

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). <p style="text-align: center;">▶ Complete all entries in accordance with the instructions to the Form 5500.</p>	OMB Nos. 1210-0110 1210-0089 <div style="font-size: 24pt; font-weight: bold;">2015</div> 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>BERMELLO, AJAMIL & PARTNERS, INC. EMPLOYEES SAVINGS INVESTMENT PLAN</u>	1b Three-digit plan number (PN) ▶	<div style="border: 1px solid black; padding: 2px;">001</div>
		1c Effective date of plan	<u>07/01/1994</u>
2a Plan sponsor's name (employer, if for a single-employer plan)		2b Employer Identification Number (EIN)	<u>59-1722486</u>
Mailing address (include room, apt., suite no. and street, or P.O. Box)		2c Plan Sponsor's telephone number	<u>305-860-3780</u>
City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions)		2d Business code (see instructions)	<u>541310</u>
<u>BERMELLO, AJAMIL & PARTNERS, INC.</u>			
<u>2601 S BAYSHORE DRIVE SUITE 1000</u>			
<u>MIAMI, FL 33133</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>DIANA GARCIA</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

3a Plan administrator's name and address ☒ Same as Plan Sponsor	3b Administrator's EIN
	3c Administrator's telephone number
4 If the name and/or EIN of the plan sponsor has changed since the last return/report filed for this plan, enter the name, EIN and the plan number from the last return/report: a Sponsor's name	4b EIN 4c PN
5 Total number of participants at the beginning of the plan year	5 183
6 Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines 6a(1) , 6a(2) , 6b , 6c , and 6d).	
a(1) Total number of active participants at the beginning of the plan year.....	6a(1) 61
a(2) Total number of active participants at the end of the plan year	6a(2) 71
b Retired or separated participants receiving benefits.....	6b 2
c Other retired or separated participants entitled to future benefits.....	6c 113
d Subtotal. Add lines 6a(2) , 6b , and 6c	6d 186
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.....	6e 0
f Total. Add lines 6d and 6e	6f 186
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	6g 170
h Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested	6h 1
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	7
8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions: 2E 2F 2G 2J 2K 3D 3H 3B	
b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristics Codes in the instructions:	
9a Plan funding arrangement (check all that apply) (1) ☒ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☐ Trust (4) ☐ General assets of the sponsor	9b Plan benefit arrangement (check all that apply) (1) ☒ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☐ Trust (4) ☐ General assets of the sponsor
10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)	
a Pension Schedules (1) ☒ R (Retirement Plan Information) (2) ☐ MB (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary (3) ☐ SB (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary	b General Schedules (1) ☒ H (Financial Information) (2) ☐ I (Financial Information – Small Plan) (3) ☒ <u>1</u> A (Insurance Information) (4) ☒ C (Service Provider Information) (5) ☒ D (DFE/Participating Plan Information) (6) ☐ G (Financial Transaction Schedules)

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

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

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

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

Receipt Confirmation Code _____

SCHEDULE A (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Insurance Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500. ▶ Insurance companies are required to provide the information pursuant to ERISA section 103(a)(2).	OMB No. 1210-0110 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 BERMELLO, AJAMIL & PARTNERS, INC. EMPLOYEES SAVINGS INVESTMENT PLAN	B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 BERMELLO, AJAMIL & PARTNERS, INC.	D Employer Identification Number (EIN) 59-1722486

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

(a) Name of insurance carrier
GREAT WEST LIFE AND ANNUITY

(b) EIN	(c) NAIC code	(d) Contract or identification number	(e) Approximate number of persons covered at end of policy or contract year	Policy or contract year	
				(f) From	(g) To
84-0467907	68322	931084-01	170	01/01/2015	12/31/2015

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

(a) Total amount of commissions paid 10910	(b) Total amount of fees paid 0
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3 Persons receiving commissions and fees. (Complete as many entries as needed to report all persons).

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

LYDA SHEHADEH
METLIFE SECURITIES INC
1 ALHAMBRA PLAZA STE 5
CORAL GABLES, FL 33134

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
8208			3

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

ROBERT PULLES
PREFERRED PRODUCT NETWORK INC
255 ALHAMBRA CIRCLE STE 630
MIAMI, FL 33134

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
2702			3

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

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

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

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

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

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

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

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

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

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

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

Part II Investment and Annuity Contract Information

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

4 Current value of plan's interest under this contract in the general account at year end	4	1026510
5 Current value of plan's interest under this contract in separate accounts at year end	5	4443015

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

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

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

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

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

b Balance at the end of the previous year	7b	968893
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c Additions: (1) Contributions deposited during the year	7c(1)	35412	
(2) Dividends and credits	7c(2)	0	
(3) Interest credited during the year	7c(3)	11865	
(4) Transferred from separate account	7c(4)	22024	
(5) Other (specify below)	7c(5)	25499	

▶ **LOAN PAYMENTS, FORFEITURES**

(6) Total additions	7c(6)	94800
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d Total of balance and additions (add lines 7b and 7c(6))	7d	1063693
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e Deductions:

(1) Disbursed from fund to pay benefits or purchase annuities during year	7e(1)	25438	
(2) Administration charge made by carrier	7e(2)	657	
(3) Transferred to separate account	7e(3)	11088	
(4) Other (specify below)	7e(4)		

(5) Total deductions	7e(5)	37183
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f Balance at the end of the current year (subtract line 7e(5) from line 7d)	7f	1026510
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Part III Welfare Benefit Contract Information

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

8 Benefit and contract type (check all applicable boxes)

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

9 Experience-rated contracts:

a Premiums: (1) Amount received.....	9a(1)		
(2) Increase (decrease) in amount due but unpaid.....	9a(2)		
(3) Increase (decrease) in unearned premium reserve.....	9a(3)		
(4) Earned ((1) + (2) - (3)).....		9a(4)	0
b Benefit charges (1) Claims paid.....	9b(1)		
(2) Increase (decrease) in claim reserves.....	9b(2)		
(3) Incurred claims (add (1) and (2)).....		9b(3)	0
(4) Claims charged.....		9b(4)	
c Remainder of premium: (1) Retention charges (on an accrual basis) --			
(A) Commissions.....	9c(1)(A)		
(B) Administrative service or other fees.....	9c(1)(B)		
(C) Other specific acquisition costs.....	9c(1)(C)		
(D) Other expenses.....	9c(1)(D)		
(E) Taxes.....	9c(1)(E)		
(F) Charges for risks or other contingencies.....	9c(1)(F)		
(G) Other retention charges.....	9c(1)(G)		
(H) Total retention.....		9c(1)(H)	0
(2) Dividends or retroactive rate refunds. (These amounts were ☐ paid in cash, or ☐ credited.).....		9c(2)	
d Status of policyholder reserves at end of year: (1) Amount held to provide benefits after retirement.....		9d(1)	
(2) Claim reserves.....		9d(2)	
(3) Other reserves.....		9d(3)	
e Dividends or retroactive rate refunds due. (Do not include amount entered in line 9c(2).).....		9e	

10 Nonexperience-rated contracts:

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

Specify nature of costs ▶

Part IV Provision of Information

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

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

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

For calendar plan year 2015 or fiscal plan year beginning 01/01/2015 and ending 12/31/2015		
<div>A</div> Name of plan BERMELLO, AJAMIL & PARTNERS, INC. EMPLOYEES SAVINGS INVESTMENT PLAN	<div>B</div> Three-digit plan number (PN) ▶	001
<div>C</div> Plan sponsor's name as shown on line 2a of Form 5500 BERMELLO, AJAMIL & PARTNERS, INC.	<div>D</div> Employer Identification Number (EIN) 59-1722486	

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)

ADVISED ASSET GROUP

8515 EAST ORCHARD ROAD
GREENWOOD VILLAGE, CO 80111

(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?
28	INVESTMENT MGMT	3805	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

GREAT-WEST LIFE & ANNUITY INSURANCE

8515 EAST ORCHARD ROAD
GREENWOOD VILLAGE, CO 80111

(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?
64	RECORDKEEPER	0	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☒ No ☐

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

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

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

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

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

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

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

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

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

Part I Service Provider Information (continued)

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE D (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small>	DFE/Participating Plan Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ► File as an attachment to Form 5500.	OMB No. 1210-0110 <hr/> 2015 <hr/> This Form is Open to Public Inspection.
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For calendar plan year 2015 or fiscal plan year beginning	01/01/2015	and ending	12/31/2015
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A Name of plan BERMELO, AJAMIL & PARTNERS, INC. EMPLOYEES SAVINGS INVESTMENT PLAN	B Three-digit plan number (PN)	► 001
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C Plan or DFE sponsor's name as shown on line 2a of Form 5500 BERMELO, AJAMIL & PARTNERS, INC.	D Employer Identification Number (EIN) 59-1722486
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Part I	Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs) (Complete as many entries as needed to report all interests in DFEs)
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a Name of MTIA, CCT, PSA, or 103-12 IE:	FUTURE FUNDS SERIES ACCT II OF GWL
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b Name of sponsor of entity listed in (a):	GREAT-WEST LIFE & ANNUITY INS. CO.
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c EIN-PN	84-0467907-003	d Entity code	P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	4443015
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a Name of MTIA, CCT, PSA, or 103-12 IE:	
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b Name of sponsor of entity listed in (a):	
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c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
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a Name of MTIA, CCT, PSA, or 103-12 IE:	
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b Name of sponsor of entity listed in (a):	
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c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
-----------------	--	----------------------	--	---	--

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

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

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

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

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

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

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

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

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

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

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

c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
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a Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)

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

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

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

SCHEDULE H (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	Financial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ► File as an attachment to Form 5500.	OMB No. 1210-0110 2015 This Form is Open to Public Inspection
For calendar plan year 2015 or fiscal plan year beginning <u>01/01/2015</u> and ending <u>12/31/2015</u>		
A Name of plan <u>BERMELO, AJAMIL & PARTNERS, INC. EMPLOYEES SAVINGS INVESTMENT PLAN</u>		B Three-digit plan number (PN) ► <u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>BERMELO, AJAMIL & PARTNERS, INC.</u>		D Employer Identification Number (EIN) <u>59-1722486</u>

Part I Asset and Liability Statement			
1 Current value of plan assets and liabilities at the beginning and end of the plan year. Combine the value of plan assets held in more than one trust. Report the value of the plan's interest in a commingled fund containing the assets of more than one plan on a line-by-line basis unless the value is reportable on lines 1c(9) through 1c(14). Do not enter the value of that portion of an insurance contract which guarantees, during this plan year, to pay a specific dollar benefit at a future date. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 1b(1), 1b(2), 1c(8), 1g, 1h, and 1i. CCTs, PSAs, and 103-12 IEs also do not complete lines 1d and 1e. See instructions.			
Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a	0	0
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	0	0
(2) Participant contributions	1b(2)	0	0
(3) Other.....	1b(3)	0	0
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	0	0
(2) U.S. Government securities.....	1c(2)	0	0
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)	0	0
(B) All other.....	1c(3)(B)	0	0
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)	0	0
(B) Common	1c(4)(B)	0	0
(5) Partnership/joint venture interests	1c(5)	0	0
(6) Real estate (other than employer real property)	1c(6)	0	0
(7) Loans (other than to participants)	1c(7)	0	0
(8) Participant loans	1c(8)	204883	184256
(9) Value of interest in common/collective trusts.....	1c(9)	0	0
(10) Value of interest in pooled separate accounts.....	1c(10)	4418945	4443015
(11) Value of interest in master trust investment accounts	1c(11)	0	0
(12) Value of interest in 103-12 investment entities	1c(12)	0	0
(13) Value of interest in registered investment companies (e.g., mutual funds).....	1c(13)	0	0
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)	968893	1026510
(15) Other	1c(15)	0	0

1d Employer-related investments:

		(a) Beginning of Year	(b) End of Year
(1) Employer securities	1d(1)	0	0
(2) Employer real property	1d(2)	0	0
e Buildings and other property used in plan operation	1e	0	0
f Total assets (add all amounts in lines 1a through 1e)	1f	5592721	5653781

Liabilities

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

Net Assets

l Net assets (subtract line 1k from line 1f)	1l	5592721	5653781
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Part II Income and Expense Statement

2 Plan income, expenses, and changes in net assets for the year. Include all income and expenses of the plan, including any trust(s) or separately maintained fund(s) and any payments/receipts to/from insurance carriers. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 2a, 2b(1)(E), 2e, 2f, and 2g.

Income**a Contributions:**

		(a) Amount	(b) Total
(1) Received or receivable in cash from: (A) Employers	2a(1)(A)	0	
(B) Participants	2a(1)(B)	183462	
(C) Others (including rollovers)	2a(1)(C)	0	
(2) Noncash contributions	2a(2)	0	
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		183462

b Earnings on investments:**(1) Interest:**

(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	0	
(B) U.S. Government securities	2b(1)(B)	0	
(C) Corporate debt instruments	2b(1)(C)	0	
(D) Loans (other than to participants)	2b(1)(D)	0	
(E) Participant loans	2b(1)(E)	8795	
(F) Other	2b(1)(F)	11865	
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		20660

(2) Dividends: (A) Preferred stock	2b(2)(A)	0	
(B) Common stock	2b(2)(B)	0	
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	0	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		0

(3) Rents	2b(3)		0
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(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)	0	
(B) Aggregate carrying amount (see instructions)	2b(4)(B)	0	
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)		0

(5) Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)	0	
(B) Other	2b(5)(B)	0	
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		0

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		0
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		-29720
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		0
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		0
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		0
c Other income	2c		-5427
d Total income. Add all income amounts in column (b) and enter total	2d		168975

Expenses**e** Benefit payment and payments to provide benefits:

(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	103960	
(2) To insurance carriers for the provision of benefits	2e(2)	0	
(3) Other	2e(3)	0	
(4) Total benefit payments. Add lines 2e(1) through (3)	2e(4)		103960
f Corrective distributions (see instructions)	2f		0
g Certain deemed distributions of participant loans (see instructions)	2g		0
h Interest expense	2h		0
i Administrative expenses: (1) Professional fees	2i(1)	0	
(2) Contract administrator fees	2i(2)	0	
(3) Investment advisory and management fees	2i(3)	3805	
(4) Other	2i(4)	150	
(5) Total administrative expenses. Add lines 2i(1) through (4)	2i(5)		3955
j Total expenses. Add all expense amounts in column (b) and enter total	2j		107915

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		61060
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: MORRISON, BROWN, ARGIZ & FARRA, LLC

(2) EIN: 01-0720052

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

	Yes	No	N/A	Amount
c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)		X		
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)		X		
e Was this plan covered by a fidelity bond?	X			500000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		X		
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?		X		
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?		X		
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	X			
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked, and see instructions for format requirements.)		X		
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?		X		
l Has the plan failed to provide any benefit when due under the plan?		X		
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)		X		
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.		X		
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>BERMELLO, AJAMIL & PARTNERS, INC. EMPLOYEES SAVINGS INVESTMENT PLAN</u>	B Three-digit plan number (PN) ▶ <u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>BERMELLO, AJAMIL & PARTNERS, INC.</u>	D Employer Identification Number (EIN) <u>59-1722486</u>

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

1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions.....	1	<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>20-3691708</u>		
Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.		
3 Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year.....	3	

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

Part III	Amendments
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9 If this is a defined benefit pension plan, were any amendments adopted during this plan year that increased or decreased the value of benefits? If yes, check the appropriate box. If no, check the "No" box.	☐ Increase	☐ Decrease	☐ Both	☐ No
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Part IV	ESOPs (see instructions). If this is not a plan described under Section 409(a) or 4975(e)(7) of the Internal Revenue Code, skip this Part.
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10 Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan?	☐ Yes	☐ No
11 a Does the ESOP hold any preferred stock?	☐ Yes	☐ No
b If the ESOP has an outstanding exempt loan with the employer as lender, is such loan part of a "back-to-back" loan? (See instructions for definition of "back-to-back" loan.)	☐ Yes	☐ No
12 Does the ESOP hold any stock that is not readily tradable on an established securities market?	☐ Yes	☐ No

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

Schedule R (Form 5500) 2015
v. 150123

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

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

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

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

**BERMELLO, AJAMIL & PARTNERS, INC.
EMPLOYEES' SAVINGS INVESTMENT PLAN**

FINANCIAL STATEMENTS

DECEMBER 31, 2015 AND 2014



CERTIFIED PUBLIC ACCOUNTANTS AND ADVISORS

**BERMELLO, AJAMIL & PARTNERS, INC.
EMPLOYEES' SAVINGS INVESTMENT PLAN**

TABLE OF CONTENTS

INDEPENDENT AUDITOR'S REPORT	1 - 2
FINANCIAL STATEMENTS	
Statements of Net Assets Available for Benefits	3
Statements of Changes in Net Assets Available for Benefits	4
Notes to Financial Statements	5 - 15
SUPPLEMENTAL SCHEDULES	16
Form 5500 Schedule H, Line 4i - Schedule of Assets (Held at End of Year) as of December 31, 2015	17
Form 5500 Schedule H, Line 4i - Schedule of Assets (Held at End of Year) as of December 31, 2014	18



INDEPENDENT AUDITOR'S REPORT

To the Administrative Committee of
Bermello, Ajamil & Partners, Inc.
Employees' Savings Investment Plan

Report on the Financial Statements

We were engaged to audit the accompanying financial statements of Bermello, Ajamil & Partners, Inc. Employees' Savings Investment Plan (the "Plan"), which comprise the statements of net assets available for benefits as of December 31, 2015 and 2014, and the related statements of changes in net assets available for benefits for the years then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

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

Auditor's Responsibility

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

Basis for Disclaimer of Opinion

As permitted by 29 CFR 2520.103-8 of the Department of Labor's ("DOL") Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 ("ERISA"), the Plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in NOTE 7, which was certified by Great West Life and Annuity Insurance Company, the custodian of the Plan, except for comparing such information with the related information included in the financial statements. We have been informed by the Plan administrator that the custodian holds the Plan's investment assets and executes investment transactions. The Plan administrator has obtained a certification from the custodian as of and for the years ended December 31, 2015 and 2014, that the information provided to the Plan administrator by the custodian is complete and accurate.

Disclaimer of Opinion

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

An Independent Member of Baker Tilly International

Other Matter

The supplemental Schedules of Assets (Held at End of Year) as of December 31, 2015 and 2014 are required by the DOL's Rules and Regulations for Reporting and Disclosure under ERISA and are presented for the purpose of additional analysis and are not a required part of the financial statements. Because of the significance of the matter described in the Basis for Disclaimer of Opinion paragraph, we do not express an opinion on these supplemental schedules.

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

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

Monison, Brown, Aigin & Tena

Miami, Florida
October 13, 2016

**BERMELLO, AJAMIL & PARTNERS, INC.
EMPLOYEES' SAVINGS INVESTMENT PLAN**

STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
DECEMBER 31,

	2015	2014
<hr/>		
ASSETS		
Investments		
Pooled separate accounts, at fair value	\$ 4,443,015	\$ 4,418,945
Funds held in insurance company general account, at fair value	<u>1,026,510</u>	<u>968,893</u>
TOTAL INVESTMENTS	<u>5,469,525</u>	<u>5,387,838</u>
Receivables:		
Participants' contributions	9,615	7,172
Notes receivable from participants	<u>184,256</u>	<u>204,883</u>
TOTAL RECEIVABLES	<u>193,871</u>	<u>212,055</u>
NET ASSETS AVAILABLE FOR BENEFITS	<u>\$ 5,663,396</u>	<u>\$ 5,599,893</u>

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

BERMELLO, AJAMIL & PARTNERS, INC.
EMPLOYEES' SAVINGS INVESTMENT PLAN

STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
FOR THE YEARS ENDED DECEMBER 31,

	2015	2014
ADDITIONS TO NET ASSETS ATTRIBUTED TO:		
Investment (loss) income:		
Net (depreciation) appreciation in fair value of investments	\$ (29,720)	\$ 290,355
Interest	11,865	11,506
Other	(5,427)	-
TOTAL INVESTMENT (LOSS) INCOME	(23,282)	301,861
Interest income on notes receivable from participants	8,795	10,037
Contributions:		
Participants	185,905	171,241
TOTAL ADDITIONS	171,418	483,139
DEDUCTIONS FROM NET ASSETS ATTRIBUTED TO:		
Benefits paid to participants	103,960	609,826
Administrative expenses	3,955	3,713
TOTAL DEDUCTIONS	107,915	613,539
NET INCREASE (DECREASE)	63,503	(130,400)
NET ASSETS AVAILABLE FOR BENEFITS:		
BEGINNING OF YEAR	5,599,893	5,730,293
END OF YEAR	\$ 5,663,396	\$ 5,599,893

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

**BERMELLO, AJAMIL & PARTNERS, INC.
EMPLOYEES' SAVINGS INVESTMENT PLAN**

NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2015 AND 2014

1. DESCRIPTION OF PLAN

The following description of the Bermello, Ajamil & Partners, Inc. Employees' Savings Investment Plan (the "Plan") provides only general information. Participants should refer to the Plan document for a more complete description of the Plan's provisions. Bermello, Ajamil & Partners, Inc. (the "Plan Administrator" or the "Company") is the Plan sponsor.

General

The Plan's original effective date was July 1, 1994. The Plan is a defined contribution plan covering all employees of Bermello, Ajamil & Partners, Inc. (the "Employer") who have worked for six consecutive months of service during which the participants complete at least one hour of service and are at least age 21. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 ("ERISA").

Plan Custodian

The Plan assets are maintained by Great West Life and Annuity Insurance Company ("Great West"), which serves as the Custodian of the Plan.

Contributions

Each year, participants may elect to have the Company contribute a portion of their total annual compensation to the Plan ("elective deferrals"). For any calendar year, a participant's elective deferrals may not exceed \$18,000 and \$17,500 in 2015 and 2014, respectively, as determined by the Internal Revenue Service ("IRS"). Participants may contribute amounts representing distributions from other qualified defined benefit or contribution plans (rollover contributions, catch-up contributions and IRA contributions). The Company may make a matching contribution or profit sharing contribution equal to a discretionary percentage of each participant's salary deferrals, which percentage will be determined each year by the Company. In order to share in the matching and profit sharing contributions, a participant must be actively employed on the last day of the Plan year and must have completed at least 1,000 hours of service during the Plan year. The Company made no matching contribution for the years ended December 31, 2015 and 2014.

Participant Accounts

Individual accounts are maintained for each Plan participant. Each participant's account is credited with the participant's contribution, the Company's matching contributions and Plan earnings thereon and allocations of (a) the Company's profit sharing contributions and (b) Plan earnings related to those profit sharing contributions. Allocations are based on participant account balances, as defined. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account. Certain minimum service hour requirements must be met for employees to be entitled to allocations of Company matching and/or non-elective contributions. Forfeited balances of terminated participants' non-vested accounts are used to reduce future Company contributions. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

Investment Options

Participants direct the investment of their contributions into various investment options offered by the Plan. Company contributions are invested in accordance with the respective employee's investment allocation elections. At their discretion, participants may change their investment options and deferral percentages at any time.

BERMELLO, AJAMIL & PARTNERS, INC.
EMPLOYEES' SAVINGS INVESTMENT PLAN

NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2015 AND 2014

1. DESCRIPTION OF PLAN (CONTINUED)

Vesting

Participants are immediately vested in their voluntary contributions (elective deferral and rollover accounts) and Company basic matching contribution plus actual earnings thereon. Vesting in the Company's discretionary non-elective contribution (profit sharing contributions are based on a different year of service basis) and forfeitures is based on years of service in accordance with the following:

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

Forfeitures

Forfeitures of nonvested amounts are allocated in the following year of forfeiture as an additional discretionary contribution. As of December 31, 2015 and 2014, forfeited non-vested amounts totaled \$3,019 and \$5,276, respectively.

Notes Receivable from Participants

Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest. Delinquent notes receivable from participants are reclassified as distributions based upon the terms of the plan document. Participants may borrow from their fund accounts a minimum of \$1,000 and up to a maximum equal to the lesser of (a) \$50,000 or (b) 50% of their vested account balance. However, the \$50,000 amount in the preceding sentence is reduced by the highest outstanding loan balance under the Plan provisions during the previous twelve-month period. The notes receivable are secured by the balance in the participant's account and bear an interest rate commensurate with local prevailing rates as determined quarterly by the Plan administrator. Notes receivable from participants outstanding at December 31, 2015 and 2014 had various interest rates ranging from 4.25% to 7.75%. Principal and interest is paid ratably through semi-monthly payroll deductions.

Payment of Benefits

Upon termination of service due to death, disability or normal retirement, a participant may elect to receive an amount equal to the value of the participant's vested interest in his or her account in either a lump-sum amount, or in annual installments over a period of time not to exceed their (or their beneficiaries) assumed life expectancy. For termination of service due to other reasons, a participant may receive the value of the participant's vested interest in his or her account of \$5,000 or less in a lump-sum amount as soon as the participant's termination date has been established by management. Upon termination, account balances that do not exceed \$1,000 are automatically distributed.

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of Accounting

The accompanying financial statements have been prepared using the accrual method of accounting.

Investment contracts held by a defined-contribution plan are required to be reported at fair value, except fully benefit-responsive investment contracts, which are to be carried at contract value. Contract value is the relevant measurement attribute for that portion of the net assets available for benefits of a defined-contribution plan attributable to fully benefit-responsive investment contracts because contract value is the amount participants would receive if they were to initiate permitted transactions under the terms of the Plan.

**BERMELLO, AJAMIL & PARTNERS, INC.
EMPLOYEES' SAVINGS INVESTMENT PLAN**

NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2015 AND 2014

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

Use of Estimates

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

Risks and Uncertainties

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

Investment Valuation and Income Recognition

Pooled separate accounts are reported at fair value. Funds held in insurance company general account are reported at contract value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. See NOTE 9 for discussion of fair value measurements.

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

Investment Management Fees and Operating Expenses

Investment management fees and operating expenses charged to the Plan for investments in the various funds are deducted from income earned and are reflected as a component of net (depreciation) appreciation in fair value of investments.

Notes Receivable from Participants

Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest. Delinquent notes receivable from participants are reclassified as distributions based upon the terms of the Plan document.

Payment of Benefits

Benefits are recorded when paid.

Administrative Expenses

Administrative expenses of the Plan are paid by the Plan or the Plan's Sponsor as provided in the Plan Document. Substantially all of the administrative expenses for the Plan for the years ended December 31, 2015 and 2014 were paid by the Plan's Sponsor.

Plan Termination

Although it has not expressed any intention to do so, the Employer has the right under the Plan to discontinue its contributions at any time and to terminate the Plan subject to the provisions set forth in ERISA. In the event that the Plan is terminated, participants would become 100% vested in their accounts.

**BERMELLO, AJAMIL & PARTNERS, INC.
EMPLOYEES' SAVINGS INVESTMENT PLAN**

NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2015 AND 2014

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

Subsequent Events

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

Adoption of Accounting Pronouncement

Fully Benefit-Responsive Investment Contracts and Plan Investment Disclosure in ASU No. 2015-12

In July 2015, the Financial Accounting Standards Board ("FASB") issued an accounting standard update which amends requirements for defined contribution, defined benefit, and health and welfare benefit plans. Generally, Part I of the update requires fully benefit-responsive investment contracts to be reported at contract value. Generally, Part II eliminates the requirements for plans to disclose (a) individual investments that represent 5 percent or more of net assets available for benefits, and (b) the net appreciation or depreciation for investments by general type. Generally, Part II also requires that investments be grouped only by type of investment. Part III provides an alternative date for measuring investments for plans with fiscal year-ends not falling on a month-end date. Parts I and II of the update are effective retrospectively for fiscal years beginning after December 15, 2015 with early application permitted. Part III of the update is effective prospectively for fiscal years beginning after December 15, 2015 with early application permitted. The Plan has elected to early adopt the update as of December 31, 2015, as permitted, and has applied the provisions retrospectively. Part III is not applicable to the Plan. The early adoption of Parts I and II are reflected in the notes to the financial statements and certain disclosures that are no longer required have been removed. There are no material effects on the net assets available for benefits or the changes in net assets available for benefits.

Recent Accounting Pronouncements

Disclosures for Investments in Certain Entities That Calculate Net Asset Value Per Share (or Its Equivalent)

In May 2015, the FASB issued an accounting standard update that removes the requirement to include investments in the fair value hierarchy for which fair value is measured at net asset value using the practical expedient. The update also changes certain disclosure requirements. The update is effective retrospectively for fiscal years beginning after December 15, 2016 and interim periods within those fiscal years. Early application is permitted. The Plan is currently evaluating the effect the update will have on its financial statements.

3. TAX STATUS

The Plan adopted its latest Prototype Non-standardized Profit Sharing Plan with a cash or deferral arrangement developed by Orchard Trust Company, effective January 31, 2006, which obtained a favorable IRS determination letter on March 31, 2008 in which the IRS stated that the form of the underlying prototype plan was acceptable under provisions of the Internal Revenue Code ("Code") and that any employer adopting this form of the plan will be considered to have a plan qualified under the Code. Although the Plan has been amended since receiving the determination letter, the Plan administrator believes that the Plan is designed and is currently being operated in compliance with the applicable requirements of the Code and, therefore, believes that the Plan is qualified and the related trust is tax-exempt.

Accounting principles generally accepted in the United States of America require plan management to evaluate tax positions taken by the Plan and recognize a tax liability (or asset) if the Plan has taken an uncertain position that more likely than not would not 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 and 2014, there are no uncertain positions taken or expected to be taken that would require recognition of a liability (or asset) or disclosure in the accompanying financial statements. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress. The Plan administrator believes it is no longer subject to income tax examinations for years prior to 2012.

**BERMELLO, AJAMIL & PARTNERS, INC.
EMPLOYEES' SAVINGS INVESTMENT PLAN**

NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2015 AND 2014

4. INVESTMENTS

The Plan uses the net asset value ("NAV") to determine the fair value of all the underlying investments which (a) do not have a readily determinable fair value and (b) prepare their financial statements consistent with the measurement principles of an investment company or have the attributes of an investment company. The following table lists all investments with a reported estimated fair value using net asset value per share:

	Fair Value as of December 31, 2015	Unfunded Commitments	Redemption Frequency	Redemption Notice Period
Maxim Conservative profile II - (a)	\$ 41,211	\$ -	None	NA
American Funds EuroPacific Growth R3 - (b)	31,620	-	None	NA
International Index fund I - (ae)	97,807	-	None	NA
Maxim US Government Mortgage Securities - (e)	27,132	-	None	NA
PIMCO Total Return Admin - (f)	166,290	-	None	NA
Maxim Bond Index - (g)	86,127	-	None	NA
Maxim Aggressive Profile II - (h)	330,947	-	None	NA
Maxim S&P 500 Index - (i)	522,093	-	None	NA
Lifetime 2025 Fund II T1 - (k)	8,125	-	None	NA
Lifetime 2045 Fund II T1 - (k)	92,728	-	None	NA
American Funds Growth Fund of Amer R3 - (l)	251,907	-	None	NA
Marsico Focus - (m)	37,305	-	None	NA
S&P Mid Cap 400 Index Fund I - (n)	21,940	-	None	NA
Maxim T. Rowe Price Equity Income - (o)	144,143	-	None	NA
Invesco Van Kampen Comstock - R - (p)	25,967	-	None	NA
Fidelity Advisor Leveraged Co Stk - T - (r)	14,438	-	None	NA
Maxim T. Rowe Price Mid-Cap Growth - (s)	82,308	-	None	NA
Real Estate Index Initial - (t)	49,946	-	None	NA
Maxim Moderate Profile II - (u)	1,125,542	-	None	NA
Maxim Loomis Sayles Bond Portfolio - (v)	20,729	-	None	NA
Maxim Index 600 - (w)	236,163	-	None	NA
Royce Total Return K - (x)	1,188	-	None	NA
Oppenheimer Global A - (aa)	53,078	-	None	NA
Maxim American Century Growth Portfolio - (ab)	556,075	-	None	NA
Ridgeworth Mid-Cap Value Equity A - (ac)	56,699	-	None	NA
Columbia Diversified Equity Income A - (ad)	3,307	-	None	NA
ClearBridge Small Cap Growth A (af)	47,090	-	None	NA
Ariel Mid Cap Value Fund I - (d)	148,847	-	None	NA
Invesco Smallcap Value Fund I - (z)	650	-	None	NA
JP Morgan Disciplined Equity A - (ag)	60,124	-	None	NA
MFS International Value Fund I - (ah)	101,489	-	None	NA
Total	\$ 4,443,015	\$ -		

BERMELLO, AJAMIL & PARTNERS, INC.
EMPLOYEES' SAVINGS INVESTMENT PLAN

NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2015 AND 2014

4. INVESTMENTS (CONTINUED)

	Fair Value as of December 31, 2014	Unfunded Commitments	Redemption Frequency	Redemption Notice Period
Maxim Conservative profile II - (a)	\$ 38,615	\$ -	None	NA
American Funds EuroPacific Growth R3 - (b)	55,643	-	None	NA
MFS International Value R2 - (c)	58,561	-	None	NA
Maxim US Government Mortgage Securities - (e)	26,347	-	None	NA
PIMCO Total Return Admin - (f)	44,229	-	None	NA
Maxim Bond Index - (g)	186,998	-	None	NA
Maxim Aggressive Profile II - (h)	254,415	-	None	NA
Maxim S&P 500 Index - (i)	591,138	-	None	NA
Dreyfus Appreciation - (j)	3,873	-	None	NA
Lifetime 2015 Fund II T1 - (k)	65,338	-	None	NA
Lifetime 2025 Fund II T1 - (k)	4,998	-	None	NA
Lifetime 2045 Fund II T1 - (k)	180,641	-	None	NA
American Funds Growth Fund of Amer R3 - (l)	244,750	-	None	NA
Marsico Focus - (m)	42,122	-	None	NA
S&P Mid Cap 400 Index Fund I - (n)	115,849	-	None	NA
Maxim T. Rowe Price Equity Income - (o)	125,707	-	None	NA
Invesco Van Kampen Comstock - R - (p)	55,305	-	None	NA
Lord Abbett Value Opportunities A - (q)	97,700	-	None	NA
Fidelity Advisor Leveraged Co Stk - T - (r)	28,926	-	None	NA
Maxim T. Rowe Price Mid-Cap Growth - (s)	49,411	-	None	NA
Real Estate Index Initial - (t)	30,760	-	None	NA
Maxim Moderate Profile II - (u)	1,086,081	-	None	NA
Maxim Loomis Sayles Bond Portfolio - (v)	27,489	-	None	NA
Maxim Index 600 - (w)	220,476	-	None	NA
Royce Total Return K - (x)	23,441	-	None	NA
RidgeWorth Small Cap Growth Fund I - (y)	45,731	-	None	NA
Oppenheimer Global A - (aa)	46,666	-	None	NA
Maxim American Century Growth Portfolio - (ab)	530,805	-	None	NA
RidgeWorth Mid-Cap Value Equity A - (ac)	74,483	-	None	NA
Columbia Diversified Equity Income A - (ad)	2,683	-	None	NA
International Index fund I - (ae)	59,175	-	None	NA
ClearBridge Small Cap Growth A (af)	589	-	None	NA
Total	\$ 4,418,945	\$ -		

Investment Strategies

(a) - The investment seeks a high level of current income with a secondary consideration of steady growth of capital. The fund normally invests at least 80% of assets in dividend-paying common and preferred stocks. It may invest up to 25% of assets in foreign investments. The fund may invest in any economic sector and may emphasize one or more particular sectors.

(b) - The investment seeks substantial dividend income and also long-term capital appreciation. The fund normally invests at least 80% of net assets in common stocks, with 65% in the common stocks of well-established companies paying above-average dividends. It normally emphasizes companies that appear to be undervalued by various measures with favorable prospects for increasing dividend income and capital appreciation. The fund may invest up to 25% of its total assets in foreign securities.

(c) - The investment seeks capital growth and income. The fund primarily invests at least 80% of assets in common stocks. It invests in a portfolio of equity securities, consisting principally of common stocks, preferred stocks and securities convertible into common and preferred stocks. It emphasizes a value style of investing seeking well-established, under-valued companies that have the potential for capital growth and income. The fund may invest up to 25% of total assets in foreign securities. It may invest up to 10% of total assets in real estate investment trusts.

BERMELLO, AJAMIL & PARTNERS, INC.
EMPLOYEES' SAVINGS INVESTMENT PLAN

NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2015 AND 2014

4. INVESTMENTS (CONTINUED)

Investment Strategies (continued)

(d) - The investment seeks long-term capital appreciation. The fund will, under normal circumstances, invest at least 80% of its net assets in the securities of issuers classified in the medium/small, medium or medium/large capitalization quintiles of the Russell 3000® Index.

(e) - The investment seeks capital appreciation. The fund normally invests at least 80% of assets in stocks. It normally invests its assets primarily in common stocks of leveraged companies defined as companies that issue lower-quality debt and other companies with leveraged capital structures.

(f) - The investment seeks long-term appreciation. The fund normally invests at least 80% of net assets in the securities of issuers whose market capitalization falls within the range of companies included in either the S&P MidCap 400 Index or the Russell MidCap Growth Index at the time of purchase. It may invest up to 25% of total assets in foreign securities and may also invest in fixed income securities without regard to quality, maturity, or rating, including up to 10% of its total assets in non-investment grade fixed income securities.

(g) - The investment seeks long-term capital appreciation. The fund normally invests at least 80% of net assets in equity securities of companies that have market capitalizations in the range of the companies in the Russell Midcap Value Index at the time of purchase that the Advisor believes are undervalued and have the potential for long-term growth. It may invest up to 20% of total assets in foreign securities. The fund normally invests in common stocks and also may invest in real estate investment trusts.

(h) - The investment seeks long-term capital appreciation primarily through investments in underlying portfolios with a relatively equal emphasis on equity and fixed income investments. The fund usually invests assets in underlying funds according to the following asset allocation ranges: 0% to 30% of assets in international funds, 0% to 25% of assets in small cap funds, 0% to 30% of assets in mid cap funds, 15% to 45% in large cap funds and 5% to 25% in bonds and 5% to 25% in short term bonds. The fund is non-diversified.

(i) - The investment seeks high total investment return through a combination of current income and capital appreciation. The fund normally invests at least 80% of its net assets in fixed income securities. It normally focuses on good relative value based on the credit outlook of the issuer, good structural fit within the objectives and constraints of the portfolio, and maximum total return potential. The fund may invest up to 20% in preferred stock and convertible preferred stock. It may invest up to 20% of its total assets in foreign securities. The fund may also invest up to 35% of its total assets in securities of below investment grade quality bonds.

(j) - The investment seeks long-term capital appreciation consistent with the preservation of capital; current income is a secondary goal.

(k) - The investment seeks capital appreciation and income consistent with its current asset allocation; after 2025, it seeks income and secondarily capital growth.

(l) - The investment seeks capital appreciation. The fund invests at least 80% of net assets (plus any borrowings for investment purposes) in U.S. traded equity securities of small cap companies.

(m) - The investment seeks capital appreciation. The fund invests at least 80% of net assets, plus the amount of any borrowings for investment purposes in common stocks of small-capitalization companies, defined as companies that have market capitalizations of less than \$3 billion at the time of purchase. It may also invest up to 25% of assets, collectively, in non-dollar denominated and dollar-denominated equity securities of foreign issuers that are either listed on a U.S. stock exchange or represented by depositary receipts that may or may not be sponsored by a domestic bank.

(n) - The investment provides investors with a benchmark for mid-sized companies. The index measures the performance of mid-sized companies, reflecting the distinctive risk and return characteristics of this market segment.

(o) - The investment seeks capital preservation primarily through investments in underlying portfolios that emphasize fixed income investments. The fund usually invests assets in underlying funds according to the following asset allocation ranges: 10% to 40% of assets in large cap funds, 0% to 15% of assets in international funds, 0% to 15% of assets in mid cap funds, 0% to 15% of assets in small cap funds, and 30% to 50% of assets in bonds and 25% to 45% of assets in short term bonds. The fund is non-diversified.

(p) - The investment seeks to provide long-term growth of capital. The fund invests primarily in common stocks of issuers in Europe and the Pacific Basin that the investment adviser believes have the potential for growth. It normally invests at least 80% of net assets in securities of issuers in Europe and the Pacific Basin. The fund may invest a portion of its assets in common stocks and other securities of companies in countries with developing economies and/or markets.

BERMELLO, AJAMIL & PARTNERS, INC.
EMPLOYEES' SAVINGS INVESTMENT PLAN

NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2015 AND 2014

4. INVESTMENTS (CONTINUED)

Investment Strategies (continued)

(q) - The investment seeks capital appreciation. The fund normally invests assets primarily in foreign equity securities, including emerging-market equity securities. It may invest a relatively high percentage of the fund's assets in a single country or a small number of countries. The fund focuses on investing assets in the stocks of companies that it believes are undervalued compared to their perceived worth.

(r) - The investment seeks long-term capital appreciation. The fund normally invests in common stocks of companies outside the United States that the advisor believes have favorable investment potential. It primarily invests in equities of small- to mid-capitalization issuers however it can invest in companies of any size. The fund may also invest in securities issued in both developed and emerging markets.

(s) - The investment seeks the highest level of return consistent with preservation of capital and substantial credit protection. The fund normally invests at least 80% of net assets in mortgage-related securities that have been issued or guaranteed by the U.S. government or its agencies or instrumentalities. It normally invests in private mortgage pass-through securities and collateralized mortgage obligations. The fund may invest in commercial mortgage-backed securities, asset-backed securities, and investment grade corporate bonds.

(t) - The investment seeks investment results, before fees and expenses that track the total return of a benchmark index that measures the performance of publicly traded equity real estate investment trusts ("REITs"). Under normal circumstances, the fund invests at least 80% of its net assets (plus the amount of any borrowings for investment purposes) in securities included in the Dow Jones U.S. Select REIT IndexSM. The benchmark index is a market capitalization-weighted index of publicly traded equity REITs. It is non-diversified.

(u) - The investment seeks investment results that track the debt securities that comprise the Barclays Capital U.S. Aggregate Bond Index. The fund normally invests at least 80% of net assets in securities included in the Benchmark Index and, using sampling techniques, a portfolio of securities designed to give the Portfolio the relevant comparable attributes of the Benchmark Index. This may be accomplished through a combination of fixed income securities ownership and owning futures contracts on the Benchmark Index and options on futures contracts.

(v) - The investment seeks long-term capital appreciation primarily through investments in underlying portfolios that emphasize equity investments. The fund usually invests in underlying equity funds according to the following asset allocation ranges: 10% to 40% of assets in large cap funds, 10% to 40% of assets in international funds, 15% to 45% of assets in mid cap funds, and 5% to 35% of assets in small cap funds, and 0% to 10% in bonds and 0% to 10% in short term bonds. The fund is non-diversified.

(w) - The investment seeks investment results that track the total return of the common stocks that comprise the S&P 500 Index. The fund invests at least 80% of net assets (plus the amount of any borrowings for investment purposes) in common stocks included in its benchmark index. It will seek investment results that track the total return of the common stocks that comprise the benchmark index by owning the securities contained in the benchmark index in as close as possible a proportion of the portfolio as each stock's weight in the benchmark index.

(x) - The investment seeks long-term growth of capital. The fund invests the majority of the assets in equity securities issued by large companies with market capitalizations of at least \$10 billion. While it invests primarily in U.S. companies, the fund may also invest in foreign companies.

(y) - The investment seeks capital appreciation. The fund mainly invests in common stocks of "growth companies" whose earnings and stock prices are expected to increase at a faster rate than the overall market. It also invests in securities of U.S. issuers but may also invest in foreign securities.

(z) - The investment seeks long-term growth of capital. The fund will normally invest at least 80% of its net assets (plus the amount of any borrowings for investment purposes) in a diversified portfolio of equity securities of small capitalization companies. The principal type of equity securities purchased by the fund is common stock.

(aa) - The investment seeks long-term growth of capital. The fund invests primarily in the common stocks of large companies that are selected for their long-term growth potential. It normally holds a core position of between 20 and 30 common stocks. The fund may invest without limitation in foreign securities. It is non-diversified.

(ab) - The investment seeks long-term capital growth. The fund normally invests in stocks of companies the portfolio managers believe will increase in value over time.

(ac) - The investment seeks to provide capital appreciation; current income is a secondary objective. The fund invests at least 80% of its net assets (plus any borrowings for investment purposes) in U.S.-traded equity securities of mid-capitalization companies.

**BERMELLO, AJAMIL & PARTNERS, INC.
EMPLOYEES' SAVINGS INVESTMENT PLAN**

NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2015 AND 2014

4. INVESTMENTS (CONTINUED)

Investment Strategies (continued)

(ad) - The investment seeks a high level of current income with a secondary consideration of steady growth of capital. The fund invests at least 80% of its net assets (including the amount of any borrowings for investment purposes) in dividend-paying common and preferred stocks. It may invest up to 25% of its net assets in foreign investments.

(ae) - The investment seeks investment results that track the total return of the common stocks that comprise the EAFE (Europe, Australasia, Far East) Index. The fund normally invests at least 80% of its net assets in common stocks of the EAFE index or in derivative securities economically related to EAFE index.

(af) - The investment seeks long-term growth of capital. The fund normally invests at least 80% of its assets in equity securities of companies with small market capitalizations and related investments. The portfolio managers use a growth-oriented investment style that emphasizes small U.S. companies.

(ag) - The Fund seeks to provide a consistently high total return from a broadly diversified portfolio of equity securities with risk characteristics similar to the Standard and Poor's 500 Composite Stock Price Index (S&P 500 Index).

(ah) The investment seeks long-term growth of capital. The fund normally invests at least 80% of net assets in common stocks and related securities such as preferred stock, convertible securities and depository receipts, of foreign (including emerging markets) issuers. It may invest a large percentage of its assets in issuers in a single country, a small number of countries, or a particular geographic region. The fund may invest in companies of any size.

5. INSURANCE CONTRACT

The Plan entered into a not "fully benefit-responsive" group annuity investment contract with Great West. Great West receives the contributions and deposits them into either a guaranteed portfolio fund or into pooled separate accounts. The pooled separate accounts' income consists of interest less administration expenses. The net (depreciation) appreciation in fair value of investments represents the net change in the market value of the pooled separate accounts exclusive of changes due to deposits, withdrawals, and investment income. The investment yield is the overall percentage gain or loss experienced by the pooled separate accounts during the year. The pooled separate accounts and the insurance company general account are reported at fair value.

6. RECONCILIATION OF FINANCIAL STATEMENTS TO FORM 5500

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

	<u>2015</u>	<u>2014</u>
Net assets available for benefits per the financial statements	\$ 5,663,396	\$ 5,599,893
Participants' contributions receivable	(9,615)	(7,172)
Net assets available for benefits per the Form 5500	<u>\$ 5,653,781</u>	<u>\$ 5,592,721</u>

The following is a reconciliation of contributions received per the financial statements to the Form 5500 as of December 31,

	<u>2015</u>	<u>2014</u>
Contributions per the financial statements	\$ 185,905	\$ 171,241
Less participants' contributions receivable at end of year	(9,615)	(7,172)
Plus participants' contributions receivable prior year	7,172	8,214
Contributions per Form 5500	<u>\$ 183,462</u>	<u>\$ 172,283</u>

**BERMELLO, AJAMIL & PARTNERS, INC.
EMPLOYEES' SAVINGS INVESTMENT PLAN**

NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2015 AND 2014

7. INFORMATION PREPARED AND CERTIFIED BY CUSTODIAN

The Plan administrator has elected the method of annual reporting compliance permitted by 29 CFR 2520.103-8 of the DOL's Rules and Regulations for Reporting and Disclosure under ERISA. Accordingly, the following information included in the accompanying financial statements and supplemental schedules was obtained from data that has been prepared and certified to as complete and accurate by the custodian, Great West.

	December 31,	
	2015	2014
Investments:		
Pooled separate accounts, at fair value	\$ 4,443,015	\$ 4,418,945
Funds held in insurance company general account, at fair value	1,026,510	968,893
	5,469,525	5,387,838
Notes receivable from participants	184,256	204,883
	\$ 5,653,781	\$ 5,592,721

	Years Ended December 31,	
	2015	2014
Investment (loss) income:		
Net (depreciation) appreciation in fair value of investments	\$ (29,720)	\$ 290,355
Interest	11,865	-
Other	(5,427)	-
Interest income on notes receivable from participants	8,795	10,037
Total investment (loss) income	\$ (14,487)	\$ 300,392

The Plan's independent accountants did not perform auditing procedures with respect to this information, except for comparing such information to the related information included in the financial statements and supplemental schedules.

8. PARTY-IN-INTEREST TRANSACTIONS

The Plan's investments include pooled separate accounts and funds held in insurance company general accounts administered by Great West. Great West is the custodian as defined in the Plan, and therefore, these transactions qualify as party-in-interest transactions.

9. FAIR VALUE MEASUREMENTS

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

- Level 1 Inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets that the Plan has the ability to access.
- Level 2 Inputs to the valuation methodology include:
 - Quoted prices for similar assets or liabilities in active markets;
 - Quoted prices for identical or similar assets or liabilities in inactive markets;
 - Inputs other than quoted prices that are observable for the asset or liability;

BERMELLO, AJAMIL & PARTNERS, INC.
EMPLOYEES' SAVINGS INVESTMENT PLAN

NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2015 AND 2014

9. FAIR VALUE MEASUREMENTS (CONTINUED)

- Inputs that are derived principally from or corroborated by observable market data by correlation or other means; and
 - If the asset or liability has a specified (contractual) term, the Level 2 input must be observable for substantially the full term of the asset or liability.
- Level 3 Inputs to the valuation methodology are unobservable and significant to the fair value measurement.

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

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

Funds Held in Insurance Company General Accounts: Valued at fair value as they are non-fully benefit-responsive. Fair value represents the amount Plan sponsors would receive if they terminated the contract at the reporting date, which is book value less an early withdrawal charge (See NOTE 5).

Pooled Separate Accounts: Valued at fair value. Fair value of shares of an underlying fund equals the number of shares of the respective underlying fund multiplied by the closing net asset value per share quoted by that fund. The net asset value of pooled separated accounts is based on the market value of its underlying investments. (See NOTE 2).

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

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

Fair Value Measurements at Reporting Date Using:				
Description	Fair Value December 31, 2015	Quoted Prices		
		in Active Markets for Identical Assets (Level 1)	Significant Other Observable Inputs (Level 2)	Significant Other Unobservable Inputs (Level 3)
Pooled separate accounts, at fair value	\$ 4,443,015	\$ -	\$ 4,443,015	\$ -
Funds held in insurance company general account, at fair value	1,026,510	-	1,026,510	-
	<u>\$ 5,469,525</u>	<u>\$ -</u>	<u>\$ 5,469,525</u>	<u>\$ -</u>
Fair Value Measurements at Reporting Date Using:				
Description	Fair Value December 31, 2014	Quoted Prices		
		in Active Markets for Identical Assets (Level 1)	Significant Other Observable Inputs (Level 2)	Significant Other Unobservable Inputs (Level 3)
Pooled separate accounts, at fair value	\$ 4,418,945	\$ -	\$ 4,418,945	\$ -
Funds held in insurance company general account, at fair value	968,893	-	968,893	-
	<u>\$ 5,387,838</u>	<u>\$ -</u>	<u>\$ 5,387,838</u>	<u>\$ -</u>

SUPPLEMENTAL SCHEDULES

**BERMELLO, AJAMIL & PARTNERS, INC.
EMPLOYEES' SAVINGS INVESTMENT PLAN**

FORM 5500 SCHEDULE H, LINE 4i
SCHEDULE OF ASSETS (HELD AT END OF YEAR)
DECEMBER 31, 2015

(a)	(b)	(c)	(d)	(e)
	Identity of issuer, borrower, lessor, or similar party	Description of investment	Cost**	Current value
*	Great-West Life & Annuity Insurance Company	Maxim Moderate Profile II		\$ 1,125,542
*	Great-West Life & Annuity Insurance Company	Guaranteed Portfolio Fund		1,023,491
*	Great-West Life & Annuity Insurance Company	Maxim American Century Growth Portfolio		556,075
*	Great-West Life & Annuity Insurance Company	Maxim S&P 500 Index		522,093
*	Great-West Life & Annuity Insurance Company	Maxim Aggressive Profile II		330,947
*	Great-West Life & Annuity Insurance Company	American Funds Growth Fund of Amer R3		251,907
*	Great-West Life & Annuity Insurance Company	Maxim Index 600		236,163
*	Great-West Life & Annuity Insurance Company	PIMCO Total Return Admin		166,290
*	Great-West Life & Annuity Insurance Company	Ariel Mid Cap Value Find I		148,847
*	Great-West Life & Annuity Insurance Company	Maxim T. Rowe Price Equity Income		144,143
*	Great-West Life & Annuity Insurance Company	MFS International Value Fund I		101,489
*	Great-West Life & Annuity Insurance Company	International Index fund I		97,807
*	Great-West Life & Annuity Insurance Company	Lifetime 2045 Fund II T1		92,728
*	Great-West Life & Annuity Insurance Company	Maxim Bond Index		86,127
*	Great-West Life & Annuity Insurance Company	Maxim T. Rowe Price Mid-Cap Growth		82,308
*	Great-West Life & Annuity Insurance Company	JP Morgan Disciplined Equity A		60,124
*	Great-West Life & Annuity Insurance Company	Ridgeworth Mid-Cap Value Equity A		56,699
*	Great-West Life & Annuity Insurance Company	Oppenheimer Global A		53,078
*	Great-West Life & Annuity Insurance Company	Real Estate Index Initial		49,946
*	Great-West Life & Annuity Insurance Company	ClearBridge Small Cap Growth A		47,090
*	Great-West Life & Annuity Insurance Company	Maxim Conservative profile II		41,211
*	Great-West Life & Annuity Insurance Company	Marsico Focus		37,305
*	Great-West Life & Annuity Insurance Company	American Funds EuroPacific Growth R3		31,620
*	Great-West Life & Annuity Insurance Company	Maxim US Government Mortgage Securities		27,132
*	Great-West Life & Annuity Insurance Company	Invesco Van Kampen Comstock – R		25,967
*	Great-West Life & Annuity Insurance Company	S&P Mid Cap 400 Index Fund I		21,940
*	Great-West Life & Annuity Insurance Company	Maxim Loomis Sayles Bond Portfolio		20,729
*	Great-West Life & Annuity Insurance Company	Fidelity Advisor Leveraged Co Stk - T		14,438
*	Great-West Life & Annuity Insurance Company	Lifetime 2025 Fund II T1		8,125
*	Great-West Life & Annuity Insurance Company	Columbia Diversified Equity Income A		3,307
*	Great-West Life & Annuity Insurance Company	Royce Total Return K		1,188
*	Great-West Life & Annuity Insurance Company	Invesco Smallcap Value Find I		650
*	Great-West Life & Annuity Insurance Company	Forfeitures - Holding Account		3,019
				\$ 5,469,525
	Notes receivable from participants	Interest rates ranging from 4.25% - 7.75%, with various maturities		\$ 184,256

* Denotes party-in-interest.

** Cost omitted for participant directed investments.

**BERMELLO, AJAMIL & PARTNERS, INC.
EMPLOYEES' SAVINGS INVESTMENT PLAN**

FORM 5500 SCHEDULE H, LINE 4i
SCHEDULE OF ASSETS (HELD AT END OF YEAR)
DECEMBER 31, 2014

(a)	(b) Identity of issuer, borrower, lessor, or similar party	(c) Description of investment	(d) Cost**	(e) Current value
*	Great-West Life & Annuity Insurance Company	Maxim Moderate Profile II		\$ 1,086,081
*	Great-West Life & Annuity Insurance Company	Guaranteed Portfolio Fund		963,617
*	Great-West Life & Annuity Insurance Company	Maxim S&P 500 Index		591,138
*	Great-West Life & Annuity Insurance Company	Maxim American Century Growth Portfolio		530,805
*	Great-West Life & Annuity Insurance Company	Maxim Aggressive Profile II		254,415
*	Great-West Life & Annuity Insurance Company	American Funds Growth Fund of Amer R3		244,750
*	Great-West Life & Annuity Insurance Company	Maxim Index 600		220,476
*	Great-West Life & Annuity Insurance Company	Maxim Bond Index		186,998
*	Great-West Life & Annuity Insurance Company	Lifetime 2045 Fund II T1		180,641
*	Great-West Life & Annuity Insurance Company	Maxim T. Rowe Price Equity Income		125,707
*	Great-West Life & Annuity Insurance Company	S&P Mid Cap 400 Index Fund I		115,849
*	Great-West Life & Annuity Insurance Company	Lord Abbett Value Opportunities A		97,700
*	Great-West Life & Annuity Insurance Company	Ridgeworth Mid-Cap Value Equity A		74,483
*	Great-West Life & Annuity Insurance Company	Lifetime 2015 Fund II T1		65,338
*	Great-West Life & Annuity Insurance Company	International Index fund		59,175
*	Great-West Life & Annuity Insurance Company	MFS International Value R2		58,561
*	Great-West Life & Annuity Insurance Company	American Funds EuroPacific		55,643
*	Great-West Life & Annuity Insurance Company	Invesco Van Kampen Comstock – R		55,305
*	Great-West Life & Annuity Insurance Company	Maxim T. Rowe Price Mid-Cap Growth		49,411
*	Great-West Life & Annuity Insurance Company	Oppenheimer Global A		46,666
*	Great-West Life & Annuity Insurance Company	RidgeWorth Small Cap Growth		45,731
*	Great-West Life & Annuity Insurance Company	PIMCO Total Return Admin		44,229
*	Great-West Life & Annuity Insurance Company	Marsico Focus		42,122
*	Great-West Life & Annuity Insurance Company	Maxim Conservative profile II		38,615
*	Great-West Life & Annuity Insurance Company	Real Estate Index Initial		30,760
*	Great-West Life & Annuity Insurance Company	Fidelity Advisor Leveraged		28,926
*	Great-West Life & Annuity Insurance Company	Maxim Loomis Sayles Bond		27,489
*	Great-West Life & Annuity Insurance Company	Maxim US Government		26,347
*	Great-West Life & Annuity Insurance Company	Royce Total Return K		23,441
*	Great-West Life & Annuity Insurance Company	Lifetime 2025 Fund II T1		4,998
*	Great-West Life & Annuity Insurance Company	Dreyfus Appreciation		3,873
*	Great-West Life & Annuity Insurance Company	Columbia Diversified Equity Income A		2,683
*	Great-West Life & Annuity Insurance Company	ClearBridge Small Cap Growth A		589
*	Great-West Life & Annuity Insurance Company	Forfeitures - Holding Account		5,276
				\$ 5,387,838
Notes receivable from participants		Interest rates ranging from 4.25% - 7.75%, with various maturities		\$ 204,883

* Denotes party-in-interest.

** Cost omitted for participant directed investments.

INVESTMENT OPTION	MATURITY DATE	INTEREST RATE	COST OF ASSETS	CURRENT VALUE
12025M1			7,708.90	8,125.03
12045M1			85,966.23	92,728.33
IPBAXCP			24,822.46	41,211.45
IPBAXMP			740,864.20	1,125,541.58
IPBAXAP			238,982.13	330,947.06
192AFEP			25,992.69	31,620.47
1296M1			104,891.88	97,806.45
1381GN			102,450.42	101,488.60
186OGA			39,111.80	53,077.73
1434REI			45,912.79	49,946.02
ISVAXAS			153,028.41	148,846.48
1492GV			659.50	650.94
193MX6			147,263.67	236,163.45
1371LI			46,716.33	47,090.28
1245RTK			1,230.72	1,187.56
1225FL			10,342.91	14,437.66
1295MM			21,354.64	21,939.85
IMGRXTM			61,612.04	82,307.80
1292RQ			38,733.87	56,699.12
195AFGF			164,267.63	251,906.59
1294CD			2,444.45	3,307.41
1293MA			345,798.19	556,075.24
194MX5			312,528.17	522,093.41
180TEIX			125,069.87	144,143.00
1147VS			26,779.32	25,967.27
1362JD			60,989.44	60,123.89
ILGRMAR			24,198.26	37,304.47
IBIMXBI			77,074.19	86,127.44
IBMSXLC			10,723.14	20,729.22
IBIMXUS			20,110.09	27,131.83
IBIMPTR			162,171.87	166,289.68
IPOINT		1.200	934,623.00	1,023,490.28
			4,164,423.21	5,466,505.59
PARTICIPANT LOANS	VARIOUS	4.250-7.750	184,498.42	184,256.42
FORFEITURES			2,074.36	3,019.28

INVESTMENT OPTION	MATURITY DATE	INTEREST RATE	COST OF ASSETS	CURRENT VALUE
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LEGEND

INVESTMENT OPTION:

12025M1	Great-West Lifetime 2025 Fund II T1	12045M1	Great-West Lifetime 2045 Fund II T1
1PBAXCP	Great-West Conserv Profile II Fund I	1PBAXMP	Great-West Moderate Profile II Fund I
1PBAXAP	Great-West Aggressive Profile II Fund I	192AFEP	American Funds EuroPacific Growth R3
1296MI	Great-West International Index Fund I	1381GN	Great-West MFS Intl Value Fund I
186OGA	Oppenheimer Global A	1434REI	Great-West Real Estate Index Initial
1SVAXAS	Great-West Ariel Mid Cap Value Fund I	1492GV	Great-West Invesco SmallCap Value Fund I
193MX6	Great-West S&P SmallCap 600 Index Fund I	1371LI	ClearBridge Small Cap Growth A
1245RTK	Royce Total Return K	1225FL	Fidelity Advisor Leveraged Co Stk - T
1295MM	Great-West S&P Mid Cap 400 Index Fund I	1MGRXTM	Great-West T Rowe Price MidCap Gr Fund I
1292RQ	RidgeWorth Mid-Cap Value Equity A	195AFGF	American Funds Growth Fund of Amer R3
1294CD	Columbia Diversified Equity Income A	1293MA	Great-West American Century Gr Fund I
194MX5	Great-West S&P 500 Index Fund I	180TEIX	Great-West T. Rowe Price Eq Inc Fund I
1147VS	Invesco Comstock R	1362JD	JPMorgan Disciplined Equity A
1LGRMAR	Marsico Focus	1BIMXBI	Great-West Bond Index Fund I
1BMSXLC	Great-West Loomis Sayles Bond Fund I	1BIMXUS	Great-West US Govt Mortgage Secur Fund I
1BIMPTR	PIMCO Total Return Admin	1PORT	Guaranteed Portfolio Fund

COST OF ASSETS: The original cost of the assets in each investment option as of the last day of the plan year

CURRENT VALUE: The value of all assets in each investment option as of the last day of the plan year