Form 5500

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Annual Return/Report of Employee Benefit Plan

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

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

OMB Nos. 1210-0110
1210-0089

2015

This Form is Open to Public Inspection

Part I Annual Report Identification Information

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

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

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

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

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

Part II Basic Plan Information—enter all requested information

1a Name of plan
OMNITRACS EMPLOYEE SAVINGS & RETIREMENT PLAN

1b Three-digit plan number (PN) ▶ 001

1c Effective date of plan 01/15/2014

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

OMNITRACS, LLC

717 NORTH HARWOOD STREET
SUITE 1300
DALLAS, TX 75201

2b Employer Identification Number (EIN)
46-1474848

2c Plan Sponsor's telephone number
469-801-6245

2d Business code (see instructions)
541519

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

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

SIGN HERE	Filed with authorized/valid electronic signature.	10/17/2016	QUYANNA HOLMES
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

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

Preparer's telephone number

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

5	Total number of participants at the beginning of the plan year	**5**	506
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)**	475
a(2)	Total number of active participants at the end of the plan year	**6a(2)**	876
b	Retired or separated participants receiving benefits	**6b**	0
c	Other retired or separated participants entitled to future benefits	**6c**	198
d	Subtotal. Add lines **6a(2)**, **6b**, and **6c**.	**6d**	1074
e	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	**6e**	1
f	Total. Add lines **6d** and **6e**.	**6f**	1075
g	Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**	1018
h	Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested	**6h**	0
7	Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	**7**	

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

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

9a Plan funding arrangement (check all that apply)

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

9b Plan benefit arrangement (check all that apply)

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

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

a Pension Schedules

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

b General Schedules

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

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

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

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

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

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

Receipt Confirmation Code_____

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

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

A Name of plan
OMNITRACS EMPLOYEE SAVINGS & RETIREMENT PLAN

B Three-digit plan number (PN) ▶ 001

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

D Employer Identification Number (EIN)
46-1474848

Part I Service Provider Information (see instructions)

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

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

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

FIDELITY INVESTMENTS INSTITUTIONAL

04-2647786

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

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

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

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

FIDELITY INVESTMENTS INSTITUTIONAL

04-2647786

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
60 64 65	RECORDKEEPER	825	Yes [X] No [ ]	Yes [X] No [ ]	0	Yes [X] No [ ]

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

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

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

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

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

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

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

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

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

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

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

Part I Service Provider Information (continued)

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

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

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
ABF SM CAP VAL INV - BOSTON FINANC P.O. BOX 8480 BOSTON, MA 02266	0.40%

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

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
AF EUROPAC GRTH R4 - AMERICAN FUND 95-2566717	0.35%

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

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
ARIEL APPREC INST - U.S. BANCORP F P.O. BOX 701 MILWAUKEE, WI 53201	0.10%

Part I Service Provider Information (continued)

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

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

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
JANUS TRITON T - JANUS SERVICES LL 43-1804048	0.35%

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

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
JH DSCPL VAL MDCP I - JOHN HANCOCK 01-0233346	0.10%

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

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
PIF EQUITY INCOME R4 - PRINCIPAL S 711 HIGH ST DES MOINES, IA 50392	0.35%

Part I Service Provider Information (continued)

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

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

(d) Enter name and EIN (address) of source of indirect compensation		**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
PIMCO ALL ASSET ADM - BOSTON FINAN	BFDS BUILDING, 30 DAN ROAD CANTON, MA 02021	0.25%

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

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

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

(d) Enter name and EIN (address) of source of indirect compensation		**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
WF DISCOVERY ADM - BOSTON FINANCIA	330 W. 9TH STREET KANSAS CITY, MO 66160	0.35%

Part I Service Provider Information (continued)

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

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

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
WF STABLE VALUE 94-6751924	0.25%

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

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

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

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

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

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

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

(complete as many entries as needed)

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE D (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

DFE/Participating Plan Information

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

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

OMB No. 1210-0110

2015

This Form is Open to Public Inspection.

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

A Name of plan
OMNITRACS EMPLOYEE SAVINGS & RETIREMENT PLAN

B Three-digit plan number (PN) ▶ 001

C Plan or DFE sponsor's name as shown on line 2a of Form 5500
OMNITRACS, LLC

D Employer Identification Number (EIN)
46-1474848

Part I **Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs)**
(Complete as many entries as needed to report all interests in DFEs)

a Name of MTIA, CCT, PSA, or 103-12 IE: STABLE VALUE FUND M

b Name of sponsor of entity listed in (a): WELLS FARGO BANK, N.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)
94-6751924-002	C	912958

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

SCHEDULE H (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Financial Information

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

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

OMB No. 1210-0110

2015

This Form is Open to Public Inspection

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

A Name of plan
OMNITRACS EMPLOYEE SAVINGS & RETIREMENT PLAN

B Three-digit plan number (PN) ▶ 001

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

D Employer Identification Number (EIN)
46-1474848

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)	1094432	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)	125964	704905
(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)	0	110077
(9) Value of interest in common/collective trusts	1c(9)	0	912958
(10) Value of interest in pooled separate accounts	1c(10)	0	0
(11) Value of interest in master trust investment accounts	1c(11)	0	0
(12) Value of interest in 103-12 investment entities	1c(12)	0	0
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	5531137	25756229
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other	1c(15)	0	0

		(a) Beginning of Year	(b) End of Year
1d Employer-related investments:			
(1) Employer securities	1d(1)	0	0
(2) Employer real property	1d(2)	0	0
e Buildings and other property used in plan operation	1e	0	0
f Total assets (add all amounts in lines 1a through 1e)	1f	6751533	27484169
Liabilities			
g Benefit claims payable	1g	0	0
h Operating payables	1h	0	0
i Acquisition indebtedness	1i	0	0
j Other liabilities	1j	341361	0
k Total liabilities (add all amounts in lines 1g through1j)	1k	341361	0
Net Assets			
l Net assets (subtract line 1k from line 1f)	1l	6410172	27484169

Part II Income and Expense Statement

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

Income		(a) Amount	(b) Total
a Contributions:			
(1) Received or receivable in cash from: **(A)** Employers	2a(1)(A)	1221	
(B) Participants	2a(1)(B)	6065004	
(C) Others (including rollovers)	2a(1)(C)	2669761	
(2) Noncash contributions	2a(2)	0	
(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		8735986
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	5198	
(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)	2292	
(F) Other	2b(1)(F)	0	
(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		7490
(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)	1333744	
(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		1333744
(3) Rents	2b(3)		0
(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)		8099
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		0
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		0
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		0
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		-1500655
c Other income	2c		0
d Total income. Add all **income** amounts in column (b) and enter total	2d		8584664
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	3796093	
(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)		3796093
f Corrective distributions (see instructions)	2f		718
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)	0	
(4) Other	2i(4)	911	
(5) Total administrative expenses. Add lines **2i(1)** through **(4)**	2i(5)		911
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		3797722
Net Income and Reconciliation			
k Net income (loss). Subtract line **2j** from line **2d**	2k		4786942
l Transfers of assets:			
(1) To this plan	2l(1)		16287055
(2) From this plan	2l(2)		

Part III Accountant's Opinion

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

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

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

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

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

(1) Name: GRANT THORNTON LLP **(2)** EIN: 36-6055558

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

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

Part IV Compliance Questions

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

During the plan year:

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

			Yes	No	N/A	Amount
c	Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)	4c		X		
d	Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)	4d		X		
e	Was this plan covered by a fidelity bond?	4e	X			1000000
f	Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?	4f		X		
g	Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?	4g		X		
h	Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?	4h		X		
i	Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	4i	X			
j	Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked, and see instructions for format requirements.)	4j		X		
k	Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?	4k		X		
l	Has the plan failed to provide any benefit when due under the plan?	4l		X		
m	If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	4m		X		
n	If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.	4n		X		
o	Did the plan trust incur unrelated business taxable income?	4o				
p	Were in-service distributions made during the plan year?	4p				

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

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

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

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

Part V Trust Information

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

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

SCHEDULE R (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Retirement Plan Information

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

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

OMB No. 1210-0110

2015

This Form is Open to Public Inspection.

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

A Name of plan
OMNITRACS EMPLOYEE SAVINGS & RETIREMENT PLAN

B Three-digit plan number (PN) ▶ 001

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

D Employer Identification Number (EIN)
46-1474848

Part I Distributions

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

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

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

EIN(s): 04-6568107

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

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

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

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

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

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

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

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

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

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

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

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

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

Part III Amendments

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

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

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

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

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

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

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

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

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

Part VII IRS Compliance Questions

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

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

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

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

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



Financial Statements and Report of Independent Certified Public Accountants

Omnitracs Employee Savings & Retirement Plan

December 31, 2015 and 2014

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Grant Thornton

REPORT OF INDEPENDENT CERTIFIED PUBLIC ACCOUNTANTS

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Plan Administrator and Participants
Omnitracs Employee Savings & Retirement Plan

Report on the financial statements

We were engaged to audit the accompanying financial statements of the Omnitracs Employee Savings & Retirement Plan (the "Plan"), which comprise the statement of net assets available for benefits as of December 31, 2015 and 2014, and the related statement of changes in net assets available for benefits for the for the year ended December 31, 2015, and the related notes to the financial statements.

Management's responsibility for the financial statements

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

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 Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the Plan Administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the certified information described in Note D, except for comparing such information with the related information included in the financial statements. We have been informed by the Plan Administrator that the certifying entity meets the requirements of 29 CFR 2520.103-8. The Plan Administrator obtained a certification from this entity as of December 31, 2015, and for the year then ended, stating that the certified information provided to the Plan Administrator 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.

Grant Thornton

Supplementary information

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

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 schedule, other than that derived from the certified information described in Note D, have been audited by us in accordance with auditing standards generally accepted in the United States of America and, in our opinion, are presented in compliance with the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974.

Grant Thornton LLP

Dallas, Texas
October 17, 2016

Omnitracs Employee Savings & Retirement Plan

STATEMENT OF NET ASSETS AVAILABLE FOR BENEFITS

December 31, 2015

	2015	2014
Assets		
Investments, at fair value	$27,374,093	$5,657,101
Receivables		
Employer contributions receivable	1,799,288	1,094,432
Notes receivable from participants	110,077	-
Total assets	29,283,458	6,751,533
Liabilities		
Excess participant contributions payable	-	341,361
Net assets available for benefits	$29,283,458	$6,410,172

The accompanying notes are an integral part of this financial statement.

Omnitracs Employee Savings & Retirement Plan

STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS

Year ended December 31, 2015

Additions	
Investment income (loss)	
Net depreciation in fair value of investments	$ (1,811,037)
Interest and dividend income	1,338,934
Total investment loss	(472,103)
Interest income on notes receivable from participants	2,300
Contributions	
Participant elective deferral	6,383,487
Participant rollover	2,669,761
Employer matching	1,800,509
Total contributions	10,853,757
Total additions	10,383,954
Deductions	
Benefits paid to participants	(3,796,812)
Administrative expenses	(911)
Total deductions	(3,797,723)
Transfers from merged funds	16,287,055
Net increase	22,873,286
Net assets available for benefits	
Beginning of period	6,410,172
End of period	$29,283,458

The accompanying notes are an integral part of this financial statement.

NOTE A - DESCRIPTION OF PLAN

The following description of the Omnitracs Employee Savings & Retirement Plan (the Plan) provides only general information. The Plan Administrator is Omnitracs LLC (the Company or Plan Administrator). Participants should refer to the Plan agreement for a more complete description of the Plan's provisions.

General

The Plan is a defined contribution plan subject to the provisions of the Employee Retirement Income Security Act of 1974, as amended (ERISA). The Plan was adopted as of January 15, 2014.

On November 25, 2014, the Company amended the Plan to establish an auto-enrollment provision effective January 1, 2015 as well as to allow the Roadnet Technologies 401(k) Plan to merge into the Plan.

The Company had acquired the assets and operations Roadnet Technologies, Inc. ("Roadnet Technologies") on December 13, 2013, with Roadnet Techologies ultimately merging with and into Omnitracs LLC. The Roadnet Technologies 401(k) Plan was merged into the Plan on January 28, 2015.

On October 21, 2014, the Company had acquired the assets and operations of XRS Corporation ("XRS") with XRS ultimately merging with and into Omnitracs LLC. The XRS Corporation 401(k) Profit Sharing Plan was frozen on January 1, 2015, at which time XRS employees became eligible to participate in the Company's Plan. On February 12, 2015, the Company amended the Plan to allow the XRS Corporation 401(k) Profit Sharing Plan to merge into the Plan effective April 1, 2015.

Transfers totaling $10,250,014 were transferred in April 2015 from the XRS Corporation 401(k) Profit Sharing Plan and transfers totaling $6,037,041 were transferred in February 2015 from the Roadnet Technologies 401(k) plan.

Eligibility

As defined in the Plan, all U.S. employees of the Company who are not in a collective bargaining unit; are not a non-resident alien; are not classified as part-time, temporary, seasonal or intern; and are not a leased employee are eligible to participate in the Plan. Upon meeting eligibility requirements, participants immediately enter the plan via auto-enrollment unless the participant affirmatively elects not to participate in the Plan.

NOTE A - DESCRIPTION OF PLAN - Continued

Contributions

Participants can contribute up to 90 percent of pretax eligible compensation, as defined in the Plan, subject to annual contribution limits established by the Internal Revenue Service (IRS). The maximum annual contributions to a participant's account including employer contributions is $53,000 ($59,000 including catch-up contributions) for 2015 per the IRS. Participants who have attained age 50 before the end of the Plan year are eligible to make catch-up contributions. Rollover contributions representing distributions from defined benefit or defined contribution plans are allowed.

The Plan allows for the Company to make an annual, discretionary matching contribution for eligible participant contributions made during the previous Plan year as defined by the Plan. Participants must be employed at December 31 of the previous Plan year to be eligible for discretionary matching contributions. For the Plan year ended December 31, 2015, the Company approved discretionary employer matching contributions equal to 50 percent of the first 6 percent of eligible participant contributions for the Plan year.

Participants' Accounts

Participants' accounts are credited with participant contributions (elective deferral, rollover and catch-up), employer discretionary matching contributions and an allocation of Plan earnings or losses, and charged with an allocation of administrative expenses. Plan earnings are allocated based on participant account balances, and Plan administrative expenses are allocated based on the number of participants. The benefit to which a participant is entitled is the vested portion of the participant's account. Participants direct their investments to any of the available investment options under the Plan.

Vesting

Participant and employer contributions, including actual earnings, are immediately 100 percent vested.

Payment of Benefits

The Plan permits participants to elect in-service withdrawals, as defined in the Plan agreement, subject to Plan and IRS restrictions. Upon termination of employment or due to death, disability or retirement, the method by which benefits are paid depends on the vested account balance. The Plan contains an automatic cash-out provision whereby, once annually, all vested account balances for terminated participants not exceeding $5,000, are distributed to participants. If the vested account balance does not exceed $1,000, a lump-sum distribution, net of tax, is made. If the vested balance is greater than $1,000 and less than $5,000 and the participant does not specify whether the distribution should be paid directly to an eligible retirement plan or paid directly to the participant, the Plan Administrator can pay the distribution in a direct rollover to an individual retirement plan designated by the Plan Administrator.

NOTE A - DESCRIPTION OF PLAN - Continued

Notes Receivable from Participants

Participants are excluded from borrowing from their accounts. During the mergers of the XRS Corporation 401(k) Profit Sharing Plan and the Roadnet Technologies 401(k) Plan, certain loan balances were transferred in to the Plan and are collateralized by the related vested account balance for the receivable. Interest is charged based on the rate charged by representative commercial banks for similar notes, ranging from 3.25% to 4.25%. Payment of principal and interest is to be amortized in level payments not less frequently than quarterly. The term of the note is not to exceed five years unless the purpose of the note is for purchasing a principal residence, in which case it is not to exceed thirty years.

Plan Termination

Although it has not expressed any intent to do so, the Company has the right under the Plan to discontinue its contributions at any time and to terminate the Plan subject to the provisions of ERISA.

NOTE B - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

The following is a summary of the significant accounting policies applied in the preparation of the accompanying financial statements.

Basis of Accounting

The accompanying financial statements are prepared using the accrual method of accounting in accordance with U.S. generally accepted accounting principles (GAAP) as set forth in the Financial Accounting Standards Board's (FASB) Accounting Standards Codification (ASC).

Investment Valuation and Income Recognition

The Plan's investments in shares of mutual funds and money market mutual funds are presented at net asset value (NAV) based on quoted market prices. Purchases and sales of securities are recorded on a trade-date basis. Dividends are recorded on the ex-dividend date. Interest income is recorded on an accrual basis.

Employer Contributions Receivable

Employer contributions receivable relates to discretionary employer matching contributions for the Plan year paid by the Company subsequent to the Plan year end.

NOTE B - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES - Continued

Net Depreciation in the Fair Value of Investments

Net depreciation in the fair value of investments represents the net realized gains or losses and the net unrealized appreciation or depreciation of investments. Realized gains or losses are the difference between the proceeds received and either the cost of the investment sold, determined on a first-in, first-out basis, or the fair value at the end of the previous year, whichever is applicable. Unrealized appreciation or depreciation is the change in the difference between fair value and the cost of investments or the fair value at the end of the previous year, whichever is applicable.

Benefits Paid to Participants

Benefits paid to participants are recorded when paid.

Administrative Expenses

The Company has the discretion to pay Plan expenses or allow the Plan to arrange payment. For the year ended December 31, 2015, the Company paid for the majority of expenses to administer the Plan, including audit and legal fees, and these expenses are excluded from the accompanying financial statements. Processing fees are paid by the Plan and are charged to the respective participant's account.

Fair Value

Fair value is defined as the price that would be received from selling an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. When determining the fair value measurements for assets and liabilities which are required to be recorded at fair value, the Plan considers the principal or most advantageous market in which the Plan would transact and considers assumptions that market participants would use when pricing the assets or liabilities, such as inherent risk, transfer restrictions and risk of nonperformance.

The Plan uses 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 the fair value hierarchy 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.

NOTE B - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES - Continued

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 and
- inputs that are derived principally from or corroborated by observable market data by correlation or other means.

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

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

The asset or liability's fair value measurement level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement. Valuation techniques used need to maximize the use of observable inputs and minimize the use of unobservable inputs.
Following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodologies used as of December 31, 2015.

Mutual Funds: Valued at the NAV of shares held by the Plan at year end based on daily closing prices. Mutual funds held by the Plan are open-end mutual funds, registered with the Securities and Exchange Commission, deemed to be actively traded and are not subject to redemption restrictions. These funds are required to publish their daily NAV and to transact at that price.

The methods described above may produce a fair value calculation that may not be indicative of net realizable value or reflective of future fair values. Furthermore, while the Company 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.

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 accompanying financial statements.

NOTE B - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES - Continued

Use of Estimates

The preparation of financial statements in conformity GAAP 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. Actual results could differ from those estimates.

Recently Issued Accounting Standards

In May 2015, the FASB issued Accounting Standards Update (ASU) 2015-07, *Disclosures for Investments in Certain Entities That Calculate Net Asset Value per Share (or Its Equivalent)* (ASU 2015-07). ASU 2015-07 amended ASC 820, *Fair Value Measurements and Disclosures*, to remove the requirement to categorize within the fair value hierarchy all investments for which fair value is measured using the NAV per share practical expedient. The amendment also removes the requirement to make certain disclosures for all investments that are eligible to be measured at fair value using the NAV per share practical expedient. ASU 2015-07 is effective for fiscal years beginning after December 15, 2016, and interim periods within those fiscal years, with early adoption permitted. The Company does not anticipate the adoption of ASU 2015-07 will have a material effect on Plan financial statements.

In July 2015, the FASB issued ASU 2015-12, *Plan Accounting: Defined Benefit Pension Plans (Topic 960), Defined Contribution Pension Plans (Topic 962), and Health and Welfare Benefit Plans (Topic 965): (Part I) Fully Benefit-Responsive Investment Contracts, (Part II) Plan Investment Disclosures, (Part III) Measurement Date Practical Expedient.* This three-part standard simplifies employee benefit plan reporting with respect to fully benefit-responsive investment contracts and plan investment disclosures, and provides for a measurement-date practical expedient. Parts I and II are effective for fiscal years beginning after December 15, 2015 and should be applied retrospectively, with early application permitted. Part III is effective for fiscal years beginning after December 15, 2015 and should be applied prospectively, with early application permitted. The adoption of this standard is not expected to have a material impact on the Plan's financial statements.

There were no other new accounting pronouncements issued or effective during the year ended December 31, 2015 that have had or are expected to have a material impact on Plan financial statements.

NOTE C - INVESTMENTS

The following table presents individual investments that represent five percent or more of the Plan's net assets available for benefits as of December 31:

	2015	2014
Fidelity Freedom 2025 Fund	$2,458,110	$705,691
Fidelity Freedom 2030 Fund	2,235,975	666,616
Fidelity Contrafund	2,329,268	619,430
Spartan 500 Index Fund, Fidelity Advantage Class	2,008,286	487,415
Fidelity Freedom 2035 Fund	3,224,822	355,236
Fidelity Freedom 2020 Fund	1,380,534	335,745
Fidelity Freedom 2045 Fund	1,551,561	
Janus Triton Fund, T Class	1,685,982	
John Hancock Funds Disciplined Value Mid Cap Fund, I Class	1,710,105	

The Plans' appreciation in fair value for the year ended December 31, 2015 was driven by the merger of the Roadnet Technologies 401(k) Plan and the Roadnet Technologies 401(k) Plan within the Omnitracs Employee Savings & Retirement Plan.

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

Mutual funds – Level 1:	
Target (a)	$14,595,488
Growth (b)	5,096,618
Index (c)	2,981,683
Value (d)	2,698,253
Fixed income (e)	1,939,667
Tactical allocation (f)	62,384
Total investments, at fair value	$27,374,093

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

Mutual funds – Level 1:	
Target (a)	$2,828,807
Growth (b)	1,219,894
Index (c)	816,951
Value (d)	564,858
Fixed income (e)	207,122
Tactical allocation (f)	19,469
Total investments, at fair value	$5,657,101

NOTE C - INVESTMENTS - Continued

(a) Target funds seek high total return, capital appreciation and income. These funds utilize an asset allocation strategy designed for investors planning to retire at a specific point in time (2020, 2030 etc.). These funds generally invest in a combination of domestic equity funds, international equity funds, bond funds and money market funds. The asset allocation strategy used becomes increasingly conservative as the target retirement date approaches.

(b) Growth funds seek long-term capital appreciation. These funds invest in a diversified portfolio of equity securities of U.S. and non-U.S. issuers having a certain market capitalization that appear to offer superior opportunities for growth of capital.

(c) Index funds seek to track the performance of a particular market index by employing a passive investment management approach. These funds invest all, or substantially all, assets in the securities that make up the market index, holding each security in approximately the same proportion as its weighting in the market index.

(d) Value funds seek capital appreciation. These funds invest in a diversified portfolio of equity securities of U.S. and non-U.S. issuers having a certain market capitalization, targeting stocks that are less expensive or growing more slowly relative to other stocks in the same market.

(e) Fixed income funds seek a stable, predictable total return and conservation of capital. These funds invest principally in bonds and other debt instruments, which may be represented by forwards or derivatives such as options, futures contracts or swap agreements. These funds invest principally in investment-grade debt securities but may invest in high-yield securities. These funds may also hold cash or money market instruments.

(f) Tactical allocation funds seek capital appreciation and income by actively shifting allocations across investments. These funds invest in a combination of equity and debt securities and in portfolios that have material, frequent shifts across equity regions and bond sectors.

The mutual fund categories and descriptions above were summarized based on the Morningstar category classification of each the Plan's mutual fund investments.

NOTE D - TRUSTEE'S CERTIFICATIONS

The Plan Administrator has elected the method of annual reporting compliance permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Accordingly, Fidelity Management Trust Company, the trustee of the Plan, has certified that the following data included in the accompanying financial statements and supplemental schedules are complete and accurate:

- Investments, at fair value, as shown in the accompanying statement of net assets available for benefits as of December 31, 2015 and 2014
- Notes receivable from participants, as shown in the statements of net assets available for benefits as of December 31, 2015
- Total investment income and interest income on notes receivable from participants, as shown in the accompanying statement of changes in net assets available for benefits for the year ended December 31, 2015
- Schedule H, Part IV, line 4(i) – schedule of assets (held at end of year) as of December 31, 2015.
- Schedule H, Part IV, line 4a – schedule of delinquent participant contributions for the year ended December 31, 2015

NOTE E - RELATED-PARTY AND PARTY-IN-INTEREST TRANSACTIONS

The Company has designated a Plan Administrator. These services are provided at no expense to the Plan. In addition, the Plan has an oversight committee responsible for ensuring Plan compliance with regulatory requirements.

Certain plan investments are shares of mutual funds managed by Fidelity Management Trust Company. Fidelity Management Trust Company is the trustee as defined by the Plan and, therefore, these transactions qualify as party-in-interest transactions.

NOTE F - TAX STATUS

Per an advisory letter dated March 31, 2014, the IRS stated the prototype Plan agreement adopted by the Plan qualified under applicable sections of the Internal Revenue Code (IRC). Although the Plan has been subsequently amended, the Plan Administrator believes the Plan is currently designed and being operated in compliance with applicable sections of the IRC. Therefore, no provision for income taxes has been included in the accompanying financial statements.

The Plan Administrator is required by GAAP 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 there are no uncertain positions taken or expected to be taken that would require recognition of a liability or asset or disclosure in the 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 the Plan is subject to income tax examinations for all periods since the Plan's inception.

NOTE G - RECONCILIATION OF FINANCIAL STATEMENTS TO FORM 5500

The following is a reconciliation of net assets available for benefits per the financial statements to Form 5500:

	2015	2014
Net assets available for benefits per the financial statements	$29,283,459	$6,410,172
Contributions receivable	(1,799,288)	-
Net assets available for benefits per Form 5500	$27,484,171	$6,410,172

Reconciliation of increase in net assets available for benefits per the financial statement to net income per the Form 5500 for the year ended December 31, 2015.

Net increase in assets available for benefits per the financial statements	$22,873,286
2015 employer contributions receivable	(1,799,288)
Net increase per Form 5500	$21,073,998

NOTE H - SUBSEQUENT EVENTS

The Plan evaluated its December 31, 2015 financial statements for subsequent events through October 17, 2016, the date the financial statements were available to be issued. There are no significant subsequent events which require disclosure.

NOTE I - PROHIBITED TRANSACTIONS

The United States Department of Labor ("DOL") considers late participant contributions to be prohibited transactions. The employer is required to remit participant contributions to the Plan as of the earliest date on which such amounts can reasonably be segregated from the employer's general assets, but in no event later than fifteen business days after the end of the month in which the contributions were withheld. It was determined that during the year ended December 31, 2015, the Plan Sponsor inadvertently failed to make deposits of approximately $335 of participant contributions within the timeframe required.

SUPPLEMENTARY INFORMATION

Omnitracs Employee Savings & Retirement Plan

SCHEDULE H, PART IV, LINE 4(i) – SCHEDULE OF ASSETS (HELD AT END OF YEAR)

December 31, 2015
EIN: 46-1474848

(a)	Identity of Issuer (b)	Description of Investment (c)	Current Value (e)
	Money market mutual fund		
*	Fidelity	Fidelity Money Market Trust Retirement Government Fund	$ 704,905
	Mutual funds		
*	Fidelity	Fidelity Freedom 2035 Fund	$ 3,224,822
*	Fidelity	Fidelity Freedom 2025 Fund	2,458,110
*	Fidelity	Fidelity Contrafund	2,329,268
*	Fidelity	Fidelity Freedom 2030 Fund	2,235,975
*	Fidelity	Spartan 500 Index Fund, Fidelity Advantage Class	2,008,286
	John Hancock	John Hancock Funds Disciplined Value Mid Cap Fund, I Class	1,710,105
	Janus Capital Group	Janus Triton Fund, T Class	1,685,982
*	Fidelity	Fidelity Freedom 2045 Fund	1,551,561
*	Fidelity	Fidelity Freedom 2020 Fund	1,380,534
*	Fidelity	Fidelity Freedom 2040 Fund	1,349,494
*	Fidelity	Fidelity Freedom 2050 Fund	1,106,334
	Wells Fargo	Wells Fargo Stable Value Fund	912,958
	Principal Funds	Principal Equity Income Fund, R-4 Class	718,002
	Wells Fargo	Wells Fargo Advantage Discovery Fund, Administrator Class	643,753
*	Fidelity	Fidelity Freedom 2055 Fund	576,593
*	Fidelity	Fidelity Freedom 2015 Fund	487,104
	American Funds	American Funds EuroPacific Growth Fund, R-4 Class	437,614
*	Fidelity	Spartan Small Cap Index Fund, Fidelity Advantage Class	395,314
*	Fidelity	Spartan International Index Fund, Fidelity Advantage Class	333,167
	PIMCO	Total Return Admin Fund	297,577
	American Beacon	American Beacon Small Cap Value Fund, Investor Class	270,146
*	Fidelity	Spartan U.S. Bond Index Fund, Fidelity Advantage Class	208,424
*	Fidelity	Fidelity Freedom 2010 Fund	183,122
	PIMCO	All Asset Fund, Administrative Class	62,384
	Ariel	Ariel Appreciation Institutional Fund	36,493
*	Fidelity	Fidelity Freedom 2060 Fund	29,233
*	Fidelity	Fidelity Freedom Income Fund	24,227
*	Fidelity	Fidelity Freedom 2005 Fund	12,606
	Total mutual funds		$26,669,188
	Total investments		$27,374,093
	Notes receivable from participants	Interest rates range from 3.25% to 4.25% Maturity dates vary until 2035	$ 110,077

* Party-in-interest.

Note column (d) not included as all investments are participant directed.

Omnitracs Employee Savings & Retirement Plan

SCHEDULE H, PART IV, LINE 4a - SCHEDULE OF DELINQUENT PARTICIPANT CONTRIBUTIONS

For the year ended December 31, 2015

EIN: 46-1474848

Participant Contributions Transferred Late to the Plan			Check Here If Late Participant Loan Repayments Are Included	Total That Constitutes Nonexempt Prohibited Transactions			
Amount Withheld	Date Withheld	Date Remitted		Contributions Not Corrected	Contributions Corrected Outside Voluntary Fiduciary Correction Program	Contributions Pending Correction in Voluntary Fiduciary Correction Program	Total Fully Corrected Under Voluntary Fiduciary Correction Program And PTE 2001-51
$335	5/8/2015	5/22/2015	x	$ -	$ -	$335	$ -



Financial Statements and Report of Independent Certified Public Accountants

Omnitracs Employee Savings & Retirement Plan

December 31, 2015 and 2014

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Grant Thornton

REPORT OF INDEPENDENT CERTIFIED PUBLIC ACCOUNTANTS

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Plan Administrator and Participants
Omnitracs Employee Savings & Retirement Plan

Report on the financial statements

We were engaged to audit the accompanying financial statements of the Omnitracs Employee Savings & Retirement Plan (the "Plan"), which comprise the statement of net assets available for benefits as of December 31, 2015 and 2014, and the related statement of changes in net assets available for benefits for the for the year ended December 31, 2015, and the related notes to the financial statements.

Management's responsibility for the financial statements

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

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 Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the Plan Administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the certified information described in Note D, except for comparing such information with the related information included in the financial statements. We have been informed by the Plan Administrator that the certifying entity meets the requirements of 29 CFR 2520.103-8. The Plan Administrator obtained a certification from this entity as of December 31, 2015, and for the year then ended, stating that the certified information provided to the Plan Administrator 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.

Grant Thornton

Supplementary information

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

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 schedule, other than that derived from the certified information described in Note D, have been audited by us in accordance with auditing standards generally accepted in the United States of America and, in our opinion, are presented in compliance with the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974.

Grant Thornton LLP

Dallas, Texas
October 17, 2016

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The Plan is a defined contribution plan subject to the provisions of the Employee Retirement Income Security Act of 1974, as amended (ERISA). The Plan was adopted as of January 15, 2014.

On November 25, 2014, the Company amended the Plan to establish an auto-enrollment provision effective January 1, 2015 as well as to allow the Roadnet Technologies 401(k) Plan to merge into the Plan.

The Company had acquired the assets and operations Roadnet Technologies, Inc. ("Roadnet Technologies") on December 13, 2013, with Roadnet Techologies ultimately merging with and into Omnitracs LLC. The Roadnet Technologies 401(k) Plan was merged into the Plan on January 28, 2015.

On October 21, 2014, the Company had acquired the assets and operations of XRS Corporation ("XRS") with XRS ultimately merging with and into Omnitracs LLC. The XRS Corporation 401(k) Profit Sharing Plan was frozen on January 1, 2015, at which time XRS employees became eligible to participate in the Company's Plan. On February 12, 2015, the Company amended the Plan to allow the XRS Corporation 401(k) Profit Sharing Plan to merge into the Plan effective April 1, 2015.

Transfers totaling $10,250,014 were transferred in April 2015 from the XRS Corporation 401(k) Profit Sharing Plan and transfers totaling $6,037,041 were transferred in February 2015 from the Roadnet Technologies 401(k) plan.

Eligibility

As defined in the Plan, all U.S. employees of the Company who are not in a collective bargaining unit; are not a non-resident alien; are not classified as part-time, temporary, seasonal or intern; and are not a leased employee are eligible to participate in the Plan. Upon meeting eligibility requirements, participants immediately enter the plan via auto-enrollment unless the participant affirmatively elects not to participate in the Plan.

NOTE A - DESCRIPTION OF PLAN - Continued

Contributions

Participants can contribute up to 90 percent of pretax eligible compensation, as defined in the Plan, subject to annual contribution limits established by the Internal Revenue Service (IRS). The maximum annual contributions to a participant's account including employer contributions is $53,000 ($59,000 including catch-up contributions) for 2015 per the IRS. Participants who have attained age 50 before the end of the Plan year are eligible to make catch-up contributions. Rollover contributions representing distributions from defined benefit or defined contribution plans are allowed.

The Plan allows for the Company to make an annual, discretionary matching contribution for eligible participant contributions made during the previous Plan year as defined by the Plan. Participants must be employed at December 31 of the previous Plan year to be eligible for discretionary matching contributions. For the Plan year ended December 31, 2015, the Company approved discretionary employer matching contributions equal to 50 percent of the first 6 percent of eligible participant contributions for the Plan year.

Participants' Accounts

Participants' accounts are credited with participant contributions (elective deferral, rollover and catch-up), employer discretionary matching contributions and an allocation of Plan earnings or losses, and charged with an allocation of administrative expenses. Plan earnings are allocated based on participant account balances, and Plan administrative expenses are allocated based on the number of participants. The benefit to which a participant is entitled is the vested portion of the participant's account. Participants direct their investments to any of the available investment options under the Plan.

Vesting

Participant and employer contributions, including actual earnings, are immediately 100 percent vested.

Payment of Benefits

The Plan permits participants to elect in-service withdrawals, as defined in the Plan agreement, subject to Plan and IRS restrictions. Upon termination of employment or due to death, disability or retirement, the method by which benefits are paid depends on the vested account balance. The Plan contains an automatic cash-out provision whereby, once annually, all vested account balances for terminated participants not exceeding $5,000, are distributed to participants. If the vested account balance does not exceed $1,000, a lump-sum distribution, net of tax, is made. If the vested balance is greater than $1,000 and less than $5,000 and the participant does not specify whether the distribution should be paid directly to an eligible retirement plan or paid directly to the participant, the Plan Administrator can pay the distribution in a direct rollover to an individual retirement plan designated by the Plan Administrator.

NOTE A - DESCRIPTION OF PLAN - Continued

Notes Receivable from Participants

Participants are excluded from borrowing from their accounts. During the mergers of the XRS Corporation 401(k) Profit Sharing Plan and the Roadnet Technologies 401(k) Plan, certain loan balances were transferred in to the Plan and are collateralized by the related vested account balance for the receivable. Interest is charged based on the rate charged by representative commercial banks for similar notes, ranging from 3.25% to 4.25%. Payment of principal and interest is to be amortized in level payments not less frequently than quarterly. The term of the note is not to exceed five years unless the purpose of the note is for purchasing a principal residence, in which case it is not to exceed thirty years.

Plan Termination

Although it has not expressed any intent to do so, the Company has the right under the Plan to discontinue its contributions at any time and to terminate the Plan subject to the provisions of ERISA.

NOTE B - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

The following is a summary of the significant accounting policies applied in the preparation of the accompanying financial statements.

Basis of Accounting

The accompanying financial statements are prepared using the accrual method of accounting in accordance with U.S. generally accepted accounting principles (GAAP) as set forth in the Financial Accounting Standards Board's (FASB) Accounting Standards Codification (ASC).

Investment Valuation and Income Recognition

The Plan's investments in shares of mutual funds and money market mutual funds are presented at net asset value (NAV) based on quoted market prices. Purchases and sales of securities are recorded on a trade-date basis. Dividends are recorded on the ex-dividend date. Interest income is recorded on an accrual basis.

Employer Contributions Receivable

Employer contributions receivable relates to discretionary employer matching contributions for the Plan year paid by the Company subsequent to the Plan year end.

NOTE B - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES - Continued

Net Depreciation in the Fair Value of Investments

Net depreciation in the fair value of investments represents the net realized gains or losses and the net unrealized appreciation or depreciation of investments. Realized gains or losses are the difference between the proceeds received and either the cost of the investment sold, determined on a first-in, first-out basis, or the fair value at the end of the previous year, whichever is applicable. Unrealized appreciation or depreciation is the change in the difference between fair value and the cost of investments or the fair value at the end of the previous year, whichever is applicable.

Benefits Paid to Participants

Benefits paid to participants are recorded when paid.

Administrative Expenses

The Company has the discretion to pay Plan expenses or allow the Plan to arrange payment. For the year ended December 31, 2015, the Company paid for the majority of expenses to administer the Plan, including audit and legal fees, and these expenses are excluded from the accompanying financial statements. Processing fees are paid by the Plan and are charged to the respective participant's account.

Fair Value

Fair value is defined as the price that would be received from selling an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. When determining the fair value measurements for assets and liabilities which are required to be recorded at fair value, the Plan considers the principal or most advantageous market in which the Plan would transact and considers assumptions that market participants would use when pricing the assets or liabilities, such as inherent risk, transfer restrictions and risk of nonperformance.

The Plan uses 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 the fair value hierarchy 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.

NOTE B - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES - Continued

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 and
- inputs that are derived principally from or corroborated by observable market data by correlation or other means.

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

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

The asset or liability's fair value measurement level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement. Valuation techniques used need to maximize the use of observable inputs and minimize the use of unobservable inputs.
Following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodologies used as of December 31, 2015.

Mutual Funds: Valued at the NAV of shares held by the Plan at year end based on daily closing prices. Mutual funds held by the Plan are open-end mutual funds, registered with the Securities and Exchange Commission, deemed to be actively traded and are not subject to redemption restrictions. These funds are required to publish their daily NAV and to transact at that price.

The methods described above may produce a fair value calculation that may not be indicative of net realizable value or reflective of future fair values. Furthermore, while the Company 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.

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 accompanying financial statements.

NOTE B - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES - Continued

Use of Estimates

The preparation of financial statements in conformity GAAP 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. Actual results could differ from those estimates.

Recently Issued Accounting Standards

In May 2015, the FASB issued Accounting Standards Update (ASU) 2015-07, *Disclosures for Investments in Certain Entities That Calculate Net Asset Value per Share (or Its Equivalent)* (ASU 2015-07). ASU 2015-07 amended ASC 820, *Fair Value Measurements and Disclosures*, to remove the requirement to categorize within the fair value hierarchy all investments for which fair value is measured using the NAV per share practical expedient. The amendment also removes the requirement to make certain disclosures for all investments that are eligible to be measured at fair value using the NAV per share practical expedient. ASU 2015-07 is effective for fiscal years beginning after December 15, 2016, and interim periods within those fiscal years, with early adoption permitted. The Company does not anticipate the adoption of ASU 2015-07 will have a material effect on Plan financial statements.

In July 2015, the FASB issued ASU 2015-12, *Plan Accounting: Defined Benefit Pension Plans (Topic 960), Defined Contribution Pension Plans (Topic 962), and Health and Welfare Benefit Plans (Topic 965): (Part I) Fully Benefit-Responsive Investment Contracts, (Part II) Plan Investment Disclosures, (Part III) Measurement Date Practical Expedient.* This three-part standard simplifies employee benefit plan reporting with respect to fully benefit-responsive investment contracts and plan investment disclosures, and provides for a measurement-date practical expedient. Parts I and II are effective for fiscal years beginning after December 15, 2015 and should be applied retrospectively, with early application permitted. Part III is effective for fiscal years beginning after December 15, 2015 and should be applied prospectively, with early application permitted. The adoption of this standard is not expected to have a material impact on the Plan's financial statements.

There were no other new accounting pronouncements issued or effective during the year ended December 31, 2015 that have had or are expected to have a material impact on Plan financial statements.

NOTE C - INVESTMENTS

The following table presents individual investments that represent five percent or more of the Plan's net assets available for benefits as of December 31:

	2015	2014
Fidelity Freedom 2025 Fund	$2,458,110	$705,691
Fidelity Freedom 2030 Fund	2,235,975	666,616
Fidelity Contrafund	2,329,268	619,430
Spartan 500 Index Fund, Fidelity Advantage Class	2,008,286	487,415
Fidelity Freedom 2035 Fund	3,224,822	355,236
Fidelity Freedom 2020 Fund	1,380,534	335,745
Fidelity Freedom 2045 Fund	1,551,561	
Janus Triton Fund, T Class	1,685,982	
John Hancock Funds Disciplined Value Mid Cap Fund, I Class	1,710,105	

The Plans' appreciation in fair value for the year ended December 31, 2015 was driven by the merger of the Roadnet Technologies 401(k) Plan and the Roadnet Technologies 401(k) Plan within the Omnitracs Employee Savings & Retirement Plan.

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

Mutual funds – Level 1:	
Target (a)	$14,595,488
Growth (b)	5,096,618
Index (c)	2,981,683
Value (d)	2,698,253
Fixed income (e)	1,939,667
Tactical allocation (f)	62,384
Total investments, at fair value	$27,374,093

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

Mutual funds – Level 1:	
Target (a)	$2,828,807
Growth (b)	1,219,894
Index (c)	816,951
Value (d)	564,858
Fixed income (e)	207,122
Tactical allocation (f)	19,469
Total investments, at fair value	$5,657,101

NOTE C - INVESTMENTS - Continued

(a) Target funds seek high total return, capital appreciation and income. These funds utilize an asset allocation strategy designed for investors planning to retire at a specific point in time (2020, 2030 etc.). These funds generally invest in a combination of domestic equity funds, international equity funds, bond funds and money market funds. The asset allocation strategy used becomes increasingly conservative as the target retirement date approaches.

(b) Growth funds seek long-term capital appreciation. These funds invest in a diversified portfolio of equity securities of U.S. and non-U.S. issuers having a certain market capitalization that appear to offer superior opportunities for growth of capital.

(c) Index funds seek to track the performance of a particular market index by employing a passive investment management approach. These funds invest all, or substantially all, assets in the securities that make up the market index, holding each security in approximately the same proportion as its weighting in the market index.

(d) Value funds seek capital appreciation. These funds invest in a diversified portfolio of equity securities of U.S. and non-U.S. issuers having a certain market capitalization, targeting stocks that are less expensive or growing more slowly relative to other stocks in the same market.

(e) Fixed income funds seek a stable, predictable total return and conservation of capital. These funds invest principally in bonds and other debt instruments, which may be represented by forwards or derivatives such as options, futures contracts or swap agreements. These funds invest principally in investment-grade debt securities but may invest in high-yield securities. These funds may also hold cash or money market instruments.

(f) Tactical allocation funds seek capital appreciation and income by actively shifting allocations across investments. These funds invest in a combination of equity and debt securities and in portfolios that have material, frequent shifts across equity regions and bond sectors.

The mutual fund categories and descriptions above were summarized based on the Morningstar category classification of each the Plan's mutual fund investments.

NOTE D - TRUSTEE'S CERTIFICATIONS

The Plan Administrator has elected the method of annual reporting compliance permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Accordingly, Fidelity Management Trust Company, the trustee of the Plan, has certified that the following data included in the accompanying financial statements and supplemental schedules are complete and accurate:

- Investments, at fair value, as shown in the accompanying statement of net assets available for benefits as of December 31, 2015 and 2014
- Notes receivable from participants, as shown in the statements of net assets available for benefits as of December 31, 2015
- Total investment income and interest income on notes receivable from participants, as shown in the accompanying statement of changes in net assets available for benefits for the year ended December 31, 2015
- Schedule H, Part IV, line 4(i) – schedule of assets (held at end of year) as of December 31, 2015.
- Schedule H, Part IV, line 4a – schedule of delinquent participant contributions for the year ended December 31, 2015

NOTE E - RELATED-PARTY AND PARTY-IN-INTEREST TRANSACTIONS

The Company has designated a Plan Administrator. These services are provided at no expense to the Plan. In addition, the Plan has an oversight committee responsible for ensuring Plan compliance with regulatory requirements.

Certain plan investments are shares of mutual funds managed by Fidelity Management Trust Company. Fidelity Management Trust Company is the trustee as defined by the Plan and, therefore, these transactions qualify as party-in-interest transactions.

NOTE F - TAX STATUS

Per an advisory letter dated March 31, 2014, the IRS stated the prototype Plan agreement adopted by the Plan qualified under applicable sections of the Internal Revenue Code (IRC). Although the Plan has been subsequently amended, the Plan Administrator believes the Plan is currently designed and being operated in compliance with applicable sections of the IRC. Therefore, no provision for income taxes has been included in the accompanying financial statements.

The Plan Administrator is required by GAAP 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 there are no uncertain positions taken or expected to be taken that would require recognition of a liability or asset or disclosure in the 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 the Plan is subject to income tax examinations for all periods since the Plan's inception.

NOTE G - RECONCILIATION OF FINANCIAL STATEMENTS TO FORM 5500

The following is a reconciliation of net assets available for benefits per the financial statements to Form 5500:

	2015	2014
Net assets available for benefits per the financial statements	$29,283,459	$6,410,172
Contributions receivable	(1,799,288)	-
Net assets available for benefits per Form 5500	$27,484,171	$6,410,172

Reconciliation of increase in net assets available for benefits per the financial statement to net income per the Form 5500 for the year ended December 31, 2015.

Net increase in assets available for benefits per the financial statements	$22,873,286
2015 employer contributions receivable	(1,799,288)
Net increase per Form 5500	$21,073,998

NOTE H - SUBSEQUENT EVENTS

The Plan evaluated its December 31, 2015 financial statements for subsequent events through October 17, 2016, the date the financial statements were available to be issued. There are no significant subsequent events which require disclosure.

NOTE I - PROHIBITED TRANSACTIONS

The United States Department of Labor ("DOL") considers late participant contributions to be prohibited transactions. The employer is required to remit participant contributions to the Plan as of the earliest date on which such amounts can reasonably be segregated from the employer's general assets, but in no event later than fifteen business days after the end of the month in which the contributions were withheld. It was determined that during the year ended December 31, 2015, the Plan Sponsor inadvertently failed to make deposits of approximately $335 of participant contributions within the timeframe required.

SUPPLEMENTARY INFORMATION

Omnitracs Employee Savings & Retirement Plan

SCHEDULE H, PART IV, LINE 4(i) – SCHEDULE OF ASSETS (HELD AT END OF YEAR)

December 31, 2015
EIN: 46-1474848

(a)	Identity of Issuer (b)	Description of Investment (c)	Current Value (e)
	Money market mutual fund		
*	Fidelity	Fidelity Money Market Trust Retirement Government Fund	$ 704,905
	Mutual funds		
*	Fidelity	Fidelity Freedom 2035 Fund	$ 3,224,822
*	Fidelity	Fidelity Freedom 2025 Fund	2,458,110
*	Fidelity	Fidelity Contrafund	2,329,268
*	Fidelity	Fidelity Freedom 2030 Fund	2,235,975
*	Fidelity	Spartan 500 Index Fund, Fidelity Advantage Class	2,008,286
	John Hancock	John Hancock Funds Disciplined Value Mid Cap Fund, I Class	1,710,105
	Janus Capital Group	Janus Triton Fund, T Class	1,685,982
*	Fidelity	Fidelity Freedom 2045 Fund	1,551,561
*	Fidelity	Fidelity Freedom 2020 Fund	1,380,534
*	Fidelity	Fidelity Freedom 2040 Fund	1,349,494
*	Fidelity	Fidelity Freedom 2050 Fund	1,106,334
	Wells Fargo	Wells Fargo Stable Value Fund	912,958
	Principal Funds	Principal Equity Income Fund, R-4 Class	718,002
	Wells Fargo	Wells Fargo Advantage Discovery Fund, Administrator Class	643,753
*	Fidelity	Fidelity Freedom 2055 Fund	576,593
*	Fidelity	Fidelity Freedom 2015 Fund	487,104
	American Funds	American Funds EuroPacific Growth Fund, R-4 Class	437,614
*	Fidelity	Spartan Small Cap Index Fund, Fidelity Advantage Class	395,314
*	Fidelity	Spartan International Index Fund, Fidelity Advantage Class	333,167
	PIMCO	Total Return Admin Fund	297,577
	American Beacon	American Beacon Small Cap Value Fund, Investor Class	270,146
*	Fidelity	Spartan U.S. Bond Index Fund, Fidelity Advantage Class	208,424
*	Fidelity	Fidelity Freedom 2010 Fund	183,122
	PIMCO	All Asset Fund, Administrative Class	62,384
	Ariel	Ariel Appreciation Institutional Fund	36,493
*	Fidelity	Fidelity Freedom 2060 Fund	29,233
*	Fidelity	Fidelity Freedom Income Fund	24,227
*	Fidelity	Fidelity Freedom 2005 Fund	12,606
	Total mutual funds		$26,669,188
	Total investments		$27,374,093
	Notes receivable from participants	Interest rates range from 3.25% to 4.25% Maturity dates vary until 2035	$ 110,077

* Party-in-interest.

Note column (d) not included as all investments are participant directed.

Omnitracs Employee Savings & Retirement Plan

SCHEDULE H, PART IV, LINE 4a - SCHEDULE OF DELINQUENT PARTICIPANT CONTRIBUTIONS

For the year ended December 31, 2015

EIN: 46-1474848

Participant Contributions Transferred Late to the Plan			Check Here If Late Participant Loan Repayments Are Included	Total That Constitutes Nonexempt Prohibited Transactions			
Amount Withheld	Date Withheld	Date Remitted		Contributions Not Corrected	Contributions Corrected Outside Voluntary Fiduciary Correction Program	Contributions Pending Correction in Voluntary Fiduciary Correction Program	Total Fully Corrected Under Voluntary Fiduciary Correction Program And PTE 2001-51
$335	5/8/2015	5/22/2015	x	$ -	$ -	$335	$ -