vested benefits	<u>31,001,110</u>
Nonvested benefits	<u>286,749</u>
Actuarial present value of accumulated plan benefits at end of year	<u>\$ 31,287,859</u>

The changes in accumulated plan benefits for the year ended December 31, 2014, are as follows:

Actuarial present value of accumulated plan benefits at beginning of year	\$ 29,910,060
Increase (decrease) during the year attributed to:	
Benefits accumulated	1,108,695
Actuarial gains	(3,881)
Increase for interest due to the decrease in the discount period	2,034,321
Benefits paid	<u>(1,761,336)</u>
Net increase	<u>1,377,799</u>
Actuarial present value of accumulated plan benefits at end of year	<u>\$ 31,287,859</u>

The significant assumptions underlying the actuarial computations are as follows:

Retirement rate	Various rates ranging from 1% at age 55 to 100% at age 65
Rate of return on investments	6.75% (6.75% in the prior year)
Mortality	RP-2014 Mortality Table for sex-distinct rates for employees and annuitants, projected generationally with Scale MP-2014

Fresh Mark, Inc.
Salaried Employees' Pension Plan

Notes to Financial Statements (continued)

3. Accumulated Plan Benefits (continued)

These actuarial assumptions are based on the presumption that the Plan will continue. Were the Plan to terminate, different actuarial assumptions and other factors might be applicable in determining the actuarial present value of accumulated plan benefits.

4. Investments

All investment information disclosed in the accompanying financial statements and supplemental schedules, including investments held at December 31, 2015 and 2014, and net (depreciation) appreciation in fair value of investments and investment income for the years ended December 31, 2015 and 2014, was obtained or derived from information supplied to the plan administrator and certified as complete and accurate by JPMorgan Chase Bank, N.A., the trustee.

The Plan's investments are held by the trustee. The Plan's investments (including investments bought, sold, as well as held during the year) (depreciated) appreciated in fair value as follows:

	Year Ended December 31	
	2015	2014
Common stocks	\$ (6,689)	\$ (38,265)
Mutual funds	(2,313,281)	357,611
	<u>\$ (2,319,970)</u>	<u>\$ 319,346</u>

5. Fair Value Measurements

Fair value is defined under ASC 820 as the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date (i.e., an exit price). To measure fair value, a hierarchy has been established that requires an entity to maximize the use of observable inputs and minimize the use of unobservable inputs. As such, the hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets and liabilities (Level 1) and the lowest priority to unobservable inputs (Level 3). The three levels of the fair value hierarchy in ASC 820 are described below:

- Level 1 – Unadjusted quoted prices in active markets that are accessible to the Plan at the measurement date for identical assets or liabilities.

Fresh Mark, Inc.
Salaried Employees' Pension Plan

Notes to Financial Statements (continued)

5. Fair Value Measurements (continued)

- Level 2 – Inputs other than quoted prices in active markets for identical assets and liabilities that are observable either directly or indirectly for substantially the full term of the asset or liability. Level 2 inputs include the following:
 - Quoted prices for similar assets or liabilities in active markets
 - Quoted prices for identical or similar assets or liabilities in markets that are not active
 - Observable inputs other than quoted prices that are used in the valuation of the assets or liabilities (e.g., interest rate and yield curve quotes at commonly quoted intervals)
 - Inputs that are derived principally from or corroborated by observable market data by correlation or other means
- Level 3 – Unobservable inputs for the asset or liability (i.e., supported by little or no market activity). Level 3 inputs include management's own assumption about the assumptions that market participants would use in pricing the asset or liability (including assumptions about risk).

Following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodologies used at December 31, 2015 and 2014:

Common stocks – Valued at the closing price reported on the active market on which the individual securities are traded.

Mutual funds – Valued at quoted market prices, which represent the net asset values of the shares held by the Plan on the last business day of the plan year.

Money market fund – Valued at net asset value of units held by the Plan at year-end.

Fresh Mark, Inc.
Salaried Employees' Pension Plan

Notes to Financial Statements (continued)

5. Fair Value Measurements (continued)

The level in the fair value hierarchy within which the fair value measurement is classified is determined based on the lowest level input that is significant to the fair value measure in its entirety.

The following table sets forth by level, within the fair value hierarchy, the Plan's assets at fair value as of December 31, 2015:

	Level 1	Level 2	Level 3	Total
Common stocks:				
U.S. companies	\$ 2,557,741	\$ —	\$ —	\$ 2,557,741
Foreign companies	3,565,337	—	—	3,565,337
Mutual funds:				
Large-cap value	5,319,442	—	—	5,319,442
Large-cap blend	3,019,739	—	—	3,019,739
Large-cap growth	2,817,768	—	—	2,817,768
Mid-cap blend	513,400	—	—	513,400
Mid-cap growth	772,212	—	—	772,212
Small-cap value	733,674	—	—	733,674
Small-cap blend	983,210	—	—	983,210
Small-cap growth	374,972	—	—	374,972
Inflation-protected bond	4,071,648	—	—	4,071,648
Intermediate term bond	3,408,605	—	—	3,408,605
Short-term bond	59,082	—	—	59,082
World bond	1,701,977	—	—	1,701,977
Nontraditional bond	874,089	—	—	874,089
Bank loan	909,421	—	—	909,421
Money market taxable	1,630,008	—	—	1,630,008
Multisector bond	897,023	—	—	897,023
Short-term government	393,665	—	—	393,665
Money market fund	—	2,700,330	—	2,700,330
Total assets at fair value	\$ 34,603,013	\$ 2,700,330	\$ —	\$ 37,303,343

Fresh Mark, Inc.
Salaried Employees' Pension Plan

Notes to Financial Statements (continued)

5. Fair Value Measurements (continued)

The following table sets forth by level, within the fair value hierarchy, the Plan's assets at fair value as of December 31, 2014:

	Level 1	Level 2	Level 3	Total
Common stocks:				
U.S. companies	\$ 2,475,751	\$ —	\$ —	\$ 2,475,751
Foreign companies	4,999,414	—	—	4,999,414
Mutual funds:				
Large-cap value	6,957,180	—	—	6,957,180
Large-cap blend	2,985,039	—	—	2,985,039
Large-cap growth	2,723,340	—	—	2,723,340
Mid-cap blend	562,102	—	—	562,102
Mid-cap growth	783,167	—	—	783,167
Small-cap value	932,079	—	—	932,079
Small-cap blend	989,187	—	—	989,187
Small-cap growth	383,212	—	—	383,212
Inflation-protected bond	4,251,213	—	—	4,251,213
Intermediate term bond	3,402,598	—	—	3,402,598
Short-term bond	58,912	—	—	58,912
World bond	1,821,349	—	—	1,821,349
Nontraditional bond	868,380	—	—	868,380
Bank loan	922,219	—	—	922,219
Money market taxable	129,970	—	—	129,970
Multisector bond	983,393	—	—	983,393
Short-term government	414,149	—	—	414,149
Money market fund	—	178,689	—	178,689
Total assets at fair value	\$ 36,642,654	\$ 178,689	\$ —	\$ 36,821,343

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

Fresh Mark, Inc.
Salaried Employees' Pension Plan

Notes to Financial Statements (continued)

6. Risks and Uncertainties

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

Plan contributions are made and the actuarial present value of accumulated plan benefits are reported based on certain assumptions pertaining to interest rates, inflation rates, and employee demographics, all of which are subject to change. Due to uncertainties inherent in the estimation and assumption processes, it is at least reasonably possible that changes in these estimates and assumptions in the near term could materially affect the amounts reported and disclosed in the financial statements.

7. Tax Status

The Plan has received a determination letter from the Internal Revenue Service (IRS) dated March 31, 2012, stating that the Plan is qualified under Section 401(a) of the Internal Revenue Code (the Code) and, therefore, the related trust is exempt from taxation. Subsequent to the issuance of the determination letter, the Plan was amended and restated. Once qualified, the Plan is required to operate in conformity with the Code to maintain its qualified status. The plan administration believes the Plan is being operated in compliance with the applicable requirements of the Code and therefore believes the Plan is qualified and the related trust is tax-exempt.

Accounting principles generally accepted in the United States require plan management to evaluate uncertain tax positions taken by the Plan. The financial statement effects of a tax position are recognized when the position is more likely than not, based on the technical merits, to be sustained upon examination by the IRS. The plan administrator has analyzed the tax positions taken by the Plan, and has concluded that as of December 31, 2015, there are no uncertain positions. The Plan has recognized no interest or penalties related to uncertain tax positions. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress. The plan administrator believes it is no longer subject to income tax examinations for years prior to 2012.

Fresh Mark, Inc.
Salaried Employees' Pension Plan

Notes to Financial Statements (continued)

8. Related-Party Transactions

Certain of the Plan's assets are invested in funds managed by the trustee of the Plan. Also, certain legal and accounting fees and certain administrative expenses relating to the maintenance of participant eligibility records were paid by the Company. Fees paid during the year for other services rendered by parties in interest were based on customary and reasonable rates for such services. These transactions qualify as party-in-interest transactions; however, they are exempt from the prohibited transaction rules under ERISA.

Supplemental Schedules

Fresh Mark, Inc.
Salaried Employees' Pension Plan

EIN #34-0565220 Plan #002

Schedule H, Line 4i – Schedule of Assets (Held at End of Year)

December 31, 2015

5500 SUMMARY

ACCOUNT NO. 6800175300

FRESH MARK SALARIED - PAYMENT ACCT

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PART II 2 (CONT.)

EXPENSES

	(A) AMOUNT	(B) TOTAL
E BENEFIT PAYMENT AND PAYMENTS TO PROVIDE BENEFITS:		
(1) DIRECTLY TO PARTICIPANTS OR BENEFICIARIES, INCLUDING DIRECT ROLLOVERS 2E(1)	1,975,236.08-	
(2) TO INSURANCE CARRIERS FOR THE PROVISION OF BENEFITS 2E(2)	0.00	
(3) OTHER 2E(3)	0.00	
(4) TOTAL BENEFIT PAYMENTS (ADD LINES 2E(1) THROUGH (3)) 2E(4)		1,975,236.08-
F CORRECTIVE DISTRIBUTIONS (SEE INSTRUCTIONS) 2F	0.00	
G CERTAIN DEEMED DISTRIBUTIONS OF PARTICIPANTS LOANS (SEE INSTRUCTIONS) 2G	0.00	
H INTEREST EXPENSE 2H		0.00
I ADMINISTRATIVE EXPENSES: (1) PROFESSIONAL FEES 2I(1)	72,139.68-	
(2) CONTRACT ADMINISTRATOR FEES 2I(2)	0.00	
(3) INVESTMENT ADVISORY AND MANAGEMENT FEES 2I(3)	36,084.18-	
(4) OTHER 2I(4)	17,588.17-	
(5) TOTAL ADMINISTRATIVE EXPENSES. ADD LINES 2I(1) THROUGH (4) 2I(5)		125,812.03-
J TOTAL EXPENSES. ADD ALL EXPENSE AMOUNTS IN COLUMN (B) AND ENTER TOTAL (4) 2J		2,101,048.11-

NET INCOME AND RECONCILIATION

K NET INCOME (LOSS) (SUBTRACT LINE 2J FROM 2D) 2K	584,910.72
L TRANSFERS OF ASSETS:	
(1) TO THIS PLAN 2L(1)	2,100,000.00
(2) FROM THIS PLAN 2L(2)	2,100,000.00-

THE 5500 SUMMARY IS BEING PROVIDED FOR REFERENCE IN PREPARING REGULATORY REPORTS. THE PREPARER MUST INDEPENDENTLY REVIEW ASSET AND TRANSACTION REPORT DETAIL, PARTICULARLY WHENEVER PARTICIPANT LOANS, REAL ESTATE, EMPLOYER SECURITIES OR UNIQUE ASSETS ARE HELD WITHIN THE PORTFOLIO. JPMORGAN WILL NOT BE RESPONSIBLE FOR THE ACCURACY OF SUCH INFORMATION.

ITEM 27A - SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES
ASSETS HELD AT END OF PLAN YEAR 12/31/15

ACCOUNT NO. 6800175300

FRESH MARK SALARIED - PAYMENT ACCT

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DESCRIPTION OF INVESTMENT	COST BASIS	CURRENT MARKET VALUE
<u>CASH EQUIVALENTS</u>		
JPMORGAN LIQUID ASSETS MONEY MARKET	2,700,330.28	2,700,330.28
FUND MORGAN CLASS (MJLXX)		
SUB-ACCOUNT 6800175300 200,204.6600		
SUB-ACCOUNT 6800175303 2,104.4800		
SUB-ACCOUNT 6800175304 2,498,021.1400		
 <u>FIXED INCOME</u>		
JPMORGAN CORE BOND FUND	628,949.88	630,456.46
CLASS A (PGBOX)		
SUB-ACCOUNT 6800175304 54,584.9750		
JPMORGAN CORE PLUS BOND FUND	1,349,874.53	1,347,413.86
CLASS A (ONLAX)		
SUB-ACCOUNT 6800175304 167,172.9350		
JPMORGAN LIMITED DURATION BOND FUND	54,178.89	59,082.01
CLASS A (ONUAX)		
SUB-ACCOUNT 6800175304 5,931.9290		

ITEM 27A - SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES
ASSETS HELD AT END OF PLAN YEAR 12/31/15

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FRESH MARK SALARIED - PAYMENT ACCT

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DESCRIPTION OF INVESTMENT	COST BASIS	CURRENT MARKET VALUE
AIM INVT SECS FDS INVESCO INVT SECS	398,187.93	393,665.31
INVESCO LTD MAT TREAS FD CL Y		
SUB-ACCOUNT 6800175304 37,888.8650		
BLACKROCK FDS II	995,196.65	917,654.02
INFLATION PROTECTED BD PORT SVC CL		
SUB-ACCOUNT 6800175304 89,790.0220		
CAPITAL WORLD BD FD	804,853.40	760,873.33
CL R-6		
SUB-ACCOUNT 6800175304 40,236.5590		
COLUMBIA FDS SER TR I	941,876.93	874,089.11
STRATEGIC INCOME FD CL Y		
SUB-ACCOUNT 6800175304 157,210.2710		
DODGE & COX INCOME FD	1,059,613.73	1,049,495.95
SUB-ACCOUNT 6800175304 78,968.8450		
DOUBLELINE FDS TR	398,919.40	381,238.68
TOTAL RETURN BD FD CL I		
SUB-ACCOUNT 6800175304 35,365.3690		

ITEM 27A - SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES
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FRESH MARK SALARIED - PAYMENT ACCT

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DESCRIPTION OF INVESTMENT		COST BASIS	CURRENT MARKET VALUE
FIDELITY ADVISOR SER II FLTG RATE HIGH INCOME FD SUB-ACCOUNT 6800175304	99,607.9900	986,660.06	909,420.95
FIDELITY FIXED INCOME TR INFLATION-PROTECTED BD FD SUB-ACCOUNT 6800175304	141,776.7220	1,688,187.74	1,648,863.28
FIDELITY HEREFORD STR TR TREAS ONLY MONEY MKT FD SUB-ACCOUNT 6800175304	1,630,008.1700	1,630,008.17	1,630,008.17
FRANKLIN STRATEGIC SER STRATEGIC INCOME FD CL R6 SUB-ACCOUNT 6800175304	97,928.3240	1,023,567.28	897,023.45
ROWE T PRICE INFLATION PROTECTED BD FD INC SUB-ACCOUNT 6800175304	130,994.8820	1,588,331.91	1,505,131.19
TEMPLETON INCOME TR GLOBAL BD FD ADVISOR CL SUB-ACCOUNT 6800175304	81,622.1710	1,062,992.60	941,103.63

ITEM 27A - SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES
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FRESH MARK SALARIED - PAYMENT ACCT

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DESCRIPTION OF INVESTMENT		COST BASIS	CURRENT MARKET VALUE
VANGUARD WELLESLEY INCOME FD		947,465.70	907,103.58
ADMIRAL SHS			
SUB-ACCOUNT 6800175304	15,271.1040		
TOTAL FIXED INCOME		15,558,864.80	14,852,616.00
EQUITIES			
ABBOTT LABS		10,253.48	26,946.00
SUB-ACCOUNT 6800175303	600.0000		
ABBVIE INC		11,119.02	35,544.00
SUB-ACCOUNT 6800175303	600.0000		
ALLY FINL INC		91,934.50	93,200.00
SUB-ACCOUNT 6800175303	5,000.0000		
AMERISOURCEBERGEN CORP		43,185.00	207,420.00
SUB-ACCOUNT 6800175303	2,000.0000		
AMGEN INC		6,799.39	15,908.34
SUB-ACCOUNT 6800175303	98.0000		

ITEM 27A - SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES
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FRESH MARK SALARIED - PAYMENT ACCT

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DESCRIPTION OF INVESTMENT		COST BASIS	CURRENT MARKET VALUE
APPLE INC		66,161.52	147,364.00
SUB-ACCOUNT 6800175303	1,400.0000		
AT & T INC		45,199.43	109,733.49
SUB-ACCOUNT 6800175303	3,189.0000		
BERKSHIRE HATHAWAY INC DEL		49,037.06	118,836.00
CL B NEW			
SUB-ACCOUNT 6800175303	900.0000		
BLOCK H & R INC		59,053.06	129,909.00
SUB-ACCOUNT 6800175303	3,900.0000		
CISCO SYS INC		46,520.69	73,318.50
SUB-ACCOUNT 6800175303	2,700.0000		
COACH INC		61,036.47	42,549.00
SUB-ACCOUNT 6800175303	1,300.0000		
CVS HEALTH CORP		33,228.00	254,202.00
SUB-ACCOUNT 6800175303	2,600.0000		

ITEM 27A - SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES
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FRESH MARK SALARIED - PAYMENT ACCT

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DESCRIPTION OF INVESTMENT		COST BASIS	CURRENT MARKET VALUE
FRANKLIN RES INC SUB-ACCOUNT 6800175303	1,500.0000	48,130.00	55,230.00
GILEAD SCIENCES INC SUB-ACCOUNT 6800175303	1,700.0000	126,290.63	172,023.00
MCGRAW HILL FINL INC SUB-ACCOUNT 6800175303	1,200.0000	50,857.00	118,296.00
MICROSOFT CORP SUB-ACCOUNT 6800175303	2,200.0000	56,226.42	122,056.00
MOODYS CORP SUB-ACCOUNT 6800175303	1,400.0000	55,211.74	140,476.00
OMNICOM GROUP SUB-ACCOUNT 6800175303	1,200.0000	50,142.29	90,792.00
PFIZER INC SUB-ACCOUNT 6800175303	821.0000	14,379.81	26,501.88

ITEM 27A - SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES
ASSETS HELD AT END OF PLAN YEAR 12/31/15

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FRESH MARK SALARIED - PAYMENT ACCT

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DESCRIPTION OF INVESTMENT		COST BASIS	CURRENT MARKET VALUE
PHILIP MORRIS INTL INC SUB-ACCOUNT 6800175303	1,900.0000	155,295.66	167,029.00
REYNOLDS AMERN INC SUB-ACCOUNT 6800175303	1,628.0000	58,730.10	75,132.20
ROBERT HALF INTL INC SUB-ACCOUNT 6800175303	1,200.0000	31,003.32	56,568.00
UNITEDHEALTH GROUP INC SUB-ACCOUNT 6800175303	1,144.0000	36,513.62	134,580.16
VIACOM INC NEW CL B SUB-ACCOUNT 6800175303	1,500.0000	53,744.35	61,740.00
WESTERN UN CO SUB-ACCOUNT 6800175303	4,600.0000	73,883.90	82,386.00
ACCENTURE PLC IRELAND CL A SUB-ACCOUNT 6800175303	1,200.0000	43,840.00	125,400.00

ITEM 27A - SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES
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FRESH MARK SALARIED - PAYMENT ACCT

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DESCRIPTION OF INVESTMENT		COST BASIS	CURRENT MARKET VALUE
ENSCO PLC		33,740.00	12,312.00
CL A			
SUB-ACCOUNT 6800175303	800.0000		
INDIVIOR PLC		840.23	6,104.85
SUB-ACCOUNT 6800175303	2,200.0000		
NOVARTIS AG		26,175.70	43,020.00
SPONSORED ADR			
SUB-ACCOUNT 6800175303	500.0000		
RECKITT BENCKISER GROUP PLC		33,196.41	207,218.00
SUB-ACCOUNT 6800175303	2,200.0000		
TEVA PHARMACEUTICAL INDS LTD		71,821.57	150,972.00
ADR			
SUB-ACCOUNT 6800175303	2,300.0000		
JPMORGAN EQUITY INDEX FUND		1,272,257.45	1,491,091.31
SELECT CLASS (HLEIX)			
SUB-ACCOUNT 6800175304	43,307.9090		

ITEM 27A - SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES
ASSETS HELD AT END OF PLAN YEAR 12/31/15

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FRESH MARK SALARIED - PAYMENT ACCT

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DESCRIPTION OF INVESTMENT		COST BASIS	CURRENT MARKET VALUE
JPMORGAN MID CAP EQUITY FD		295,935.18	434,415.80
CL A (JCMAX)			
SUB-ACCOUNT 6800175304	10,269.8770		
JPMORGAN SMALL CAP GROWTH FUND		313,890.89	374,971.97
CLASS A(PGSGX)			
SUB-ACCOUNT 6800175304	31,536.7510		
CAPITAL INCOME BLDG INC		1,360,163.92	1,575,101.77
CL R-6			
SUB-ACCOUNT 6800175304	28,207.4100		
EUROPACIFIC GROWTH FD		190,504.30	216,021.18
CL R-6			
SUB-ACCOUNT 6800175304	4,766.5750		
FIDELITY ADVISOR SER VII		1,316,605.10	1,536,306.57
UTILS FD INSTL CL			
SUB-ACCOUNT 6800175304	65,542.0890		
FIDELITY COMWLTH TR		776,390.18	776,364.78
SMALL CAP STK FD			
SUB-ACCOUNT 6800175304	44,695.7270		

ITEM 27A - SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES
ASSETS HELD AT END OF PLAN YEAR 12/31/15

ACCOUNT NO. 6800175300

FRESH MARK SALARIED - PAYMENT ACCT

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DESCRIPTION OF INVESTMENT	COST BASIS	CURRENT MARKET VALUE
FIDELITY CONTRAFUND INC NEW INSIGHTS FD INSTL CL SUB-ACCOUNT 6800175304 51,702.9020	1,098,077.17	1,376,848.28
FIDELITY INVT TR EMERGING MKTS FD SUB-ACCOUNT 6800175304 16,972.5580	410,464.39	369,153.14
FIDELITY SECS FD LEVERAGED CO STOCK FD SUB-ACCOUNT 6800175304 13,501.9490	342,362.85	537,512.59
FIDELITY SELECT PORTFOLIOS SELECT CONSUMER STAPLES SUB-ACCOUNT 6800175304 12,707.0280	1,109,812.94	1,159,897.52
FIDELITY ADVISOR SER VIII STRATEGIC OPPORTUNITIES FD INSTL CL SUB-ACCOUNT 6800175304 12,535.0150	281,048.68	496,511.94
LORD ABBETT MID-CAP VALUE FD SUB-ACCOUNT 6800175304 14,543.3550	201,202.54	359,948.04

ITEM 27A - SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES
ASSETS HELD AT END OF PLAN YEAR 12/31/15

ACCOUNT NO. 6800175300

FRESH MARK SALARIED - PAYMENT ACCT

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DESCRIPTION OF INVESTMENT		COST BASIS	CURRENT MARKET VALUE
LORD ABBETT SECS TR		342,205.33	337,795.73
VALUE OPPTYs FD CL A			
SUB-ACCOUNT 6800175304	19,138.5680		
MATTHEWS ASIA FDS		481,446.14	510,131.57
CHINA DIVID FD INV CL			
SUB-ACCOUNT 6800175304	36,992.8620		
OPPENHEIMER GLOBAL FD		255,234.30	349,694.81
CL Y			
SUB-ACCOUNT 6800175304	4,651.4340		
OPPENHEIMER SERS FD INC		530,157.57	763,416.36
VALUE FD CL Y			
SUB-ACCOUNT 6800175304	24,351.3990		
T ROWE PRICE CAP APPRECIATION FD		1,211,396.71	1,440,919.76
SUB-ACCOUNT 6800175304	57,521.7470		
T ROWE PRICE NEW ERA FD INC		225,202.48	153,451.78
SUB-ACCOUNT 6800175304	5,627.1280		

ITEM 27A - SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES
ASSETS HELD AT END OF PLAN YEAR 12/31/15

ACCOUNT NO. 6800175300

FRESH MARK SALARIED - PAYMENT ACCT

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DESCRIPTION OF INVESTMENT		COST BASIS	CURRENT MARKET VALUE
ROYCE FD		905,001.30	733,673.78
VALUE FD INVT CL			
SUB-ACCOUNT 6800175304	83,944.3680		
RS INVT TR		218,533.98	206,844.59
PARTNERS FD CL Y			
SUB-ACCOUNT 6800175304	7,453.8590		
TEMPLETON GLOBAL INVT TR		765,244.84	737,326.10
EMERGING MKTS SMALL CAP FD ADVISOR			
CL			
SUB-ACCOUNT 6800175304	64,507.9700		
VANGUARD WORLD FDS		315,795.83	368,750.23
VANGUARD CONSUMER STAPLES INDEX FD			
ADMIRAL			
SUB-ACCOUNT 6800175304	5,795.2260		
VANGUARD WHITEHALL FDS		285,716.36	341,471.92
INTL EXPLORER FD INVS SHS			
SUB-ACCOUNT 6800175304	20,145.8360		
TOTAL EQUITIES		16,048,200.80	19,750,372.00
SUBTOTAL			37,303,342.20
ACCRUED INCOME			4,778.20
ACCOUNT TOTAL		34,307,395.88	37,308,120.40

ITEM 27A - SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES
ASSETS ACQUIRED AND DISPOSED OF DURING THE PLAN YEAR 01/01/15 TO 12/31/15

ACCOUNT NO. 6800175300

FRESH MARK SALARIED - PAYMENT ACCT

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DESCRIPTION OF INVESTMENT	COST BASIS	CASH
ALLY FINL INC		
PURCHASED 12/18/15	91,934.50	91,934.50-
AT \$18.39/SH COMM \$25.00		
5,000 SHARES AT \$18.3819		
BLACKROCK INFL PROTD BD PORT SVC*		
PURCHASED 12/21/15	17,197.52	17,197.52-
AT \$10.18/SH COMM \$0.00		
1,689.344 SHARES AT \$10.18		
DODGE & COX INCOME FD*		
PURCHASED 3/25/15	153.22	153.22-
AT \$13.81/SH COMM \$0.00		
11.095 SHARES AT \$13.81		
PURCHASED 3/25/15	76.61	76.61-
AT \$13.81/SH COMM \$0.00		
5.547 SHARES AT \$13.81		
PURCHASED 12/18/15	391.37	391.37-
AT \$13.30/SH COMM \$0.00		
29.426 SHARES AT \$13.30		
TOTAL DODGE & COX INCOME FD*	621.20	621.20-

Fresh Mark, Inc.
Salaried Employees' Pension Plan

EIN #34-0565220 Plan #002

Schedule H, Line 4j – Schedule of Reportable Transactions

Year Ended December 31, 2015

ITEM 27D - SCHEDULE OF REPORTABLE TRANSACTIONS
BY ISSUE 01/01/15 TO 12/31/15

ACCOUNT NO. 6800175300

FRESH MARK SALARIED - PAYMENT ACCT

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TRADE DATE	SHARES/ FACE AMOUNT	DESCRIPTION	PURCHASE/ SALE UNIT PRICE	TRANSACTION EXPENSE	CASH NET GAIN/(LOSS)	COST BASIS
		JPMORGAN LIQUID ASSETS MMKT MORGAN				
01/02/15	1,275	PURCHASED 1/ 2/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	1,275.00- 0.00	1,275.00
01/02/15	109,364.08	109,364.08 SOLD 1/ 2/15	1.00	0.00	109,364.08 0.00	109,364.08
01/05/15	0.58	PURCHASED 1/ 5/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	0.58- 0.00	0.58
01/05/15	2.18	PURCHASED 1/ 5/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	2.18- 0.00	2.18
01/05/15	16,426.8	16,426.8 SOLD 1/ 5/15	1.00	0.00	16,426.80 0.00	16,426.80
01/06/15	89.48	PURCHASED 1/ 6/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	89.48- 0.00	89.48
01/06/15	1,200	1,200 SOLD 1/ 6/15	1.00	0.00	1,200.00 0.00	1,200.00
01/07/15	600	PURCHASED 1/ 7/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	600.00- 0.00	600.00
01/08/15	26.45	PURCHASED 1/ 8/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	26.45- 0.00	26.45

ITEM 27D - SCHEDULE OF REPORTABLE TRANSACTIONS
BY ISSUE 01/01/15 TO 12/31/15

ACCOUNT NO. 6800175300

FRESH MARK SALARIED - PAYMENT ACCT

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TRADE DATE	SHARES/ FACE AMOUNT	DESCRIPTION	PURCHASE/ SALE UNIT PRICE	TRANSACTION EXPENSE	CASH NET GAIN/ (LOSS)	COST BASIS
01/09/15	975	PURCHASED 1/ 9/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	975.00- 0.00	975.00
01/14/15	175.42	175.42 SOLD 1/14/15	1.00	0.00	175.42 0.00	175.42
01/14/15	557.52	557.52 SOLD 1/14/15	1.00	0.00	557.52 0.00	557.52
01/14/15	1,398.1	1,398.1 SOLD 1/14/15	1.00	0.00	1,398.10 0.00	1,398.10
01/15/15	17,182.61	17,182.61 SOLD 1/15/15	1.00	0.00	17,182.61 0.00	17,182.61
01/21/15	513	PURCHASED 1/21/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	513.00- 0.00	513.00
01/21/15	400,000	PURCHASED 1/21/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	400,000.00- 0.00	400,000.00
01/22/15	100,000	PURCHASED 1/22/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	100,000.00- 0.00	100,000.00
01/22/15	185,490.45	PURCHASED 1/22/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	185,490.45- 0.00	185,490.45

ITEM 27D - SCHEDULE OF REPORTABLE TRANSACTIONS
BY ISSUE 01/01/15 TO 12/31/15

ACCOUNT NO. 6800175300

FRESH MARK SALARIED - PAYMENT ACCT

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TRADE DATE	SHARES/ FACE AMOUNT	DESCRIPTION	PURCHASE/ SALE UNIT PRICE	TRANSACTION EXPENSE	CASH NET GAIN/(LOSS)	COST BASIS
01/22/15	500,000	500,000 SOLD 1/22/15	1.00	0.00	500,000.00 0.00	500,000.00
01/23/15	752.01	752.01 SOLD 1/23/15	1.00	0.00	752.01 0.00	752.01
01/27/15	330,000	PURCHASED 1/27/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	330,000.00- 0.00	330,000.00
02/02/15	910	PURCHASED 2/ 2/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	910.00- 0.00	910.00
02/02/15	109,498.82	109,498.82 SOLD 2/ 2/15	1.00	0.00	109,498.82 0.00	109,498.82
02/03/15	0.32	PURCHASED 2/ 3/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	0.32- 0.00	0.32
02/03/15	0.56	PURCHASED 2/ 3/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	0.56- 0.00	0.56
02/03/15	0.57	PURCHASED 2/ 3/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	0.57- 0.00	0.57
02/12/15	658	PURCHASED 2/12/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	658.00- 0.00	658.00
02/13/15	438	PURCHASED 2/13/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	438.00- 0.00	438.00

ITEM 27D - SCHEDULE OF REPORTABLE TRANSACTIONS
BY ISSUE 01/01/15 TO 12/31/15

ACCOUNT NO. 6800175300

FRESH MARK SALARIED - PAYMENT ACCT

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TRADE DATE	SHARES/ FACE AMOUNT	DESCRIPTION	PURCHASE/ SALE UNIT PRICE	TRANSACTION EXPENSE	CASH NET GAIN/ (LOSS)	COST BASIS
02/17/15	189.65	189.65 SOLD 2/17/15	1.00	0.00	189.65 0.00	189.65
02/17/15	608.4	608.4 SOLD 2/17/15	1.00	0.00	608.40 0.00	608.40
02/17/15	1,387.05	1,387.05 SOLD 2/17/15	1.00	0.00	1,387.05 0.00	1,387.05
02/20/15	1,700	1,700 SOLD 2/20/15	1.00	0.00	1,700.00 0.00	1,700.00
02/24/15	112.61	112.61 SOLD 2/24/15	1.00	0.00	112.61 0.00	112.61
02/24/15	330,000	PURCHASED 2/24/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	330,000.00- 0.00	330,000.00
03/02/15	580	PURCHASED 3/ 2/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	580.00- 0.00	580.00
03/02/15	72,819.18	72,819.18 SOLD 3/ 2/15	1.00	0.00	72,819.18 0.00	72,819.18
03/03/15	2.97	PURCHASED 3/ 3/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	2.97- 0.00	2.97

ITEM 27D - SCHEDULE OF REPORTABLE TRANSACTIONS
BY ISSUE 01/01/15 TO 12/31/15

ACCOUNT NO. 6800175300

FRESH MARK SALARIED - PAYMENT ACCT

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TRADE DATE	SHARES/ FACE AMOUNT	DESCRIPTION	PURCHASE/ SALE UNIT PRICE	TRANSACTION EXPENSE	CASH NET GAIN/(LOSS)	COST BASIS
03/03/15	230.16	PURCHASED 3/ 3/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	230.16- 0.00	230.16
03/04/15	675.36	PURCHASED 3/ 4/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	675.36- 0.00	675.36
03/06/15	675.36	675.36 SOLD 3/ 6/15	1.00	0.00	675.36 0.00	675.36
03/06/15	752.78	PURCHASED 3/ 6/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	752.78- 0.00	752.78
03/10/15	2,324	PURCHASED 3/10/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	2,324.00- 0.00	2,324.00
03/11/15	396	PURCHASED 3/11/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	396.00- 0.00	396.00
03/11/15	260,552.2	PURCHASED 3/11/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	260,552.20- 0.00	260,552.20
03/11/15	300,000	300,000 SOLD 3/11/15	1.00	0.00	300,000.00 0.00	300,000.00
03/12/15	682	PURCHASED 3/12/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	682.00- 0.00	682.00
03/12/15	2,450	2,450 SOLD 3/12/15	1.00	0.00	2,450.00 0.00	2,450.00

ITEM 27D - SCHEDULE OF REPORTABLE TRANSACTIONS
BY ISSUE 01/01/15 TO 12/31/15

ACCOUNT NO. 6800175300

FRESH MARK SALARIED - PAYMENT ACCT

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TRADE DATE	SHARES/ FACE AMOUNT	DESCRIPTION	PURCHASE/ SALE UNIT PRICE	TRANSACTION EXPENSE	CASH NET GAIN/ (LOSS)	COST BASIS
03/13/15	240	PURCHASED 3/13/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	240.00- 0.00	240.00
03/16/15	182.17	182.17 SOLD 3/16/15	1.00	0.00	182.17 0.00	182.17
03/16/15	551.64	551.64 SOLD 3/16/15	1.00	0.00	551.64 0.00	551.64
03/16/15	1,434.49	1,434.49 SOLD 3/16/15	1.00	0.00	1,434.49 0.00	1,434.49
03/17/15	228.57	PURCHASED 3/17/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	228.57- 0.00	228.57
03/23/15	120	PURCHASED 3/23/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	120.00- 0.00	120.00
03/24/15	429	PURCHASED 3/24/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	429.00- 0.00	429.00
03/25/15	330,000	PURCHASED 3/25/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	330,000.00- 0.00	330,000.00
03/27/15	1,950	1,950 SOLD 3/27/15	1.00	0.00	1,950.00 0.00	1,950.00

ITEM 27D - SCHEDULE OF REPORTABLE TRANSACTIONS
BY ISSUE 01/01/15 TO 12/31/15

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TRADE DATE	SHARES/ FACE AMOUNT	DESCRIPTION	PURCHASE/ SALE UNIT PRICE	TRANSACTION EXPENSE	CASH NET GAIN/ (LOSS)	COST BASIS
03/30/15	199.17	PURCHASED 3/30/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	199.17- 0.00	199.17
03/30/15	438.75	PURCHASED 3/30/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	438.75- 0.00	438.75
03/31/15	713	PURCHASED 3/31/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	713.00- 0.00	713.00
04/01/15	1,275	PURCHASED 4/ 1/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	1,275.00- 0.00	1,275.00
04/01/15	112,039	112,039 SOLD 4/ 1/15	1.00	0.00	112,039.00 0.00	112,039.00
04/02/15	0.31	PURCHASED 4/ 2/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	0.31- 0.00	0.31
04/02/15	1.49	PURCHASED 4/ 2/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	1.49- 0.00	1.49
04/02/15	4.53	PURCHASED 4/ 2/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	4.53- 0.00	4.53
04/07/15	600	PURCHASED 4/ 7/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	600.00- 0.00	600.00
04/14/15	181.55	181.55 SOLD 4/14/15	1.00	0.00	181.55 0.00	181.55

ITEM 27D - SCHEDULE OF REPORTABLE TRANSACTIONS
BY ISSUE 01/01/15 TO 12/31/15

ACCOUNT NO. 6800175300

FRESH MARK SALARIED - PAYMENT ACCT

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TRADE DATE	SHARES/ FACE AMOUNT	DESCRIPTION	PURCHASE/ SALE UNIT PRICE	TRANSACTION EXPENSE	CASH NET GAIN/ (LOSS)	COST BASIS
04/14/15	572.52	572.52 SOLD 4/14/15	1.00	0.00	572.52 0.00	572.52
04/14/15	1,431.43	1,431.43 SOLD 4/14/15	1.00	0.00	1,431.43 0.00	1,431.43
04/15/15	225	PURCHASED 4/15/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	225.00- 0.00	225.00
04/21/15	17,791.09	17,791.09 SOLD 4/21/15	1.00	0.00	17,791.09 0.00	17,791.09
04/22/15	1,696.27	PURCHASED 4/22/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	1,696.27- 0.00	1,696.27
04/24/15	330,000	PURCHASED 4/24/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	330,000.00- 0.00	330,000.00
05/01/15	124,376.74	124,376.74 SOLD 5/ 1/15	1.00	0.00	124,376.74 0.00	124,376.74
05/04/15	1.2	PURCHASED 5/ 4/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	1.20- 0.00	1.20
05/04/15	6.33	PURCHASED 5/ 4/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	6.33- 0.00	6.33

ITEM 27D - SCHEDULE OF REPORTABLE TRANSACTIONS
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ACCOUNT NO. 6800175300

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TRADE DATE	SHARES/ FACE AMOUNT	DESCRIPTION	PURCHASE/ SALE UNIT PRICE	TRANSACTION EXPENSE	CASH NET GAIN/ (LOSS)	COST BASIS
05/04/15	910.3	PURCHASED 5/ 4/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	910.30- 0.00	910.30
05/05/15	1,210	1,210 SOLD 5/ 5/15	1.00	0.00	1,210.00 0.00	1,210.00
05/14/15	530.92	PURCHASED 5/14/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	530.92- 0.00	530.92
05/14/15	539.58	539.58 SOLD 5/14/15	1.00	0.00	539.58 0.00	539.58
05/14/15	1,462.75	1,462.75 SOLD 5/14/15	1.00	0.00	1,462.75 0.00	1,462.75
05/15/15	450	PURCHASED 5/15/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	450.00- 0.00	450.00
05/18/15	1,224	PURCHASED 5/18/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	1,224.00- 0.00	1,224.00
05/18/15	600,000	PURCHASED 5/18/15 AT \$1.00/SH COMM \$0.00 TRANSFER FROM 6800175304 TO 6800175300	1.00	0.00	600,000.00- 0.00	600,000.00
05/18/15	600,000	600,000 SOLD 5/18/15 TRANSFER FROM 6800175304 TO 6800175300	1.00	0.00	600,000.00 0.00	600,000.00

ITEM 27D - SCHEDULE OF REPORTABLE TRANSACTIONS
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TRADE DATE	SHARES/ FACE AMOUNT	DESCRIPTION	PURCHASE/ SALE UNIT PRICE	TRANSACTION EXPENSE	CASH NET GAIN/ (LOSS)	COST BASIS
05/26/15	330,000	PURCHASED 5/26/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	330,000.00- 0.00	330,000.00
05/28/15	3,030	3,030 SOLD 5/28/15	1.00	0.00	3,030.00 0.00	3,030.00
06/01/15	580	PURCHASED 6/ 1/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	580.00- 0.00	580.00
06/01/15	324,005.32	324,005.32 SOLD 6/ 1/15	1.00	0.00	324,005.32 0.00	324,005.32
06/02/15	2.41	PURCHASED 6/ 2/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	2.41- 0.00	2.41
06/02/15	6.89	PURCHASED 6/ 2/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	6.89- 0.00	6.89
06/02/15	230.18	PURCHASED 6/ 2/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	230.18- 0.00	230.18
06/03/15	475.39	PURCHASED 6/ 3/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	475.39- 0.00	475.39
06/05/15	742.12	PURCHASED 6/ 5/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	742.12- 0.00	742.12
06/08/15	2,634.23	PURCHASED 6/ 8/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	2,634.23- 0.00	2,634.23

ITEM 27D - SCHEDULE OF REPORTABLE TRANSACTIONS
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TRADE DATE	SHARES/ FACE AMOUNT	DESCRIPTION	PURCHASE/ SALE UNIT PRICE	TRANSACTION EXPENSE	CASH NET GAIN/ (LOSS)	COST BASIS
06/10/15	2,720	PURCHASED 6/10/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	2,720.00- 0.00	2,720.00
06/11/15	682	PURCHASED 6/11/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	682.00- 0.00	682.00
06/15/15	597.96	597.96 SOLD 6/15/15	1.00	0.00	597.96 0.00	597.96
06/15/15	1,453.99	1,453.99 SOLD 6/15/15	1.00	0.00	1,453.99 0.00	1,453.99
06/15/15	141,455.33	PURCHASED 6/15/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	141,455.33- 0.00	141,455.33
06/22/15	40.02	PURCHASED 6/22/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	40.02- 0.00	40.02
06/22/15	120	PURCHASED 6/22/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	120.00- 0.00	120.00
06/23/15	330,000	PURCHASED 6/23/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	330,000.00- 0.00	330,000.00
06/24/15	572	PURCHASED 6/24/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	572.00- 0.00	572.00
06/29/15	1,169.75	PURCHASED 6/29/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	1,169.75- 0.00	1,169.75

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TRADE DATE	SHARES/ FACE AMOUNT	DESCRIPTION	PURCHASE/ SALE UNIT PRICE	TRANSACTION EXPENSE	CASH NET GAIN/ (LOSS)	COST BASIS
06/30/15	713	PURCHASED 6/30/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	713.00- 0.00	713.00
07/01/15	1,380	PURCHASED 7/ 1/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	1,380.00- 0.00	1,380.00
07/01/15	102,581.53	102,581.53 SOLD 7/ 1/15	1.00	0.00	102,581.53 0.00	102,581.53
07/02/15	0.94	PURCHASED 7/ 2/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	0.94- 0.00	0.94
07/02/15	2.4	PURCHASED 7/ 2/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	2.40- 0.00	2.40
07/02/15	6.94	PURCHASED 7/ 2/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	6.94- 0.00	6.94
07/07/15	450.66	PURCHASED 7/ 7/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	450.66- 0.00	450.66
07/10/15	600	PURCHASED 7/10/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	600.00- 0.00	600.00
07/14/15	182.5	182.5 SOLD 7/14/15	1.00	0.00	182.50 0.00	182.50
07/14/15	612.96	612.96 SOLD 7/14/15	1.00	0.00	612.96 0.00	612.96

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TRADE DATE	SHARES/ FACE AMOUNT	DESCRIPTION	PURCHASE/ SALE UNIT PRICE	TRANSACTION EXPENSE	CASH NET GAIN/(LOSS)	COST BASIS
07/14/15	1,443.97	1,443.97 SOLD 7/14/15	1.00	0.00	1,443.97 0.00	1,443.97
07/15/15	225	PURCHASED 7/15/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	225.00- 0.00	225.00
07/20/15	1,586	1,586 SOLD 7/20/15 INV # 100061371280; FOR ACTUARIAL SERVICES DURING	1.00	0.00	1,586.00 0.00	1,586.00
07/22/15	567	PURCHASED 7/22/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	567.00- 0.00	567.00
07/24/15	330,000	PURCHASED 7/24/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	330,000.00- 0.00	330,000.00
07/27/15	51,300	PURCHASED 7/27/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	51,300.00- 0.00	51,300.00
07/31/15	1,848	PURCHASED 7/31/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	1,848.00- 0.00	1,848.00
08/03/15	910	PURCHASED 8/ 3/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	910.00- 0.00	910.00
08/03/15	8,725	8,725 SOLD 8/ 3/15	1.00	0.00	8,725.00 0.00	8,725.00
08/03/15	102,581.53	102,581.53 SOLD 8/ 3/15	1.00	0.00	102,581.53 0.00	102,581.53

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TRADE DATE	SHARES/ FACE AMOUNT	DESCRIPTION	PURCHASE/ SALE UNIT PRICE	TRANSACTION EXPENSE	CASH NET GAIN/ (LOSS)	COST BASIS
08/04/15	1.55	PURCHASED 8/ 4/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	1.55- 0.00	1.55
08/04/15	1.6	PURCHASED 8/ 4/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	1.60- 0.00	1.60
08/04/15	9.92	PURCHASED 8/ 4/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	9.92- 0.00	9.92
08/04/15	1,848	1,848 SOLD 8/ 4/15	1.00	0.00	1,848.00 0.00	1,848.00
08/05/15	237.35	PURCHASED 8/ 5/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	237.35- 0.00	237.35
08/10/15	20.72	PURCHASED 8/10/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	20.72- 0.00	20.72
08/13/15	728	PURCHASED 8/13/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	728.00- 0.00	728.00
08/14/15	104.36	PURCHASED 8/14/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	104.36- 0.00	104.36
08/14/15	541.82	541.82 SOLD 8/14/15	1.00	0.00	541.82 0.00	541.82
08/14/15	1,460.76	1,460.76 SOLD 8/14/15	1.00	0.00	1,460.76 0.00	1,460.76

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TRADE DATE	SHARES/ FACE AMOUNT	DESCRIPTION	PURCHASE/ SALE UNIT PRICE	TRANSACTION EXPENSE	CASH NET GAIN/(LOSS)	COST BASIS
08/14/15	126,282.3	PURCHASED 8/14/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	126,282.30- 0.00	126,282.30
08/17/15	144	PURCHASED 8/17/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	144.00- 0.00	144.00
08/26/15	155,295.66	155,295.66 SOLD 8/26/15	1.00	0.00	155,295.66 0.00	155,295.66
08/26/15	330,000	PURCHASED 8/26/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	330,000.00- 0.00	330,000.00
08/31/15	4,560	4,560 SOLD 8/31/15	1.00	0.00	4,560.00 0.00	4,560.00
09/01/15	580	PURCHASED 9/ 1/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	580.00- 0.00	580.00
09/01/15	69,190.13	69,190.13 SOLD 9/ 1/15	1.00	0.00	69,190.13 0.00	69,190.13
09/02/15	13.17	PURCHASED 9/ 2/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	13.17- 0.00	13.17
09/02/15	231.51	PURCHASED 9/ 2/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	231.51- 0.00	231.51
09/08/15	77.42	PURCHASED 9/ 8/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	77.42- 0.00	77.42

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TRADE DATE	SHARES/ FACE AMOUNT	DESCRIPTION	PURCHASE/ SALE UNIT PRICE	TRANSACTION EXPENSE	CASH NET GAIN/ (LOSS)	COST BASIS
09/10/15	1,554	PURCHASED 9/10/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	1,554.00- 0.00	1,554.00
09/11/15	664.7	PURCHASED 9/11/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	664.70- 0.00	664.70
09/14/15	192.08	192.08 SOLD 9/14/15	1.00	0.00	192.08 0.00	192.08
09/14/15	1,428.84	1,428.84 SOLD 9/14/15	1.00	0.00	1,428.84 0.00	1,428.84
09/15/15	240	PURCHASED 9/15/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	240.00- 0.00	240.00
09/15/15	216,289.81	PURCHASED 9/15/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	216,289.81- 0.00	216,289.81
09/15/15	250,000	250,000 SOLD 9/15/15	1.00	0.00	250,000.00 0.00	250,000.00
09/15/15	360,000	PURCHASED 9/15/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	360,000.00- 0.00	360,000.00
09/18/15	120	PURCHASED 9/18/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	120.00- 0.00	120.00
09/22/15	572	PURCHASED 9/22/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	572.00- 0.00	572.00

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TRADE DATE	SHARES/ FACE AMOUNT	DESCRIPTION	PURCHASE/ SALE UNIT PRICE	TRANSACTION EXPENSE	CASH NET GAIN/ (LOSS)	COST BASIS
09/28/15	438.75	PURCHASED 9/28/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	438.75- 0.00	438.75
09/29/15	731	PURCHASED 9/29/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	731.00- 0.00	731.00
09/30/15	419.18	419.18 SOLD 9/30/15	1.00	0.00	419.18 0.00	419.18
09/30/15	713	PURCHASED 9/30/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	713.00- 0.00	713.00
09/30/15	1,500,000	\$1500000. 0 SOLD 9/30/15	1.00	0.00	1,500,000.00 0.00	1,500,000.00
10/01/15	1,966.08	PURCHASED 10/ 1/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	1,966.08- 0.00	1,966.08
10/01/15	102,344.18	102,344.18 SOLD 10/ 1/15	1.00	0.00	102,344.18 0.00	102,344.18
10/02/15	0.6	PURCHASED 10/ 2/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	0.60- 0.00	0.60
10/02/15	0.96	PURCHASED 10/ 2/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	0.96- 0.00	0.96
10/02/15	15.37	PURCHASED 10/ 2/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	15.37- 0.00	15.37

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TRADE DATE	SHARES/ FACE AMOUNT	DESCRIPTION	PURCHASE/ SALE UNIT PRICE	TRANSACTION EXPENSE	CASH NET GAIN/ (LOSS)	COST BASIS
10/02/15	3,476	3,476 SOLD 10/ 2/15	1.00	0.00	3,476.00 0.00	3,476.00
10/05/15	1,675.04	PURCHASED 10/ 5/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	1,675.04- 0.00	1,675.04
10/06/15	8,365.11	8,365.11 SOLD 10/ 6/15	1.00	0.00	8,365.11 0.00	8,365.11
10/08/15	600	PURCHASED 10/ 8/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	600.00- 0.00	600.00
10/14/15	526.82	526.82 SOLD 10/14/15	1.00	0.00	526.82 0.00	526.82
10/14/15	1,408.84	1,408.84 SOLD 10/14/15	1.00	0.00	1,408.84 0.00	1,408.84
10/14/15	1,764.04	PURCHASED 10/14/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	1,764.04- 0.00	1,764.04
10/15/15	225	PURCHASED 10/15/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	225.00- 0.00	225.00
10/21/15	567	PURCHASED 10/21/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	567.00- 0.00	567.00

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TRADE DATE	SHARES/ FACE AMOUNT	DESCRIPTION	PURCHASE/ SALE UNIT PRICE	TRANSACTION EXPENSE	CASH NET GAIN/(LOSS)	COST BASIS
10/22/15	200,000	PURCHASED 10/22/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	200,000.00- 0.00	200,000.00
10/22/15	200,000	200,000 SOLD 10/22/15	1.00	0.00	200,000.00 0.00	200,000.00
10/23/15	18,293.09	18,293.09 SOLD 10/23/15	1.00	0.00	18,293.09 0.00	18,293.09
10/26/15	6,981	6,981 SOLD 10/26/15	1.00	0.00	6,981.00 0.00	6,981.00
10/28/15	70.02	PURCHASED 10/28/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	70.02- 0.00	70.02
11/02/15	2,510.35	PURCHASED 11/ 2/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	2,510.35- 0.00	2,510.35
11/02/15	102,553.77	102,553.77 SOLD 11/ 2/15	1.00	0.00	102,553.77 0.00	102,553.77
11/03/15	1.15	PURCHASED 11/ 3/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	1.15- 0.00	1.15
11/03/15	2.32	PURCHASED 11/ 3/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	2.32- 0.00	2.32

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TRADE DATE	SHARES/ FACE AMOUNT	DESCRIPTION	PURCHASE/ SALE UNIT PRICE	TRANSACTION EXPENSE	CASH NET GAIN/ (LOSS)	COST BASIS
11/03/15	5.4	PURCHASED 11/ 3/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	5.40- 0.00	5.40
11/03/15	112.45	PURCHASED 11/ 3/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	112.45- 0.00	112.45
11/05/15	128,753.54	128,753.54 SOLD 11/ 5/15	1.00	0.00	128,753.54 0.00	128,753.54
11/12/15	728	PURCHASED 11/12/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	728.00- 0.00	728.00
11/13/15	1,320	PURCHASED 11/13/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	1,320.00- 0.00	1,320.00
11/16/15	253.88	PURCHASED 11/16/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	253.88- 0.00	253.88
11/16/15	604.76	604.76 SOLD 11/16/15	1.00	0.00	604.76 0.00	604.76
11/16/15	1,383.65	1,383.65 SOLD 11/16/15	1.00	0.00	1,383.65 0.00	1,383.65
11/25/15	5,244	5,244 SOLD 11/25/15	1.00	0.00	5,244.00 0.00	5,244.00

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TRADE DATE	SHARES/ FACE AMOUNT	DESCRIPTION	PURCHASE/ SALE UNIT PRICE	TRANSACTION EXPENSE	CASH NET GAIN/ (LOSS)	COST BASIS
12/01/15	909.88	PURCHASED 12/ 1/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	909.88- 0.00	909.88
12/01/15	57,024.73	57,024.73 SOLD 12/ 1/15	1.00	0.00	57,024.73 0.00	57,024.73
12/02/15	0.78	PURCHASED 12/ 2/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	0.78- 0.00	0.78
12/02/15	2.64	PURCHASED 12/ 2/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	2.64- 0.00	2.64
12/04/15	664.7	PURCHASED 12/ 4/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	664.70- 0.00	664.70
12/07/15	77.42	PURCHASED 12/ 7/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	77.42- 0.00	77.42
12/07/15	204,401.02	PURCHASED 12/ 7/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	204,401.02- 0.00	204,401.02
12/07/15	250,000	250,000 SOLD 12/ 7/15	1.00	0.00	250,000.00 0.00	250,000.00
12/08/15	70.9	PURCHASED 12/ 8/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	70.90- 0.00	70.90
12/10/15	1,664	PURCHASED 12/10/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	1,664.00- 0.00	1,664.00

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TRADE DATE	SHARES/ FACE AMOUNT	DESCRIPTION	PURCHASE/ SALE UNIT PRICE	TRANSACTION EXPENSE	CASH NET GAIN/ (LOSS)	COST BASIS
12/14/15	180.57	180.57 SOLD 12/14/15	1.00	0.00	180.57 0.00	180.57
12/14/15	567.26	567.26 SOLD 12/14/15	1.00	0.00	567.26 0.00	567.26
12/14/15	1,445.73	1,445.73 SOLD 12/14/15	1.00	0.00	1,445.73 0.00	1,445.73
12/15/15	812	PURCHASED 12/15/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	812.00- 0.00	812.00
12/18/15	120	PURCHASED 12/18/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	120.00- 0.00	120.00
12/23/15	3,700	3,700 SOLD 12/23/15	1.00	0.00	3,700.00 0.00	3,700.00
12/23/15	84,624.28	84,624.28 SOLD 12/23/15	1.00	0.00	84,624.28 0.00	84,624.28
12/28/15	438.75	PURCHASED 12/28/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	438.75- 0.00	438.75
12/30/15	731	PURCHASED 12/30/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	731.00- 0.00	731.00

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12/31/15	713	PURCHASED 12/31/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	713.00- 0.00	713.00
12/31/15	2,482,993.96	PURCHASED 12/31/15 AT \$1.00/SH COMM \$0.00	1.00	0.00	2,482,993.96- 0.00	2,482,993.96
		TOTAL ISSUE		0.00	2,521,640.90- 0.00	
		TOTAL ACCOUNT		0.00	2,521,640.90- 0.00	

CURRENT PERIOD GAIN/(LOSS) 1/ 1/15 TO 12/31/15

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ASSETS HELD AT END OF PERIOD - UNREALIZED GAIN/(LOSS)

<----- ASSETS HELD AT START -----> <----- ASSETS OBTAINED IN PERIOD ----> <----- TOTAL HELD + OBTAINED ----->

ASSET NAME	BEGINNING MARKET	ENDING MARKET	UNREAL GAIN/LOSS	PURCHASE COST	ENDING MARKET	UNREAL GAIN/LOSS	TOTAL VALUE	AGGREGATE MARKET	TOTAL UNREAL
ABBOTT LABS	27012	26946	-66	0	0	0	27012	26946	-66
ABBVIE INC	39264	35544	-3720	0	0	0	39264	35544	-3720
ACCENTURE PLC IRELAND CL A	107172	125400	18228	0	0	0	107172	125400	18228
ALLY FINL INC	0	0	0	91935	93200	1266	91935	93200	1266
AMERISOURCEBERGEN CORP	180320	207420	27100	0	0	0	180320	207420	27100
AMGEN INC	15610	15908	298	0	0	0	15610	15908	298
APPLE INC	154532	147364	-7168	0	0	0	154532	147364	-7168
*AT & T INC	0	0	0	109351	109733	383	109351	109733	383
BERKSHIRE HATHAWAY INC DEL CL B NEW	135135	118836	-16299	0	0	0	135135	118836	-16299
BLOCK H & R INC	131352	129909	-1443	0	0	0	131352	129909	-1443

ASSETS SOLD/MATURED DURING PERIOD - REALIZED GAIN/(LOSS)

HELD AT
START

OBTAINED
IN PERIOD

<----- COMBINED ----->

<----- TOTAL HELD + OBTAINED ----->

ASSET NAME	BEGINNING MARKET	PURCHASE COST	SALE PROCEEDS	REALIZED GAIN/LOSS	AGGREGATE COSTS	AGGREGATE PROCEEDS	REALIZED GAIN/LOSS
ABBOTT LABS	0	0	0	0	0	0	0
ABBVIE INC	0	0	0	0	0	0	0
ACCENTURE PLC IRELAND CL A	0	0	0	0	0	0	0
ALLY FINL INC	0	0	0	0	0	0	0
AMERISOURCEBERGEN CORP	0	0	0	0	0	0	0
AMGEN INC	0	0	0	0	0	0	0
APPLE INC	0	0	0	0	0	0	0
*AT & T INC	0	7427	7331	-96	7427	7331	-96
BERKSHIRE HATHAWAY INC DEL CL B NEW	0	0	0	0	0	0	0
BLOCK H & R INC	0	0	0	0	0	0	0

- FOR THIS ASSET, AVERAGE PRICES WERE USED

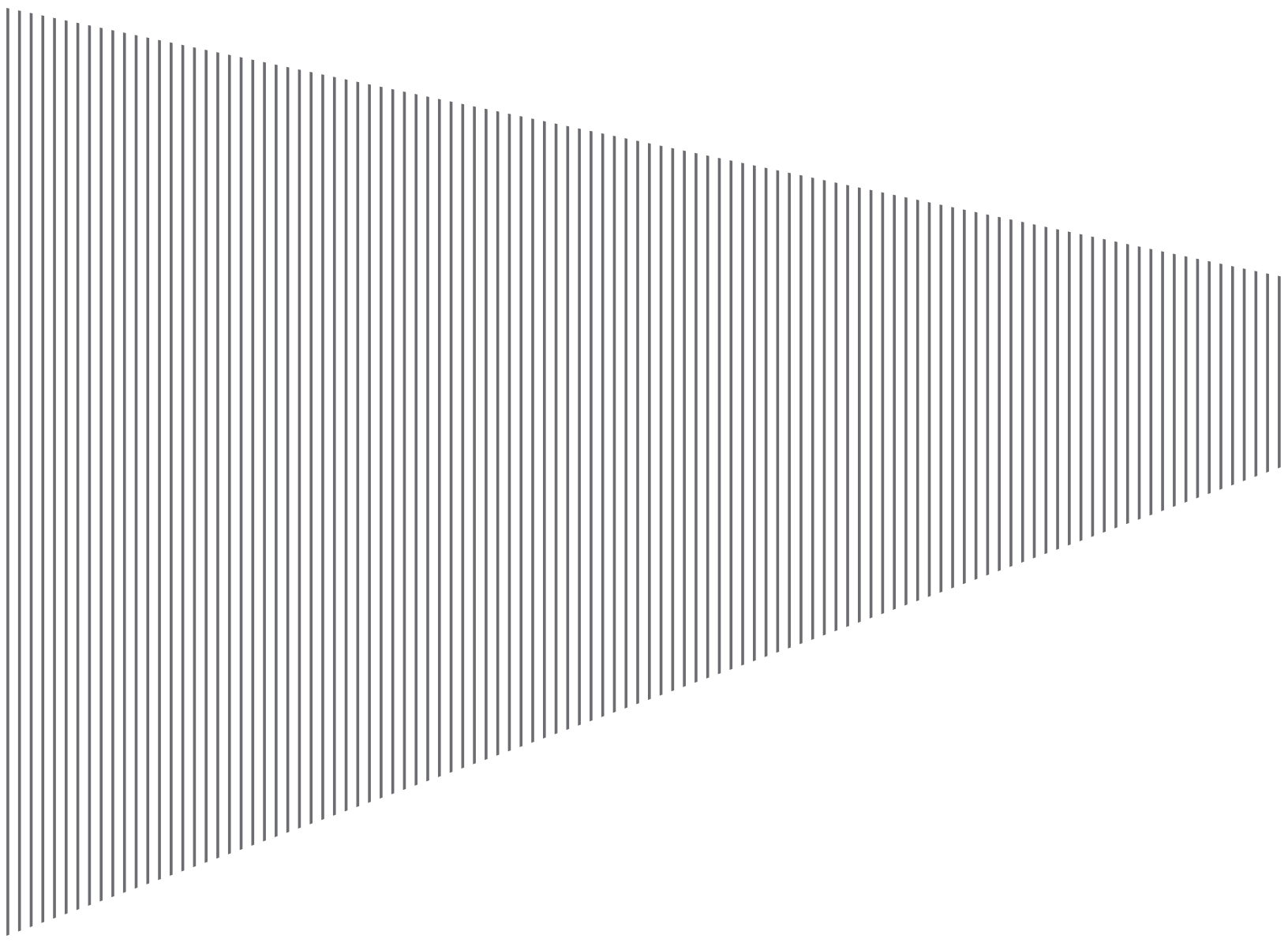
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SCHEDULE SB ATTACHMENTS

Schedule SB, Part V Statement of Actuarial Assumptions and Methods

Economic Assumptions

Interest rate basis:

- | | |
|---------------------|-----------------|
| ■ Applicable month | September |
| ■ Yield curve basis | 3-Segment Rates |

Interest rates:

- | | Reflecting
Corridors | Not Reflecting
Corridors |
|---------------------------|-------------------------|-----------------------------|
| ■ First segment rate | 4.72% | 1.15% |
| ■ Second segment rate | 6.11% | 4.06% |
| ■ Third segment rate | 6.81% | 5.15% |
| ■ Effective interest rate | 6.30% | 4.42% |

Annual rates of increase

- | | |
|-------------------------------------|-------------------------------|
| ■ 2015 Compensation: | 4.00% times 2014 compensation |
| ■ Future Social Security wage bases | 4.00% |
| ■ Statutory limits on compensation | None |

Administrative "and investment" expenses	\$91,551
--	----------

Plan Name:	Fresh Mark, Inc. Salaried Employees' Pension Plan
EIN / PN:	34-0565220 / 002
Plan Sponsor:	Fresh Mark, Inc.
Valuation Date:	January 1, 2015

SCHEDULE SB ATTACHMENTS

Demographic Assumptions

Inclusion date The valuation date coincident with or next following the date on which the employee becomes a participant.

New or rehired employees It was assumed there will be no new or rehired employees.

Mortality

■ **Healthy** For non-disabled participants: The prescribed mortality assumption under IRC §430(h)(3)(A) using static tables with separate mortality rates for annuitants and non-annuitants. For lump sums the unisex mortality version is used.

■ **Disabled** For purposes of determining Target Liability, mortality rates in accordance with Revenue Ruling 96-7 were used.

Termination The following rates are illustrative of the annual probability of withdrawal per 1,000 employees.

Representative Termination Rates

Percentage leaving during the year		
Attained Age	Males	Females
20	149	250
30	69	99
40	28	49
50	4	17
55	0	4

Disability Wyatt 1985 Disability Study Class 1 male and female rates. Below is a sample of assumed rates of disablement at selected age per 1,000 employees:

Attained Age	Males	Females
20	0.29	0.30
30	0.48	0.80
40	1.17	2.11
50	3.58	5.33
55	7.22	9.52

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 EIN / PN: 34-0565220 / 002
 Plan Sponsor: Fresh Mark, Inc.
 Valuation Date: January 1, 2015

SCHEDULE SB ATTACHMENTS

Retirement

The rates at which participants retire by age are shown below.

Age	Percentage retiring during the year
55 - 61	1% per year
62 - 64	20% per year
65	100% per year

Benefit commencement date:

- Preretirement death benefit The later of the death of the active participant or the date the participant would have attained age 55 and five years of service.
- Deferred vested benefit For the annuity, the later of age 65 or termination of employment. For the lump sum option, immediately after termination.
- Disability benefit Upon disablement with at least 10 years of service.

Form of payment

80% of current employees are assumed to elect a lump sum at termination/retirement. All other participants are assumed to elect a straight life annuity.

Percent married

It was assumed that 85% of males and 50% of females are married.

Spouse age

Females are assumed to be three years younger than males.

Covered pay

Compensation assumed paid in the current year beginning on the valuation date equals the actual plan compensation paid in the prior year increased by 4%.

Timing of benefit payments

Annuity payments are payable monthly at the beginning of the month.

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Plan Sponsor: Fresh Mark, Inc.
Valuation Date: January 1, 2015

SCHEDULE SB ATTACHMENTS

Methods	
Valuation date	First day of plan year
Funding target	Present value of accrued benefits
Target normal cost	Present value of benefits expected to accrue during plan year plus plan-related expenses expected to be paid from plan assets during plan year.
Actuarial value of assets	The actuarial value of assets is equal to the market value of assets as of the valuation date plus the discounted present value of contributions made after the valuation date for the prior plan year, discounted using the effective interest rate for the prior plan year.
Benefits not valued	The employee contributions in the Plan have been excluded from the valuation.
Change in assumptions and methods since prior valuation	Other than the prescribed changes in the discount rate and mortality assumption no other changes were made.

Assumptions Rationale - Significant Economic Assumptions

Interest rate	The basis chosen was selected by the plan sponsor from among choices prescribed by law, all of which are based on observed market data over certain periods of time.
Lump sum conversion rate	For funding purposes, lump sums were valued using the substitution of annuity form under IRS Regulation 1.430(d)-1(f)(4) without application of generational mortality.
Rates of increase in compensation, National Average Wages (NAW) CPI	Assumed increases were chosen by the plan sponsor and, as required by U.S. GAAP they represent an estimate of future experience.
Administrative expenses	Administrative expenses are estimated by determining the actual expenses paid from the trust the preceding year.

Assumptions Rationale - Significant Demographic Assumptions

Healthy and Disabled Mortality	Assumptions used for funding purposes are as prescribed by IRC §430(h).
Termination	Assumed termination rates differ by age and gender because of observed and expected differences in termination rates by gender.

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Disability	Assumed disability rates differ by gender because of observed and expected differences in disability rates by gender.
Retirement	Assumed retirement rates differ by age because of observed and expected differences in retirement rates by age.
Benefit commencement date for deferred benefits:	
Preretirement death benefit	Surviving spouses are assumed to begin benefits at the earliest permitted commencement date because ERISA requires benefits to start then unless the spouse elects to defer. If the spouse elects to defer, actuarial increases from the earliest commencement date must be given, so that a later commencement date is expected to be of approximately equal value, and experience indicates that most spouses do take the benefit as soon as it is available.
Deferred vested benefit	Deferred vested participants are assumed to begin benefits at age 65 (or current age if later) because the plan's experience is not considered to be credible, but deferred vested early commencement factors are not subsidized so that the difference between this approach and using assumed commencement rates at earlier ages is not expected to be significant.
Form of payment	The percentage of retiring participants assumed to take lump sums is based on observed experience over the period 2012-2014.
Marital Assumptions:	
Percent married	The assumed percentage married is based on general population statistics on the marital status of individuals of retirement age.
Spouse age	The assumed age difference for spouses is based on general population statistics of the age difference for married individuals of retirement age.

Source of Prescribed Methods

Funding methods	The methods used for funding purposes as described in Appendix A, including the method of determining plan assets, are "prescribed methods set by law", as defined in the actuarial standards of practice (ASOPs). These methods are required by IRC §430, or were selected by the plan sponsor from a range of methods permitted by IRC §430.
------------------------	--

Plan Name:	Fresh Mark, Inc. Salaried Employees' Pension Plan
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Plan Sponsor:	Fresh Mark, Inc.
Valuation Date:	January 1, 2015

SCHEDULE SB ATTACHMENTS

SCHEDULE SB ATTACHMENTS

Schedule SB, Line 22
Description of Weighted Average Retirement Age
as of January 1, 2015

See Schedule SB, Part V, Statement of Actuarial Assumptions and Methods for retirement rates. The average retirement age for Line 22 was calculated by determining the average age at retirement for those current active participants expected to reach retirement, based on all current decrements assumed.

Age of Retirement	Rates of Retirement	% Retiring	Weighted Ages
(A)	(B)	(C)	(A)*(C)
55	1.00%	1.00%	0.5500
56	1.00%	0.99%	0.5544
57	1.00%	0.98%	0.5587
58	1.00%	0.97%	0.5628
59	1.00%	0.96%	0.5668
60	1.00%	0.95%	0.5706
61	1.00%	0.94%	0.5743
62	20.00%	18.64%	11.5576
63	20.00%	14.91%	9.3952
64	20.00%	11.93%	7.6355
65	100.00%	47.72%	31.0191
Average Retirement Age			64

Plan Name: Fresh Mark, Inc. Salaried Employees' Pension Plan
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Plan Sponsor: Fresh Mark, Inc.
Valuation Date: January 1, 2015

SCHEDULE SB ATTACHMENTS

Schedule SB, Line 26 Schedule of Active Participant Data as of January 1, 2015

Attained Age	Years of Credited Service															
	Under 1		1 to 4		5 to 9		10 to 14		15 to 19		20 to 24		25 to 29		30 to 34	
	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.
Under 25	0		0		0		0		0		0		0		0	
25 - 29	0		0		0		0		0		0		0		0	
30 - 34	0		0		3		4		0		0		0		0	
35 - 39	0		0		0		2		3		0		0		0	
40 - 44	0		0		2		6		9		6		0		0	
45 - 49	0		0		2		9		3		2		4		0	
50 - 54	0		0		0		7		7		6		4		5	
55 - 59	0		0		4		7		2		5		5		5	
60 - 64	0		0		2		5		4		4		4		4	
65 - 69	0		0		0		2		1		0		0		0	
70 & Over	0		0		0		0		0		0		0		0	

Plan Name: Fresh Mark, Inc. Salaried Employees' Pension Plan
 EIN / PN: 34-0565220 / 002
 Plan Sponsor: Fresh Mark, Inc.
 Valuation Date: January 1, 2015

SCHEDULE SB ATTACHMENTS

Schedule SB, Part V Summary of Plan Provisions

Plan Sponsor

Fresh Mark, Inc.

Plan

Fresh Mark, Inc. Salaried Employees' Pension Plan

Effective Date and Most Recent Amendment

August 1, 1988 as merger of Superior's Brand Meats, Inc. Salaried Plan (originally effective date January 1, 1971) and Sugardale Foods Inc. Salaried Plan (originally effective January 1, 1961), and Amended and Restated effective January 1, 2010. Further, the plan was amended effective July 31, 2012 to include additional lump sum provisions. The plan was further amended effective April 1, 2013.

Plan Year

The twelve-month period ending December 31st.

Coverage and Participation

Each salaried employee and hourly-paid employee hired prior to January 1, 2007, and not represented by a union, working or expected to work 1,000 or more hours a year, becomes a participant on the first January 1 or July 1 following attainment of age 21 and one year of service. Effective December 30, 1993, certain designated active Carriage Hill employees were no longer covered under this Plan.

Credited Service

One year is credited for each year of employment after January 1, 1976 computed on an elapsed time basis; service prior to January 1, 1976 is computed based upon the provisions of the Plan then in effect.

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Plan Sponsor:	Fresh Mark, Inc.
Valuation Date:	January 1, 2015

SCHEDULE SB ATTACHMENTS

Final Average Compensation/Salary

1/60th of the average of the highest 5 consecutive calendar years of aggregate compensation received during the 10 years prior to retirement or termination. Compensation is total compensation for services inclusive of any bonuses, commissions, overtime pay, and premiums for insurance protection which are treated as taxable income to the Participant for the year. Compensation is limited to \$260,000 effective January 1, 2014, and is subject to future indexing.

Normal Retirement Benefit

Eligible at age 65.

The normal retirement benefit, if paid on a straight-life basis, is equal to 45% of Final Average Monthly Compensation less 50% of the Primary Insurance Amount, with such difference proportionately reduced for less than 30 years of Credited Service.

Primary Insurance Amount

The monthly benefit under the Federal Social Security Act in effect at retirement or termination (but not beyond the Normal Retirement Date) assuming the Participant continues to earn compensation at the rate in effect at the time of his termination for the period between his date of retirement or termination and his attainment of age 65.

Accrued Benefits

The accrued pension is calculated on the basis of Credited Service projected to the Participant's normal retirement date and Final Average Compensation at the date of determination (such as early retirement or termination) and then multiplying by a ratio of Credited Service at termination to Credited Service at the normal retirement date.

Early Retirement Benefit

Eligible at age 55 with 10 years of Credited Service.

The early retirement benefit is the Accrued Benefit payable at age 65 or, alternatively, a reduced pension payable immediately. Below is an excerpt of the factors:

Age at Benefit Commencement	Factor
55	0.50
60	0.70
62	0.82

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Plan Sponsor: Fresh Mark, Inc.
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SCHEDULE SB ATTACHMENTS

Disability Benefit

Eligible upon total and permanent disability after 10 years of Credited Service.

After a 26-week waiting period, the disability retirement benefit is the Accrued Benefit at disability without actuarial reduction for early commencement of benefits. Payments made prior to age 65 are reduced for benefits receivable under Workmen's Compensation, Company provided group insurance plans or any other Federal, state or local legislation (excluding Social Security).

Vested Benefits Upon Termination of Service

Eligible at any age and 5 years of Credited Service.

The deferred vested termination is the Accrued Benefit payable at age 65 or, alternatively, if the employee has at least 10 years of Credited Service, an actuarially reduced pension payable as early as age 55.

Pre-Retirement Spouse's Benefit

Eligible upon death of an active or terminated vested Participant after completion of 5 years of Credited Service.

The surviving spouse will receive the benefit which would have been paid if the Participant had retired on the day prior to his death and had elected a 50% Joint and Survivor Annuity. If the employee dies prior to meeting the eligibility requirements for Normal or Early Retirement, benefits to the spouse will be deferred until the earliest date the decedent would have been so eligible.

One-Time Lump Sum Window

Former employees were given the option through a one-time window to receive their accrued benefit as a single lump sum payment with a payout date of November 1, 2012. The value of their benefit had to be \$250,000 or less.

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Valuation Date:	January 1, 2015

SCHEDULE SB ATTACHMENTS

Optional Forms of Retirement Income in Lieu of Normal Form

The amount of pension as determined according to the applicable formula for retirement benefits is payable on a straight-life annuity basis. A Participant retiring under the provisions for Normal or Early Retirement may elect to receive his benefit on a straight-life basis or on an actuarially equivalent 50% Joint and Survivor basis, 75%, 100% Joint and Survivor basis or 10 or 20 year certain and life basis. For participants whose benefit has a present value of \$300,000, the benefit is payable as a lump sum if paid within six months following termination of employment.

Unless otherwise elected, any benefit payable under the Plan shall be paid:

- (1) on a reduced 50% Joint and Survivor annuity basis, if the Participant has been married at least one year; or
- (2) on a straight-life annuity basis otherwise.

Changes in Plan Provisions since Last Actuarial Valuation

None.

Plan Name:	Fresh Mark, Inc. Salaried Employees' Pension Plan
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Plan Sponsor:	Fresh Mark, Inc.
Valuation Date:	January 1, 2015

SCHEDULE SB ATTACHMENTS

Schedule SB – Statement by Enrolled Actuary

Plan Sponsor	Fresh Mark, Inc.
EIN/PN	34-0565220/002
Plan Name	Fresh Mark, Inc. Salaried Employees' Pension Plan
Valuation Date	January 1, 2015
Enrolled Actuary	Keith Okress
Enrollment Number	14-06965

The actuarial assumptions that are not mandated by IRC § 430 and regulations, represent the enrolled actuary's best estimate of anticipated experience under the plan, subject to the following conditions:

The actuarial valuation, on which the information in this Schedule SB is based, has been prepared in reliance upon the employee and financial data furnished by the plan administrator and the trustee. The enrolled actuary has not made a rigorous check of the accuracy of this information but has accepted it after reviewing it and concluding it is reasonable in relation to similar information furnished in previous years. The amounts of contributions and dates paid shown in Item 18 of Schedule SB were listed in reliance on information provided by the plan administrator and/or trustee.

<http://natdt.internal.towerswatson.com/clients/608352/6083522016valuation/documents/fm 2015 sal sb attachments.docx>

Plan Name:	Fresh Mark, Inc. Salaried Employees' Pension Plan
EIN / PN:	34-0565220 / 002
Plan Sponsor:	Fresh Mark, Inc.
Valuation Date:	January 1, 2015

**SCHEDULE SB
(Form 5500)**Department of the Treasury
Internal Revenue ServiceDepartment of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

**Single-Employer Defined Benefit Plan
Actuarial Information**

This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6059 of the Internal Revenue Code (the Code).

▶ **File as an attachment to Form 5500 or 5500-SF.**

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▶ **Round off amounts to nearest dollar.**▶ **Caution:** A penalty of \$1,000 will be assessed for late filing of this report unless reasonable cause is established.

A Name of plan Fresh Mark, Inc. Salaried Employees' Pension Plan		B Three-digit plan number (PN) ▶ 002
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF Fresh Mark, Inc.		D Employer Identification Number (EIN) 34-0565220
E Type of plan: ☒ Single ☐ Multiple-A ☐ Multiple-B ☐ Other		
F Prior year plan size: ☐ 100 or fewer ☐ 101-500 ☒ More than 500		

Part I Basic Information

1 Enter the valuation date: Month <u>01</u> Day <u>01</u> Year <u>2015</u>			
2 Assets:			
a Market value		2a	39,623,730
b Actuarial value		2b	39,623,730
3 Funding target/participant count breakdown	(1) Number of participants	(2) Vested Funding Target	(3) Total Funding Target
a For retired participants and beneficiaries receiving payment	178	12,393,150	12,393,150
b For terminated vested participants	32	1,139,159	1,139,159
c For active participants	158	17,658,301	18,039,886
d Total	368	31,190,610	31,572,195
4 If the plan is in at-risk status, check the box and complete lines (a) and (b) ☐			
a Funding target disregarding prescribed at-risk assumptions		4a	
b Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been in at-risk status for fewer than five consecutive years and disregarding loading factor		4b	
5 Effective interest rate	5		6.30%
6 Target normal cost	6		1,465,182

Statement by Enrolled Actuary

To the best of my knowledge, the information supplied in this schedule and accompanying schedules, statements and attachments, if any, is complete and accurate. Each prescribed assumption was applied in accordance with applicable law and regulations. In my opinion, each other assumption is reasonable (taking into account the experience of the plan and reasonable expectations) and such other assumptions, in combination, offer my best estimate of anticipated experience under the plan.

SIGN HERE	Keith J Okress <i>KJO</i>	October 5, 2016
Signature of actuary		Date
Keith J Okress		1406965
Type or print name of actuary		Most recent enrollment number
Towers Watson Delaware Inc.		216-937-4000
Firm name		Telephone number (including area code)
1001 Lakeside Avenue, Suite 1500		
Cleveland, OH 44114		
Address of the firm		

If the actuary has not fully reflected any regulation or ruling promulgated under the statute in completing this schedule, check the box and see instructions ☐

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

Schedule SB (Form 5500) 2015
v. 150123

Part V Assumptions Used to Determine Funding Target and Target Normal Cost

21 Discount rate:			
a Segment rates:	1st segment: 4.72%	2nd segment: 6.11%	3rd segment: 6.81%
			☐ N/A, full yield curve used
b Applicable month (enter code)			21b 4
22 Weighted average retirement age			22 64
23 Mortality table(s) (see instructions)	☐ Prescribed - combined	☒ Prescribed - separate	☐ Substitute

Part VI Miscellaneous Items

24 Has a change been made in the non-prescribed actuarial assumptions for the current plan year? If "Yes," see instructions regarding required attachment	☐ Yes	☒ No
25 Has a method change been made for the current plan year? If "Yes," see instructions regarding required attachment	☐ Yes	☒ No
26 Is the plan required to provide a Schedule of Active Participants? If "Yes," see instructions regarding required attachment	☒ Yes	☐ No
27 If the plan is subject to alternative funding rules, enter applicable code and see instructions regarding attachment	27	

Part VII Reconciliation of Unpaid Minimum Required Contributions For Prior Years

28 Unpaid minimum required contributions for all prior years	28	0
29 Discounted employer contributions allocated toward unpaid minimum required contributions from prior years (line 19a)	29	0
30 Remaining amount of unpaid minimum required contributions (line 28 minus line 29)	30	0

Part VIII Minimum Required Contribution For Current Year

31 Target normal cost and excess assets (see instructions):			
a Target normal cost (line 6)	31a	1,465,182	
b Excess assets, if applicable, but not greater than line 31a	31b	1,465,182	
32 Amortization installments:	Outstanding Balance		Installment
a Net shortfall amortization installment	0	0	
b Waiver amortization installment	0	0	
33 If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____) and the waived amount	33	0	
34 Total funding requirement before reflecting carryover/prefunding balances (lines 31a - 31b + 32a + 32b - 33)	34	0	
	Carryover balance	Prefunding balance	Total balance
35 Balances elected for use to offset funding requirement	0	0	0
36 Additional cash requirement (line 34 minus line 35)	36	0	
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)	37	2,756,523	
38 Present value of excess contributions for current year (see instructions)			
a Total (excess, if any, of line 37 over line 36)	38a	2,756,523	
b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances	38b	0	
39 Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37)	39	0	
40 Unpaid minimum required contributions for all years	40	0	

Part IX Pension Funding Relief Under Pension Relief Act of 2010 (See Instructions)

41 If an election was made to use PRA 2010 funding relief for this plan:			
a Schedule elected	☐ 2 plus 7 years ☐ 15 years		
b Eligible plan year(s) for which the election in line 41a was made	☐ 2008 ☐ 2009 ☐ 2010 ☐ 2011		
42 Amount of acceleration adjustment	42	0	
43 Excess installment acceleration amount to be carried over to future plan years	43	0	

See

Audited Financial

Statements

For

Schedule of Assets Held

See

Audited Financial

Statements

For

Schedule of Reportable Transactions

(Schedule H 4j)