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

2013

This Form is Open to Public Inspection

Part I Annual Report Identification Information

For calendar plan year 2013 or fiscal plan year beginning 01/01/2013 and ending 12/31/2013

A This return/report is for:
- [ ] a multiemployer plan;
- [ ] a multiple-employer plan; or
- [X] a single-employer plan;
- [ ] a DFE (specify) ____

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

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

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

Part II Basic Plan Information—enter all requested information

1a Name of plan
SYSINTELLI INC 401(K) PROFIT SHARING PLAN & TRUST

1b Three-digit plan number (PN) ▶ 001

1c Effective date of plan 01/01/2007

2a Plan sponsor's name and address; include room or suite number (employer, if for a single-employer plan)

SYSINTELLI INC

9466 BLACK MOUNTAIN RD STE 140
SAN DIEGO, CA 92126-4550

2b Employer Identification Number (EIN)
20-2345291

2c Sponsor's telephone number
858-271-1600

2d Business code (see instructions)
541600

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.	04/05/2017	RAVINDRA HANUMARA
	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. (optional)

Preparer's telephone number (optional)

3a Plan administrator's name and address [X] Same as Plan Sponsor Name [ ] Same as Plan Sponsor Address

3b Administrator's EIN

3c Administrator's telephone number

4 If the name and/or EIN of the plan sponsor has changed since the last return/report filed for this plan, enter the name, EIN and the plan number from the last return/report:

a Sponsor's name

4b EIN

4c PN

5	Total number of participants at the beginning of the plan year	**5**	180
6	Number of participants as of the end of the plan year (welfare plans complete only lines **6a, 6b, 6c,** and **6d**).		
a	Active participants	**6a**	172
b	Retired or separated participants receiving benefits	**6b**	0
c	Other retired or separated participants entitled to future benefits	**6c**	1
d	Subtotal. Add lines **6a**, **6b**, and **6c**	**6d**	173
e	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	**6e**	0
f	Total. Add lines **6d** and **6e**.	**6f**	173
g	Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**	9
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:
2A 2E 2G 2J 2T 3D

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

9a Plan funding arrangement (check all that apply)

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

9b Plan benefit arrangement (check all that apply)

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

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

a Pension Schedules

- **(1)** [ ] **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)** [ ] 0 **A** (Insurance Information)
- **(4)** [X] **C** (Service Provider Information)
- **(5)** [ ] **D** (DFE/Participating Plan Information)
- **(6)** [ ] **G** (Financial Transaction Schedules)

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.**	**2013** **This Form is Open to Public Inspection.**

For calendar plan year 2013 or fiscal plan year beginning 01/01/2013 and ending 12/31/2013

A Name of plan
SYSINTELLI INC 401(K) PROFIT SHARING PLAN & TRUST

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
SYSINTELLI INC

D Employer Identification Number (EIN)
20-2345291

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

PAYCHEX SECURITIES CORPORATION

16-1486352

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

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

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

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

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

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

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

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

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

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

(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)

(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 ☐

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

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

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

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

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

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

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

Part I Service Provider Information (continued)

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

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

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

(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 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

2013

This Form is Open to Public Inspection

For calendar plan year 2013 or fiscal plan year beginning 01/01/2013 and ending 12/31/2013

A Name of plan
SYSINTELLI INC 401(K) PROFIT SHARING PLAN & TRUST

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
SYSINTELLI INC

D Employer Identification Number (EIN)
20-2345291

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	
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	0	0
(2) Participant contributions	1b(2)	0	0
(3) Other	1b(3)	0	0
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	6764	20010
(2) U.S. Government securities	1c(2)	0	
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)	0	
(B) All other	1c(3)(B)	0	
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)	0	
(B) Common	1c(4)(B)	0	
(5) Partnership/joint venture interests	1c(5)	0	
(6) Real estate (other than employer real property)	1c(6)	0	
(7) Loans (other than to participants)	1c(7)	0	
(8) Participant loans	1c(8)	0	0
(9) Value of interest in common/collective trusts	1c(9)	0	0
(10) Value of interest in pooled separate accounts	1c(10)		
(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)	139130	229912
(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	
(2) Employer real property	1d(2)	0	
e Buildings and other property used in plan operation	1e	0	
f Total assets (add all amounts in lines 1a through 1e)	1f	145894	249922
Liabilities			
g Benefit claims payable	1g	0	
h Operating payables	1h	0	
i Acquisition indebtedness	1i	0	
j Other liabilities	1j	0	
k Total liabilities (add all amounts in lines 1g through1j)	1k	0	0
Net Assets			
l Net assets (subtract line 1k from line 1f)	1l	145894	249922

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)	0	
(B) Participants	2a(1)(B)	90106	
(C) Others (including rollovers)	2a(1)(C)	0	
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		90106
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	2	
(B) U.S. Government securities	2b(1)(B)		
(C) Corporate debt instruments	2b(1)(C)		
(D) Loans (other than to participants)	2b(1)(D)		
(E) Participant loans	2b(1)(E)	0	
(F) Other	2b(1)(F)		
(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		2
(2) Dividends: **(A)** Preferred stock	2b(2)(A)		
(B) Common stock	2b(2)(B)		
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	7887	
(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		7887
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	2b(4)(A)		
(B) Aggregate carrying amount (see instructions)	2b(4)(B)		
(C) Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result	2b(4)(C)		0
(5) Unrealized appreciation (depreciation) of assets: **(A)** Real estate	2b(5)(A)		
(B) Other	2b(5)(B)		
(C) Total unrealized appreciation of assets. Add lines **2b(5)(A)** and **(B)**	2b(5)(C)		0

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		0
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		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)		15859
c Other income	2c		
d Total income. Add all **income** amounts in column (b) and enter total	2d		113854

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	0	
(2) To insurance carriers for the provision of benefits	2e(2)		
(3) Other	2e(3)		
(4) Total benefit payments. Add lines **2e(1)** through **(3)**	2e(4)		0
f Corrective distributions (see instructions)	2f		9826
g Certain deemed distributions of participant loans (see instructions)	2g		0
h Interest expense	2h		
i Administrative expenses: **(1)** Professional fees	2i(1)		
(2) Contract administrator fees	2i(2)	0	
(3) Investment advisory and management fees	2i(3)		
(4) Other	2i(4)	0	
(5) Total administrative expenses. Add lines **2i(1)** through **(4)**	2i(5)		0
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		9826

Net Income and Reconciliation

k Net income (loss). Subtract line **2j** from line **2d**	2k		104028
l Transfers of assets:			
(1) To this plan	2l(1)		
(2) From this plan	2l(2)		

Part III Accountant's Opinion

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

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

(1) [ ] Unqualified **(2)** [ ] Qualified **(3)** [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: HARSHWAL & COMPANY LLP **(2)** EIN: 27-0741376

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	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	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	
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			

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 (optional)

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

SYSINTELLI INC.
San Diego, CA
Independent Auditor's Report
401(k) Plan
December 31, 2013

Harshwal & Company LLP
Certified Public Accountants
6739 Academy Road NE, Suite 130
Albuquerque, NM 87109
(505) 814-1201

Table of Contents

	Page
Independent Auditor's Report	1 - 2
Financial Statements	
Statement of Net Assets Available for Benefits	3
Statement of Changes in Net Assets Available for Benefits	4
Supplemental Schedule	
Schedule H, Line 4i - Schedule of Assets (Held at Year End)	5
Notes to the Financial Statements	6 - 9

HARSHWAL® & COMPANY LLP
CERTIFIED PUBLIC ACCOUNTANTS

INDEPENDENT AUDITORS' REPORT

To the Board of Directors
Sysintelli Inc.
401 (k) Plan,
San Diego, CA

We were engaged to audit the accompanying financial statements of Qualified Retirement Plan, which comprise the statements of net assets available for benefits of the Sysintelli Inc. 401(k) Plan (the Plan) as of December 31, 2013, and the related statement of changes in net assets available for benefits for the year then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

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

Auditor's Responsibility

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

Basis for Disclaimer of Opinion

As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Schedule H, Line 4i - Schedule of Assets Held at End of Year and Note C, which was certified by Paychex, the custodian of the plan, except for comparing the information with the related information included in the financial statements and the supplemental schedules. The plan administrator has informed us that the custodian holds the Plan's investment assets and executes investment transactions. The plan administrator has obtained a certification from the custodian, as of and for the year ended December 31, 2013, that the information provided to the plan administrator by the custodian is complete and accurate.

ALBUQUERQUE
6739 Academy Road NE Suite 130 Albuquerque NM 87109
www.harshwal.com |T 505.814.1201 | F 505.395.7581

Disclaimer of Opinion

Because of the significance of the matter described in the Basis of 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 matters.

Other Matter

We were engaged for the purpose of forming an opinion on the financial statements as a whole. The supplemental schedule, which is the responsibility of the plan management, is presented for the purpose of additional analysis and is not a required part of the financial statements, but is 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, it is inappropriate to and we do not express an opinion on the supplemental schedules referred to above.

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

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

Harshwal & Company LLP
Certified Public Accountants



Albuquerque, New Mexico
November 3, 2014

SYSINTELLI INC.
401(k) PLAN
STATEMENT OF NET ASSETS AVAILABLE FOR BENEFITS
DECEMBER 31, 2013

	2013
ASSETS	
Investments	
Interest bearing Cash	$ 20,010
Value of interest in registered investment companies	229,912
Total investments	249,922
Total assets	249,922
LIABILITIES AND NET ASSETS	
Liabilities	-
Net Assets	249,922
Total liabilities and net assets	$ 249,922

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

SYSINTELLI INC.
401(k) PLAN
STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
DECEMBER 31, 2013

	2013
Additions to net assets attributed to:	
Investment income:	
Net appreciation in fair value of investments	$ 15,859
Interest	2
Other income-Dividends	7,887
Total investment income	23,748
Contributions:	
Participants contributions	90,106
Total contributions	90,106
Total Additions	113,854
Deductions from net assets attributed to:	
Corrective distributions paid to participants	9,826
Total deductions	9,826
Net increase in Net Assets	104,028
Net assets available for plan benefits, beginning of the year	145,894
Net assets, end of the year	$ 249,922

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

SYSINTELLI INC.
SCHEDULE OF ASSETS HELD AT END OF YEAR
(SCHEDULE H, LINE 4i)
DECEMBER 31, 2013

Identity of issuer, borrower, lessor or similar party	Description of investment	Current Value
Paychex Securities Corporation	FED AUTO CASH MNG	$ 4,190
Paychex Securities Corporation	VANGRD PRIME MMKT	15,820
Paychex Securities Corporation	FED KAUFMANN C	802
Paychex Securities Corporation	FED BOND C	1,706
Paychex Securities Corporation	FED PRDNT ABS RET	160
Paychex Securities Corporation	VANGRD MID CAP ID	1,019
Paychex Securities Corporation	VANGRD MC GR IND	205
Paychex Securities Corporation	VANGRD MORGAN GR	5,482
Paychex Securities Corporation	VANGRD SMCP GR ID	2,193
Paychex Securities Corporation	VANGRD SMCP VL ID	5,708
Paychex Securities Corporation	VANGRD S/T TREAS	143
Paychex Securities Corporation	VANGRD GR IDX	401
Paychex Securities Corporation	VANGRD INFL-PROT	214
Paychex Securities Corporation	VANGRD INTM BD ID	11,927
Paychex Securities Corporation	VANGRD INTTM INV-	3,379
Paychex Securities Corporation	VANGRD INT-TM US	3,324
Paychex Securities Corporation	VANGRD LIFEST CON	153
Paychex Securities Corporation	VANGRD LONGTM BD	291
Paychex Securities Corporation	VANGRD 500 INDEX	6,442
Paychex Securities Corporation	VANGRD DIVIDEND G	16,469
Paychex Securities Corporation	VANGRD EQUITY-INC	11,422
Paychex Securities Corporation	VANGRD FTSE SOC I	14,067
Paychex Securities Corporation	VANGRD GLOBAL EQU	1,227
Paychex Securities Corporation	VANGRD GR & INC	153
Paychex Securities Corporation	VANGRD GROWTH EQU	15,462
Paychex Securities Corporation	VANGRD TARG RET 2	11,453
Paychex Securities Corporation	VANGRD TOTAL BD I	71
Paychex Securities Corporation	VANGRD U.S. GR	815
Paychex Securities Corporation	VANGRD U.S. VALUE	11,089
Paychex Securities Corporation	VANGRD WELLESLEY	93,501
Paychex Securities Corporation	VANGRD WINDSOR	8,096
Paychex Securities Corporation	FED STRAT INCOME	1,702
Paychex Securities Corporation	FED US GOVT SEC C	836
Total Investments		$ 249,922

SYSINTELLI INC.
NOTES TO THE FINANCIAL STATEMENTS
DECEMBER 31, 2013

Note 1 - Nature of Business and Significant Accounting Policies

A. Description of Plan

Volume Submitter Profit Sharing Plan with CODA - the Plan adopted by Sysintelli Inc. is acceptable under section 401 of the Internal Revenue Code for use by employers for the benefit of their employees. The following description of the Sysintelli Inc. 401(k) Plan provides only general information. Participants should refer to the plan agreement for a more complete description of the plan's provisions.

Nature of Activities

Sysintelli Inc. is a global software development and consulting firm. The company develops, delivers and supports enterprise wide IT solutions to their customers. They have certified experts from all areas of software development working all over the world as a part of their team, providing efficient solutions for varied business needs, such as, Software Development and Deployment, Research and Development, Engineering Design and development etc.

General

The plan is a defined contribution plan covering all full-time employees of Sysintelli Inc. Employees aged 21 and older are eligible to participate in the plan. 1000 Hours of Service shall be required to constitute a Year of Eligibility Service.

Contributions

Each year participants may contribute up to 96% of annual compensation in increment of 1% as defined in the plan. The law limits the amount of 401(k) elective deferral contributions in any tax year. Participants who have attained age 50 before the end of the plan year are eligible to make catch-up contributions. Participants direct the investment of their contributions into various investment options offered by the plan. The plan currently offers various mutual funds as investment options for participants. Sysintelli Inc. contributes additional profit-sharing amounts at the option of the board of directors. Contributions are subject to certain limitations.

Participant Accounts

Each participant's account is credited with the participant's contribution and allocations of (a) the Employer Profit Sharing Contribution and (b) plan earnings and charged with an allocation of administrative expenses. Allocations are based on participant earnings or account balances as defined. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

Note 1 - Nature of Business and Significant Accounting Policies - Continued

Vesting

Participants are vested in the range of 20%-100% progressively on completing two years of service. A participant is 100 percent vested after six years of credited service. 1000 Hours of Service shall be required to constitute a Year of Vesting Service.

Participant Loans

Loans shall be made available to all Participants on a reasonably equivalent basis. Loans must be adequately secured and bear a reasonable interest rate. No Participant loan shall exceed the Present Value of the vested portion of a Participant's Individual Account. If the Participant's Individual Account contains both Pre-Tax Elective Deferrals and Roth Elective Deferrals, the specific rules governing the loan program may also designate the extent to which Pre-Tax Elective Deferrals, Roth Elective Deferrals, or a combination of both will 1) be used to calculate the maximum amount available for a loan, or 2) be available as a source from which loan proceeds may be taken or which may be used as security for a loan. To the extent permitted by law and related regulations, these rules established by the Plan Sponsor may specify the ordering rules to be applied in the event of defaulted loan.

Payment of Benefits

A Participant's Elective Deferrals, Qualified Nonelective Contributions, Qualified Matching Contributions, and earnings attributable to these contributions shall be distributed because of the Participant's severance from employment. A Participant who has not incurred a Severance from Employment is entitled to request an in-service withdrawal from the Plan of that portion of the Participant's Individual Account attributable to Elective Deferrals, Qualified Nonelective Contributions, and Qualified Matching Contributions if the participant has attained age 59½. In-service distributions will be available from Pre-Tax and/or Roth Elective Deferrals.

Forfeited Accounts

At December 31, 2013 there were no forfeited nonvested accounts.

B. Basis of Presentation and Accounting

The financial statements of the plan are prepared on the accrual basis of accounting. Investment contracts held by a defined-contribution plan are required to be reported at fair value. However, contract value is the relevant measurement attribute for that portion of the net assets available for benefits of a defined-contribution plan attributable to fully benefit-responsive investment contracts because contract value is the amount participants would receive if they were to initiate permitted transactions under the terms of the plan. The Statement of Net Assets Available for Benefits presents the fair value of the investment contracts as well as the fully benefit-responsive investment contracts from fair value to contract value. The Statement of Changes in Net Assets Available for Benefits is prepared on a contract value basis.

SYSINTELLI INC.
NOTES TO THE FINANCIAL STATEMENTS
DECEMBER 31, 2013

Note 1 - Nature of Business and Significant Accounting Policies - Continued

Use of Estimates

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

Investment Valuation and Income Recognition

The plan's investments are stated at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date.

Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded on the accrual basis. Net appreciation includes the plan's gains and losses on investments bought and sold as well as held during the year.

Payment of Benefits

Benefits are recorded when paid.

Operating Expenses

All expenses of maintaining the plan are paid by the Company. A portion of the administrative cost is distributed amongst participants.

C. Investments

The plan's investments are held in a mutual fund by the Paychex, the plan custodian. The following presents investments that represent 5 percent or more of the plan's net assets.

Investments		
VANGRD PRIME MMKT	$	15,820
VANGRD DIVIDEND G		16,469
VANGRD FTSE SOC I		14,067
VANGRD GROWTH EQU		15,462
VANGRD WELLESLEY INC		93,501
Total		155,319

During 2013, the plan's investments (including investments bought, sold, and held during the year) appreciated by $ 15,859 as follows:

Net Change in Fair value		
Registered Investment Companies	$	15,859

Note 1 - Nature of Business and Significant Accounting Policies - Continued

D. Fair Value Measurements

Financial Accounting Standards Board (FASB) Statement No. 157, Fair Value Measurements, establishes a framework for measuring fair value. The plan values its assets and liabilities in accordance with the provisions of FASB Statement No. 157.

E. Plan Termination

Although it has not expressed any intent to do so, Sysintelli Inc. has the right under the plan to discontinue its contributions at any time and to terminate the plan subject to the provisions of ERISA. In the event of plan termination, participants will become 100% vested in their accounts. Any unallocated assets of the plan shall be allocated to participant accounts and distributed in such a manner as SMASE may determine.

G. Reconciliation of Financial Statements to Form 5500

The following is a reconciliation of net assets available for benefits per the financial statements at December 31, 2013 and as per Form 5500:

	2013
Net assets available for benefits per the financial statement	$ 249,922
Net assets available for benefits per the Form 5500	$ 249,922

The following is a reconciliation of benefits paid to participants per the financial statements for the year ended December 31, 2013 to Form 5500:

Benefits paid to participants per the financial statements	$ 9,826
Benefits paid to participants per the Form 5500	$ 9,826

H. 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 statement of net assets available for benefits.

SYSINTELLI INC.
San Diego, CA
Independent Auditor's Report
401(k) Plan
December 31, 2013

Harshwal & Company LLP
Certified Public Accountants
6739 Academy Road NE, Suite 130
Albuquerque, NM 87109
(505) 814-1201

Table of Contents

	Page
Independent Auditor's Report	1 - 2
Financial Statements	
Statement of Net Assets Available for Benefits	3
Statement of Changes in Net Assets Available for Benefits	4
Supplemental Schedule	
Schedule H, Line 4i - Schedule of Assets (Held at Year End)	5
Notes to the Financial Statements	6 - 9

HARSHWAL® & COMPANY LLP
CERTIFIED PUBLIC ACCOUNTANTS

INDEPENDENT AUDITORS' REPORT

To the Board of Directors
Sysintelli Inc.
401 (k) Plan,
San Diego, CA

We were engaged to audit the accompanying financial statements of Qualified Retirement Plan, which comprise the statements of net assets available for benefits of the Sysintelli Inc. 401(k) Plan (the Plan) as of December 31, 2013, and the related statement of changes in net assets available for benefits for the year then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

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

Auditor's Responsibility

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

Basis for Disclaimer of Opinion

As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Schedule H, Line 4i - Schedule of Assets Held at End of Year and Note C, which was certified by Paychex, the custodian of the plan, except for comparing the information with the related information included in the financial statements and the supplemental schedules. The plan administrator has informed us that the custodian holds the Plan's investment assets and executes investment transactions. The plan administrator has obtained a certification from the custodian, as of and for the year ended December 31, 2013, that the information provided to the plan administrator by the custodian is complete and accurate.

ALBUQUERQUE
6739 Academy Road NE Suite 130 Albuquerque NM 87109
www.harshwal.com |T 505.814.1201 | F 505.395.7581

Disclaimer of Opinion

Because of the significance of the matter described in the Basis of 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 matters.

Other Matter

We were engaged for the purpose of forming an opinion on the financial statements as a whole. The supplemental schedule, which is the responsibility of the plan management, is presented for the purpose of additional analysis and is not a required part of the financial statements, but is 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, it is inappropriate to and we do not express an opinion on the supplemental schedules referred to above.

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

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

Harshwal & Company LLP
Certified Public Accountants



Albuquerque, New Mexico
November 3, 2014

SYSINTELLI INC.
401(k) PLAN
STATEMENT OF NET ASSETS AVAILABLE FOR BENEFITS
DECEMBER 31, 2013

	2013
ASSETS	
Investments	
Interest bearing Cash	$ 20,010
Value of interest in registered investment companies	229,912
Total investments	249,922
Total assets	249,922
LIABILITIES AND NET ASSETS	
Liabilities	-
Net Assets	249,922
Total liabilities and net assets	$ 249,922

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

SYSINTELLI INC.
401(k) PLAN
STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
DECEMBER 31, 2013

	2013
Additions to net assets attributed to:	
Investment income:	
Net appreciation in fair value of investments	$ 15,859
Interest	2
Other income-Dividends	7,887
Total investment income	23,748
Contributions:	
Participants contributions	90,106
Total contributions	90,106
Total Additions	113,854
Deductions from net assets attributed to:	
Corrective distributions paid to participants	9,826
Total deductions	9,826
Net increase in Net Assets	104,028
Net assets available for plan benefits, beginning of the year	145,894
Net assets, end of the year	$ 249,922

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

SYSINTELLI INC.
SCHEDULE OF ASSETS HELD AT END OF YEAR
(SCHEDULE H, LINE 4i)
DECEMBER 31, 2013

Identity of issuer, borrower, lessor or similar party	Description of investment	Current Value
Paychex Securities Corporation	FED AUTO CASH MNG	$ 4,190
Paychex Securities Corporation	VANGRD PRIME MMKT	15,820
Paychex Securities Corporation	FED KAUFMANN C	802
Paychex Securities Corporation	FED BOND C	1,706
Paychex Securities Corporation	FED PRDNT ABS RET	160
Paychex Securities Corporation	VANGRD MID CAP ID	1,019
Paychex Securities Corporation	VANGRD MC GR IND	205
Paychex Securities Corporation	VANGRD MORGAN GR	5,482
Paychex Securities Corporation	VANGRD SMCP GR ID	2,193
Paychex Securities Corporation	VANGRD SMCP VL ID	5,708
Paychex Securities Corporation	VANGRD S/T TREAS	143
Paychex Securities Corporation	VANGRD GR IDX	401
Paychex Securities Corporation	VANGRD INFL-PROT	214
Paychex Securities Corporation	VANGRD INTM BD ID	11,927
Paychex Securities Corporation	VANGRD INTTM INV-	3,379
Paychex Securities Corporation	VANGRD INT-TM US	3,324
Paychex Securities Corporation	VANGRD LIFEST CON	153
Paychex Securities Corporation	VANGRD LONGTM BD	291
Paychex Securities Corporation	VANGRD 500 INDEX	6,442
Paychex Securities Corporation	VANGRD DIVIDEND G	16,469
Paychex Securities Corporation	VANGRD EQUITY-INC	11,422
Paychex Securities Corporation	VANGRD FTSE SOC I	14,067
Paychex Securities Corporation	VANGRD GLOBAL EQU	1,227
Paychex Securities Corporation	VANGRD GR & INC	153
Paychex Securities Corporation	VANGRD GROWTH EQU	15,462
Paychex Securities Corporation	VANGRD TARG RET 2	11,453
Paychex Securities Corporation	VANGRD TOTAL BD I	71
Paychex Securities Corporation	VANGRD U.S. GR	815
Paychex Securities Corporation	VANGRD U.S. VALUE	11,089
Paychex Securities Corporation	VANGRD WELLESLEY	93,501
Paychex Securities Corporation	VANGRD WINDSOR	8,096
Paychex Securities Corporation	FED STRAT INCOME	1,702
Paychex Securities Corporation	FED US GOVT SEC C	836
Total Investments		$ 249,922

SYSINTELLI INC.
NOTES TO THE FINANCIAL STATEMENTS
DECEMBER 31, 2013

Note 1 - Nature of Business and Significant Accounting Policies

A. Description of Plan

Volume Submitter Profit Sharing Plan with CODA - the Plan adopted by Sysintelli Inc. is acceptable under section 401 of the Internal Revenue Code for use by employers for the benefit of their employees. The following description of the Sysintelli Inc. 401(k) Plan provides only general information. Participants should refer to the plan agreement for a more complete description of the plan's provisions.

Nature of Activities

Sysintelli Inc. is a global software development and consulting firm. The company develops, delivers and supports enterprise wide IT solutions to their customers. They have certified experts from all areas of software development working all over the world as a part of their team, providing efficient solutions for varied business needs, such as, Software Development and Deployment, Research and Development, Engineering Design and development etc.

General

The plan is a defined contribution plan covering all full-time employees of Sysintelli Inc. Employees aged 21 and older are eligible to participate in the plan. 1000 Hours of Service shall be required to constitute a Year of Eligibility Service.

Contributions

Each year participants may contribute up to 96% of annual compensation in increment of 1% as defined in the plan. The law limits the amount of 401(k) elective deferral contributions in any tax year. Participants who have attained age 50 before the end of the plan year are eligible to make catch-up contributions. Participants direct the investment of their contributions into various investment options offered by the plan. The plan currently offers various mutual funds as investment options for participants. Sysintelli Inc. contributes additional profit-sharing amounts at the option of the board of directors. Contributions are subject to certain limitations.

Participant Accounts

Each participant's account is credited with the participant's contribution and allocations of (a) the Employer Profit Sharing Contribution and (b) plan earnings and charged with an allocation of administrative expenses. Allocations are based on participant earnings or account balances as defined. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

Note 1 - Nature of Business and Significant Accounting Policies - Continued

Vesting

Participants are vested in the range of 20%-100% progressively on completing two years of service. A participant is 100 percent vested after six years of credited service. 1000 Hours of Service shall be required to constitute a Year of Vesting Service.

Participant Loans

Loans shall be made available to all Participants on a reasonably equivalent basis. Loans must be adequately secured and bear a reasonable interest rate. No Participant loan shall exceed the Present Value of the vested portion of a Participant's Individual Account. If the Participant's Individual Account contains both Pre-Tax Elective Deferrals and Roth Elective Deferrals, the specific rules governing the loan program may also designate the extent to which Pre-Tax Elective Deferrals, Roth Elective Deferrals, or a combination of both will 1) be used to calculate the maximum amount available for a loan, or 2) be available as a source from which loan proceeds may be taken or which may be used as security for a loan. To the extent permitted by law and related regulations, these rules established by the Plan Sponsor may specify the ordering rules to be applied in the event of defaulted loan.

Payment of Benefits

A Participant's Elective Deferrals, Qualified Nonelective Contributions, Qualified Matching Contributions, and earnings attributable to these contributions shall be distributed because of the Participant's severance from employment. A Participant who has not incurred a Severance from Employment is entitled to request an in-service withdrawal from the Plan of that portion of the Participant's Individual Account attributable to Elective Deferrals, Qualified Nonelective Contributions, and Qualified Matching Contributions if the participant has attained age 59½. In-service distributions will be available from Pre-Tax and/or Roth Elective Deferrals.

Forfeited Accounts

At December 31, 2013 there were no forfeited nonvested accounts.

B. Basis of Presentation and Accounting

The financial statements of the plan are prepared on the accrual basis of accounting. Investment contracts held by a defined-contribution plan are required to be reported at fair value. However, contract value is the relevant measurement attribute for that portion of the net assets available for benefits of a defined-contribution plan attributable to fully benefit-responsive investment contracts because contract value is the amount participants would receive if they were to initiate permitted transactions under the terms of the plan. The Statement of Net Assets Available for Benefits presents the fair value of the investment contracts as well as the fully benefit-responsive investment contracts from fair value to contract value. The Statement of Changes in Net Assets Available for Benefits is prepared on a contract value basis.

SYSINTELLI INC.
NOTES TO THE FINANCIAL STATEMENTS
DECEMBER 31, 2013

Note 1 - Nature of Business and Significant Accounting Policies - Continued

Use of Estimates

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

Investment Valuation and Income Recognition

The plan's investments are stated at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date.

Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded on the accrual basis. Net appreciation includes the plan's gains and losses on investments bought and sold as well as held during the year.

Payment of Benefits

Benefits are recorded when paid.

Operating Expenses

All expenses of maintaining the plan are paid by the Company. A portion of the administrative cost is distributed amongst participants.

C. Investments

The plan's investments are held in a mutual fund by the Paychex, the plan custodian. The following presents investments that represent 5 percent or more of the plan's net assets.

Investments		
VANGRD PRIME MMKT	$	15,820
VANGRD DIVIDEND G		16,469
VANGRD FTSE SOC I		14,067
VANGRD GROWTH EQU		15,462
VANGRD WELLESLEY INC		93,501
Total		155,319

During 2013, the plan's investments (including investments bought, sold, and held during the year) appreciated by $ 15,859 as follows:

Net Change in Fair value		
Registered Investment Companies	$	15,859

Note 1 - Nature of Business and Significant Accounting Policies - Continued

D. Fair Value Measurements

Financial Accounting Standards Board (FASB) Statement No. 157, Fair Value Measurements, establishes a framework for measuring fair value. The plan values its assets and liabilities in accordance with the provisions of FASB Statement No. 157.

E. Plan Termination

Although it has not expressed any intent to do so, Sysintelli Inc. has the right under the plan to discontinue its contributions at any time and to terminate the plan subject to the provisions of ERISA. In the event of plan termination, participants will become 100% vested in their accounts. Any unallocated assets of the plan shall be allocated to participant accounts and distributed in such a manner as SMASE may determine.

G. Reconciliation of Financial Statements to Form 5500

The following is a reconciliation of net assets available for benefits per the financial statements at December 31, 2013 and as per Form 5500:

	2013
Net assets available for benefits per the financial statement	$ 249,922
Net assets available for benefits per the Form 5500	$ 249,922

The following is a reconciliation of benefits paid to participants per the financial statements for the year ended December 31, 2013 to Form 5500:

Benefits paid to participants per the financial statements	$ 9,826
Benefits paid to participants per the Form 5500	$ 9,826

H. 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 statement of net assets available for benefits.