

Form 5500 Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Annual Return/Report of Employee Benefit Plan This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6047(e), 6057(b), and 6058(a) of the Internal Revenue Code (the Code). ▶ Complete all entries in accordance with the instructions to the Form 5500.	OMB Nos. 1210-0110 1210-0089 2015 This Form is Open to Public Inspection
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Part I	Annual Report Identification Information
For calendar plan year 2015 or fiscal plan year beginning <u>09/01/2015</u> and ending <u>08/31/2016</u>	
A This return/report is for:	☐ a multiemployer plan; ☐ a multiple-employer plan (Filers checking this box must attach a list of participating employer information in accordance with the form instructions); or ☒ a single-employer plan; ☐ a DFE (specify) _____
B This return/report is:	☐ the first return/report; ☐ the final return/report; ☐ an amended return/report; ☐ a short plan year return/report (less than 12 months).
C If the plan is a collectively-bargained plan, check here.	☐
D Check box if filing under:	☒ Form 5558; ☐ automatic extension; ☐ the DFVC program; ☐ special extension (enter description)

Part II	Basic Plan Information —enter all requested information
1a Name of plan <u>RETIREMENT PLAN FOR EMPLOYEES OF AAA NORTHWEST OHIO</u>	1b Three-digit plan number (PN) ▶ <u>012</u>
	1c Effective date of plan <u>09/28/1960</u>
2a Plan sponsor's name (employer, if for a single-employer plan) Mailing address (include room, apt., suite no. and street, or P.O. Box) City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions) <u>AAA CLUB ALLIANCE INC</u> <u>CORPORATE TAX DEPARTMENT</u> <u>ONE RIVER PLACE</u> <u>WILMINGTON, DE 19801-5125</u>	2b Employer Identification Number (EIN) <u>23-0758010</u> 2c Plan Sponsor's telephone number <u>302-299-4356</u> 2d Business code (see instructions) <u>488990</u>

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

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

SIGN HERE	<u>Filed with authorized/valid electronic signature.</u>	<u>06/12/2017</u>	<u>DEBRA KING</u>
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	<u>Filed with authorized/valid electronic signature.</u>	<u>06/15/2017</u>	<u>MICHAEL SUMSKY</u>
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE
Preparer's name (including firm name, if applicable) and address (include room or suite number)			Preparer's telephone number

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

Form 5500 (2015)
v. 150123

3a Plan administrator's name and address ☐ Same as Plan Sponsor AAA CLUB ALLIANCE INC CORPORATE TAX DEPARTMENT 1 RIVER PL WILMINGTON, DE 19801-5125	3b Administrator's EIN 23-0758010
	3c Administrator's telephone number 302-299-4356
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 AAA NOTHWEST OHIO	4b EIN 34-4374445 4c PN 001
5 Total number of participants at the beginning of the plan year	5 190
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) 56
a(2) Total number of active participants at the end of the plan year	6a(2) 47
b Retired or separated participants receiving benefits.....	6b 58
c Other retired or separated participants entitled to future benefits.....	6c 82
d Subtotal. Add lines 6a(2) , 6b , and 6c	6d 187
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.....	6e 3
f Total. Add lines 6d and 6e	6f 190
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item).....	6g
h Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested	6h 8
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	7
8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions: 1A	
b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristics Codes in the instructions:	
9a Plan funding arrangement (check all that apply) (1) ☐ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor	9b Plan benefit arrangement (check all that apply) (1) ☐ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor
10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)	
a Pension Schedules (1) ☒ R (Retirement Plan Information) (2) ☐ MB (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary (3) ☒ SB (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary	b General Schedules (1) ☒ H (Financial Information) (2) ☐ I (Financial Information – Small Plan) (3) ☐ A (Insurance Information) (4) ☒ C (Service Provider Information) (5) ☐ D (DFE/Participating Plan Information) (6) ☐ G (Financial Transaction Schedules)

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

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

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

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

Receipt Confirmation Code _____

<div>SCHEDULE SB (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation</div>	<div>Single-Employer Defined Benefit Plan Actuarial Information</div> <div>This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6059 of the Internal Revenue Code (the Code).</div> <div>File as an attachment to Form 5500 or 5500-SF.</div>	<div>OMB No. 1210-0110</div> <div>2015</div> <div>This Form is Open to Public Inspection</div>
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For calendar plan year 2015 or fiscal plan year beginning 09/01/2015 and ending 08/31/2016

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

<div>A Name of plan RETIREMENT PLAN FOR EMPLOYEES OF AAA NORTHWEST OHIO</div>	<div>B Three-digit plan number (PN) 012</div>
<div>C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF AAA CLUB ALLIANCE INC</div>	<div>D Employer Identification Number (EIN) 23-0758010</div>

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

Part I Basic Information

1	Enter the valuation date: Month 09 Day 01 Year 2015	
2	Assets:	
	a Market value	2a 8043697
	b Actuarial value	2b 8215838
3	Funding target/participant count breakdown	
	(1) Number of participants	(2) Vested Funding Target
	(3) Total Funding Target	
	a For retired participants and beneficiaries receiving payment	56 3037921 3037921
	b For terminated vested participants	78 1390212 1390212
	c For active participants	56 2363745 2383394
	d Total	190 6791878 6811527
4	If the plan is in at-risk status, check the box and complete lines (a) and (b)	
	a Funding target disregarding prescribed at-risk assumptions	4a
	b Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been in at-risk status for fewer than five consecutive years and disregarding loading factor	4b
5	Effective interest rate	5 6.34%
6	Target normal cost	6 26162

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

<div>SIGN HERE</div>	<div>05/24/2017</div>
<div>Signature of actuary</div>	<div>Date</div>
<div>DAVID M DAVALA</div>	<div>17-07402</div>
<div>Type or print name of actuary</div>	<div>Most recent enrollment number</div>
<div>FINDLEY DAVIES, INC</div>	<div>216-875-1900</div>
<div>Firm name</div>	<div>Telephone number (including area code)</div>
<div>1300 E. 9TH STREET SUITE 850 CLEVELAND, OH 44114-1516</div>	
<div>Address of the firm</div>	

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

Part II Beginning of Year Carryover and Prefunding Balances		
	(a) Carryover balance	(b) Prefunding balance
7 Balance at beginning of prior year after applicable adjustments (line 13 from prior year)	0	623765
8 Portion elected for use to offset prior year's funding requirement (line 35 from prior year)		
9 Amount remaining (line 7 minus line 8)	0	623765
10 Interest on line 9 using prior year's actual return of <u>0.19%</u>		1185
11 Prior year's excess contributions to be added to prefunding balance:		
a Present value of excess contributions (line 38a from prior year)		407424
b(1) Interest on the excess, if any, of line 38a over line 38b from prior year Schedule SB, using prior year's effective interest rate of <u>6.55%</u>		26686
b(2) Interest on line 38b from prior year Schedule SB, using prior year's actual return		0
c Total available at beginning of current plan year to add to prefunding balance		434110
d Portion of (c) to be added to prefunding balance		434110
12 Other reductions in balances due to elections or deemed elections	0	0
13 Balance at beginning of current year (line 9 + line 10 + line 11d – line 12)	0	1059060

Part III Funding Percentages		
14 Funding target attainment percentage	14	105.06 %
15 Adjusted funding target attainment percentage	15	120.61 %
16 Prior year's funding percentage for purposes of determining whether carryover/prefunding balances may be used to reduce current year's funding requirement	16	105.15 %
17 If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage	17	%

Part IV Contributions and Liquidity Shortfalls					
18 Contributions made to the plan for the plan year by employer(s) and employees:					
(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees
09/10/2015	35000		04/12/2016	35000	0
10/15/2015	35000	0	05/20/2016	35000	0
12/11/2015	70000	0	06/21/2016	35000	0
01/08/2016	35000	0			
02/11/2016	35000	0			
03/10/2016	35000	0			
			Totals ►	18(b)	350000
				18(c)	0

19 Discounted employer contributions – see instructions for small plan with a valuation date after the beginning of the year:		
a Contributions allocated toward unpaid minimum required contributions from prior years.	19a	0
b Contributions made to avoid restrictions adjusted to valuation date	19b	0
c Contributions allocated toward minimum required contribution for current year adjusted to valuation date	19c	341227
20 Quarterly contributions and liquidity shortfalls:		
a Did the plan have a "funding shortfall" for the prior year? ☐ Yes ☒ No		
b If line 20a is "Yes," were required quarterly installments for the current year made in a timely manner? ☐ Yes ☐ No		
c If line 20a is "Yes," see instructions and complete the following table as applicable:		
Liquidity shortfall as of end of quarter of this plan year		
(1) 1st	(2) 2nd	(3) 3rd

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

21 Discount rate:				
a Segment rates:	1st segment: 4.72 %	2nd segment: 6.11 %	3rd segment: 6.81 %	☐ N/A, full yield curve used
b Applicable month (enter code).....				21b 0
22 Weighted average retirement age				22 67
23 Mortality table(s) (see instructions) ☒ Prescribed - combined ☐ Prescribed - separate ☐ Substitute				

Part VI Miscellaneous Items

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

Part VII Reconciliation of Unpaid Minimum Required Contributions For Prior Years

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

Part VIII Minimum Required Contribution For Current Year

31 Target normal cost and excess assets (see instructions):			
a Target normal cost (line 6)	31a	26162	
b Excess assets, if applicable, but not greater than line 31a	31b	26162	
32 Amortization installments:	Outstanding Balance	Installment	
a Net shortfall amortization installment	0	0	
b Waiver amortization installment	0	0	
33 If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____) and the waived amount	33		
34 Total funding requirement before reflecting carryover/prefunding balances (lines 31a - 31b + 32a + 32b - 33)...	34	0	
	Carryover balance	Prefunding balance	Total balance
35 Balances elected for use to offset funding requirement.....			0
36 Additional cash requirement (line 34 minus line 35)	36	0	
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)	37	341227	
38 Present value of excess contributions for current year (see instructions)			
a Total (excess, if any, of line 37 over line 36)	38a	341227	
b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances	38b	0	
39 Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37)	39	0	
40 Unpaid minimum required contributions for all years.....	40	0	

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

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

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

For calendar plan year 2015 or fiscal plan year beginning 09/01/2015 and ending 08/31/2016		
A Name of plan RETIREMENT PLAN FOR EMPLOYEES OF AAA NORTHWEST OHIO	B Three-digit plan number (PN) ▶	012
C Plan sponsor's name as shown on line 2a of Form 5500 AAA CLUB ALLIANCE INC	D Employer Identification Number (EIN) 23-0758010	

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

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

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

(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)

PRICEWATERHOUSECOOPERS LLP

2001 MARKET STREET
PHILADELPHIA, PA 19103

13-4008324

(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?
10	NONE	0	Yes ☐ No ☒	Yes ☐ No ☒	0	Yes ☐ No ☒

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

FINDLEYDAVIES

1300 EAST NINTH STREET, SUITE 850
CLEVELAND, OH 44114

34-1213174

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

THE TRUST COMPANY OF TOLEDO

1630 TIMBERWOLF DRIVE
HOLLAND, OH 43528

34-1661757

(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?
18 21 27 50 52 60	TRUSTEE	26569	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☒ No ☐

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

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

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

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

Part I Service Provider Information (continued)

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE H (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	Financial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ► File as an attachment to Form 5500.	OMB No. 1210-0110 2015 This Form is Open to Public Inspection
For calendar plan year 2015 or fiscal plan year beginning 09/01/2015 and ending 08/31/2016		
A Name of plan RETIREMENT PLAN FOR EMPLOYEES OF AAA NORTHWEST OHIO		B Three-digit plan number (PN) ► 012
C Plan sponsor's name as shown on line 2a of Form 5500 AAA CLUB ALLIANCE INC		D Employer Identification Number (EIN) 23-0758010

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		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)		
(2) Participant contributions	1b(2)		
(3) Other.....	1b(3)	15064	14299
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	387921	126835
(2) U.S. Government securities.....	1c(2)	1131024	1522862
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other.....	1c(3)(B)	1134839	978441
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)		
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)		
(9) Value of interest in common/collective trusts.....	1c(9)		
(10) Value of interest in pooled separate accounts.....	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds).....	1c(13)	5374849	5974445
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)		
(15) Other	1c(15)		

1d Employer-related investments:

		(a) Beginning of Year	(b) End of Year
(1) Employer securities	1d(1)		
(2) Employer real property	1d(2)		
e Buildings and other property used in plan operation	1e		
f Total assets (add all amounts in lines 1a through 1e)	1f	8043697	8616882

Liabilities

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

Net Assets

l Net assets (subtract line 1k from line 1f)	1l	8043697	8616882
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Part II Income and Expense Statement

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

Income**a Contributions:**

		(a) Amount	(b) Total
(1) Received or receivable in cash from: (A) Employers	2a(1)(A)	350000	
(B) Participants	2a(1)(B)		
(C) Others (including rollovers)	2a(1)(C)		
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		350000

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

(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	1011	
(B) U.S. Government securities	2b(1)(B)	25494	
(C) Corporate debt instruments	2b(1)(C)	34102	
(D) Loans (other than to participants)	2b(1)(D)		
(E) Participant loans	2b(1)(E)		
(F) Other	2b(1)(F)		
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		60607

(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)	193229	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		193229

(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)	2484246	
(B) Aggregate carrying amount (see instructions)	2b(4)(B)	2486348	
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)		-2102

(5) Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)		
(B) Other	2b(5)(B)	344317	
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		344317

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		
c Other income	2c		
d Total income. Add all income amounts in column (b) and enter total	2d		946051

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	346297	
(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)		346297
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions)	2g		
h Interest expense	2h		
i Administrative expenses: (1) Professional fees	2i(1)	26569	
(2) Contract administrator fees	2i(2)		
(3) Investment advisory and management fees	2i(3)		
(4) Other	2i(4)		
(5) Total administrative expenses. Add lines 2i(1) through (4)	2i(5)		26569
j Total expenses. Add all expense amounts in column (b) and enter total	2j		372866

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		573185
l Transfers of assets:			
(1) To this plan	2l(1)		
(2) From this plan	2l(2)		

Part III Accountant's Opinion

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

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

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

b Did the accountant perform a limited scope audit pursuant to 29 CFR 2520.103-8 and/or 103-12(d)?

☒ Yes ☐ No

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

(1) Name: PRICEWATERHOUSECOOPERS LLP

(2) EIN: 13-4008324

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

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

Part IV Compliance Questions

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

During the plan year:

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

	Yes	No	N/A	Amount
c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)		X		
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)		X		
e Was this plan covered by a fidelity bond?	X			5000000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		X		
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?		X		
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?		X		
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	X			
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked, and see instructions for format requirements.)	X			
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?		X		
l Has the plan failed to provide any benefit when due under the plan?		X		
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)		X		
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.				
o Did the plan trust incur unrelated business taxable income?		X		
p Were in-service distributions made during the plan year?		X		

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

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

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

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

Part V Trust Information

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

SCHEDULE R (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Retirement Plan Information This schedule is required to be filed under section 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110 2015 This Form is Open to Public Inspection.
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For calendar plan year 2015 or fiscal plan year beginning 09/01/2015 and ending 08/31/2016

A Name of plan <u>RETIREMENT PLAN FOR EMPLOYEES OF AAA NORTHWEST OHIO</u>	B Three-digit plan number (PN) ▶ <u>012</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>AAA CLUB ALLIANCE INC</u>	D Employer Identification Number (EIN) <u>23-0758010</u>

Part I	Distributions
---------------	----------------------

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

1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions.....	1	<u>0</u>
2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits): EIN(s): <u>34-1661757</u>		
Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.		
3 Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year.....	3	<u>0</u>

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

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

Part III	Amendments
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9 If this is a defined benefit pension plan, were any amendments adopted during this plan year that increased or decreased the value of benefits? If yes, check the appropriate box. If no, check the "No" box.	☐ Increase	☐ Decrease	☐ Both	☒ No
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Part IV	ESOPs (see instructions). If this is not a plan described under Section 409(a) or 4975(e)(7) of the Internal Revenue Code, skip this Part.
----------------	---

10 Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan?	☐ Yes	☐ No
11 a Does the ESOP hold any preferred stock?	☐ Yes	☐ No
b If the ESOP has an outstanding exempt loan with the employer as lender, is such loan part of a "back-to-back" loan? (See instructions for definition of "back-to-back" loan.)	☐ Yes	☐ No
12 Does the ESOP hold any stock that is not readily tradable on an established securities market?	☐ Yes	☐ No

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

Schedule R (Form 5500) 2015
v. 150123

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

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

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

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

Retirement Plan for Employees of AAA Northwest Ohio

**Financial Statements and Supplemental Schedules
August 31, 2016 and 2015**

Retirement Plan for Employees of AAA Northwest Ohio

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* Other supplemental schedules required by Section 2520.103-10 of the Department of Labor Rules and Regulations for Reporting and Disclosures under ERISA have been omitted because they are not applicable.



Report of Independent Auditors

To the Administrator of the Retirement Plan
for Employees of AAA Northwest Ohio

Report on the Financial Statements

We were engaged to audit the accompanying financial statements of Retirement Plan for Employees of AAA Northwest Ohio (the "Plan"), which comprise the statement of net assets available for benefits as of August 31, 2016, and the related statement of changes in net assets available for benefits for the year ended August 31, 2016, 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 the 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.

Auditors' Responsibility for the 2016 Financial Statements

Our responsibility is to express an opinion on the 2016 financial statements based on conducting the audit in accordance with auditing standards generally accepted in the United States of America. Because of the matters 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 on the 2016 financial statements.

Basis for Disclaimer of Opinion on the 2016 Financial Statements

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 Note 3, which was certified by The Trust Company of Toledo, the trustee of the Plan, except for comparing such information with the related information included in the 2016 financial statements. We have been informed by the plan administrator that the trustee holds the Plan's investment assets and executes investment transactions. The plan administrator has obtained a certification from the



trustee as of and for the year ended August 31, 2016 that the information provided to the plan administrator by the trustee is complete and accurate.

Disclaimer of Opinion on the 2016 Financial Statements

Because of the significance of the matter described in the Basis for Disclaimer of Opinion paragraph, we have not been able to obtain sufficient appropriate audit evidence to provide a basis for an audit opinion on the 2016 financial statements. Accordingly, we do not express an opinion on the 2016 financial statements as a whole.

Other Matters

2015 Financial Statements

The financial statements of the Plan as of August 31, 2015 were audited by predecessor auditors before the effects of the disclosure adjustments discussed in Note 2. 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 the predecessor auditors not to perform and they did not perform, any auditing procedures with respect to the information summarized in Note 3, which was certified by The Trust Company of Toledo the trustee of the Plan, except for comparing such information with the related information included in the 2015 financial statements. Their report, dated January 18, 2016, indicated that (a) because of the significance of the information that they did not audit, they were not able to obtain sufficient appropriate audit evidence to provide a basis for an audit opinion and accordingly, they did not express an opinion on the 2015 financial statements and (b) the form and content of the information included in the 2015 financial statements other than that derived from the information certified by the trustee, were 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.

Supplementary Information

The supplemental Schedule of Assets (Held at End of Year) as of August 31, 2016 and Schedule of Reportable Transactions for the year ended August 31, 2016 are required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 and are presented for the purpose of additional analysis and are not a required part of the financial statements. Because of the significance of the matter described in the Basis for Disclaimer of Opinion paragraph, we do not express an opinion on these supplemental schedules.



Report on Form and Content in Compliance With DOL Rules and Regulations 2016

The form and content of the information included in the 2016 financial statements and supplemental schedules, other than that derived from the information certified by the trustee, have been audited by us in accordance with auditing standards generally accepted in the United States of America and, in our opinion, are presented in compliance with the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974.

PricewaterhouseCoopers LLP

Philadelphia, Pennsylvania

June 12, 2017

Retirement Plan for Employees of AAA Northwest Ohio
Statements of Net Assets Available for Benefits
August 31, 2016 and 2015

	2016	2015
Assets		
Investments at fair value		
Mutual funds	\$ 5,974,445	\$ 5,374,849
U.S. government and agency obligations	1,522,862	1,131,024
Corporate bonds	978,441	1,134,839
Money market funds	26,835	272,921
Interest bearing cash	<u>100,000</u>	<u>115,000</u>
Total investments at fair value	8,602,583	8,028,633
Receivables		
Accrued income	<u>14,299</u>	<u>15,064</u>
Net assets available for benefits	<u>\$ 8,616,882</u>	<u>\$ 8,043,697</u>

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

Retirement Plan for Employees of AAA Northwest Ohio
Statements of Changes in Net Assets Available for Benefits
Years Ended August 31, 2016 and 2015

	2016	2015
Additions		
Net appreciation (depreciation) in the fair value of investments	\$ 342,215	\$ (272,042)
Interest	60,607	63,139
Dividends	193,229	223,859
Total investment income	596,051	14,956
Employer contributions	350,000	420,000
Total additions	946,051	434,956
Deductions		
Benefits paid	346,297	337,362
Administrative expenses	26,569	26,162
Total deductions	372,866	363,524
Net increase	573,185	71,432
Net assets available for benefits		
Beginning of year	8,043,697	7,972,265
End of year	\$ 8,616,882	\$ 8,043,697

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

Retirement Plan for Employees of AAA Northwest Ohio

Notes to Financial Statements

August 31, 2016 and 2015

1. Description of Plan

The following brief description of the Retirement Plan for Employees of AAA Northwest Ohio (the "Plan") is provided for general information purposes only. Information about the Plan agreement, the vesting and benefit provisions, and the PBGC's benefit guarantee is contained in the Plan Document and Summary Plan Description (SPD). Copies of the Plan Document and SPD pamphlet are available from the Pension Committee. Participants should refer to the Plan Document and SPD agreement for more complete information.

The Retirement Plan for Employees of Northwest Ohio (the Plan) is a defined benefit plan established for the principal purpose of providing the employees of AAA Northwest Ohio, Automobile Club Insurance Agency of Toledo, Inc., Northwest Ohio Auto Repair, LLC, and Northwest Ohio Towing, LLC, (collectively "AAA")

In August 2010 the Board of Trustees of AAA Northwest voted to freeze the Plan effective December 31, 2010 with regards to participation, compensation, and credited service. Participants age 50 and over as of that date who had 10 years or more of credited service may accrue up to an additional 5 years of credited service; however the monthly average compensation for calculation of the monthly pension benefit (see below) will be calculated as if the participant was terminated as of December 31, 2010. No new participants will be allowed to enter the plan after December 31, 2010, but existing participants will continue to earn years of service for vesting purposes.

Effective October 1, 2015 AAA merged with AAA Allied Group, Inc. ("Allied"). Under the merger agreement, Allied is the surviving entity and AAA is no longer a separately existing entity. On January 1, 2016 Allied merged with AAA Mid-Atlantic Inc. Under the merger agreement Allied is no longer a separate entity and the new company was renamed Auto Club Alliance, Inc. ("ACA") or (the "Company"). These changes in the Plan sponsor have no direct impact on the operations of the Plan.

The Plan is administered by the Company's Pension Committee ("Committee"), which is a committee of the board of directors of the Company. The Committee has overall responsibility for the operation and administration of the Plan. The Committee determines the appropriateness of the Plan's investment offerings, monitors investment performance and reports to the Plan's Board of Trustees.

Funding Policy

ACA contributes such amounts as are necessary to provide assets sufficient to meet the benefits to be paid to Plan participants. Employer contributions are made in amounts sufficient to fund the Plan's normal cost on a current basis and to fund prior service cost plus interest thereon over a period of seven years. The Plan has met the minimum funding requirements of the Employee Retirement Income Security Act of 1974, as amended ("ERISA").

Pension Benefits

Participants are entitled to monthly pension beginning at normal retirement (the later of attaining age 65 or the completion of 5 years of service in the Plan), in the amount equal to the sum of 1.30% of Plan compensation plus 0.65% of Plan compensation in excess of covered compensation multiplied by the number of years of credited service. Plan compensation is defined by the Plan agreement as the monthly average of the highest 5 consecutive annual compensation amounts. Covered compensation is defined by the Plan agreement as the monthly average of the social security taxable wage bases in the 35 consecutive calendar years that end with the year the employee attains social security retirement age. A year of service is credited to a participant for

Retirement Plan for Employees of AAA Northwest Ohio

Notes to Financial Statements

August 31, 2016 and 2015

each Plan year the participant completes 1,000 hours of service after attaining the age of 21. Years of credited service cannot exceed 35 years and participants may be credited for employment at other AAA clubs under certain conditions.

The Plan provides for normal retirement benefits commencing at age 65, or reduced benefits at early retirement age (ages 60-64 with 5 years of service), and permits late retirement. If the present value of the participant's vested portion of their accrued benefit does not exceed \$1,000, payment will be made in a lump-sum without the participant's consent.

At retirement, participants choose from a number of life annuity options or installment payments, with certain limitations described by the Plan. If a participant dies prior to the completion of 120 monthly payments, such payments will be continued to the participant's beneficiary until the total number of payments reaches 120, subject to certain provisions.

Death and Disability Benefits

A vested participant who dies prior to receiving benefits under the Plan and is married at the time of death is entitled to a benefit payable to their spouse in the form of a 50% surviving spouse annuity. If an active participant, prior to attaining age 65 and with a vested balance in the Plan, becomes totally and permanently disabled, a disability pension calculated in a manner similar to an early retirement pension is paid to the participant.

Plan Termination

In the event of termination of the Plan, all benefits accrued to the date of termination, to the extent then funded, will be nonforfeitable. Any remaining assets will be allocated in accordance with priorities as set forth in the Plan document. The Pension Benefit Guaranty Corporation (PBGC) guarantees the payment of nonforfeitable basic benefits subject to certain limitations prescribed by ERISA.

Administrative Expenses

AAA has the option of paying administrative expenses of the Plan or having the Plan pay them. The Plan paid expenses of \$26,569 and \$26,162 in 2016 and 2015, respectively.

Vesting

A participant becomes fully vested after five years of service or attaining the early retirement age of 60.

2. Summary of Significant Accounting Policies

Basis of Accounting

The accompanying financial statements have been prepared on the accrual basis of accounting.

Payment of Benefits

Benefits are recorded when paid.

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 amounts reported in the financial statements and accompanying notes and supplemental schedules. Actual results could differ from those estimates.

Retirement Plan for Employees of AAA Northwest Ohio

Notes to Financial Statements

August 31, 2016 and 2015

Investment Valuation and Income Recognition

The Plan's investments are stated at fair value. Fair value is defined as the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date (an exit price). The Plan's Pension Committee determines the Plan's valuation policies utilizing information provided by its investment advisers, custodians, and insurance company. See note 5 for further discussion and disclosures related to fair value measurements.

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

Accumulated plan benefits (Note 4) represent the actuarial present value of estimated future periodic payments, including lump-sum distributions that are attributable under the Plan's provisions to services rendered by the employees to the valuation date. Accumulated plan benefits include benefits expected to be paid to retired or terminated employees or their beneficiaries. Benefits payable under all circumstances—retirement, death, disability, and termination of employment—are included, to the extent they are deemed attributable to employee services rendered to the valuation date.

Subsequent Events

Management evaluated subsequent events for the Plan through June 12, 2017, the date the financial statements were available to be issued.

New Accounting Pronouncements

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. Part II is 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. Management retrospectively adopted Part II of ASU 2015-12. Parts I and III are not applicable to this Plan.

3. Information Certified by Trustee

The plan administrator has elected the method of compliance permitted by Section 2520.103-8 of the Department of Labor's ("DOL") Rules and Regulations for Reporting and Disclosure under ERISA. All of the Plan's assets at August 31, 2016 and 2015 were held by The Trust Company of Toledo, the Trustee of the Plan. Accordingly, investment amounts on the Statements of Net Assets Available for Benefits at August 31, 2016 and 2015, investment income (including net appreciation (depreciation) in fair value of investments, interest and dividends) on the Statements of Changes in Net Assets for the years ended August 31, 2016 and 2015, and information included in the accompanying supplemental schedules of assets (held at end of year) and reportable transactions, have been compiled from statements certified as complete and accurate by the Trustee of the Plan in accordance with DOL Regulations Section 2520.103-8.

Retirement Plan for Employees of AAA Northwest Ohio

Notes to Financial Statements

August 31, 2016 and 2015

4. Actuarial Present Value of Accumulated Plan Benefits

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

At August 31, 2015, new mortality tables were available. Use of these tables were not used in the calculation of the Plan's accumulated plan benefits in 2015. The estimated impact of using these tables would be to increase the actuarial present value of accumulated benefit by approximately 5% at August 31, 2015. During 2016, the Plan utilized the updated mortality tables which resulted in an increase in the actuarial present value of accumulated plan benefits of \$211,568 as noted in the change in actuarial assumptions line item below.

The accumulated plan benefit as of September 1, 2016 and September 1, 2015 is as follows:

	2016	2015
Vested benefits:		
Participants currently receiving benefits	\$ 3,098,542	\$ 2,748,280
Other participants	3,348,735	3,202,807
Total vested benefits	6,447,277	5,951,087
Nonvested benefits	-	21,991
Total actuarial present value of accumulated plan benefits	\$ 6,447,277	\$ 5,973,078

The change in accumulated plan benefits is as follows:

	2016	2015
Actuarial present value of accumulated plan benefits at beginning of year	\$ 5,973,078	\$ 5,877,559
Increase (decrease) during the year attributed to		
Change in actuarial assumptions	211,568	-
Benefits accumulated	158,066	4,486
Increase for interest due to the decrease in discount rate	450,862	428,395
Benefits paid	(346,297)	(337,362)
Net increase	474,199	95,519
Total actuarial present value of accumulated plan benefits at end of year	\$ 6,447,277	\$ 5,973,078

Retirement Plan for Employees of AAA Northwest Ohio

Notes to Financial Statements

August 31, 2016 and 2015

Significant assumptions underlying the actuarial valuation are as follows:

	2016	2015
Discount rate	7.50 %	7.50 %
Mortality basis	RP-2014 Total Dataset Mortality adjusted backward to 2006 and projected with Scale MP-2016	RP-2000 static, non-generational mortality table with combined rates for annuitants and nonannuitants, projected by Scale AA to between 7 and 15 years beyond the year of the obligation and blended as described in Regulation 1.430(h)(3)
Average retirement age	67	67
Return on investments	7.50 %	8.51 %

These actuarial assumptions are based on the presumption that the Plan will continue. Were the Plan to terminate, different actuarial assumptions and other factors might be applicable in determining the actuarial present value of accumulated plan benefits. The actuarial present value of accumulated plan benefits and change in accumulated plan benefits is presented at August 31, 2016 and August 31, 2015, respectively. However, these disclosures use actuarial data as of September 1, 2016 and September 1, 2015, respectively. There is not a significant difference between the actuarial data as of August 31, 2016 and August 31, 2015 and September 1, 2016 and September 1, 2015, respectively.

5. Fair Value Measurements

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

- Level 1 Unadjusted quoted prices in active markets that are accessible to the reporting entity
- Level 2 Inputs other than quoted prices in active markets for identical assets and liabilities that are observable either directly or indirectly for substantially the full term of the asset or liability. Level 2 inputs include the following:
 - Quoted prices for similar assets and liabilities in active markets.
 - Quoted prices for identical or similar assets or liabilities in markets that are not active.
 - Observable inputs other than quoted prices that are used in the valuation of the asset or liabilities (e.g., interest rate and yield curve quotes at commonly quoted intervals).

Retirement Plan for Employees of AAA Northwest Ohio

Notes to Financial Statements

August 31, 2016 and 2015

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

Level 3 Unobservable inputs for the asset or liability (i.e., supported by little or no market activity). Level 3 inputs include management's own assumption about the assumptions that market participants would use in pricing the asset or liability (including assumptions about risk).

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

The following is a description of the valuation techniques and inputs used for each major class of assets measured at fair value.

Mutual Funds and Money Market Fund

Shares held in mutual funds and the money market fund are valued at quoted market prices that represent the net asset value ("NAV") of shares held by the Plan at year-end and are classified as Level 1. The NAV is based on the value of the underlying assets owned by each fund, less its liabilities then divided by the number of shares outstanding. Mutual funds held by the Plan are open-end mutual funds that are registered with the SEC. These funds are required to publish their daily NAV and to transact at that price. The mutual funds held by the Plan are deemed to be actively traded.

U.S. Government and Agency Obligations and Corporate Bonds

The U.S. government and agency obligations and corporate bonds are not actively traded or listed on an exchange. Therefore, fair values are estimated using a model-driven system to calculate prices and these investments are classified as Level 2. The model estimates the spread at which obligations and bonds of similar quality and maturity should be trading with respect to treasury securities of the same maturity. Based on their spread (yield difference versus treasury security) the value is then calculated using the standard yield-to-maturity formula.

Interest Bearing Cash

The fair value of the interest bearing cash is based on the prevailing interest yields for similar investments in the market and are classified as Level 1.

The following table sets forth by level, within the fair value hierarchy, the Plan's assets carried at fair value.

Description	Assets at Fair Value as of August 31, 2016			
	Level 1	Level 2	Level 3	Total
Mutual funds	\$ 5,974,445	\$ -	\$ -	\$ 5,974,445
U.S. Government and agency obligations		1,522,862	-	1,522,862
Corporate bonds	-	978,441	-	978,441
Money market funds	26,835	-	-	26,835
Interest bearing cash	100,000	-	-	100,000
Total assets at fair value	\$ 6,101,280	\$ 2,501,303	\$ -	\$ 8,602,583

Retirement Plan for Employees of AAA Northwest Ohio

Notes to Financial Statements

August 31, 2016 and 2015

Description	Assets at Fair Value as of August 31, 2015			
	Level 1	Level 2	Level 3	Total
Mutual funds	\$ 5,374,849	\$ -	\$ -	\$ 5,374,849
U.S. Government and agency obligations	-	1,131,024	-	1,131,024
Corporate bonds	-	1,134,839	-	1,134,839
Money market funds	272,921	-	-	272,921
Interest bearing cash	-	115,000	-	115,000
Total assets at fair value	<u>\$ 5,647,770</u>	<u>\$ 2,380,863</u>	<u>\$ -</u>	<u>\$ 8,028,633</u>

The Plan did not have any assets or liabilities measured at fair value on a nonrecurring basis as of August 31, 2016. We evaluate the significance of transfers between levels based upon the nature of the financial instrument and size of the transfer relative to total net assets available for benefits. The classification of the interest bearing cash account at August 31, 2015 has changed from a Level 2 to a Level 1 investment at August 31, 2016. This change has no impact on net assets available for benefits. There were no changes in the methodologies from August 31, 2015 to August 31, 2016.

6. Tax Status

The Internal Revenue Service has determined and informed ACA by a letter dated June 29, 2012 that the Plan and related trust are designed in accordance with applicable sections of the Internal Revenue Code ("IRC"). Although the Plan has been amended since receiving the determination letter, the Plan Administrator and the Plan's legal counsel believe that the Plan is designed and is currently being operated in compliance with the applicable requirements of the IRC and, therefore, believe the Plan is qualified and the related trust is tax exempt.

GAAP requires plan management to evaluate uncertain tax positions taken by the Plan. The financial statement effects of a tax position are recognized when the position is more likely than not, based on technical merits, to be sustained upon examination by the IRS. The plan administrator has analyzed the tax positions taken by the plan, and has concluded that as of August 31, 2016, there are no uncertain positions taken or expected to be taken. The Plan has no recognized no interest or penalties related to uncertain tax positions. The plan is subject to routine audits taken by taxing jurisdictions; however there are currently no audits for any tax periods in progress. The plan administrator believes it is no longer subject to income tax examinations for years prior to 2013.

7. Risks and Uncertainties

The Plan invests in various investment securities. Investment securities are exposed to various risks such as interest rate, market volatility 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 could occur in the near term and that those changes could affect the amounts reported in the statements of net assets available for benefits.

Retirement Plan for Employees of AAA Northwest Ohio

Notes to Financial Statements

August 31, 2016 and 2015

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

8. Related-Party Transactions

Fees paid by the Plan for party-in-interest transactions, including custodial, record keeping, and actuarial services amounted to \$26,569 and \$26,162 in 2016 and 2015, respectively. Fees paid by the Plan for investment management services are included as an increase in the net depreciation or a reduction of net appreciation in fair value of investments.

9. Plan Termination

ACA has the right under the Plan to discontinue contributions at any time and to terminate the Plan subject to certain provisions set forth in ERISA. In the event the Plan terminates, the net assets of the Plan would be allocated, as prescribed by ERISA and its related regulations, generally to provide the following benefits in the order indicated:

- a. Annuity benefits that former employees or their beneficiaries have been receiving for at least three years, or that employees eligible to retire for that three-year period would have been receiving if they had retired with benefits in the normal form of annuity under the Plan. The priority amount is limited to the lowest benefit that was payable (or would have been payable) during those three years. The amount is further limited to the lowest benefit that would be payable under Plan provisions in effect at any time during the five years preceding Plan termination.
- b. Other vested benefits insured by the Pension Benefit Guaranty Corporation ("PBGC", a U.S. government agency) up to the applicable limitations (discussed below).
- c. All other vested benefits (that is, vested benefits not insured by the PBGC).
- d. All nonvested benefits.

Certain benefits under the Plan are insured by the PBGC if the Plan terminates. Generally, the PBGC guarantees most vested normal age retirement benefits, early retirement benefits, and certain disability and survivor's pensions. However, the PBGC does not guarantee all types of benefits under the Plan, and the amount of benefit protection is subject to certain limitations. Vested benefits under the Plan are guaranteed at the level in effect on the date of the Plan's termination.

Whether all participants receive their benefits should the Plan terminate at some future time will depend on the sufficiency, at that time, of the Plan's net assets to provide for accumulated benefit obligations, and may also depend on the financial condition of the Plan sponsor and the level of benefits guaranteed by the PBGC.

Supplemental Schedules

Retirement Plan for Employees of AAA Northwest Ohio
Schedule H, Line 4i – Schedule of Assets (Held at End of Year)
August 31, 2016

(a)	(b)	(c) Description of Investment, Including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value	(d)	(e)
Identity of Issuer, Borrower, Lessor, or Similar Party			Cost*	Current Value*
Northern Prime Inst'l Obligations Total Money Market Fund		26,835 shares, Money market fund	\$ 26,835 26,835	\$ 26,835 26,835
Farmers & Merchant Money Market Funds Waterford Bank Money Market Total Interest Bearing Cash		50,000 Par Value, Interest bearing cash 50,000 Par Value, Interest bearing cash	50,000 50,000 100,000	50,000 50,000 100,000
Federal Farm Credit Bank		50,000 Par Value, 2.350%, due 11/05/2024	50,000	50,051
Federal Farm Credit Bank		50,000 Par Value, 1.660%, due 05/25/2021	50,000	50,061
Federal Farm Credit Bank		50,000 Par Value, 1.000%, due 08/23/2018	49,900	49,954
Federal Farm Credit Bank		50,000 Par Value, 3.500%, due 12/23/2023	56,916	56,321
Federal Farm Credit Bank		50,000 Par Value, 1.240%, due 11/12/2018	49,962	50,003
Federal Home Loan Bank		25,000 Par Value, 4.125%, due 03/13/2020	24,925	27,561
Federal Home Loan Bank		100,000 Par Value, 5.000%, due 11/17/2017	99,838	105,056
Federal Home Loan Bank		50,000 Par Value, 2.125%, due 06/09/2023	49,950	51,814
Federal Home Loan Bank		50,000 Par Value, 1.875%, due 03/13/2020	51,587	51,378
Federal Home Loan Bank		50,000 Par Value, 0.875%, due 08/08/2018	49,975	49,907
Federal Home Loan Bank		50,000 Par Value, 2.470%, due 06/23/2026	50,000	50,256
Federal Home Loan Bank		50,000 Par Value, 0.830%, due 07/25/2018	49,970	49,877
Federal Home Loan Bank		50,000 Par Value, 0.875%, due 08/05/2019	49,904	49,776
Federal Home Loan Bank		50,000 Par Value, 1.000%, due 06/09/2017	50,148	50,128
Federal National Mortgage Association		100,000 Par Value, .875%, due 05/21/2018	97,548	100,073
Federal National Mortgage Association		50,000 Par Value, 1.200%, due 01/29/2019	50,000	50,009
Federal National Mortgage Association		50,000 Par Value, 1.500%, due 02/20/2020	49,006	50,580
Federal National Mortgage Association		100,000 Par Value, 1.500%, due 04/28/2020	99,950	100,158
Federal National Mortgage Association		25,000 Par Value, 1.400%, due 03/29/2019	25,000	25,004
U.S. Treasury Notes		50,000 Par Value, 1.500%, due 01/31/2019	49,844	50,760
U.S. Treasury Notes		50,000 Par Value, 0.875%, due 07/31/2019	48,015	49,955
U.S. Treasury Notes		50,000 Par Value, 1.375%, due 02/28/2019	99,645	101,265
U.S. Treasury Notes		50,000 Par Value, 0.875%, due 06/15/2017	50,018	50,094
U.S. Treasury Notes		50,000 Par Value, 1.375%, due 05/31/2020	48,813	50,564
U.S. Treasury Notes		50,000 Par Value, 2.000%, due 09/30/2020	50,312	51,734
U.S. Treasury Notes		50,000 Par Value, 1.375%, due 07/31/2018	49,922	50,537
U.S. Treasury Notes		50,000 Par Value, 0.755%, due 03/31/2018	49,031	49,986
Total U.S. government and agency obligations			1,500,179	1,522,862

*Information has been certified as complete and accurate by The Trust Company of Toledo, the Plan Trustee.

Retirement Plan for Employees of AAA Northwest Ohio
Schedule H, Line 4i – Schedule of Assets (Held at End of Year)
August 31, 2016

(a)	(b)	(c)	(d)	(e)
		Description of Investment, Including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value	Cost*	Current Value*
Identity of Issuer, Borrower, Lessor, or Similar Party				
Anheuser-Busch Cos. Inc.		50,000 Par Value, 5.600%, due 03/01/2017	\$ 49,937	\$ 51,079
Archer Daniels		42,000 Par Value, 5.450%, due 03/15/2018	41,999	44,760
Berkshire Hathaway Inc.		50,000 Par Value, 3.460%, due 01/31/2022	50,175	53,937
Chevron Corp.		50,000 Par Value, 2.419%, due 11/17/2020	50,197	51,650
Colgate Palmolive Co.		50,000 Par Value, 2.625%, due 05/01/2017	49,975	50,581
Estee Lauder Co. Inc.		50,000 Par Value, 2.350%, due 08/15/2022	49,908	50,773
General Dynamics Corp.		50,000 Par Value, 1.000%, due 11/15/2017	49,900	49,977
Intel Corp.		50,000 Par Value, 1.350%, due 12/15/2017	50,000	50,224
Lowes Companies, Inc.		50,000 Par Value, 5.400%, due 10/15/2016	49,824	50,279
Microsoft Corp.		50,000 Par Value, 4.000%, due 02/08/2021	49,947	55,451
Microsoft Corp.		50,000 Par Value, 2.400%, due 08/08/2026	50,104	50,265
Microsoft Corp.		50,000 Par Value, 0.875%, due 11/15/2017	49,900	50,018
National Rural Utilities Coop		50,000 Par Value, 3.050%, due 02/15/2022	50,156	52,586
National Rural Utilities Coop		50,000 Par Value, 4.000%, due 11/15/2020	49,500	53,386
Oracle Corp.		50,000 Par Value, 1.200%, due 10/15/2017	50,181	50,147
Pepsico Inc.		50,000 Par Value, 5.000%, due 06/01/2018	49,743	53,364
Pfizer Inc.		50,000 Par Value, 6.200%, due 03/15/2019	49,949	55,950
Praxair Inc.		50,000 Par Value, 2.4500%, due 02/15/2022	50,000	51,325
The Walt Disney Company		50,000 Par Value, 2.750%, due 08/16/2021	49,956	52,689
Total corporate bonds			941,351	978,441
Alger Capital Appreciation		Mutual fund, 20,365 shares	591,635	545,381
Dodge & Cox Stock		Mutual fund, 2,095 shares	252,581	358,586
Fidelity Contrafund		Mutual fund, 9,190 shares	686,821	934,213
Vanguard Dividend Growth		Mutual fund, 20,138 shares	405,792	480,700
Vanguard Extended Market Index - Admiral		Mutual fund, 7,421 shares	240,806	511,069
Vanguard Institutional Index		Mutual fund, 11,700 shares	1,792,425	2,329,707
Harbor International		Mutual fund, 4,079 shares	158,712	250,173
Invesco International Growth		Mutual fund, 5,975 shares	212,513	193,239
MFS International New Discovery		Mutual fund, 5,781 shares	169,030	171,409
T Rowe Price Emerging Market		Mutual fund, 3,537 shares	110,379	118,887
T Rowe Price International New Asia		Mutual fund, 4,899 shares	86,632	81,081
Total mutual funds			4,707,326	5,974,445
Total Investments			\$ 7,275,691	\$ 8,602,583

*Information has been certified as complete and accurate by The Trust Company of Toledo, the Plan Trustee.

Retirement Plan for Employees of AAA Northwest Ohio
Schedule H, Line 4j – Schedule of Reportable Transactions
Year Ended August 31, 2016

(a)	(b)	(c)	(d)	(g)	(h)	(i)
Identity of Party Involved	Description of Asset	Purchase Price**	Selling Price**	Cost of Asset**	Current Value of Asset on Transaction Date**	Net Gain or (Loss)**
Category (iii) – A single transaction within the plan year in excess of 5% of the current value of the plan assets						
Northern Inst'l Prime Obligations Portfolio	Money market fund	\$ -	\$ 2,874,719	\$ 2,874,719	\$ 2,874,719	\$ -

There were no category (i), (ii) or (iv) reportable transactions during 2016.

*Columns (e) and (f) have been omitted as they were not applicable

**Information has been certified as complete and accurate by The Trust Company of Toledo, the Plan Trustee.

SCHEDULE SB (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	Single-Employer Defined Benefit Plan Actuarial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6059 of the Internal Revenue Code (the Code). ► File as an attachment to Form 5500 or 5500-SF.	OMB No. 1210-0110 2015 This Form is Open to Public Inspection
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For calendar plan year 2015 or fiscal plan year beginning 09/01/2015 and ending 08/31/2016

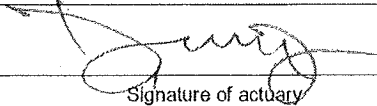
► Round off amounts to nearest dollar.

► Caution: A penalty of \$1,000 will be assessed for late filing of this report unless reasonable cause is established.

A Name of plan Retirement Plan For Employees Of AAA Northwest Ohio	B Three-digit plan number (PN) ►	012
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF AAA Club Alliance, Inc.	D Employer Identification Number (EIN) 23-0758010	
E Type of plan: ☒ Single ☐ Multiple-A ☐ Multiple-B		
F Prior year plan size: ☐ 100 or fewer ☒ 101-500 ☐ More than 500		

Part I Basic Information			
1 Enter the valuation date: Month <u>09</u> Day <u>01</u> Year <u>2015</u>			
2 Assets:			
a Market value	2a	8,043,697	
b Actuarial value	2b	8,215,738	
3 Funding target/participant count breakdown	(1) Number of participants	(2) Vested Funding Target	(3) Total Funding Target
a For retired participants and beneficiaries receiving payment.....	56	3,037,921	3,037,921
b For terminated vested participants.....	78	1,390,212	1,390,212
c For active participants.....	56	2,363,745	2,383,394
d Total.....	190	6,791,878	6,811,527
4 If the plan is in at-risk status, check the box and complete lines (a) and (b) ☐			
a Funding target disregarding prescribed at-risk assumptions	4a		
b Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been in at-risk status for fewer than five consecutive years and disregarding loading factor	4b		
5 Effective interest rate.....	5	6.34%	
6 Target normal cost.....	6	26,162	

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

SIGN HERE	 Signature of actuary	<u>05/24/2017</u> Date <u>1707402</u> Most recent enrollment number <u>216-875-1900</u> Telephone number (including area code)
David M. Davala Type or print name of actuary Findley Davies, Inc. Firm name 1300 E. 9th Street Suite 850 Cleveland OH 44114-1516 Address of the firm		

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

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

Schedule SB (Form 5500) 2015
v. 150123

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

21 Discount rate:			
a Segment rates:	1st segment: 4.72%	2nd segment: 6.11%	3rd segment: 6.81%
			☐ N/A, full yield curve used
b Applicable month (enter code)			21b 0
			22 67
22 Weighted average retirement age			
23 Mortality table(s) (see instructions) ☒ Prescribed - combined ☐ Prescribed - separate ☐ Substitute			

Part VI Miscellaneous Items

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

Part VII Reconciliation of Unpaid Minimum Required Contributions For Prior Years

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

Part VIII Minimum Required Contribution For Current Year

31 Target normal cost and excess assets (see instructions):		
a Target normal cost (line 6)	31a	26,162
b Excess assets, if applicable, but not greater than line 31a	31b	26,162
32 Amortization installments:		
a Net shortfall amortization installment	0	0
b Waiver amortization installment	0	0
33 If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____) and the waived amount		
		33
34 Total funding requirement before reflecting carryover/prefunding balances (lines 31a - 31b + 32a + 32b - 33)		34
		0
	Carryover balance	Prefunding balance
35 Balances elected for use to offset funding requirement	0	0
36 Additional cash requirement (line 34 minus line 35)		36
		0
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)		37
		341,227
38 Present value of excess contributions for current year (see instructions)		
a Total (excess, if any, of line 37 over line 36)	38a	341,227
b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances	38b	0
39 Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37)		39
		0
40 Unpaid minimum required contributions for all years		40
		0

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

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

Appendix B

Statement of Actuarial Assumptions and Methods

Interest Rates

24-month segment rates averaged through the end of August 2015 and published in September 2015:

	Pre MAP-21/ <u>HATFA</u>	Reflecting MAP-21/ <u>HATFA</u>
a. First Rate, Years 1-5	1.34%	4.72%
b. Second Rate, Years 5-20	4.03%	6.11%
c. Third Rate, Years 20+	5.06%	6.81%
d. Effective Interest Rate using the above rates	4.43%	6.34%
e. Interest rate for developing expected value of assets, (limited by statute to 6.99%)		7.50%
f. Intermediate Level Contribution		6.55%

Salary Scale

N/A

Mortality

RP-2000 static, non-generational Mortality Table as described in Regulation 1.430(h)(3) projected by Scale AA, to between 7 and 15 years beyond the year of the obligation, male and female, with combined rates for annuitants and nonannuitants, and applicable to years beginning in 2015.

Rates of Retirement

<u>Age</u>	<u>Rate</u>
60	5.00%
61	5.00
62	20.00
63	15.00
64	20.00
65	35.00
66-69	20.00
70	80.00
71+	100.00

Appendix B (Continued)

Rates of Retirement (Continued)

Weighted Average Retirement Age is 67. This is the average retirement age for someone eligible to retire at all ages using the assumed retirement rates and no other decrements.

Rates of Disability

100% of Table S-10 of the 11th Railroad Retirement Board Valuation.

Rates of Turnover

Based on age and length of service as follows:

Age	Completed Years of Service					
	0	1	2	3	4	5+
20	61%	55%	55%	55%	55%	55%
25	63	54	28	25	25	25
30	66	56	30	23	18	18
35	66	56	30	23	17	11
40	62	53	28	22	15	11
45	58	49	26	20	14	11
50	48	41	22	17	12	11
55	39	33	17	13	11	11

Assumptions Made In Valuing Spouse's Benefit

Eighty percent of the male and female employees included in the valuation are assumed to be married. These percentages are used as the probabilities that survivor benefits will be payable due to preretirement deaths. The wife is assumed to be three years younger than the husband.

Optional Form Election

All employees are assumed to elect the life annuity benefit with 120 payments guaranteed.

Annual Increases to Maximum Benefits and Plan Compensation Limits

N/A

Annual Increases to Social Security

N/A

Appendix B (Continued)

<i>Provision for Expenses</i>	The expected administrative (i.e. non-investment) expenses are assumed to equal actual expenses paid from plan assets during the prior year, if any. These were included in the Target Normal Cost for minimum contribution purposes.
<i>Standing Elections</i>	AAA has signed an election that provides for the automatic use of the Carryover and/or Prefunding Balance if necessary at the end of the plan year to meet the minimum funding requirement. AAA does <u>not</u> have a standing election to add the maximum amount possible to the Prefunding Balance for any future affected plan year.
<i>Asset Method</i>	Market Value of Assets plus interest adjusted accrued but unpaid contributions as of the valuation date plus an adjustment to defer full recognition of investment losses and gains over a two-year period. The investment (gain)/loss for every year equals the market value at the beginning of the year projected to the end of the year using the interest rate above, but no greater than the third segment rate for the plan year, minus the end of the year actual market value. The actuarial value of assets will be no less than 90% and no more than 110% of the market value (including interest-adjusted accrued but unpaid contributions). Note that due to the regulatory constraint on the interest rate, a characteristic of this asset valuation method is that, over time, it may be more likely to produce an actuarial value of assets that is less than the market value of assets.
<i>Employees Valued</i>	Only participants as of the valuation date were valued.
<i>Selection of Assumptions</i>	<p>The segment rates and mortality table used to determine minimum funding and funded ratios were based on methodology mandated by Internal Revenue Code and rates published by the Internal Revenue Service to affect it.</p> <p>A complete review of non-economic assumptions, to satisfy ASOP 35, was done for the September 1, 2010 valuation, and we monitor the gains and losses annually to ensure the assumptions are still reasonable.</p>

Appendix B (Continued)

***Changes in
Assumptions and
Methods since the Last
Actuarial Valuation***

The segmented interest rates used for determining the funding target were 4.99%, 6.32% and 6.99%. These rates were updated to the rates required for the current plan year and also reflect MAP-21/HATFA.

The mortality table for the funding target was changed as required under PPA '06.

***Justification for
Changes in Actuarial
Assumptions***

The only assumption changes were to prescribed actuarial assumptions or as a result of At-Risk status. Therefore, the plan did not need IRS approval to change assumptions and there is no need to disclose any "Change in Actuarial Assumptions."

Schedule SB, line 32 – Schedule of Shortfall Amortization Bases
Retirement Plan for Employees of AAA Northwest Ohio
September 1, 2015 Valuation
EIN/PN: 34-4374445 / 001

Schedule of Amortization Bases

	Plan Year Beginning			9/01/2015
	Date Established	Present Value of Payments	Remaining Years	Amortization Installment
Shortfall Amortization Bases	9/01/2015	\$ 0	7	\$ 0
	Total	\$ 0		\$ 0
Waiver Amortization Bases	9/01/2015	\$ 0		\$ 0

Appendix A

Summary of Principal Plan Provisions

<i>Plan Sponsor</i>	AAA Northwest Ohio
<i>EIN/PN</i>	34-4374445/001
<i>Effective Date</i>	September 28, 1960; amended and restated effective September 1, 2011.
<i>Plan Year</i>	The 12-month period beginning each September 1.
<i>Participation</i>	Each employee commences participation on the March 1 or September 1 coincident with or next following completion of one year of service and attainment of age 21. No new participants are permitted after December 31, 2010.
<i>Annual Compensation</i>	W-2 compensation earned during the plan year plus any contributions made by the participant to a 401(k) or 125 plan, as limited by IRC Section 401(a)(17).
<i>Plan Compensation</i>	The sum of the highest five consecutive Annual Compensation amounts divided by 60. This amount was frozen effective December 31, 2010.
<i>Social Security Covered Compensation</i>	The average of the Social Security Maximum Taxable Wage Bases for the 35-year period ending with the year in which Social Security Retirement Age is attained. Social Security Retirement Age is 65 for employees born before 1938, 67 for those born after 1954, and 66 for those born in between. This amount was frozen effective December 31, 2010.
<i>Grandfathered Group</i>	Participants who are at least age 50 and have at least 10 Years of Credited Service as of January 1, 2011, (known as the grandfathered group) may earn up to 5 additional Years of Credited Service (or until date of termination, whichever is earlier).

Appendix A (Continued)

Credited Service

A Year of Credited Service is granted for any Plan Year in which a participant is credited with at least 1,000 Hours of Service. This amount was frozen as of December 31, 2010 for all participants who are not in the grandfathered group.

Accrued Benefit

A monthly life annuity with 120 payments guaranteed starting at Normal Retirement Date (NRD) equal to 1.3% of Plan Compensation plus .65% of Plan Compensation in excess of Social Security Covered Compensation, if any, with such total multiplied by Years of Credited Service up to 35 years. This amount was frozen effective December 31, 2010 for those participants not in the grandfathered group.

Normal Retirement Benefit

Eligibility:

The later of age 65 and the fifth anniversary of the date the employee became a participant.

Monthly Benefit:

The Accrued Benefit.

Early Retirement Benefit

Eligibility:

Age 60.

Monthly Benefit:

The Accrued Benefit either deferred to NRD or commencing prior thereto but reduced by 1/156th for the first 36 months and by 1/288th for each of the next 24 months by which early retirement precedes NRD.

Appendix A (Continued)

Late Retirement Benefit

Eligibility:

The later of age 65 and the fifth anniversary of the date the employee became a participant.

Monthly Benefit:

The Accrued Benefit calculated as if late retirement date were NRD.

Termination Benefit

Eligibility:

Termination of employment prior to retirement after completion of at least five Years of Credited Service.

Monthly Benefit:

100% vested in his Accrued Benefit. The vested benefit is payable at NRD or in a reduced amount as early as age 60.

Death Benefit

Eligibility:

100% vested.

Monthly Benefit:

If married for at least one year on the date of death, the spouse receives a monthly benefit for life commencing at the time the participant would have been eligible for retirement. The benefit is equal to 50% of the benefit vested on the date of death, adjusted as appropriate for early commencement and the 50% Joint and Survivor Annuity form of payment.

Death benefits are payable to the estates of unmarried employees who die after reaching Normal Retirement but before terminating employment as if they had retired with the "life with 120 payments guaranteed" form of payment.

Appendix A (Continued)

<i>Top Heavy Provisions</i>	Special provisions relating to minimum benefit, vesting, etc. under IRC Section 416 will automatically become effective should the Plan become top-heavy.
<i>Optional Forms of Benefit</i>	<p><u>Life Annuity with Certain Period</u> – 0, 60, 120, or 180 months – payments monthly for the life of the participant with the first 0, 60, 120, or 180 months guaranteed.</p> <p><u>Joint and Survivor Annuity</u> – 50%, 67%, 75%, or 100% – payments monthly for the life of the participant with the specified percentage continuing to the surviving beneficiary upon the participant's death.</p> <p>The conversion factors are based on the 1984 Unisex Mortality Table and the PBGC immediate rate for each September of the plan year of distribution.</p>
<i>Benefits Payable as Lump Sums</i>	<p>This plan pays only small lump sums (those less than \$1,000) automatically.</p> <p>The conversion factors are based on the Applicable Mortality Table and the Applicable Interest Rate as required under IRC Section 417(e)(3) for each July preceding the plan year of distribution.</p>
<i>Funding of Plan</i>	The employer pays the entire cost.
<i>Maximum Benefit Limit</i>	The Internal Revenue Code Section 415 Maximum Benefit payable as a life annuity at Social Security Normal Retirement Age.
<i>Plan Compensation Limit</i>	The Section 401(a)(17) Maximum Compensation that can be recognized for benefit calculation purposes. Additionally, the \$200,000 pay limit is applied retroactively to years prior to September 1, 2002.
<i>Changes in Plan Provisions</i>	None.

Schedule SB, line 22 – Description of Weighted Average Retirement Age
Retirement Plan for Employees of AAA Northwest Ohio
September 1, 2015 Valuation
EIN/PN: 34-4374445 / 001

Rates of Retirement

<u>Age</u>	<u>Rate</u>
60	5.00%
61	5.00
62	20.00
63	15.00
64	20.00
65	35.00
66-69	20.00
70	80.00
71+	100.00

Weighted Average Retirement Age is 67. This is the average retirement age for someone eligible to retire at all ages using the assumed retirement rates and no other decrements.

SCHEDULE SB (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation</small>	Single-Employer Defined Benefit Plan Actuarial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6059 of the Internal Revenue Code (the Code). ► File as an attachment to Form 5500 or 5500-SF.	OMB No. 1210-0110 2015 This Form is Open to Public Inspection
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For calendar plan year 2015 or fiscal plan year beginning 09/01/2015 and ending 08/31/2016

► Round off amounts to nearest dollar.

► Caution: A penalty of \$1,000 will be assessed for late filing of this report unless reasonable cause is established.

A Name of plan Retirement Plan For Employees Of AAA Northwest Ohio	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:60%;">B Three-digit plan number (PN) ►</td> <td style="width:40%; text-align: center;">012</td> </tr> <tr> <td colspan="2" style="height: 20px;"> </td> </tr> </table>	B Three-digit plan number (PN) ►	012		
B Three-digit plan number (PN) ►	012				
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF AAA Club Alliance, Inc.	D Employer Identification Number (EIN) 23-0758010				

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

Part I Basic Information			
1 Enter the valuation date: Month <u>09</u> Day <u>01</u> Year <u>2015</u>			
2 Assets:			
a Market value	2a		8,043,697
b Actuarial value	2b		8,215,738
3 Funding target/participant count breakdown	(1) Number of participants	(2) Vested Funding Target	(3) Total Funding Target
a For retired participants and beneficiaries receiving payment.....	56	3,037,921	3,037,921
b For terminated vested participants.....	78	1,390,212	1,390,212
c For active participants.....	56	2,363,745	2,383,394
d Total.....	190	6,791,878	6,811,527
4 If the plan is in at-risk status, check the box and complete lines (a) and (b) ☐			
a Funding target disregarding prescribed at-risk assumptions	4a		
b Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been in at-risk status for fewer than five consecutive years and disregarding loading factor	4b		
5 Effective interest rate	5	6.34%	
6 Target normal cost.....	6	26,162	

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

SIGN HERE	 Signature of actuary	<u>05/24/2017</u> Date <u>1707402</u> Most recent enrollment number <u>216-875-1900</u> Telephone number (including area code)
<u>David M. Davala</u> Type or print name of actuary <u>Findley Davies, Inc.</u> Firm name <u>1300 E. 9th Street</u> <u>Suite 850</u> <u>Cleveland OH 44114-1516</u> Address of the firm		

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

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

21 Discount rate:			
a Segment rates:	1st segment: 4.72%	2nd segment: 6.11%	3rd segment: 6.81%
			☐ N/A, full yield curve used
b Applicable month (enter code)			21b 0
22 Weighted average retirement age			22 67
23 Mortality table(s) (see Instructions) ☒ Prescribed - combined ☐ Prescribed - separate ☐ Substitute			

Part VI Miscellaneous Items

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

Part VII Reconciliation of Unpaid Minimum Required Contributions For Prior Years

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

Part VIII Minimum Required Contribution For Current Year

31 Target normal cost and excess assets (see instructions):			
a Target normal cost (line 6)		31a	26,162
b Excess assets, if applicable, but not greater than line 31a		31b	26,162
32 Amortization installments:		Outstanding Balance	Installment
a Net shortfall amortization installment		0	0
b Waiver amortization installment		0	0
33 If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____) and the waived amount		33	
34 Total funding requirement before reflecting carryover/prefunding balances (lines 31a - 31b + 32a + 32b - 33)		34	0
	Carryover balance	Prefunding balance	Total balance
35 Balances elected for use to offset funding requirement	0	0	0
36 Additional cash requirement (line 34 minus line 35)		36	0
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)		37	341,227
38 Present value of excess contributions for current year (see instructions)			
a Total (excess, if any, of line 37 over line 36)		38a	341,227
b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances		38b	0
39 Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37)		39	0
40 Unpaid minimum required contributions for all years		40	0

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

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

Appendix A

Summary of Principal Plan Provisions

<i>Plan Sponsor</i>	AAA Northwest Ohio
<i>EIN/PN</i>	34-4374445/001
<i>Effective Date</i>	September 28, 1960; amended and restated effective September 1, 2011.
<i>Plan Year</i>	The 12-month period beginning each September 1.
<i>Participation</i>	Each employee commences participation on the March 1 or September 1 coincident with or next following completion of one year of service and attainment of age 21. No new participants are permitted after December 31, 2010.
<i>Annual Compensation</i>	W-2 compensation earned during the plan year plus any contributions made by the participant to a 401(k) or 125 plan, as limited by IRC Section 401(a)(17).
<i>Plan Compensation</i>	The sum of the highest five consecutive Annual Compensation amounts divided by 60. This amount was frozen effective December 31, 2010.
<i>Social Security Covered Compensation</i>	The average of the Social Security Maximum Taxable Wage Bases for the 35-year period ending with the year in which Social Security Retirement Age is attained. Social Security Retirement Age is 65 for employees born before 1938, 67 for those born after 1954, and 66 for those born in between. This amount was frozen effective December 31, 2010.
<i>Grandfathered Group</i>	Participants who are at least age 50 and have at least 10 Years of Credited Service as of January 1, 2011, (known as the grandfathered group) may earn up to 5 additional Years of Credited Service (or until date of termination, whichever is earlier).

Appendix A (Continued)

Credited Service

A Year of Credited Service is granted for any Plan Year in which a participant is credited with at least 1,000 Hours of Service. This amount was frozen as of December 31, 2010 for all participants who are not in the grandfathered group.

Accrued Benefit

A monthly life annuity with 120 payments guaranteed starting at Normal Retirement Date (NRD) equal to 1.3% of Plan Compensation plus .65% of Plan Compensation in excess of Social Security Covered Compensation, if any, with such total multiplied by Years of Credited Service up to 35 years. This amount was frozen effective December 31, 2010 for those participants not in the grandfathered group.

Normal Retirement Benefit

Eligibility:

The later of age 65 and the fifth anniversary of the date the employee became a participant.

Monthly Benefit:

The Accrued Benefit.

Early Retirement Benefit

Eligibility:

Age 60.

Monthly Benefit:

The Accrued Benefit either deferred to NRD or commencing prior thereto but reduced by 1/156th for the first 36 months and by 1/288th for each of the next 24 months by which early retirement precedes NRD.

Appendix A (Continued)

Late Retirement Benefit

Eligibility:

The later of age 65 and the fifth anniversary of the date the employee became a participant.

Monthly Benefit:

The Accrued Benefit calculated as if late retirement date were NRD.

Termination Benefit

Eligibility:

Termination of employment prior to retirement after completion of at least five Years of Credited Service.

Monthly Benefit:

100% vested in his Accrued Benefit. The vested benefit is payable at NRD or in a reduced amount as early as age 60.

Death Benefit

Eligibility:

100% vested.

Monthly Benefit:

If married for at least one year on the date of death, the spouse receives a monthly benefit for life commencing at the time the participant would have been eligible for retirement. The benefit is equal to 50% of the benefit vested on the date of death, adjusted as appropriate for early commencement and the 50% Joint and Survivor Annuity form of payment.

Death benefits are payable to the estates of unmarried employees who die after reaching Normal Retirement but before terminating employment as if they had retired with the "life with 120 payments guaranteed" form of payment.

Appendix A (Continued)

Top Heavy Provisions

Special provisions relating to minimum benefit, vesting, etc. under IRC Section 416 will automatically become effective should the Plan become top-heavy.

Optional Forms of Benefit

Life Annuity with Certain Period – 0, 60, 120, or 180 months – payments monthly for the life of the participant with the first 0, 60, 120, or 180 months guaranteed.

Joint and Survivor Annuity – 50%, 67%, 75%, or 100% – payments monthly for the life of the participant with the specified percentage continuing to the surviving beneficiary upon the participant's death.

The conversion factors are based on the 1984 Unisex Mortality Table and the PBGC immediate rate for each September of the plan year of distribution.

Benefits Payable as Lump Sums

This plan pays only small lump sums (those less than \$1,000) automatically.

The conversion factors are based on the Applicable Mortality Table and the Applicable Interest Rate as required under IRC Section 417(e)(3) for each July preceding the plan year of distribution.

Funding of Plan

The employer pays the entire cost.

Maximum Benefit Limit

The Internal Revenue Code Section 415 Maximum Benefit payable as a life annuity at Social Security Normal Retirement Age.

Plan Compensation Limit

The Section 401(a)(17) Maximum Compensation that can be recognized for benefit calculation purposes. Additionally, the \$200,000 pay limit is applied retroactively to years prior to September 1, 2002.

Changes in Plan Provisions

None.

Appendix B

Statement of Actuarial Assumptions and Methods

Interest Rates	24-month segment rates averaged through the end of August 2015 and published in September 2015:		
		Pre MAP-21/ <u>HATFA</u>	Reflecting MAP-21/ <u>HATFA</u>
	a. First Rate, Years 1-5	1.34%	4.72%
	b. Second Rate, Years 5-20	4.03%	6.11%
	c. Third Rate, Years 20+	5.06%	6.81%
	d. Effective Interest Rate using the above rates	4.43%	6.34%
	e. Interest rate for developing expected value of assets, (limited by statute to 6.99%)		7.50%
	f. Intermediate Level Contribution		6.55%
Salary Scale	N/A		
Mortality	RP-2000 static, non-generational Mortality Table as described in Regulation 1.430(h)(3) projected by Scale AA, to between 7 and 15 years beyond the year of the obligation, male and female, with combined rates for annuitants and nonannuitants, and applicable to years beginning in 2015.		
Rates of Retirement	<u>Age</u>	<u>Rate</u>	
	60	5.00%	
	61	5.00	
	62	20.00	
	63	15.00	
	64	20.00	
	65	35.00	
	66-69	20.00	
	70	80.00	
	71+	100.00	

Appendix B (Continued)

Rates of Retirement (Continued)

Weighted Average Retirement Age is 67. This is the average retirement age for someone eligible to retire at all ages using the assumed retirement rates and no other decrements.

Rates of Disability

100% of Table S-10 of the 11th Railroad Retirement Board Valuation.

Rates of Turnover

Based on age and length of service as follows:

Age	Completed Years of Service					
	0	1	2	3	4	5+
20	61%	55%	55%	55%	55%	55%
25	63	54	28	25	25	25
30	66	56	30	23	18	18
35	66	56	30	23	17	11
40	62	53	28	22	15	11
45	58	49	26	20	14	11
50	48	41	22	17	12	11
55	39	33	17	13	11	11

Assumptions Made In Valuing Spouse's Benefit

Eighty percent of the male and female employees included in the valuation are assumed to be married. These percentages are used as the probabilities that survivor benefits will be payable due to preretirement deaths. The wife is assumed to be three years younger than the husband.

Optional Form Election

All employees are assumed to elect the life annuity benefit with 120 payments guaranteed.

Annual Increases to Maximum Benefits and Plan Compensation Limits

N/A

Annual Increases to Social Security

N/A

Appendix B (Continued)

<i>Provision for Expenses</i>	The expected administrative (i.e. non-investment) expenses are assumed to equal actual expenses paid from plan assets during the prior year, if any. These were included in the Target Normal Cost for minimum contribution purposes.
<i>Standing Elections</i>	AAA has signed an election that provides for the automatic use of the Carryover and/or Prefunding Balance if necessary at the end of the plan year to meet the minimum funding requirement. AAA does <u>not</u> have a standing election to add the maximum amount possible to the Prefunding Balance for any future affected plan year.
<i>Asset Method</i>	Market Value of Assets plus interest adjusted accrued but unpaid contributions as of the valuation date plus an adjustment to defer full recognition of investment losses and gains over a two-year period. The investment (gain)/loss for every year equals the market value at the beginning of the year projected to the end of the year using the interest rate above, but no greater than the third segment rate for the plan year, minus the end of the year actual market value. The actuarial value of assets will be no less than 90% and no more than 110% of the market value (including interest-adjusted accrued but unpaid contributions). Note that due to the regulatory constraint on the interest rate, a characteristic of this asset valuation method is that, over time, it may be more likely to produce an actuarial value of assets that is less than the market value of assets.
<i>Employees Valued</i>	Only participants as of the valuation date were valued.
<i>Selection of Assumptions</i>	<p>The segment rates and mortality table used to determine minimum funding and funded ratios were based on methodology mandated by Internal Revenue Code and rates published by the Internal Revenue Service to affect it.</p> <p>A complete review of non-economic assumptions, to satisfy ASOP 35, was done for the September 1, 2010 valuation, and we monitor the gains and losses annually to ensure the assumptions are still reasonable.</p>

Appendix B (Continued)

***Changes in
Assumptions and
Methods since the Last
Actuarial Valuation***

The segmented interest rates used for determining the funding target were 4.99%, 6.32% and 6.99%. These rates were updated to the rates required for the current plan year and also reflect MAP-21/HATFA.

The mortality table for the funding target was changed as required under PPA '06.

***Justification for
Changes in Actuarial
Assumptions***

The only assumption changes were to prescribed actuarial assumptions or as a result of At-Risk status. Therefore, the plan did not need IRS approval to change assumptions and there is no need to disclose any "Change in Actuarial Assumptions."

Schedule SB, line 22 – Description of Weighted Average Retirement Age
Retirement Plan for Employees of AAA Northwest Ohio
September 1, 2015 Valuation
EIN/PN: 34-4374445 / 001

Rates of Retirement

<u>Age</u>	<u>Rate</u>
60	5.00%
61	5.00
62	20.00
63	15.00
64	20.00
65	35.00
66-69	20.00
70	80.00
71+	100.00

Weighted Average Retirement Age is 67. This is the average retirement age for someone eligible to retire at all ages using the assumed retirement rates and no other decrements.

Schedule SB, line 32 – Schedule of Shortfall Amortization Bases
 Retirement Plan for Employees of AAA Northwest Ohio
 September 1, 2015 Valuation
 EIN/PN: 34-4374445 / 001

Schedule of Amortization Bases

	Plan Year Beginning	9/01/2015		
	Date Established	Present Value of Payments	Remaining Years	Amortization Installment
Shortfall Amortization Bases	9/01/2015	\$ 0	7	\$ 0
	Total	\$ 0		\$ 0
Waiver Amortization Bases	9/01/2015	\$ 0		\$ 0

Schedule SB, Line 26 - Schedule of Active Participant Data

September 1, 2015 Valuation
Retirement Plan for Employees of AAA Northwest Ohio
(EIN: 34-4374445; PN: 001)

Attained Age	Years of Credited Service									
	Under 1	1 to 4	5 to 9	10 to 14	15 to 19	20 to 24	25 to 29	30 to 34	35 to 39	40 & up
Under 25	-	-	-	-	-	-	-	-	-	-
25 to 29	-	-	-	-	-	-	-	-	-	-
30 to 34	-	1 (*)	3 (*)	-	-	-	-	-	-	-
35 to 39	-	-	4 (*)	-	-	-	-	-	-	-
40 to 44	-	2 (*)	1 (*)	2 (*)	-	-	-	-	-	-
45 to 49	-	2 (*)	1 (*)	2 (*)	1 (*)	2 (*)	-	-	-	-
50 to 54	-	3 (*)	4 (*)	1 (*)	2 (*)	3 (*)	2 (*)	-	-	-
55 to 59	-	2 (*)	1 (*)	-	2 (*)	1 (*)	-	1 (*)	2 (*)	-
60 to 64	-	3 (*)	1 (*)	-	2 (*)	-	-	1 (*)	-	3 (*)
65 to 69	-	-	-	-	1 (*)	-	-	-	-	-
70 & up	-	-	-	-	-	-	-	-	-	-

* Average compensation is not shown since there are fewer than 1,000 active participants in this plan

Retirement Plan for Employees of AAA Northwest Ohio
Schedule H, Line 4j – Schedule of Reportable Transactions
Year Ended August 31, 2016

(a)	(b)	(c)	(d)	(g)	(h)	(i)
Identity of Party Involved	Description of Asset	Purchase Price**	Selling Price**	Cost of Asset**	Current Value of Asset on Transaction Date**	Net Gain or (Loss)**
Category (iii) – A single transaction within the plan year in excess of 5% of the current value of the plan assets						
Northern Inst'l Prime Obligations Portfolio	Money market fund	\$ -	\$ 2,874,719	\$ 2,874,719	\$ 2,874,719	\$ -

There were no category (i), (ii) or (iv) reportable transactions during 2016.

*Columns (e) and (f) have been omitted as they were not applicable

**Information has been certified as complete and accurate by The Trust Company of Toledo, the Plan Trustee.

Retirement Plan for Employees of AAA Northwest Ohio
Schedule H, Line 4i – Schedule of Assets (Held at End of Year)
August 31, 2016

(a)	(b)	(c) Description of Investment, Including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value	(d)	(e)
Identity of Issuer, Borrower, Lessor, or Similar Party			Cost*	Current Value*
Northern Prime Inst'l Obligations		26,835 shares, Money market fund	\$ 26,835	\$ 26,835
Total Money Market Fund			26,835	26,835
Farmers & Merchant Money Market Funds		50,000 Par Value, Interest bearing cash	50,000	50,000
Waterford Bank Money Market		50,000 Par Value, Interest bearing cash	50,000	50,000
Total Interest Bearing Cash			100,000	100,000
Federal Farm Credit Bank		50,000 Par Value, 2.350%, due 11/05/2024	50,000	50,051
Federal Farm Credit Bank		50,000 Par Value, 1.660%, due 05/25/2021	50,000	50,061
Federal Farm Credit Bank		50,000 Par Value, 1.000%, due 08/23/2018	49,900	49,954
Federal Farm Credit Bank		50,000 Par Value, 3.500%, due 12/23/2023	56,916	56,321
Federal Farm Credit Bank		50,000 Par Value, 1.240%, due 11/12/2018	49,962	50,003
Federal Home Loan Bank		25,000 Par Value, 4.125%, due 03/13/2020	24,925	27,561
Federal Home Loan Bank		100,000 Par Value, 5.000%, due 11/17/2017	99,838	105,056
Federal Home Loan Bank		50,000 Par Value, 2.125%, due 06/09/2023	49,950	51,814
Federal Home Loan Bank		50,000 Par Value, 1.875%, due 03/13/2020	51,587	51,378
Federal Home Loan Bank		50,000 Par Value, 0.875%, due 08/08/2018	49,975	49,907
Federal Home Loan Bank		50,000 Par Value, 2.470%, due 06/23/2026	50,000	50,256
Federal Home Loan Bank		50,000 Par Value, 0.830%, due 07/25/2018	49,970	49,877
Federal Home Loan Bank		50,000 Par Value, 0.875%, due 08/05/2019	49,904	49,776
Federal Home Loan Bank		50,000 Par Value, 1.000%, due 06/09/2017	50,148	50,128
Federal National Mortgage Association		100,000 Par Value, .875%, due 05/21/2018	97,548	100,073
Federal National Mortgage Association		50,000 Par Value, 1.200%, due 01/29/2019	50,000	50,009
Federal National Mortgage Association		50,000 Par Value, 1.500%, due 02/20/2020	49,006	50,580
Federal National Mortgage Association		100,000 Par Value, 1.500%, due 04/28/2020	99,950	100,158
Federal National Mortgage Association		25,000 Par Value, 1.400%, due 03/29/2019	25,000	25,004
U.S. Treasury Notes		50,000 Par Value, 1.500%, due 01/31/2019	49,844	50,760
U.S. Treasury Notes		50,000 Par Value, 0.875%, due 07/31/2019	48,015	49,955
U.S. Treasury Notes		50,000 Par Value, 1.375%, due 02/28/2019	99,645	101,265
U.S. Treasury Notes		50,000 Par Value, 0.875%, due 06/15/2017	50,018	50,094
U.S. Treasury Notes		50,000 Par Value, 1.375%, due 05/31/2020	48,813	50,564
U.S. Treasury Notes		50,000 Par Value, 2.000%, due 09/30/2020	50,312	51,734
U.S. Treasury Notes		50,000 Par Value, 1.375%, due 07/31/2018	49,922	50,537
U.S. Treasury Notes		50,000 Par Value, 0.755%, due 03/31/2018	49,031	49,986
Total U.S. government and agency obligations			1,500,179	1,522,862

*Information has been certified as complete and accurate by The Trust Company of Toledo, the Plan Trustee.

Retirement Plan for Employees of AAA Northwest Ohio
Schedule H, Line 4i – Schedule of Assets (Held at End of Year)
August 31, 2016

(a)	(b)	(c)	(d)	(e)
		Description of Investment, Including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value	Cost*	Current Value*
Identity of Issuer, Borrower, Lessor, or Similar Party				
Anheuser-Busch Cos. Inc.		50,000 Par Value, 5.600%, due 03/01/2017	\$ 49,937	\$ 51,079
Archer Daniels		42,000 Par Value, 5.450%, due 03/15/2018	41,999	44,760
Berkshire Hathaway Inc.		50,000 Par Value, 3.460%, due 01/31/2022	50,175	53,937
Cheveron Corp.		50,000 Par Value, 2.419%, due 11/17/2020	50,197	51,650
Colgate Palmolive Co.		50,000 Par Value, 2.625%, due 05/01/2017	49,975	50,581
Estee Lauder Co. Inc.		50,000 Par Value, 2.350%, due 08/15/2022	49,908	50,773
General Dynamics Corp.		50,000 Par Value, 1.000%, due 11/15/2017	49,900	49,977
Intel Corp.		50,000 Par Value, 1.350%, due 12/15/2017	50,000	50,224
Lowes Companies, Inc.		50,000 Par Value, 5.400%, due 10/15/2016	49,824	50,279
Microsoft Corp.		50,000 Par Value, 4.000%, due 02/08/2021	49,947	55,451
Microsoft Corp.		50,000 Par Value, 2.400%, due 08/08/2026	50,104	50,265
Microsoft Corp.		50,000 Par Value, 0.875%, due 11/15/2017	49,900	50,018
National Rural Utilities Coop		50,000 Par Value, 3.050%, due 02/15/2022	50,156	52,586
National Rural Utilities Coop		50,000 Par Value, 4.000%, due 11/15/2020	49,500	53,386
Oracle Corp.		50,000 Par Value, 1.200%, due 10/15/2017	50,181	50,147
Pepsico Inc.		50,000 Par Value, 5.000%, due 06/01/2018	49,743	53,364
Pfizer Inc.		50,000 Par Value, 6.200%, due 03/15/2019	49,949	55,950
Praxair Inc.		50,000 Par Value, 2.4500%, due 02/15/2022	50,000	51,325
The Walt Disney Company		50,000 Par Value, 2.750%, due 08/16/2021	49,956	52,689
Total corporate bonds			941,351	978,441
Alger Capital Appreciation		Mutual fund, 20,365 shares	591,635	545,381
Dodge & Cox Stock		Mutual fund, 2,095 shares	252,581	358,586
Fidelity Contrafund		Mutual fund, 9,190 shares	686,821	934,213
Vanguard Dividend Growth		Mutual fund, 20,138 shares	405,792	480,700
Vanguard Extended Market Index - Admiral		Mutual fund, 7,421 shares	240,806	511,069
Vanguard Institutional Index		Mutual fund, 11,700 shares	1,792,425	2,329,707
Harbor International		Mutual fund, 4,079 shares	158,712	250,173
Invesco International Growth		Mutual fund, 5,975 shares	212,513	193,239
MFS International New Discovery		Mutual fund, 5,781 shares	169,030	171,409
T Rowe Price Emerging Market		Mutual fund, 3,537 shares	110,379	118,887
T Rowe Price International New Asia		Mutual fund, 4,899 shares	86,632	81,081
Total mutual funds			4,707,326	5,974,445
Total Investments			\$ 7,275,691	\$ 8,602,583

*Information has been certified as complete and accurate by The Trust Company of Toledo, the Plan Trustee.