

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 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 2016 This Form is Open to Public Inspection
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Part I	Annual Report Identification Information		
For calendar plan year 2016 or fiscal plan year beginning <u>01/01/2016</u> and ending <u>12/31/2016</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.) ☒ 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>PREMIER PHYSICIAN SERVICES, INC. PENSION PLAN</u>	1b	Three-digit plan number (PN) ► <u>001</u>
		1c	Effective date of plan <u>01/01/1992</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>PREMIER PHYSICIAN SERVICES, INC.</u> <u>332 CONGRESS PARK DR</u> <u>DAYTON, OH 45459-4133</u>	2b	Employer Identification Number (EIN) <u>45-3684948</u>
		2c	Plan Sponsor's telephone number <u>937-312-3627</u>
		2d	Business code (see instructions) <u>621111</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	Filed with authorized/valid electronic signature.	09/25/2017	WILLIAM COLE
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE
Preparer's name (including firm name, if applicable) and address (include room or suite number)			Preparer's telephone number

3a Plan administrator's name and address ☒ Same as Plan Sponsor	3b Administrator's EIN 3c Administrator's telephone number
4 If the name and/or EIN of the plan sponsor has changed since the last return/report filed for this plan, enter the name, EIN and the plan number from the last return/report: a Sponsor's name	4b EIN 4c PN
5 Total number of participants at the beginning of the plan year	5 1075
6 Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines 6a(1) , 6a(2) , 6b , 6c , and 6d). a(1) Total number of active participants at the beginning of the plan year..... a(2) Total number of active participants at the end of the plan year b Retired or separated participants receiving benefits..... c Other retired or separated participants entitled to future benefits d Subtotal. Add lines 6a(2) , 6b , and 6c e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits. f Total. Add lines 6d and 6e g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item) h Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested	 6a(1) 647 6a(2) 0 6b 0 6c 0 6d 0 6e 0 6f 0 6g 0 6h 0
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item).....	7
8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions: 2A 2C 3D 3H 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) ☐ 0 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)

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 2016 Form M-1 annual report. If the plan was not required to file the 2016 Form M-1 annual report, enter the Receipt Confirmation Code for the most recent Form M-1 that was required to be filed under the Form M-1 filing requirements. (Failure to enter a valid Receipt Confirmation Code will subject the Form 5500 filing to rejection as incomplete.)

Receipt Confirmation Code _____

SCHEDULE C (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Service Provider Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110
		2016
		This Form is Open to Public Inspection.

For calendar plan year 2016 or fiscal plan year beginning **01/01/2016** and ending **12/31/2016**

A Name of plan PREMIER PHYSICIAN SERVICES, INC. PENSION PLAN	B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 PREMIER PHYSICIAN SERVICES, INC.	D Employer Identification Number (EIN) 45-3684948

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)

MORGAN STANLEY SMITH BARNEY LLC

7777 WASHINGTON VILLAGE DRIVE
SUITE 100
DAYTON, OH 45459

13-2919773

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28	INVESTMENT MANAGEMENT	312904	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 ☐

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

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

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

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

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

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

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

Part I Service Provider Information (continued)

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE H (Form 5500) Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Financial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ► File as an attachment to Form 5500.	OMB No. 1210-0110 2016 This Form is Open to Public Inspection
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For calendar plan year 2016 or fiscal plan year beginning 01/01/2016 and ending 12/31/2016		
A Name of plan PREMIER PHYSICIAN SERVICES, INC. PENSION PLAN	B Three-digit plan number (PN) ►	001
C Plan sponsor's name as shown on line 2a of Form 5500 PREMIER PHYSICIAN SERVICES, INC.	D Employer Identification Number (EIN) 45-3684948	

Part I	Asset and Liability Statement
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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)	7194781	0
(2) Participant contributions	1b(2)		
(3) Other.....	1b(3)	41632	0
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit).....	1c(1)	3646226	0
(2) U.S. Government securities	1c(2)	6920644	0
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)	1108535	0
(B) All other.....	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)	6411	0
(B) Common.....	1c(4)(B)	48204002	0
(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)	23770382	0
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)		
(15) Other.....	1c(15)	7131517	0

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	98024130	0

Liabilities

g Benefit claims payable	1g	2727	0
h Operating payables	1h		
i Acquisition indebtedness	1i		
j Other liabilities	1j		
k Total liabilities (add all amounts in lines 1g through 1j)	1k	2727	0

Net Assets

l Net assets (subtract line 1k from line 1f)	1l	98021403	0
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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) Amount	(b) Total
a Contributions:			
(1) Received or receivable in cash from: (A) Employers	2a(1)(A)		
(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)		0
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	5634	
(B) U.S. Government securities	2b(1)(B)	94128	
(C) Corporate debt instruments	2b(1)(C)	29985	
(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)		129747
(2) Dividends: (A) Preferred stock	2b(2)(A)		
(B) Common stock	2b(2)(B)	602775	
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	308529	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		911304
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)	95555100	
(B) Aggregate carrying amount (see instructions)	2b(4)(B)	92576102	
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)		2978998
(5) Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)		
(B) Other	2b(5)(B)	0	
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		0

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		
(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		4598
d Total income. Add all income amounts in column (b) and enter total.....	2d		4024647

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	101727917	
(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)		101727917
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)		
(2) Contract administrator fees.....	2i(2)		
(3) Investment advisory and management fees.....	2i(3)	312904	
(4) Other	2i(4)	5229	
(5) Total administrative expenses. Add lines 2i(1) through (4).....	2i(5)		318133
j Total expenses. Add all expense amounts in column (b) and enter total	2j		102046050

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		-98021403
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: KENTNER SELLERS, LLP

(2) EIN: 31-0787612

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:

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	Amount
4a		X	
4b		X	

		Yes	No	Amount
c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)	4c		X	
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)	4d		X	
e Was this plan covered by a fidelity bond?	4e	X		2500000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?	4f		X	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?	4g		X	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?	4h		X	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	4i	X		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked, and see instructions for format requirements.)	4j		X	
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?	4k	X		
l Has the plan failed to provide any benefit when due under the plan?	4l		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	4m		X	
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.	4n			
o Defined Benefit Plan or Money Purchase Pension Plan Only: Were any distributions made during the plan year to an employee who attained age 62 and had not separated from service?	4o		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: 0

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
If "Yes" is checked, enter the My PAA confirmation number from the PBGC premium filing for this plan year . (See instructions.)

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 sections 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 2016 This Form is Open to Public Inspection.
---	---	--

For calendar plan year 2016 or fiscal plan year beginning 01/01/2016 and ending 12/31/2016

A Name of plan <u>PREMIER PHYSICIAN SERVICES, INC. PENSION PLAN</u>	B Three-digit plan number (PN) ▶ <u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>PREMIER PHYSICIAN SERVICES, INC.</u>	D Employer Identification Number (EIN) <u>45-3684948</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>45-3684948</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>1090</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	<u>0</u>	
b Enter the amount contributed by the employer to the plan for this plan year	6b	<u>0</u>	
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	<u>0</u>	
If you completed line 6c, skip lines 8 and 9.			
7 Will the minimum funding amount reported on line 6c be met by the funding deadline?	☐ Yes	☐ No	☒ N/A
8 If a change in actuarial cost method was made for this plan year pursuant to a revenue procedure or other authority providing automatic approval for the change or a class ruling letter, does the plan sponsor or plan administrator agree with the change?	☐ Yes	☐ No	☐ N/A

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

For Paperwork Reduction Act Notice, see the Instructions for Form 5500.

Schedule R (Form 5500) 2016
v. 160205

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: <u>0.0</u> % 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? If "No," skip b	☐ Yes ☐ No
20b How did the plan satisfy the nondiscrimination requirements for employee deferrals under section 401(k)(3) for the plan year? Check all that apply:	☐ Design-based safe harbor ☐ "Prior year" ADP test ☐ "Current year" ADP test ☐ N/A
21a What testing method was used to satisfy the coverage requirements under section 410(b) for the plan year? Check all that apply:	☐ Ratio percentage test ☐ Average benefit test ☐ N/A
21b Did the plan satisfy the coverage and nondiscrimination requirements of sections 410(b) and 401(a)(4) for the plan year by combining this plan with any other plan under the permissive aggregation rules?	☐ Yes ☐ No
22a If the plan is a master and prototype plan (M&P) or volume submitter plan that received a favorable IRS opinion letter or advisory letter, enter the date of the letter / / and the serial number .	
22b If the plan is an individually-designed plan that received a favorable determination letter from the IRS, enter the date of the most recent determination letter / / .	

**PREMIER PHYSICIAN SERVICES, INC.
PENSION PLAN**

**FINANCIAL STATEMENTS
and SUPPLEMENTARY INFORMATION**

YEARS ENDED DECEMBER 31, 2016 and 2015

PREMIER PHYSICIAN SERVICES, INC. PENSION PLAN
YEARS ENDED DECEMBER 31, 2016 and 2015

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Independent Auditors' Report

To the Participants and Trustees of
Premier Physician Services, Inc. Pension Plan

Report on the Financial Statements

We have audited the accompanying financial statements of the Premier Physician Services, Inc. Pension Plan which comprise the statements of net assets in liquidation available for benefits as of December 31, 2016 and 2015, and the related statement of changes in net assets in liquidation available for benefits for the year ended December 31, 2016, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

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

Auditors' Responsibility

Our responsibility is to express an opinion on these financial statements based on our audits. We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audits to obtain reasonable assurance about whether the financial statements are free of material misstatement.

An audit includes performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the Plan's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Plan's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall financial statement presentation.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Basis of Accounting

As described in Note I to the financial statements, management of Premier Physician Services, Inc., the Plan's Sponsor, voted on October 20, 2014, to terminate the Plan effective December 31, 2015. In accordance with accounting principles generally accepted in the United States of America, the Plan has changed its basis of accounting from the ongoing plan basis to the liquidation basis for periods after October 20, 2014, the date upon which plan termination was determined to be imminent. There are no known material differences between the two methods based on the nature of the assets held by the Plan. Our opinion is not modified with respect to that matter.

Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the net assets in liquidation available for benefits of the Plan as of December 31, 2016 and 2015, and the changes in its net assets in liquidation available for benefits for the year ended December 31, 2016, in accordance with accounting principles generally accepted in the United States of America.

Report on Supplemental Information

Our audits were conducted for the purpose of forming an opinion on the financial statements as a whole. The supplemental schedule of assets (acquired and disposed of within year) as of December 31, 2016, referred to as the supplemental information, is presented for the purpose of additional analysis and is not a required part of the financial statements but is supplemental information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974. Such information is the responsibility of the Plan's management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audits of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the information is fairly stated in all material respects in relation to the financial statements as a whole.

A handwritten signature in blue ink that reads "Kentner Sellers, LLP".

KENTNER SELLERS, LLP
September 25, 2017

PREMIER PHYSICIAN SERVICES, INC. PENSION PLAN
STATEMENTS OF NET ASSETS IN LIQUIDATION AVAILABLE FOR BENEFITS
DECEMBER 31, 2016 and 2015

	<u>2016</u>	<u>2015</u>
ASSETS:		
Investments, at Fair Value:		
Non-participant directed:		
Money market funds	\$ 0	\$ 3,646,226
Mutual funds	0	23,770,382
Common stocks	0	48,204,002
Preferred stocks	0	6,411
Corporate bonds	0	1,108,535
Government securities	0	6,920,644
Hedge funds	<u>0</u>	<u>7,131,517</u>
Total Investments	<u>0</u>	<u>90,787,717</u>
Receivables:		
Employer's contribution	0	7,194,781
Interest and dividends	<u>0</u>	<u>41,632</u>
Total Receivables	<u>0</u>	<u>7,236,413</u>
Total Assets	<u>0</u>	<u>98,024,130</u>
LIABILITIES:		
Benefit claims payable	<u>0</u>	<u>2,727</u>
Total Liabilities	<u>0</u>	<u>2,727</u>
NET ASSETS IN LIQUIDATION AVAILABLE FOR BENEFITS	<u><u>\$ 0</u></u>	<u><u>\$ 98,021,403</u></u>

See Notes to Financial Statements.

PREMIER PHYSICIAN SERVICES, INC. PENSION PLAN
STATEMENT OF CHANGES IN NET ASSETS IN LIQUIDATION
AVAILABLE FOR BENEFITS
FOR THE YEAR ENDED DECEMBER 31, 2016

**ADDITIONS TO NET ASSETS IN
LIQUIDATION ATTRIBUTED TO:**

Investment income:

Dividends	\$ 911,304
Interest	<u>129,747</u>
	<u>1,041,051</u>

Net realized and unrealized appreciation in fair value of investments	<u>2,978,998</u>
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Other income	<u>4,598</u>
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Total Additions	<u>4,024,647</u>
-----------------	------------------

**DEDUCTIONS FROM NET ASSETS IN
LIQUIDATION ATTRIBUTED TO:**

Benefits paid to participants	101,727,917
Administrative expenses	<u>318,133</u>

Total Deductions	<u>102,046,050</u>
------------------	--------------------

NET DECREASE	(98,021,403)
---------------------	--------------

NET ASSETS IN LIQUIDATION AVAILABLE FOR BENEFITS - Beginning of Year	<u>98,021,403</u>
---	-------------------

NET ASSETS IN LIQUIDATION AVAILABLE FOR BENEFITS - End of Year	<u><u>\$ 0</u></u>
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See Notes to Financial Statements.

PREMIER PHYSICIAN SERVICES, INC. PENSION PLAN
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2016 and 2015

NOTE A - DESCRIPTION OF THE PLAN

The following description of the Premier Physician Services, Inc. Pension Plan is provided for general information purposes only. Participants should refer to the Plan Agreement for a more complete description of the Plan's provisions.

General

The Plan was a defined contribution money purchase plan sponsored by Premier Physician Services, Inc., (the Plan Sponsor) and covered all eligible employees. It was subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA). Effective December 31, 2015, the Plan was terminated.

Eligibility

Prior to termination, employees were eligible to become participants in the defined contribution plan when they completed at least one hour of service and were at least 21 years of age. If eligibility requirements were satisfied before July 31, the entry date was the later of the first day of the Plan Year or the participant's employment date. If eligibility requirements were satisfied after July 31, the entry date was the first day of the Plan Year immediately following eligibility requirements being met.

Contributions

Each year, the Plan Sponsor made contributions to four different employee groups which were cross tested as permitted by law. Those four groups were as follows:

- (a) Group I Members were Level 1 Clinicians/Doctors and Officers of the Plan Sponsor eligible to participate in the Plan whose compensation was \$220,000 or greater. Group I members were eligible to receive a \$22,000 contribution.
- (b) Group II Members were Level 2 Clinicians/Doctors and Officers of the Plan Sponsor eligible to participate in the Plan whose compensation was less than \$220,000. Group II members were eligible to receive a contribution equal to 9.25% of compensation.
- (c) Group III Members were all participants in the Plan who were not Group I, Group II, or Group IV Members. Group III Members were eligible to receive a contribution equal to 6% of compensation.
- (d) Group IV Members included each doctor who had completed less than three years of service and was designated as a Clinical Specialist or hospitalist by the Plan Sponsor. Group IV Members were eligible to receive a contribution equal to 1% of compensation.

PREMIER PHYSICIAN SERVICES, INC. PENSION PLAN
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2016 and 2015

NOTE A - DESCRIPTION OF THE PLAN (Continued)

Participant Accounts

Each participant's account was credited with its share of the employer contribution (as defined by the Plan) and its proportionate share of plan earnings and losses, net of plan expenses. Each participant was entitled only to the benefits that could be provided from that participant's account. All investment income or loss was allocated to eligible participants as of the last day of the Plan Year, and any other date designated as such by the Plan Administrator in a nondiscriminatory manner, based on the proportionate share of all plan assets as of the beginning of the Plan Year.

Investment Options

Under the Plan Adoption Agreement, the Plan Sponsor designated the trustees to administer the Plan and invest plan assets. The trustees engaged a custodian and investment advisors to assist them in the selection of the following non-participant directed investment options:

Large Cap Value - Managed by Harding Loevner L.P., this fund invested primarily in common stocks of large-sized companies.

Large Cap Core - Managed by Atlanta/Sosnoff Capital, this fund invested primarily in common stocks of large-sized companies.

Large Cap Growth - Managed by GW Capital, this fund invested primarily in common stocks of large-sized companies.

All Cap Growth - Managed by Clearbridge Asset Management, this fund invested primarily in common stocks of large-sized companies.

Fixed Income - Managed by Seix Investment Advisors, this fund invested primarily in government and corporate bonds, and mortgage and asset-backed securities.

International Equity - Managed by Thornburg Investment Management, this fund invested primarily in common stocks of international companies.

International Growth - Managed by Lazard Asset Management, this fund invested primarily in common stocks of international companies.

Mid-Cap Core - Managed by Apex Capital Management, this fund invested primarily in common stocks of medium-sized value, core, or growth companies.

Money Funds - These funds invested primarily in money funds and bank deposit programs.

PREMIER PHYSICIAN SERVICES, INC. PENSION PLAN
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2016 and 2015

NOTE A - DESCRIPTION OF THE PLAN (Continued)

Investment Options (Continued)

Total Return - Managed by PIMCO, this fund invested primarily in mortgage-backed securities, government bonds, and mutual funds.

Real Estate Investment Trust - Managed by Invesco Capital Management, this fund invested primarily in mortgaged-backed securities.

Hedge Funds - Managed by MUFG Alternative Fund Services, UBP and Private Advisors Alternative Asset Management, these hedge funds held investments among a number of managers, investment vehicles, markets, trading styles, and/or asset categories in order to attempt to produce consistent, above-average risk adjusted, long-term returns.

Vesting

On October 15, 2014, the Plan Sponsor amended the Plan to eliminate the Plan's vesting schedule. Effective as of October 15, 2014, all participants became 100% vested in their account balances.

Forfeited Accounts

Forfeitures were reallocated following the date on which a terminated participant incurred five consecutive one-year breaks in service or following the date on which a terminated participant received payment of his vested account balance. The Plan provided for forfeitures to be applied first to restore any amounts attributable to employer contributions related to a break in service. Remaining forfeitures, if any, were to be used to reduce the required employer contribution.

There were no forfeitures in 2016 or 2015 due to the participants becoming fully vested effective October 15, 2014.

Payment of Benefits

Benefits were recorded when paid. Upon termination of the Plan, a participant could elect to receive:

- (a) A lump sum distribution equal to the value of their account,
- (b) A rollover to an individual retirement account (IRA),
- (c) A direct rollover to the TeamHealth 401(k) Plan (See Note I).

PREMIER PHYSICIAN SERVICES, INC. PENSION PLAN
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2016 and 2015

NOTE B - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of Accounting

In accordance with accounting principles generally accepted in the United States of America, the Plan has changed its basis of accounting from the ongoing plan basis to the liquidation basis for periods after October 20, 2014.

Investment Valuation and Income Recognition

Investments are reported at fair value as determined by the custodian and trustees. The fair value of marketable securities is based on quotations obtained from national securities exchanges. Quotations are obtained from other published sources when marketable securities are not listed on an exchange. See Note D for discussion of fair value measurements.

Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded on the accrual basis. Dividends are recorded on the ex-dividend date. Net appreciation includes the Plan's realized and unrealized gains and losses on investments during the year.

Use of Estimates

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

Administrative Expenses

Administrative fees were paid by both the Plan and Plan Sponsor. Plan expenses paid by the Plan include fees for trading and investment management, and advisory services. Audit, legal, and accountant expenses were paid primarily by the Plan Sponsor. In addition, certain administrative functions were performed by officers or employees of the Plan Sponsor. No such officer or employee received compensation from the Plan.

PREMIER PHYSICIAN SERVICES, INC. PENSION PLAN
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2016 and 2015

NOTE B - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

Amendments

Effective December 15, 2016, the Plan Sponsor amended the Plan to add the following provision: if, following the termination of the Plan, any part of a participant's or beneficiary's account remains unpaid because: (i) the Plan Administrator has been unable to ascertain the whereabouts of the participant or beneficiary; or (ii) the participant or beneficiary has failed to provide a valid consent to an immediate distribution, such accounts shall be transferred to the TeamHealth 401(k) Plan sponsored by AmeriTeam Services, LLC (the Company's parent company). The TeamHealth 401(k) Plan shall protect the optional forms of benefit available to participants and beneficiaries under this Plan.

Accounting Changes

In May 2015, the FASB issued ASU 2015-07, Fair Value Measurement (Topic 820): Disclosures for Investments in Certain Entities That Calculate Net Asset Value per Share, which exempts investments measured using the net asset value (NAV) practical expedient in ASC 820, Fair Value Measurement, from categorization within the fair value hierarchy. The guidance requires retrospective application and is effective for fiscal years beginning after December 15, 2016. Early adoption is permitted. Management elected to early-adopt the provisions of this new standard. Accordingly, the amendment was retrospectively applied resulting in simplified reporting of fair value hierarchies at December 31, 2015, in Note D.

In July 2015, the FASB issued ASU 2015-12, Plan Accounting: Defined Contribution Pension Plans (Topic 962): Part (I) Fully Benefit-Responsive Investment Contracts, Part (II) Plan Investment Disclosures, Part (III) Measurement Date Practical Expedient. This three-part standard simplifies employee benefit plan reporting with respect to fully benefit-responsive investment contracts and plan investment disclosures and provides for a measurement-date practical expedient. Parts I and II are effective for fiscal years beginning after December 15, 2015, and should be applied retrospectively with early application permitted. Part III is effective for fiscal years beginning after December 15, 2015, and should be applied prospectively with early application permitted. Management elected to adopt Part II early. Accordingly, the amendments were retrospectively applied resulting in simplified reporting of investments at December 31, 2015, in Note D.

PREMIER PHYSICIAN SERVICES, INC. PENSION PLAN
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2016 and 2015

NOTE C - CONCENTRATION OF CREDIT RISK

The Plan maintained its cash balances in cash accounts and various money market funds. The Federal Deposit Insurance Corporation (FDIC) insured these accounts up to \$250,000. At various times during the year, some or all of these funds may have been uninsured or exceeded insurance limits.

NOTE D - FAIR VALUE MEASUREMENTS

FASB Accounting Standards Codification (ASC) 820-10, Fair Value Measurements, establishes a framework for measuring fair value. That framework provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1 measurements) and the lowest priority to unobservable inputs (Level 3 measurements). The three levels of the fair value hierarchy under FASB ASC 820-10 are described below:

Level 1 - Inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets that the Plan has the ability to access.

Level 2 - Inputs to the valuation methodology include:

- Quoted prices for similar assets or liabilities in active markets;
- Quoted prices for identical or similar assets or liabilities in inactive markets;
- Inputs other than quoted prices that are observable for the asset or liability; and
- Inputs that are derived principally from or corroborated by observable market data by correlation or other means.

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

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

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

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NOTE D - FAIR VALUE MEASUREMENTS (Continued)

Following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodologies used at December 31, 2016.

Common stocks, preferred debt, corporate bonds, and U.S. government securities: Valued at the closing price reported on the active market on which the individual securities are traded.

Mutual funds and money market funds: Valued at the net asset value (NAV) of shares held by the Plan at year-end.

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

The following tables set forth by level, within the fair value hierarchy, the Plan's assets at fair value as of:

	Assets at Fair Value as of December 31, 2016			
	Level 1	Level 2	Level 3	Total
Total Assets at Fair Value	\$ 0	\$ 0	\$ 0	\$ 0

	Assets at Fair Value as of December 31, 2015			
	Level 1	Level 2	Level 3	Total
Mutual funds	\$ 23,770,382	\$ 0	\$ 0	\$ 23,770,382
Money market funds	3,646,226	0	0	3,646,226
Common stocks	48,204,002	0	0	48,204,002
Preferred Stock	6,411	0	0	6,411
Corporate bonds	1,108,535	0	0	1,108,535
Government securities	6,920,644	0	0	6,920,644
Hedge funds	<u>0</u>	<u>7,131,517</u>	<u>0</u>	<u>7,131,517</u>
Total Assets at Fair Value	\$ 83,656,200	\$ 7,131,517	\$ 0	\$ 90,787,717

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NOTE E - MONEY PURCHASE PLAN

As a money purchase plan, the Plan had certain minimum contribution requirements, which were met for 2016 and 2015.

NOTE F - BENEFITS PAYABLE

As described in Note I, the Plan was amended effective October 15, 2014, at which time all participants became 100% vested in their entire account balances. As of December 31, 2015, the vested benefit payable to participants terminated prior to year-end was \$98,021,403. All benefits were liquidated from the Plan during the year ended December 31, 2016.

NOTE G - RELATED PARTY TRANSACTIONS

Certain plan investments were shares of Morgan Stanley common stock and shares of money market funds managed by Morgan Stanley Wealth Management. Morgan Stanley Wealth Management is the custodian; therefore, these transactions qualified as party-in-interest transactions.

NOTE H - INCOME TAX STATUS

The Plan obtained a favorable tax determination letter as of April 23, 2001, in which the Internal Revenue Service stated that the Plan, as then designed, was in compliance with the applicable requirements of the Internal Revenue Code (IRC). Subsequent amendments were made to the Plan, and these changes were not submitted for a determination letter. However, the Plan Sponsor believes that the Plan was qualified and was being operated in compliance with the applicable provisions of the IRC. Therefore, no income taxes have been provided for in the financial statements.

Accounting principles generally accepted in the United States of America require plan management to evaluate tax positions taken by the Plan and recognize a tax liability if the Plan has taken an uncertain position that more likely than not would not be sustained upon examination by the IRS. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress.

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NOTE I - PLAN TERMINATION

The Board of Directors of Premier Physician Services, Inc., the Plan Sponsor, voted on October 20, 2014, to terminate the Plan effective December 31, 2015. Distributions were based on all participants being 100% vested. During 2016, all of the assets were liquidated from the Plan. In accordance with generally accepted accounting principles, the Plan has changed its basis of accounting used to value plan assets from the ongoing plan basis to the liquidation basis after October 20, 2014, the date when Plan termination was determined to be imminent. There are no known material differences between the two methods based on the nature of the assets held by the Plan.

NOTE J - SUBSEQUENT EVENTS

The Company has evaluated subsequent events through September 25, 2017, the date which the financial statements were available to be issued.

**SUPPLEMENTARY
INFORMATION**

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IDENTITY OF ISSUE, BORROWER, LESSOR OR SIMILAR PARTY	DESCRIPTION OF INVESTMENT INCLUDING MATURITY DATE, RATE OF INTEREST, COLLATERAL, PAR, OR MATURITY VALUE	COSTS OF ACQUISITIONS		PROCEEDS OF DISPOSITIONS	
(a)	(b)	(c)		(d)	
UNITED PARCEL SER INC CL-B	Common Stock	\$	12,050	\$	12,736
CELGENE CORP	Common Stock		11,378		10,819
COMCAST CORP CLASS A	Common Stock		45,022		48,682
ADOBE SYSTEMS	Common Stock		40,587		42,842
MICROSOFT CORP	Common Stock		20,342		21,275
FREEPORT-MCMORAN INC	Common Stock		31,544		31,008
TE CONNECTIVITY LTD	Common Stock		30,735		28,862
AETNA INC	Common Stock		27,835		27,178
PALO ALTO NETWORKS INC	Common Stock		47,206		56,414
REGENERON PHARM	Common Stock		11,239		12,470
HOME DEPOT INC	Common Stock		16,922		18,865
BROADCOM LTD SHS	Common Stock		8,415		10,508
BIOGEN INC COM	Common Stock		18,612		21,565
VMWARE INC CLASS A	Common Stock		31,385		40,430
GENERAL ELECTRIC CO	Common Stock		32,199		31,438
ECOLAB INC	Common Stock		128,804		143,487
TWENTY-FIRST CENTURY FOX CL A	Common Stock		3,582		3,296
IONIS PHARMACEUTICALS INC	Common Stock		32,165		31,867
ZOETIS IN CLASS-A	Common Stock		22,829		28,739
SCHLUMBERGER LTD	Common Stock		60,149		62,715
FORTINET INC	Common Stock		11,189		12,252
ALEXION PHARM INC	Common Stock		94,123		88,806
JOHNSON & JOHNSON	Common Stock		73,864		72,979
APPLE INC	Common Stock		87,819		96,360
ALLEGRAN PLC	Common Stock		64,266		72,164
WEATHERFORD INTERNATIONAL	Common Stock		12,839		11,697
WESTERN DIGITAL CORPORATION	Common Stock		31,614		46,208
ANADARKO PETE	Common Stock		124,360		184,106
ROYAL CARRIBEAN CRUISES LTD	Common Stock		61,865		62,222
NORFOLK SOUTHERN CORP	Common Stock		43,769		44,607
KIMBERLY CLARK CORP	Common Stock		62,172		63,835
CROWN CASTLE INTL CORP	Common Stock		31,967		32,710
LINKEDIN CORP-A	Common Stock		10,229		17,048
VISA INC CL A	Common Stock		248,942		275,079
AMERICAN TOWER REIT COM	Common Stock		70,484		79,044
PPG INDUSTRIES INC	Common Stock		72,666		68,762
CSX CORP	Common Stock		32,925		33,743
CALIFORNIA RES CORP COM	Common Stock		50		44
DUKE ENERGY CORP	Common Stock		35,979		33,744
INTEL CORP	Common Stock		45,002		49,969

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(a)	(b)	(c)	(d)
SYNCHRONY FINANCIAL	Common Stock	120,896	116,416
WELLS FARGO & CO	Common Stock	197,518	194,862
HALLIBURTON CO	Common Stock	49,360	48,723
NXP SEMICONDUCTORS NV	Common Stock	62,655	60,440
HONEYWELL INTERNATIONAL INC	Common Stock	63,380	67,834
PIONEER NATURAL RESOURCES CO	Common Stock	91,042	124,120
ABBVIE INC	Common Stock	52,711	54,096
STARBUCKS CORP WASHINGTON	Common Stock	19,181	18,148
FEDEX CORP	Common Stock	43,601	47,139
SALESFORCE.COM, INC	Common Stock	23,235	20,914
CITIGROUP INC	Common Stock	12,618	12,565
CISCO SYS INC	Common Stock	132,095	162,500
AT&T INC	Common Stock	222,324	256,500
DOLLAR GEN CORP	Common Stock	31,839	31,217
ALIBABA GROUP HLDG LTD	Common Stock	40,036	43,925
VERIZON COMMUNICATIONS	Common Stock	88,988	92,632
ELI LILLY & CO	Common Stock	43,282	41,828
PROCTER & GAMBLE	Common Stock	47,165	49,443
ZIMMER BIOMET HLDGS INC	Common Stock	76,803	81,539
MARSH & MCLENNAN COS INC	Common Stock	8,667	10,070
TIME WARNER INC	Common Stock	39,236	37,705
STANLEY BLACK & DECKER INC	Common Stock	21,774	22,783
MC DONALDS CORP	Common Stock	32,947	34,372
SOUTHERN CO	Common Stock	48,161	47,512
BANK OF AMERICA CORP	Common Stock	46,960	48,217
AMER INTL GP INC	Common Stock	32,529	31,803
OCCIDENTAL PETROLEUM CORP DE	Common Stock	30,015	31,211
CHARTER COMMUNICATIONS INC	Common Stock	75,944	85,580
EXXON MOBIL CORP	Common Stock	78,719	84,343
MORGAN STANLEY	Common Stock	86,789	54,361
BOSTON SCIENTIFIC CORP	Common Stock	18,494	25,685
CANADIAN NATURAL RESOURCES LTD	Common Stock	117,216	125,078
JP MORGAN CHASE & CO	Common Stock	8,269	8,302
HEWLETT PACKARD ENTERPRISE	Common Stock	62,472	68,502
XYLEM INC COM	Common Stock	30,526	35,200
WEYERHAEUSER CO	Common Stock	35,931	47,938
SMITH & NEWPHEW PLC ADR	Common Stock	11,440	11,992
CENOVUS ENERGY INC COM	Common Stock	7,541	7,327
PT BK MANDIRI PERSERO TBK UNSP	Common Stock	9,058	11,269
RELX PLC SPONSORED ADR	Common Stock	10,349	11,312

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(a)	(b)	(c)	(d)
COMPAGNIE FIN RICHIEMONTAG ADR	Common Stock	25,319	23,620
SKY PLC	Common Stock	21,031	23,609
FANUC CORPORATION UNSP ADR	Common Stock	62,112	68,299
ALLIANZ SE ADS	Common Stock	34,201	34,664
CK HUTCHISON HLDGS LTD ADR	Common Stock	28,713	32,499
JAPAN TOB INC	Common Stock	42,902	43,236
SANDVIK AB SPONS ADR	Common Stock	17,983	18,003
WOLTERS KLUWER NV SPON ADR	Common Stock	28,878	30,282
PUBLICIS GROUPE SA ADS	Common Stock	22,271	22,455
ROYAL DUTCH SHELL PLC CL B	Common Stock	159,193	180,393
TAIWAN SEMICONDUCTOR MFG CO	Common Stock	14,107	18,132
TEVA PHARMACEUTICALS UNSP ADR	Common Stock	18,452	17,175
ROCHE HOLDINGS ADR	Common Stock	113,843	111,936
GENTIGE AB UNSPONS ADR	Common Stock	3,111	2,984
DESNO CORP LTD ADR	Common Stock	9,347	10,348
BAIDU INC ADS	Common Stock	106,516	118,753
UBS GROUP AG SGS	Common Stock	14,689	13,568
PROSIEBENSAT 1 MEDIA AG ADR	Common Stock	63,028	55,640
JULIUS BAER GROUP LTD UN AADR	Common Stock	14,424	13,955
SAP AG	Common Stock	16,796	19,690
FOMENTO ECONOMICO MEXICANO	Common Stock	28,718	30,050
AKORN INC	Common Stock	5,611	6,126
ARTISA NETWORKS INC	Common Stock	19,842	21,058
WHITEWAVE FOODS CORP CL A	Common Stock	30,412	40,047
EMCOR GROUP INC	Common Stock	16,523	17,081
SABRE CORPORATION	Common Stock	20,132	19,222
TERDATA CORP	Common Stock	19,984	19,049
BROADRIDGE FINANCIAL SOLUTIONS LLC	Common Stock	42,543	52,086
CARRIZO OIL & GAS INC	Common Stock	6,484	3,943
JAZZ PHARMACEUTICALS PLC	Common Stock	4,967	4,218
MICHEALS COS INC	Common Stock	30,545	27,796
CHINA LODGING GRP LTD SPON ADR	Common Stock	15,861	18,460
THE BOSTON BEER CO INC A	Common Stock	19,693	16,012
ANACOR PHARMACEUTICALS	Common Stock	4,850	7,642
DEXCOM INC	Common Stock	8,938	12,489
BERRY PLASTICS GROUP INC	Common Stock	16,487	17,235
NORWEGIAN CRUISE LINE HLDS INC	Common Stock	48,747	45,578
MOMENTA PHARM INC.	Common Stock	9,566	9,599
PROTO LABS	Common Stock	8,294	7,717
GENPACT LTD	Common Stock	28,484	24,678

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(a)	(b)	(c)	(d)
CARTER'S	Common Stock	10,668	9,689
PRESTIGE BRANDS HOLDINGS INC	Common Stock	27,348	23,806
UNITED RENTALS	Common Stock	16,219	15,789
AFFILIATED MGRS GROUP	Common Stock	30,872	27,678
CHENIERE ENERGY INC	Common Stock	30,277	51,590
BROADSOFT INC COM	Common Stock	11,085	14,341
HAWAIIAN HOLDINGS INC	Common Stock	39,892	37,570
BANK OF THE OZARKS INC	Common Stock	31,088	26,827
ADVANCED ENERGY IND INC	Common Stock	20,464	26,414
WILLIS TOWERS WATSON PUB LTD	Common Stock	57,350	55,800
DAVE & BUSTERS ENTERTAINMENT INC	Common Stock	27,060	28,586
PIMCO ALL ASSET ALL AUTH INST	Common Stock	30,613	33,541
VANGUARD HIGH DIV YIELD ETF	Common Stock	68,196	70,955
CALAMOS MARKET NEUTRAL INC	Common Stock	26,388	26,908
TEMPLETON GLOBAL BOND FUND ADV	Common Stock	45,286	45,054
BIDVEST GROUP LTD SPONS ADR	Common Stock	3,133	3,112
CHINA MOBILE LTD	Common Stock	6,450	7,297
PT SEMEN GRESIK PERSERO ADR	Common Stock	651	7,297
TURK TELEKOMUNIKASYON AS ADR	Common Stock	10,412	9,739
MOBILE TELESYSTEMS PJSC	Common Stock	23,685	20,638
CHINA CONSTRUCTION BANK	Common Stock	515	521
SANLAM LTD ADR	Common Stock	3,792	5,572
COMMERCIAL INTL BNK LTD SP ADR	Common Stock	8,696	9,061
AMERICA MOVIL SA DE CV AD L	Common Stock	10,951	9,422
IMPERIAL HOLDINGS LTD ADR	Common Stock	4,043	5,755
WEICHAI PWR CO LTD UNSPON ADR	Common Stock	14,584	21,772
LIFE HEALTHCARE GRP HOLDINGS LTD	Common Stock	14,907	16,474
YPF SOCIEDAD ADS REP 1 CL-D SH	Common Stock	9,104	8,221
PARAMOUNT GROUP INC	Common Stock	37,226	37,635
MID AMER APART COMM INC	Common Stock	23,637	24,048
VORNADO REALTY TRUST	Common Stock	71,194	86,129
LAMAR ADVERTISING CO CL A	Common Stock	10,876	10,745
AVALONBAY COMM INC	Common Stock	44,011	45,189
EQUITY RESIDENTIAL	Common Stock	96,737	89,131
RETAIL OPPORTUNITY INVESTMENTS CORP	Common Stock	841	945
COUSINS PROPERTIES INC GA	Common Stock	8,583	8,456
DCT INDUSTRIAL TRUST INC	Common Stock	30,558	38,548
SUN COMMUNITIES	Common Stock	20,599	21,163
HUDSON PACIFIC PROPERTIES	Common Stock	6,861	9,258
VENTAS INC	Common Stock	47,972	48,595

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	MATURITY VALUE		
(a)	(b)	(c)	(d)
GENERAL GROWTH PROPERTIES	Common Stock	41,967	42,044
SIMON PROPERTY GROUP INC	Common Stock	61,981	71,398
LIBERTY PROPERTY TRUST SBI	Common Stock	18,975	23,078
REALTY INCOME CORP	Common Stock	33,123	37,032
FEDL RLTY INVT TRUST S B I	Common Stock	31,640	35,719
WELLTOWER INC	Common Stock	25,534	28,490
QTS REALTY INC COM CL A	Common Stock	762	919
ACADIA REALTY TR SBI	Common Stock	22,171	23,070
EPR PROPERTIES	Common Stock	47,625	56,836
PUBLIC STORAGE	Common Stock	7,033	6,178
EXTRA SPACE STORAGE INC	Common Stock	39,383	36,325
RJ ROLLING TRUST	Common Stock	16,798	17,205
CUBESMART COM	Common Stock	34,090	31,894
HEALTHCARE REALTY TRUST INCORP	Common Stock	34,000	42,086
APPLE HOSPITALITY REIT INC COM	Common Stock	23,032	23,042
INFREAREIT INC	Common Stock	2,046	1,873
EQUITY LIFESTYLE PROPERTIES	Common Stock	16,180	18,272
BOSTON PROPERTIES INC	Common Stock	24,324	30,334
NATIONAL HEALTH INVESTORS INC	Common Stock	31,289	33,203
WASH REAL EST INV TR MARYLAND	Common Stock	25,400	24,049
AMERICAN HOMES	Common Stock	10,076	11,821
HOST HOTEL & RESORTS	Common Stock	61,128	61,622
BRANDYWINE REALTY TR SBI	Common Stock	29,120	33,469
CYRUSONE INC	Common Stock	18,919	23,146
FIRST INDUSTRIAL REALTY TR INC	Common Stock	13,978	15,279
SUNSTONE HOTEL INVESTORS, INC	Common Stock	11,164	11,583
POST PROPERTIES INC	Common Stock	36,588	40,234
DDR CORP COM	Common Stock	12,256	12,832
ESSEX PROPERTY TRUST INC	Common Stock	68,946	69,715
EQUINOX INC	Common Stock	20,299	24,132
AMERICAN CAMPUS COMMUNITIES INC	Common Stock	24,362	28,857
PROLOGIS INC COM	Common Stock	63,709	82,077
DIGITAL REALTY TRUST INC	Common Stock	36,063	34,459
NATIONAL RETAIL PROPERTIES I	Common Stock	59,710	65,642
LTC PROPERTIES INC	Common Stock	16,341	17,058
SL GREEN REALTY CP	Common Stock	85,609	101,236
HILTON WORLDWIDE HOLDINGS INC.	Common Stock	39,476	43,031
APARTMENT INVT & MGMT CO A	Common Stock	64,373	75,983
WISDOM TREE SMALL CAP DIV FUND	Common Stock	32,675	37,469
ISHARES ASIA/PACIFIC DIV ETF	Common Stock	42,749	47,191

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(a)	(b)	(c)	(d)
PHILLIPS 66 COM	Common Stock	80,819	76,702
KELLOG CO	Common Stock	79,719	85,248
LYONDELLBASELL NV CL-A	Common Stock	127,157	119,885
SPIRE INC	Common Stock	98,297	102,093
TEGNA INC	Common Stock	16,912	16,578
MASCO CORP	Common Stock	12,699	17,132
PNC FINANCIAL SERVICES GROUP	Common Stock	20,286	21,829
ALASKA AIR GROUP INCORPORATED	Common Stock	72,198	73,988
IDACORP INC	Common Stock	123,697	140,235
JACK HENRY& ASSOC INC	Common Stock	59,610	64,986
CHECK POINT SOFTWARE TECH LTD	Common Stock	38,194	37,488
ALFA LAVAL AB-UNSPONS ADR	Common Stock	111,431	139,504
AIR LIQUIDE ADR	Common Stock	20,904	21,434
DBS HOLDINGS LTD SP	Common Stock	26,242	26,703
BAYER AG SPON ADR	Common Stock	126,853	123,832
ARM HOLDINGS PLC ADS	Common Stock	13,050	22,262
BANCO BILBAO VIZ ARG SA ADS	Common Stock	1,047	1,055
FRESENIUS MEDICAL CARE AG&CO	Common Stock	25,150	25,350
BBA AVIATION PLC ADR	Common Stock	21,968	22,712
PARK24 CO LTD SPONSORED	Common Stock	65,486	74,519
LINDE AG SPONSERE ADR	Common Stock	19,268	21,285
COLOPLAST AS ADR	Common Stock	21,371	21,631
TENARIS S.A	Common Stock	48,975	49,134
KUBOTA CP ADR	Common Stock	57,067	54,052
BHP BILLITON FIN	Corporate Bond, 3.25%, 11/21/21	43,940	44,835
WILLIAMS PARTNERS	Corporate Bond, 4.5%, 11/15/23	34,492	37,067
NEWMONT MINING	Corporate Bond, 6.25%, 10/1/39	9,468	10,656
ANHEUSER- BUSCH INC	Corporate Bond, 2.65%, 2/1/21	42,052	43,392
AIR LEASE CORP	Corporate Bond, 4.25%, 9/15/24	14,700	14,497
AETNA INC	Corporate Bond, 3.2%, 6/15/26	36,033	36,759
EOG RESOURCES	Corporate Bond, 4.15%, 1/15/26	42,732	45,108
DEUTSCHE BANK AG	Corporate Bond, 2.85%, 5/10/19	40,999	41,041
COMCAST CORP	Corporate Bond, 3.4%, 1/15/46	21,840	21,443
DELPHI AUTOMOTIVE	Corporate Bond, 4.25%, 1/15/26	37,562	38,070
MOLSON COORS BREWING	Corporate Bond, 3.0%, 7/15/26	35,249	35,378
GENERAL MOTORS CO	Corporate Bond, 5.2%, 4/1/45	39,190	40,383
BARRICK NA FIN LL	Corporate Bond, 5.75%, 5/1/43	17,493	18,743
GILEAD SCIENCES	Corporate Bond, 3.5%, 8/15/26	158,843	157,456
RIO TINTO FIN USA	Corporate Bond, 2.875%, 8/21/22	41,855	45,992
INTERNATIONAL PAP	Corporate Bond, 3.0%, 2/15/27	13,929	14,036

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(a)	(b)	(c)	(d)
JP MORGAN CHA	Corporate Bond, 2.295%, 8/15/18	27,104	27,113
MAGNA INTERNATIONAL	Corporate Bond, 4.15%, 10/1/25	15,404	15,288
DEVON ENERGY CORP	Corporate Bond, 5.85%, 12/15/25	41,922	50,708
VERIZON COMMUNICATIONS	Corporate Bond, 4.125%, 8/15/46	14,069	14,140
VERIZON COMMUNICATIONS	Corporate Bond, 4.862%, 8/21/46	17,277	17,826
ENSCO PLC	Corporate Bond, 4.5%, 10/1/24	6,435	6,278
NVIDIA CORP	Corporate Bond, 2.2%, 9/16/21	23,034	23,109
SHELL INTERNATIONAL	Corporate Bond, 3.75%, 9/12/46	13,750	13,775
DUKE ENERGY CORP	Corporate Bond, 3.75%, 9/1/46	14,087	13,774
GOLDMAN SACHS GROUP	Corporate Bond, 5.15%, 5/22/45	20,906	24,033
SHIRE ACQ INV IRE	Corporate Bond, 2.4%, 9/23/21	23,033	23,051
COMCAST CORP	Corporate Bond, 4.65%, 7/15/42	18,664	20,229
US TSY NOTE	U.S. Government Security, 1.625%, 2/15/26	404,392	404,291
US TSY NOTE	U.S. Government Security, 1.375%, 2/29/20	592,304	602,512
US TSY NOTE	U.S. Government Security, 2.125%, 8/15/21	373,507	368,966
US TSY NOTE	U.S. Government Security, .75%, 2/28/18	240,159	240,966
US TSY NOTE	U.S. Government Security, .75%, 8/15/19	80,658	80,646
US TSY BOND	U.S. Government Security, 2.5%, 2/15/46	498,148	522,502
US TSY NOTE	U.S. Government Security, 1.25%, 10/31/18	175,772	175,631
US TSY NOTE	U.S. Government Security, 2.25%, 11/15/25	58,778	59,311
US TSY NOTE	U.S. Government Security, 1.625%, 5/15/26	448,011	449,147
US TSY NOTE	U.S. Government Security, .5%, 6/15/16	85,056	85,040
US TSY NOTE	U.S. Government Security, 1.625%, 7/31/20	2,754	27,568
US TSY NOTE	U.S. Government Security, .375%, 2/15/16	138,032	138,000
US TSY BOND	U.S. Government Security, 2.875%, 8/15/45	31,220	32,701
FNMA POOL #MA2771	U.S. Agency Security, 3.0%, 10/1/46	138,878	139,318

See Independent Auditors' Report.

Form 5500Department of the Treasury
Internal Revenue ServiceDepartment 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 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**2016****This Form is Open to Public Inspection****Part I Annual Report Identification Information**For calendar plan year 2016 or fiscal plan year beginning 01/01/2016 and ending 12/31/2016

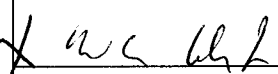
- A** This return/report is for: ☐ a multiemployer plan ☐ a multiple-employer plan (Filers checking this box must attach a list of participating employer information in accordance with the form instructions.)
- ☒ a single-employer plan ☐ a DFE (specify) _____
- B** This return/report is: ☐ the first 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 Premier Physician Services, Inc. Pension Plan	1b Three-digit plan number (PN) ▶ 001
	1c Effective date of plan 01/01/1992
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) Premier Physician Services, Inc. 332 Congress Park Dr Dayton OH 45459-4133	2b Employer Identification Number (EIN) 45-3684948
	2c Plan Sponsor's telephone number 937-312-3627
	2d Business code (see instructions) 621111

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>9/25/17</u>	WILLIAM COLE
Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE		
Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE		
Signature of DFE	Date	Enter name of individual signing as DFE
Preparer's name (including firm name, if applicable) and address (include room or suite number)		Preparer's telephone number

For Paperwork Reduction Act Notice, see the Instructions for Form 5500.

Form 5500 (2016)

3a Plan administrator's name and address ☒ Same as Plan Sponsor	3b Administrator's EIN 3c Administrator's telephone number
4 If the name and/or EIN of the plan sponsor has changed since the last return/report filed for this plan, enter the name, EIN and the plan number from the last return/report: a Sponsor's name	4b EIN 4c PN
5 Total number of participants at the beginning of the plan year	5 1, 075
6 Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines 6a(1) , 6a(2) , 6b , 6c , and 6d). a(1) Total number of active participants at the beginning of the plan year a(2) Total number of active participants at the end of the plan year b Retired or separated participants receiving benefits..... c Other retired or separated participants entitled to future benefits d Subtotal. Add lines 6a(2) , 6b , and 6c e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits. f Total. Add lines 6d and 6e g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item) h Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested	 6a(1) 647 6a(2) 0 6b 0 6c 0 6d 0 6e 0 6f 0 6g 0 6h 0
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	7
8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions: 2A 2C 3D 3H 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
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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)

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 2016 Form M-1 annual report. If the plan was not required to file the 2016 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 _____

PREMIER PHYSICIAN SERVICES, INC. PENSION PLAN
PLAN 001; EMPLOYER IDENTIFICATION NUMBER 31-1212677
FORM 5500, SCHEDULE H, PART IV, LINE 4i
SCHEDULE OF ASSETS (ACQUIRED AND DISPOSED OF WITHIN YEAR)
YEAR ENDED DECEMBER 31, 2016

IDENTITY OF ISSUE, BORROWER, LESSOR OR SIMILAR PARTY	DESCRIPTION OF INVESTMENT INCLUDING MATURITY DATE, RATE OF INTEREST, COLLATERAL, PAR, OR MATURITY VALUE	COSTS OF ACQUISITIONS		PROCEEDS OF DISPOSITIONS	
(a)	(b)	(c)		(d)	
UNITED PARCEL SER INC CL-B	Common Stock	\$	12,050	\$	12,736
CELGENE CORP	Common Stock		11,378		10,819
COMCAST CORP CLASS A	Common Stock		45,022		48,682
ADOBE SYSTEMS	Common Stock		40,587		42,842
MICROSOFT CORP	Common Stock		20,342		21,275
FREEPORT-MCMORAN INC	Common Stock		31,544		31,008
TE CONNECTIVITY LTD	Common Stock		30,735		28,862
AETNA INC	Common Stock		27,835		27,178
PALO ALTO NETWORKS INC	Common Stock		47,206		56,414
REGENERON PHARM	Common Stock		11,239		12,470
HOME DEPOT INC	Common Stock		16,922		18,865
BROADCOM LTD SHS	Common Stock		8,415		10,508
BIOGEN INC COM	Common Stock		18,612		21,565
VMWARE INC CLASS A	Common Stock		31,385		40,430
GENERAL ELECTRIC CO	Common Stock		32,199		31,438
ECOLAB INC	Common Stock		128,804		143,487
TWENTY-FIRST CENTURY FOX CL A	Common Stock		3,582		3,296
IONIS PHARMACEUTICALS INC	Common Stock		32,165		31,867
ZOETIS IN CLASS-A	Common Stock		22,829		28,739
SCHLUMBERGER LTD	Common Stock		60,149		62,715
FORTINET INC	Common Stock		11,189		12,252
ALEXION PHARM INC	Common Stock		94,123		88,806
JOHNSON & JOHNSON	Common Stock		73,864		72,979
APPLE INC	Common Stock		87,819		96,360
ALLEGRAN PLC	Common Stock		64,266		72,164
WEATHERFORD INTERNATIONAL	Common Stock		12,839		11,697
WESTERN DIGITAL CORPORATION	Common Stock		31,614		46,208
ANADARKO PETE	Common Stock		124,360		184,106
ROYAL CARRIBEAN CRUISES LTD	Common Stock		61,865		62,222
NORFOLK SOUTHERN CORP	Common Stock		43,769		44,607
KIMBERLY CLARK CORP	Common Stock		62,172		63,835
CROWN CASTLE INTL CORP	Common Stock		31,967		32,710
LINKEDIN CORP-A	Common Stock		10,229		17,048
VISA INC CL A	Common Stock		248,942		275,079
AMERICAN TOWER REIT COM	Common Stock		70,484		79,044
PPG INDUSTRIES INC	Common Stock		72,666		68,762
CSX CORP	Common Stock		32,925		33,743
CALIFORNIA RES CORP COM	Common Stock		50		44
DUKE ENERGY CORP	Common Stock		35,979		33,744
INTEL CORP	Common Stock		45,002		49,969

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YEAR ENDED DECEMBER 31, 2016

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(a)	(b)	(c)	(d)
SYNCHRONY FINANCIAL	Common Stock	120,896	116,416
WELLS FARGO & CO	Common Stock	197,518	194,862
HALLIBURTON CO	Common Stock	49,360	48,723
NXP SEMICONDUCTORS NV	Common Stock	62,655	60,440
HONEYWELL INTERNATIONAL INC	Common Stock	63,380	67,834
PIONEER NATURAL RESOURCES CO	Common Stock	91,042	124,120
ABBVIE INC	Common Stock	52,711	54,096
STARBUCKS CORP WASHINGTON	Common Stock	19,181	18,148
FEDEX CORP	Common Stock	43,601	47,139
SALESFORCE.COM, INC	Common Stock	23,235	20,914
CITIGROUP INC	Common Stock	12,618	12,565
CISCO SYS INC	Common Stock	132,095	162,500
AT&T INC	Common Stock	222,324	256,500
DOLLAR GEN CORP	Common Stock	31,839	31,217
ALIBABA GROUP HLDG LTD	Common Stock	40,036	43,925
VERIZON COMMUNICATIONS	Common Stock	88,988	92,632
ELI LILLY & CO	Common Stock	43,282	41,828
PROCTER & GAMBLE	Common Stock	47,165	49,443
ZIMMER BIOMET HLDGS INC	Common Stock	76,803	81,539
MARSH & MCLENNAN COS INC	Common Stock	8,667	10,070
TIME WARNER INC	Common Stock	39,236	37,705
STANLEY BLACK & DECKER INC	Common Stock	21,774	22,783
MC DONALDS CORP	Common Stock	32,947	34,372
SOUTHERN CO	Common Stock	48,161	47,512
BANK OF AMERICA CORP	Common Stock	46,960	48,217
AMER INTL GP INC	Common Stock	32,529	31,803
OCCIDENTAL PETROLEUM CORP DE	Common Stock	30,015	31,211
CHARTER COMMUNICATIONS INC	Common Stock	75,944	85,580
EXXON MOBIL CORP	Common Stock	78,719	84,343
MORGAN STANLEY	Common Stock	86,789	54,361
BOSTON SCIENTIFIC CORP	Common Stock	18,494	25,685
CANADIAN NATURAL RESOURCES LTD	Common Stock	117,216	125,078
JP MORGAN CHASE & CO	Common Stock	8,269	8,302
HEWLETT PACKARD ENTERPRISE	Common Stock	62,472	68,502
XYLEM INC COM	Common Stock	30,526	35,200
WEYERHAEUSER CO	Common Stock	35,931	47,938
SMITH & NEWPHEW PLC ADR	Common Stock	11,440	11,992
CENOVUS ENERGY INC COM	Common Stock	7,541	7,327
PT BK MANDIRI PERSERO TBK UNSP	Common Stock	9,058	11,269
RELX PLC SPONSORED ADR	Common Stock	10,349	11,312

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PREMIER PHYSICIAN SERVICES, INC. PENSION PLAN
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SCHEDULE OF ASSETS (ACQUIRED AND DISPOSED OF WITHIN YEAR)
YEAR ENDED DECEMBER 31, 2016

IDENTITY OF ISSUE, BORROWER, LESSOR OR SIMILAR PARTY	DESCRIPTION OF INVESTMENT INCLUDING MATURITY DATE, RATE OF INTEREST, COLLATERAL, PAR, OR	COSTS OF ACQUISITIONS	PROCEEDS OF DISPOSITIONS
	MATURITY VALUE		
(a)	(b)	(c)	(d)
COMPAGNIE FIN RICHIEMONTAG ADR	Common Stock	25,319	23,620
SKY PLC	Common Stock	21,031	23,609
FANUC CORPORATION UNSP ADR	Common Stock	62,112	68,299
ALLIANZ SE ADS	Common Stock	34,201	34,664
CK HUTCHISON HLDGS LTD ADR	Common Stock	28,713	32,499
JAPAN TOB INC	Common Stock	42,902	43,236
SANDVIK AB SPONS ADR	Common Stock	17,983	18,003
WOLTERS KLUWER NV SPON ADR	Common Stock	28,878	30,282
PUBLICIS GROUPE SA ADS	Common Stock	22,271	22,455
ROYAL DUTCH SHELL PLC CL B	Common Stock	159,193	180,393
TAIWAN SEMICONDUCTOR MFG CO	Common Stock	14,107	18,132
TEVA PHARMACEUTICALS UNSP ADR	Common Stock	18,452	17,175
ROCHE HOLDINGS ADR	Common Stock	113,843	111,936
GENTIGE AB UNSPONS ADR	Common Stock	3,111	2,984
DESNO CORP LTD ADR	Common Stock	9,347	10,348
BAIDU INC ADS	Common Stock	106,516	118,753
UBS GROUP AG SGS	Common Stock	14,689	13,568
PROSIEBENSAT 1 MEDIA AG ADR	Common Stock	63,028	55,640
JULIUS BAER GROUP LTD UN AADR	Common Stock	14,424	13,955
SAP AG	Common Stock	16,796	19,690
FOMENTO ECONOMICO MEXICANO	Common Stock	28,718	30,050
AKORN INC	Common Stock	5,611	6,126
ARTISA NETWORKS INC	Common Stock	19,842	21,058
WHITEWAVE FOODS CORP CL A	Common Stock	30,412	40,047
EMCOR GROUP INC	Common Stock	16,523	17,081
SABRE CORPORATION	Common Stock	20,132	19,222
TERDATA CORP	Common Stock	19,984	19,049
BROADRIDGE FINANCIAL SOLUTIONS LLC	Common Stock	42,543	52,086
CARRIZO OIL & GAS INC	Common Stock	6,484	3,943
JAZZ PHARMACEUTICALS PLC	Common Stock	4,967	4,218
MICHEALS COS INC	Common Stock	30,545	27,796
CHINA LODGING GRP LTD SPON ADR	Common Stock	15,861	18,460
THE BOSTON BEER CO INC A	Common Stock	19,693	16,012
ANACOR PHARMACEUTICALS	Common Stock	4,850	7,642
DEXCOM INC	Common Stock	8,938	12,489
BERRY PLASTICS GROUP INC	Common Stock	16,487	17,235
NORWEGIAN CRUISE LINE HLDS INC	Common Stock	48,747	45,578
MOMENTA PHARM INC.	Common Stock	9,566	9,599
PROTO LABS	Common Stock	8,294	7,717
GENPACT LTD	Common Stock	28,484	24,678

See Independent Auditors' Report.

PREMIER PHYSICIAN SERVICES, INC. PENSION PLAN
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SCHEDULE OF ASSETS (ACQUIRED AND DISPOSED OF WITHIN YEAR)
YEAR ENDED DECEMBER 31, 2016

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(a)	(b)	(c)	(d)
CARTER'S	Common Stock	10,668	9,689
PRESTIGE BRANDS HOLDINGS INC	Common Stock	27,348	23,806
UNITED RENTALS	Common Stock	16,219	15,789
AFFILIATED MGRS GROUP	Common Stock	30,872	27,678
CHENIERE ENERGY INC	Common Stock	30,277	51,590
BROADSOFT INC COM	Common Stock	11,085	14,341
HAWAIIAN HOLDINGS INC	Common Stock	39,892	37,570
BANK OF THE OZARKS INC	Common Stock	31,088	26,827
ADVANCED ENERGY IND INC	Common Stock	20,464	26,414
WILLIS TOWERS WATSON PUB LTD	Common Stock	57,350	55,800
DAVE & BUSTERS ENTERTAINMENT INC	Common Stock	27,060	28,586
PIMCO ALL ASSET ALL AUTH INST	Common Stock	30,613	33,541
VANGUARD HIGH DIV YIELD ETF	Common Stock	68,196	70,955
CALAMOS MARKET NEUTRAL INC	Common Stock	26,388	26,908
TEMPLETON GLOBAL BOND FUND ADV	Common Stock	45,286	45,054
BIDVEST GROUP LTD SPONS ADR	Common Stock	3,133	3,112
CHINA MOBILE LTD	Common Stock	6,450	7,297
PT SEMEN GRESIK PERSERO ADR	Common Stock	651	7,297
TURK TELEKOMUNIKASYON AS ADR	Common Stock	10,412	9,739
MOBILE TELESYSTEMS PJSC	Common Stock	23,685	20,638
CHINA CONSTRUCTION BANK	Common Stock	515	521
SANLAM LTD ADR	Common Stock	3,792	5,572
COMMERCIAL INTL BNK LTD SP ADR	Common Stock	8,696	9,061
AMERICA MOVIL SA DE CV AD L	Common Stock	10,951	9,422
IMPERIAL HOLDINGS LTD ADR	Common Stock	4,043	5,755
WEICHAI PWR CO LTD UNSPON ADR	Common Stock	14,584	21,772
LIFE HEALTHCARE GRP HOLDINGS LTD	Common Stock	14,907	16,474
YPF SOCIEDAD ADS REP 1 CL-D SH	Common Stock	9,104	8,221
PARAMOUNT GROUP INC	Common Stock	37,226	37,635
MID AMER APART COMM INC	Common Stock	23,637	24,048
VORNADO REALTY TRUST	Common Stock	71,194	86,129
LAMAR ADVERTISING CO CL A	Common Stock	10,876	10,745
AVALONBAY COMM INC	Common Stock	44,011	45,189
EQUITY RESIDENTIAL	Common Stock	96,737	89,131
RETAIL OPPORTUNITY INVESTMENTS CORP	Common Stock	841	945
COUSINS PROPERTIES INC GA	Common Stock	8,583	8,456
DCT INDUSTRIAL TRUST INC	Common Stock	30,558	38,548
SUN COMMUNITIES	Common Stock	20,599	21,163
HUDSON PACIFIC PROPERTIES	Common Stock	6,861	9,258
VENTAS INC	Common Stock	47,972	48,595

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YEAR ENDED DECEMBER 31, 2016

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(a)	(b)	(c)	(d)
GENERAL GROWTH PROPERTIES	Common Stock	41,967	42,044
SIMON PROPERTY GROUP INC	Common Stock	61,981	71,398
LIBERTY PROPERTY TRUST SBI	Common Stock	18,975	23,078
REALTY INCOME CORP	Common Stock	33,123	37,032
FEDL RLTY INVT TRUST S B I	Common Stock	31,640	35,719
WELLTOWER INC	Common Stock	25,534	28,490
QTS REALTY INC COM CL A	Common Stock	762	919
ACADIA REALTY TR SBI	Common Stock	22,171	23,070
EPR PROPERTIES	Common Stock	47,625	56,836
PUBLIC STORAGE	Common Stock	7,033	6,178
EXTRA SPACE STORAGE INC	Common Stock	39,383	36,325
RJ ROLLING TRUST	Common Stock	16,798	17,205
CUBESMART COM	Common Stock	34,090	31,894
HEALTHCARE REALTY TRUST INCORP	Common Stock	34,000	42,086
APPLE HOSPITALITY REIT INC COM	Common Stock	23,032	23,042
INFREAREIT INC	Common Stock	2,046	1,873
EQUITY LIFESTYLE PROPERTIES	Common Stock	16,180	18,272
BOSTON PROPERTIES INC	Common Stock	24,324	30,334
NATIONAL HEALTH INVESTORS INC	Common Stock	31,289	33,203
WASH REAL EST INV TR MARYLAND	Common Stock	25,400	24,049
AMERICAN HOMES	Common Stock	10,076	11,821
HOST HOTEL & RESORTS	Common Stock	61,128	61,622
BRANDYWINE REALTY TR SBI	Common Stock	29,120	33,469
CYRUSONE INC	Common Stock	18,919	23,146
FIRST INDUSTRIAL REALTY TR INC	Common Stock	13,978	15,279
SUNSTONE HOTEL INVESTORS, INC	Common Stock	11,164	11,583
POST PROPERTIES INC	Common Stock	36,588	40,234
DDR CORP COM	Common Stock	12,256	12,832
ESSEX PROPERTY TRUST INC	Common Stock	68,946	69,715
EQUINOX INC	Common Stock	20,299	24,132
AMERICAN CAMPUS COMMUNITIES INC	Common Stock	24,362	28,857
PROLOGIS INC COM	Common Stock	63,709	82,077
DIGITAL REALTY TRUST INC	Common Stock	36,063	34,459
NATIONAL RETAIL PROPERTIES I	Common Stock	59,710	65,642
LTC PROPERTIES INC	Common Stock	16,341	17,058
SL GREEN REALTY CP	Common Stock	85,609	101,236
HILTON WORLDWIDE HOLDINGS INC.	Common Stock	39,476	43,031
APARTMENT INVT & MGMT CO A	Common Stock	64,373	75,983
WISDOM TREE SMALL CAP DIV FUND	Common Stock	32,675	37,469
ISHARES ASIA/PACIFIC DIV ETF	Common Stock	42,749	47,191

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YEAR ENDED DECEMBER 31, 2016

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(a)	(b)	(c)	(d)
PHILLIPS 66 COM	Common Stock	80,819	76,702
KELLOG CO	Common Stock	79,719	85,248
LYONDELLBASELL NV CL-A	Common Stock	127,157	119,885
SPIRE INC	Common Stock	98,297	102,093
TEGNA INC	Common Stock	16,912	16,578
MASCO CORP	Common Stock	12,699	17,132
PNC FINANCIAL SERVICES GROUP	Common Stock	20,286	21,829
ALASKA AIR GROUP INCORPORATED	Common Stock	72,198	73,988
IDACORP INC	Common Stock	123,697	140,235
JACK HENRY& ASSOC INC	Common Stock	59,610	64,986
CHECK POINT SOFTWARE TECH LTD	Common Stock	38,194	37,488
ALFA LAVAL AB-UNSPONS ADR	Common Stock	111,431	139,504
AIR LIQUIDE ADR	Common Stock	20,904	21,434
DBS HOLDINGS LTD SP	Common Stock	26,242	26,703
BAYER AG SPON ADR	Common Stock	126,853	123,832
ARM HOLDINGS PLC ADS	Common Stock	13,050	22,262
BANCO BILBAO VIZ ARG SA ADS	Common Stock	1,047	1,055
FRESENIUS MEDICAL CARE AG&CO	Common Stock	25,150	25,350
BBA AVIATION PLC ADR	Common Stock	21,968	22,712
PARK24 CO LTD SPONSORED	Common Stock	65,486	74,519
LINDE AG SPONSERE ADR	Common Stock	19,268	21,285
COLOPLAST AS ADR	Common Stock	21,371	21,631
TENARIS S.A	Common Stock	48,975	49,134
KUBOTA CP ADR	Common Stock	57,067	54,052
BHP BILLITON FIN	Corporate Bond, 3.25%, 11/21/21	43,940	44,835
WILLIAMS PARTNERS	Corporate Bond, 4.5%, 11/15/23	34,492	37,067
NEWMONT MINING	Corporate Bond, 6.25%, 10/1/39	9,468	10,656
ANHEUSER- BUSCH INC	Corporate Bond, 2.65%, 2/1/21	42,052	43,392
AIR LEASE CORP	Corporate Bond, 4.25%, 9/15/24	14,700	14,497
AETNA INC	Corporate Bond, 3.2%, 6/15/26	36,033	36,759
EOG RESOURCES	Corporate Bond, 4.15%, 1/15/26	42,732	45,108
DEUTSCHE BANK AG	Corporate Bond, 2.85%, 5/10/19	40,999	41,041
COMCAST CORP	Corporate Bond, 3.4%, 1/15/46	21,840	21,443
DELPHI AUTOMOTIVE	Corporate Bond, 4.25%, 1/15/26	37,562	38,070
MOLSON COORS BREWING	Corporate Bond, 3.0%, 7/15/26	35,249	35,378
GENERAL MOTORS CO	Corporate Bond, 5.2%, 4/1/45	39,190	40,383
BARRICK NA FIN LL	Corporate Bond, 5.75%, 5/1/43	17,493	18,743
GILEAD SCIENCES	Corporate Bond, 3.5%, 8/15/26	158,843	157,456
RIO TINTO FIN USA	Corporate Bond, 2.875%, 8/21/22	41,855	45,992
INTERNATIONAL PAP	Corporate Bond, 3.0%, 2/15/27	13,929	14,036

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PREMIER PHYSICIAN SERVICES, INC. PENSION PLAN
PLAN 001; EMPLOYER IDENTIFICATION NUMBER 31-1212677
FORM 5500, SCHEDULE H, PART IV, LINE 4i
SCHEDULE OF ASSETS (ACQUIRED AND DISPOSED OF WITHIN YEAR)
YEAR ENDED DECEMBER 31, 2016

IDENTITY OF ISSUE, BORROWER, LESSOR OR SIMILAR PARTY	DESCRIPTION OF INVESTMENT INCLUDING MATURITY DATE, RATE OF INTEREST, COLLATERAL, PAR, OR MATURITY VALUE	COSTS OF ACQUISITIONS	PROCEEDS OF DISPOSITIONS
(a)	(b)	(c)	(d)
JP MORGAN CHA	Corporate Bond, 2.295%, 8/15/18	27,104	27,113
MAGNA INTERNATIONAL	Corporate Bond, 4.15%, 10/1/25	15,404	15,288
DEVON ENERGY CORP	Corporate Bond, 5.85%, 12/15/25	41,922	50,708
VERIZON COMMUNICATIONS	Corporate Bond, 4.125%, 8/15/46	14,069	14,140
VERIZON COMMUNICATIONS	Corporate Bond, 4.862%, 8/21/46	17,277	17,826
ENSCO PLC	Corporate Bond, 4.5%, 10/1/24	6,435	6,278
NVIDIA CORP	Corporate Bond, 2.2%, 9/16/21	23,034	23,109
SHELL INTERNATIONAL	Corporate Bond, 3.75%, 9/12/46	13,750	13,775
DUKE ENERGY CORP	Corporate Bond, 3.75%, 9/1/46	14,087	13,774
GOLDMAN SACHS GROUP	Corporate Bond, 5.15%, 5/22/45	20,906	24,033
SHIRE ACQ INV IRE	Corporate Bond, 2.4%, 9/23/21	23,033	23,051
COMCAST CORP	Corporate Bond, 4.65%, 7/15/42	18,664	20,229
US TSY NOTE	U.S. Government Security, 1.625%, 2/15/26	404,392	404,291
US TSY NOTE	U.S. Government Security, 1.375%, 2/29/20	592,304	602,512
US TSY NOTE	U.S. Government Security, 2.125%, 8/15/21	373,507	368,966
US TSY NOTE	U.S. Government Security, .75%, 2/28/18	240,159	240,966
US TSY NOTE	U.S. Government Security, .75%, 8/15/19	80,658	80,646
US TSY BOND	U.S. Government Security, 2.5%, 2/15/46	498,148	522,502
US TSY NOTE	U.S. Government Security, 1.25%, 10/31/18	175,772	175,631
US TSY NOTE	U.S. Government Security, 2.25%, 11/15/25	58,778	59,311
US TSY NOTE	U.S. Government Security, 1.625%, 5/15/26	448,011	449,147
US TSY NOTE	U.S. Government Security, .5%, 6/15/16	85,056	85,040
US TSY NOTE	U.S. Government Security, 1.625%, 7/31/20	2,754	27,568
US TSY NOTE	U.S. Government Security, .375%, 2/15/16	138,032	138,000
US TSY BOND	U.S. Government Security, 2.875%, 8/15/45	31,220	32,701
FNMA POOL #MA2771	U.S. Agency Security, 3.0%, 10/1/46	138,878	139,318

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