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

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.)
- [X] a single-employer plan
- [ ] a DFE (specify) ____

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

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

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

Part II Basic Plan Information—enter all requested information

1a Name of plan
CENTRO INC. 401(K) SAVINGS PLAN

1b Three-digit plan number (PN) ▶ 001

1c Effective date of plan 01/01/2005

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)

CENTRO, INC.

11 EAST MADISON ST
CHICAGO, IL 60602

2b Employer Identification Number (EIN) 36-4476242

2c Plan Sponsor's telephone number 312-397-3330

2d Business code (see instructions) 541800

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

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

SIGN HERE	Filed with authorized/valid electronic signature.	10/12/2017	VICTORIA GRANT
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

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

Preparer's telephone number

3a Plan administrator's name and address [X] Same as Plan Sponsor	**3b** Administrator's EIN	
	3c Administrator's telephone number	
4 If the name and/or EIN of the plan sponsor has changed since the last return/report filed for this plan, enter the name, EIN and the plan number from the last return/report:	**4b** EIN	
a Sponsor's name	**4c** PN	
5 Total number of participants at the beginning of the plan year	**5**	696
6 Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines **6a(1), 6a(2), 6b, 6c,** and **6d**).		
a(1) Total number of active participants at the beginning of the plan year	**6a(1)**	603
a(2) Total number of active participants at the end of the plan year	**6a(2)**	597
b Retired or separated participants receiving benefits	**6b**	0
c Other retired or separated participants entitled to future benefits	**6c**	150
d Subtotal. Add lines **6a(2)**, **6b**, and **6c**.	**6d**	747
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	**6e**	0
f Total. Add lines **6d** and **6e**.	**6f**	747
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**	664
h Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested	**6h**	0
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	**7**	

8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions:

2E 2F 2G 2J 2K 2R 2T 3D

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

9a Plan funding arrangement (check all that apply)		**9b** Plan benefit arrangement (check all that apply)	
(1)	[ ] Insurance	**(1)**	[ ] Insurance
(2)	[ ] Code section 412(e)(3) insurance contracts	**(2)**	[ ] Code section 412(e)(3) insurance contracts
(3)	[X] Trust	**(3)**	[X] Trust
(4)	[ ] General assets of the sponsor	**(4)**	[ ] General assets of the sponsor

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

a Pension Schedules

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

b General Schedules

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

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

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

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

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

11c Enter the Receipt Confirmation Code for the 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)	Service Provider Information	OMB No. 1210-0110
Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ **File as an attachment to Form 5500.**	**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	**B** Three-digit plan number (PN) ▶	
CENTRO INC. 401(K) SAVINGS PLAN		001
C Plan sponsor's name as shown on line 2a of Form 5500	**D** Employer Identification Number (EIN)	
CENTRO, INC.	36-4476242	

Part I Service Provider Information (see instructions)

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

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

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

FIDELITY INVESTMENTS INSTITUTIONAL

04-2647786

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

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

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

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

FIDELITY INVESTMENTS INSTITUTIONAL

04-2647786

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
60 64 65 71	RECORDKEEPER	54281	Yes [X] No [ ]	Yes [X] No [ ]	0	Yes [X] No [ ]

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

NFP ADVISOR SERVICES LLC

1750 E. GOLF ROAD
SUITE 1100
SCHAUMBURG, IL 60173

(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?
27	ADVISOR	50059	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

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

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

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

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

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

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

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

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

Part I Service Provider Information (continued)

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

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

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
GS INFL-PRO SECS IS - GOLDMAN, SAC 13-5108880	0.10%

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

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

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

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

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

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

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

(complete as many entries as needed)

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE D (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

DFE/Participating Plan Information

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

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

OMB No. 1210-0110

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
CENTRO INC. 401(K) SAVINGS PLAN

B Three-digit plan number (PN) ▶ 001

C Plan or DFE sponsor's name as shown on line 2a of Form 5500
CENTRO, INC.

D Employer Identification Number (EIN)
36-4476242

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

a Name of MTIA, CCT, PSA, or 103-12 IE: MIP CL 1

b Name of sponsor of entity listed in (a): FIDELITY MANAGEMENT TRUST COMPANY

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
04-3022712-024	C	205479

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

a Plan name

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

a Plan name

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

a Plan name

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

a Plan name

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

a Plan name

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

a Plan name

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

a Plan name

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

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

a Plan name

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

a Plan name

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

a Plan name

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

a Plan name

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

a Plan name

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

SCHEDULE H (Form 5500)

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

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

A Name of plan
CENTRO INC. 401(K) SAVINGS PLAN

B Three-digit plan number (PN) ▶ 001

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

D Employer Identification Number (EIN)
36-4476242

Part I Asset and Liability Statement

1 Current value of plan assets and liabilities at the beginning and end of the plan year. Combine the value of plan assets held in more than one trust. Report the value of the plan's interest in a commingled fund containing the assets of more than one plan on a line-by-line basis unless the value is reportable on lines 1c(9) through 1c(14). Do not enter the value of that portion of an insurance contract which guarantees, during this plan year, to pay a specific dollar benefit at a future date. **Round off amounts to the nearest dollar.** MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 1b(1), 1b(2), 1c(8), 1g, 1h, and 1i. CCTs, PSAs, and 103-12 IEs also do not complete lines 1d and 1e. See instructions.

Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a	0	0
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	1509672	1578660
(2) Participant contributions	1b(2)	0	0
(3) Other	1b(3)	0	0
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	0	46841
(2) U.S. Government securities	1c(2)	0	0
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)	0	0
(B) All other	1c(3)(B)	0	0
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)	0	0
(B) Common	1c(4)(B)	0	0
(5) Partnership/joint venture interests	1c(5)	0	0
(6) Real estate (other than employer real property)	1c(6)	0	0
(7) Loans (other than to participants)	1c(7)	0	0
(8) Participant loans	1c(8)	0	0
(9) Value of interest in common/collective trusts	1c(9)	133657	205479
(10) Value of interest in pooled separate accounts	1c(10)	0	0
(11) Value of interest in master trust investment accounts	1c(11)	0	0
(12) Value of interest in 103-12 investment entities	1c(12)	0	0
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	13827782	18896920
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other	1c(15)	0	0

			(a) Beginning of Year	(b) End of Year
1d	Employer-related investments:			
	(1) Employer securities	1d(1)	0	0
	(2) Employer real property	1d(2)	0	0
e	Buildings and other property used in plan operation	1e	0	0
f	Total assets (add all amounts in lines 1a through 1e)	1f	15471111	20727900
	Liabilities			
g	Benefit claims payable	1g	0	0
h	Operating payables	1h	0	0
i	Acquisition indebtedness	1i	0	0
j	Other liabilities	1j	0	0
k	Total liabilities (add all amounts in lines 1g through1j)	1k	0	0
	Net Assets			
l	Net assets (subtract line 1k from line 1f)	1l	15471111	20727900

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)	1579776	
	(B) Participants	2a(1)(B)	3855975	
	(C) Others (including rollovers)	2a(1)(C)	438964	
	(2) Noncash contributions	2a(2)	0	
	(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		5874715
b	**Earnings on investments:**			
	(1) Interest:			
	(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	30	
	(B) U.S. Government securities	2b(1)(B)	0	
	(C) Corporate debt instruments	2b(1)(C)	0	
	(D) Loans (other than to participants)	2b(1)(D)	0	
	(E) Participant loans	2b(1)(E)	0	
	(F) Other	2b(1)(F)	0	
	(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		30
	(2) Dividends: **(A)** Preferred stock	2b(2)(A)	0	
	(B) Common stock	2b(2)(B)	0	
	(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	442368	
	(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		442368
	(3) Rents	2b(3)		0
	(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	2b(4)(A)	0	
	(B) Aggregate carrying amount (see instructions)	2b(4)(B)	0	
	(C) Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result	2b(4)(C)		0
	(5) Unrealized appreciation (depreciation) of assets: **(A)** Real estate	2b(5)(A)	0	
	(B) Other	2b(5)(B)	0	
	(C) Total unrealized appreciation of assets. Add lines **2b(5)(A)** and **(B)**	2b(5)(C)		0

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		2265
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		0
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		0
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		0
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		1139697
c Other income	2c		0
d Total income. Add all **income** amounts in column (b) and enter total	2d		7459075
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	2097910	
(2) To insurance carriers for the provision of benefits	2e(2)	0	
(3) Other	2e(3)	0	
(4) Total benefit payments. Add lines **2e(1)** through **(3)**	2e(4)		2097910
f Corrective distributions (see instructions)	2f		306
g Certain deemed distributions of participant loans (see instructions)	2g		0
h Interest expense	2h		0
i Administrative expenses: (1) Professional fees	2i(1)	0	
(2) Contract administrator fees	2i(2)	0	
(3) Investment advisory and management fees	2i(3)	0	
(4) Other	2i(4)	104070	
(5) Total administrative expenses. Add lines **2i(1)** through **(4)**	2i(5)		104070
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		2202286
Net Income and Reconciliation			
k Net income (loss). Subtract line **2j** from line **2d**	2k		5256789
l Transfers of assets:			
(1) To this plan	2l(1)		0
(2) From this plan	2l(2)		

Part III Accountant's Opinion

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

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

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

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

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

(1) Name: R. J. AUGUSTINE **(2)** EIN: 36-3657241

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

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

Part IV Compliance Questions

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

During the plan year:

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

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

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

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

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

5c If the plan is a defined benefit plan, is it covered under the PBGC insurance program (See ERISA section 4021.)? ..... ☐ Yes ☐ No ☐ Not determined
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
CENTRO INC. 401(K) SAVINGS PLAN

B Three-digit plan number (PN) ▶ 001

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

D Employer Identification Number (EIN)
36-4476242

Part I Distributions

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

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

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

EIN(s): 04-6568107

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

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

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

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

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

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

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

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

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

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

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

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

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

Part III Amendments

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

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

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

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

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

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

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

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

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

Part VII IRS Compliance Questions

20a Is the plan a 401(k) plan? 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 _____/_____/_____.

CENTRO INC. 401(K) SAVINGS PLAN

FINANCIAL STATEMENTS

FOR THE YEARS ENDED
DECEMBER 31, 2016 AND 2015

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NOTE: A schedule of reportable transactions has not been prepared because there were no individual reportable transactions exceeding 5% of the current value of plan assets threshold.

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INDEPENDENT AUDITORS' REPORT

Board of Trustees
Centro Inc. 401(k) Savings Plan
Chicago, Illinois

Report on the Financial Statements

We were engaged to audit the accompanying financial statements of Centro Inc. 401(k) Savings Plan (the Plan), which comprise the statements of net assets available for benefits as of December 31, 2016 and 2015, and the related statement of changes in net assets 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

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 conducting the audit in accordance with auditing standards generally accepted in the United States of America. Because of the matter described in the *Basis for Disclaimer of Opinion* paragraph, however, we were not able to obtain sufficient appropriate audit evidence to provide a basis for an audit opinion.

Basis for Disclaimer of Opinion

As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Note L, which was certified by the Fidelity Management Trust Company, the Trustee of the Plan, except for comparing the information with the related information included in the 2016 financial statements and supplemental schedule. We have been informed by the plan administrator that the Trustee holds the Plan's investment assets and executes investment transactions. The plan administrator has obtained a certification from the Trustee as of December 31, 2016 and 2015 and for the year ended December 31, 2016, that the information provided to the plan administrator by the Trustee is complete and accurate.

Disclaimer of Opinion

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

(Continued)

Other Matter

The supplemental schedule (Schedule H, line 4i – Schedule of Assets for Investment) as of December 31, 2016 is required by the Department of Labor's (DOL) Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 and is presented for the purpose of additional analysis and is not a required part of the financial statements. Because of the significance of the matter described in the *Basis for Disclaimer of Opinion* Paragraph, we do not express an opinion of these supplemental schedules.

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

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

R. J. Augustine & Associates, Ltd.

R.J. Augustine & Associates, Ltd.
CERTIFIED PUBLIC ACCOUNTANTS

September 30, 2017

CENTRO INC. 401(K) SAVINGS PLAN
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
DECEMBER 31, 2016 AND 2015

PARTICIPANT DIRECTED

	2016	2015
ASSETS		
Investments at Fair Value	**$ 19,149,240**	$ 13,961,439
RECEIVABLES		
Employer's Contributions	**1,578,660**	1,509,672
TOTAL ASSETS	**20,727,900**	15,471,111
TOTAL LIABILITIES	**-**	-
NET ASSETS AVAILABLE FOR BENEFITS	**$ 20,727,900**	$ 15,471,111

See independent auditors' report.
The accompanying notes are an integral part of the financial statements.

CENTRO INC. 401(K) SAVINGS PLAN
STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
FOR THE YEAR ENDED DECEMBER 31, 2016

PARTICIPANT DIRECTED

ADDITIONS		
Additions to Net Assets		
Contributions		
Participants	$	3,855,975
Employer 401(k) Match and Safe Harbor		1,579,776
Rollovers		438,964
Total Contributions		5,874,715
Investment Income		
Net Appreciation in Fair Value of Investments		1,141,962
Interest and Dividends		442,398
Total Investment Income		1,584,360
TOTAL ADDITIONS		7,459,075
DEDUCTIONS		
Deductions from Net Assets:		
Benefits Paid to Participants		2,098,216
Administrative Expense		104,070
TOTAL DEDUCTIONS		2,202,286
INCREASE IN NET ASSETS AVAILABLE FOR BENEFITS		5,256,789
NET ASSETS AVAILABLE FOR BENEFITS		
Beginning of Year		15,471,111
End of Year	$	20,727,900

See independent auditors' report.
The accompanying notes are an integral part of the financial statements.

CENTRO INC. 401(K) SAVINGS PLAN
NOTES TO FINANCIAL STATEMENTS
FOR THE YEARS ENDED DECEMBER 31, 2016 AND 2015

A. DESCRIPTION OF PLAN:

The following brief description of the Centro Inc. (the Company) 401(k) Savings Plan (the Plan) is provided for general information purposes only. Interested parties should refer to the Plan agreement for more complete information.

1. *General.* The Plan is a defined contribution plan covering eligible employees of Centro Inc.(the Company) It is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA).

2. *Plan Administration.* The Plan is administered by the board of trustees of the Company. The Plan's trustee, Fidelity Management Trust Company (the Trustee), is responsible for the custody and management of the Plan's assets.

3. *Eligibility for Elective Deferrals.* The eligibility requirements for the purpose of making Elective Deferrals to the Plan are as follows:

    a. **General Eligibility Requirements:** For the purpose of making elective deferrals only, an eligible employee will enter the Plan as a participant on the applicable entry date upon reaching Age 21. This Plan has no minimum service requirement to participate.

    b. **Eligible Classes of Employees:** For the purpose of making elective deferrals, all employees are eligible to participate in the Plan upon satisfying the eligibility requirements.

    c. **Entry Date for Elective Deferrals:** In order to make elective deferrals, an eligible employee will enter the Plan as a participant on the first day of the month coinciding with or next following the date you satisfy the eligibility conditions described above.

4. *Contributions.* Each Plan Year the employer may elect to make a contribution to the Plan, the amount of which will be determined in accordance with the following provisions:

    a. **Participant Contributions:** Each participant may enter into a salary deferral agreement authorizing the employer to withhold a percentage of the participant's compensation as an elective deferral. The amount of each participant's elective deferral for any plan year will be determined in accordance with the following provision, subject to any limitations thereon that may be imposed by the Administrator:

        1. **Deferral Percentage:** For each contribution period, a participant may elect that up to the maximum amount of compensation that will not cause the Plan to violate the ADP Test for the plan year be withheld as an elective deferral. Elective deferrals may be made in whole percentages of compensation or in specific dollar amounts as designated by the participant. The plan administrator will have the right to direct that such percentages of compensation be rounded to the next highest or lowest dollar. Furthermore, on a uniform nondiscriminatory basis, the plan administrator may permit a participant to identify separate components of the participant's compensation (such as base salary, bonuses, etc.) and to specify that a different percentage (or dollar amount) apply to each such component.

CENTRO INC. 401(K) SAVINGS PLAN
NOTES TO FINANCIAL STATEMENTS
FOR THE YEARS ENDED DECEMBER 31, 2016 AND 2015

A. DESCRIPTION OF PLAN (CONTINUED):

2. **Annual Dollar Limitation:** The actual dollar amount withheld during the course of a Plan Year under subparagraph (1) cannot exceed the lesser of (A) the maximum dollar amount permitted for that Plan Year under Code §402(g)(5), or (B) the maximum amount permitted for that Plan Year under subparagraph (1).

3. **Deferral Election with Respect to Bonuses and Severance:** On an uniform nondiscriminatory basis, and subject to the limits set forth in subparagraph (2) above, the plan administrator may permit a participant to make an election to defer up to 100% of (A) compensation received as a bonus that is paid after the end of the plan year for which the bonus is payable, but which is not paid more than two and one-half months after the last day of the plan year; and (B) compensation received as severance pay provided such compensation is received in a single lump sum payment. Severance pay that is received in the form of installment payments is not eligible for elective deferrals under this Plan.

4. **Roth Deferral:** Participants are eligible to make designated Roth deferrals to their respective accounts, if eligible.

b. **Employer Contributions:** The employer may in its sole discretion make a basic Employer Contribution to the Plan in accordance with the Plan:

1. **Employer Contribution Formula:** For each plan year or other contribution period in which a matching contribution is made, such matching contribution may be made in any specific dollar amount (including zero) and/or any specific percentage (including zero) of elective deferrals, as determined by the Company.

2. **Certain Amounts not Required to be Matched:** Notwithstanding subparagraph (1) above, for any plan year in which matching contributions are only contributed to the Plan on an annual basis, no matching contribution will be required with respect to that portion of an elective deferral or an excess contribution.

3. **Catch-up Contributions:** Participants may elect to make contributions to the Plan in an amount which does not exceed $18,000 (additional catch-up contributions of $6,000 are allowed if the participant is over 50 years old).

5. *Vesting.* Participants are vested immediately in employer contributions, their contributions, plus actual earnings thereon.

6. *Payments of Benefits.* On retirement, death, disability or termination of service, a participant (or participant's beneficiary in the event of death) may elect to receive a lump-sum distribution equal to the participant's vested account balance. In addition, financial hardship distributions are permitted if certain criteria are met.

7. *Forfeitures.* Forfeitures are not applicable with this plan as all participants are 100% vested in all participant contributions immediately.

CENTRO INC. 401(K) SAVINGS PLAN
NOTES TO FINANCIAL STATEMENTS
FOR THE YEARS ENDED DECEMBER 31, 2016 AND 2015

A. DESCRIPTION OF PLAN (CONTINUED):

8. *Participant Accounts.* Individual accounts are maintained for each of the Plan's participants to reflect the participant's contributions and related employer matching contributions, as well as the participant's share of the Plan's income and any related administrative expenses. Allocation of income and expenses are based on the proportion of that each participant's account balance bears to the total of all participant account balances.

9. *Notes Receivable from Participants.* Loans to participants are not permitted.

B. SUMMARY OF ACCOUNTING POLICIES:

1. *Basis of Accounting.* The Plan's financial statements are prepared on the accrual basis of accounting, whereby employer contributions and investment income are recorded as additions to net assets in the year to which they pertain.

2. *Investments Valuation and Income Recognition.* Investments are reported at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. See Note D for discussion of fair value measurements.

   Purchases and sales of securities are recorded on a trade-date basis.

3. *Payment of Benefits.* Benefits are recorded when paid.

4. *Administrative Expenses.* Certain expenses incurred in connection with the general administration of the Plan are paid by the Plan and are recorded in the accompanying statement of changes in net assets available for benefits.

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

6. *Subsequent events.* In accordance with the requirements in FASB ASC 855, *Subsequent Events*, the Plan has evaluated all subsequent events through September 30, 2017 (the date the Plan's financial statements were available to be issued). There were no material subsequent events that required recognition or additional disclosures in these financial statements.

7. *Adoption of New Accounting Standards.* During the year ended December 31, 2016, the Company adopted Accounting Standards Update No. 2015-07 related to fair value measurement and the disclosures for investments in certain entities that calculate net asset value ("NAV") per share (or its equivalent). The updated guidance applies to reporting entities that elect to measure the fair value of certain investments using the NAV per share (or its equivalent) of the investment as a practical expedient. Currently, investments valued using the practical expedient are categorized within the fair value hierarchy on the basis of when the investment is redeemable with the investee at NAV. The amendment removes the requirement to categorize within the fair value hierarchy all investments for which fair value is measured using the NAV per share practical expedient.

CENTRO INC. 401(K) SAVINGS PLAN
NOTES TO FINANCIAL STATEMENTS
FOR THE YEARS ENDED DECEMBER 31, 2016 AND 2015

B. SUMMARY OF ACCOUNTING POLICIES (CONTINUED):

The total amount of the investment measured at NAV is disclosed so that total investments in the fair value tables can be reconciled to total investments at fair value on the statement of net assets.

The Company also adopted Accounting Standards Update No. 2015-12, Plan Accounting: Plan Accounting: Defined Benefit Pension Plans (Topic 960), Defined Contribution Pension Plans (Topic 962), and Health and Welfare Benefit Plans (Topic 965): Part (I) Fully Benefit-Responsive Investment Contracts, Part (II) Plan Investment Disclosures, Part (III) Measurement Date Practical Expedient. The guidance issued a three-part update to simplify plan accounting of employee benefit plans. The update simplifies employee benefit plan reporting as outlined in Part (I) for fully benefit-responsive investment contracts and in Part (II) for plan investments disclosures. Part (III) provides for a measurement date practical expedient. Part (III) does not apply to the Plan.

As required, Part (I) and (II) of the guidance were adopted for the year ended December 31, 2016. In addition, the disclosure of individual investments greater than 5% of net assets and the net appreciation or depreciation in fair value of investments by general type have been removed from the former Investments note.

This guidance requires that amendments are applied retrospectively to all periods presented. Information presented for the year ended December 31, 2015 has been reclassified to reflect this updated guidance.

C. INVESTMENTS:

During 2016, the Plan's pooled separate account investments (including gains and losses on investment bought and sold as well as held during the year) appreciated in value by $1,141,962.

CENTRO INC. 401(K) SAVINGS PLAN
NOTES TO FINANCIAL STATEMENTS
FOR THE YEARS ENDED DECEMBER 31, 2016 AND 2015

D. FAIR VALUE MEASUREMENTS:

The framework for measuring fair value 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) and the lowest priority to unobservable inputs (level 3). The three levels of the fair value hierarchy under FASB ASC 820, *Fair Value Measurements,* are described as follows:

Level 1	Inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets that the Plan has the ability to access.
Level 2	Inputs to the valuation methodology include: • quoted prices for similar assets or liabilities in active markets; • quoted prices for identical or similar assets or liabilities in inactive markets; • inputs other than quoted prices that are observable for the asset or liability; • inputs that are derived principally from or corroborated by observable market data by correlation or other means. If the asset or liability has a specified (contractual) term, the level 2 input must be observable for substantially the full term of the asset or liability.
Level 3	Inputs to the valuation methodology are unobservable and significant to the fair value measurement.

The asset or liability's fair market 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.

The 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 and 2015.

- *Pooled Separate Accounts (PSA).* PSAs are made up of a wide variety of underlying investments such as equities, preferred stock, bonds, real estate and mutual funds. Assets of the separate accounts are assets of the insurance company but are not commingled with the insurance company's general assets. The net asset value (NAV) of a PSA is based on the market value of its underlying investments but the PSA NAV is not a publicly quoted price in an active market. Based on these facts, PSA will be categorized as a level 2 fair value.

CENTRO INC. 401(K) SAVINGS PLAN
NOTES TO FINANCIAL STATEMENTS
FOR THE YEARS ENDED DECEMBER 31, 2016 AND 2015

D. FAIR VALUE MEASUREMENTS (CONTINUED):

The following table sets forth by level, within the fair value hierarchy, the Plan's assets at fair value as of December 31, 2016 and 2015:

	Assets at Fair Value as of December 31, 2016			
	Level 1	Level 2	Level 3	Total
Pooled Separate Accounts	$ 18,943,761	$ 205,479	$ -	$ 19,149,240
	$ 18,943,761	$ 205,479	$ -	$ 19,149,240

	Assets at Fair Value as of December 31, 2015			
	Level 1	Level 2	Level 3	Total
Pooled Separate Accounts	$ 13,827,783	$ 133,656	$ -	$ 13,961,439
	$ 13,827,783	$ 133,656	$ -	$ 13,961,439

Fair Value of Investments in Entities that Use Net Asset Value:

The following table summarizes investments measured at fair value based on net asset value (NAVs) per share as of December 31, 2016 and 2015, respectively.

December 31, 2016	Fair Value	Unfunded Commitments	Redemption Frequency (if Currently Eligible)	Redemption Notice Period
Pooled Separate Accounts - Various	$ 18,943,761	n/a	Daily	1 Day
Group Annuity Contact	$ 205,479	n/a	Daily	1 Day

December 31, 2015	Fair Value	Unfunded Commitments	Redemption Frequency (if Currently Eligible)	Redemption Notice Period
Pooled Separate Accounts - Various	$ 13,827,783	n/a	Daily	1 Day

CENTRO INC. 401(K) SAVINGS PLAN
NOTES TO FINANCIAL STATEMENTS
FOR THE YEARS ENDED DECEMBER 31, 2016 AND 2015

D. FAIR VALUE MEASUREMENTS (CONTINUED):

Unobservable (Level 3) Inputs

The following table presents quantitative information about unobservable inputs used in recurring Level 3 fair value investments:

Fund Name	Fair Value 12/31/2016	Valuation Technique	Unobservable Inputs	Range (Weighted Average)
Group Annuity Contract	$ 205,479	Contract Value	Contractual Interest Rate	1.98%

E. GUARANTEED ANNUITY CONTRACT:

Certain events limit the ability of the Plan to transact at contract value with the issuer. Such events include the following: (1) amendments to the Plan documents (including complete or partial Plan termination or merger with another plan), (2) changes to the Plan's prohibition on competing investment options for deletion of equity wash provisions, (3) bankruptcy of the Plan sponsor or other Plan sponsor events (for example, divestitures or spin-offs of a subsidiary) that cause a significant withdrawal from the Plan, or (4) the failure of the trust to qualify for exemption from federal income taxes or any required prohibited transactions exemption under ERISA. The Plan's management believe that any events that would limit the Plan's ability to transact at contract value with participants are probably of not occurring.

The average yields earned by the guaranteed investment contract are as follows:

Average yields	**2016**	**2015**
Based on actual earnings	1.98%	1.93%
Based on interest credited to participants	1.24%	1.17%

The following table sets forth a summary of changes in the fair value of the Plan's Level 3 assets for the year ended December 31, 2016:

CENTRO INC. 401(K) SAVINGS PLAN
NOTES TO FINANCIAL STATEMENTS
FOR THE YEARS ENDED DECEMBER 31, 2016 AND 2015

E. GUARANTEED ANNUITY CONTRACT (CONTINUED):

	Group Annuity Contract
Balance, Beginning of Year	$ 132,750
Interest	2,663
Purchases	147,021
Sales	(77,459)
Balance, End of Year	$ 204,975

F. SPECIAL RULE FOR CERTAIN PARTICIPANT - DIRECTED TRANSACTIONS:

The investment of transactions is directed by the participants; therefore, those transactions are no longer required to include the cost computation of the investments as reported on the schedule of assets held at end of year.

G. EMPLOYER CONTRIBUTIONS:

The Company's contributions are paid to the Plan each year no later than the due date of the Company's federal income tax returns, including extensions thereon. Participant contributions collected by the Company are remitted at the earliest date contributions can be reasonably segregated from the employer's general business assets, but no later than 15 business days following month in which contributions were withheld or received by employer.

H. RELATED PARTY TRANSACTIONS AND PARTY-IN-INTEREST TRANSACTIONS:

Certain Plan investments are shares of mutual funds managed by Fidelity Management Trust Company. Fidelity is the trustee as defined by the Plan and, therefore, these transactions qualify as party-in-interest transactions. Fees paid by the Plan for investment management services amounted to $0 and $0 for the years ended December 31, 2016 and 2015, respectively.

CENTRO INC. 401(K) SAVINGS PLAN
NOTES TO FINANCIAL STATEMENTS
FOR THE YEARS ENDED DECEMBER 31, 2016 AND 2015

I. TAX STATUS:

The Plan has received a favorable determination letter from the Internal Revenue Service and is qualified for exemption from federal income taxes under Section 401(a) of the Internal Revenue Code. Although the Plan has been amended since receiving the determination letter, the Plan administrator and the Plan's tax counsel believe that the Plan is designed and is currently being operated in compliance with the applicable requirements of the IRC and therefore believe that the Plan is qualified and the related trust is tax exempt.

Accounting principles generally accepted in the United States of America require plan management to evaluate tax positions taken by the Plan and recognize a tax liability (or asset) if the organization has taken an uncertain position that more likely than not would be sustained upon examination by the applicable tax authority. The Plan administrator has analyzed the tax positions taken by the Plan, and has concluded that as of December 31, 2016, there are no uncertain positions taken or expected to be taken that would require recognition of a liability (or asset) or disclosure in the financial statements. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress. The Plan administrator believes it is no longer subject to income tax examinations for years prior to 2013.

J. RISKS AND UNCERTAINTIES:

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

K. PLAN TERMINATION:

Although it has not expressed any intent to do so, the Company has the right under the Plan to discontinue its contributions at any time and to terminate the Plan subject to the provisions of ERISA. In the event of Plan termination, participants would become 100 percent vested in their employer contributions.

CENTRO INC. 401(K) SAVINGS PLAN
NOTES TO FINANCIAL STATEMENTS
FOR THE YEARS ENDED DECEMBER 31, 2016 AND 2015

L. INFORMATION CERTIFIED BY THE PLAN'S TRUSTEE:

The Plan administrator has elected the method of annual reporting compliance permitted by 29 CFR 2520.103-8 of the Department of Labor Rules and Regulations for Reporting and Disclosure under ERISA. Accordingly, the Trustee has certified that the following data included in the accompanying financial statements and the supplemental schedule is complete and accurate.

	December 31, 2016	December 31, 2015
Pooled Separate Accounts	$ 18,943,761	$ 13,827,783
Group Annuity Contract	205,479	133,656
Total	$ 19,149,240	$ 13,961,439

	Year Ended December 31, 2016
Investment Income:	
Net Appreciation in Fair Value of Investments	$ 1,141,962
Total Investment Income	$ 1,141,962

M. FULLY BENEFIT RESPONSIVE INVESTMENT CONTRACTS:

Investment contracts held by a defined contribution plan are required to be reported at fair value. However, contract value is the relevant measurement attribute for that portion of the net assets available for plan benefits of a defined contribution plan attributable to fully benefit-responsive investment contracts because contract value is the amount participants would receive if they were to initiate permitted transactions under the terms of the Plan. The statements of net assets available for plan benefits as of December 31, 2016 and 2015 present the fair value of the investment contracts as well as the adjustment of the fully benefit-responsive investment contracts from fair value to contract value. The statements of changes in net assets available for plan benefits are prepared on a contract value basis.

CENTRO INC. 401(K) SAVINGS PLAN
NOTES TO FINANCIAL STATEMENTS
FOR THE YEARS ENDED DECEMBER 31, 2016 AND 2015

M. FULLY BENEFIT RESPONSIVE INVESTMENT CONTRACTS (CONTINUED):

The following table outlines the credit rating, fair value and adjustment to contract value of the Plan's fully benefit-responsive investment contract at December 31, 2016 and 2015:

	December 31, 2016		
	Investment at Fair Value	Adjustment to Contract Value	Investment at Contract Value
Fidelity Management Trust Company: Managed Income Portfolio	205,479	504	204,975

	December 31, 2015		
	Investment at Fair Value	Adjustment to Contract Value	Investment at Contract Value
Fidelity Management Trust Company: Managed Income Portfolio	133,657	907	132,750

CENTRO INC. 401(K) SAVINGS PLAN

SUPPLEMENTAL SCHEDULE

FOR THE YEAR ENDED
DECEMBER 31, 2016

CENTRO INC. 401(K) SAVINGS PLAN
ASSETS HELD FOR INVESTMENT PURPOSES
FOR THE YEAR ENDED DECEMBER 31, 2016

Schedule H, line 4i

Schedule of Assets (Held At End of Year)

For the plan year beginning 01/01/2016 and ending 12/31/2016

Name of plan
Centro Inc. 401(k) Savings Plan

Employer Identification Number
36-4476242

Three-digit
Plan number 001

(a)	(b) Identity of issuer, borrower, lessor, or similar party	(c) Description of investment, including maturity date, rate of interest, collateral, par, or maturity value	(d) Cost	(e) Current value
*	Fidelity	BROKERAGELINK		174,465
*	Fidelity	VANG TARGET RET 2055		1,046,168
*	Fidelity	PIMCO INCOME INST		119,419
*	Fidelity	VANG TARGET RET 2020		1,113,437
*	Fidelity	VANG TARGET RET 2030		2,580,954
*	Fidelity	VANG TARGET RET 2040		2,273,681
*	Fidelity	VANG TARGET RET 2050		3,084,750
*	Fidelity	INVS COMSTOCK R6		84,903
*	Fidelity	DFA US TARGET VAL I		195,098
*	Fidelity	VANG 500 INDEX ADM		1,050,745
*	Fidelity	VANG HI YLD CORP ADM		102,828
*	Fidelity	VANG INTL GROWTH ADM		23,897
*	Fidelity	VANG SM CAP IDX ADM		283,088
*	Fidelity	VANG MIDCAP IDX ADM		200,829
*	Fidelity	VANGUARD ENERGY ADM		173,326
*	Fidelity	VANG EXPLORER ADM		168,653
*	Fidelity	LOOMIS CORE PL BD N		57,699
*	Fidelity	VANG TARGET RET INC		13,561
*	Fidelity	VANG TARGET RET 2015		369,653
*	Fidelity	VANG TARGET RET 2025		16,514
*	Fidelity	VANG TARGET RET 2035		775,505
*	Fidelity	VANG TARGET RET 2045		2,726,674
*	Fidelity	FKLN UTILITIES R6		126,699
*	Fidelity	JPM DISCPL EQUITY R6		125,516
*	Fidelity	GS INFL-PRO SECS IS		39,486
*	Fidelity	VANG MDCPGR IDX ADM		179,209
*	Fidelity	AF NEW PERSPECT R6		123,098
*	Fidelity	AF AMCAP R6		355,788
*	Fidelity	AF NEW WORLD R6		118,593
*	Fidelity	LM BW GLB OPP BD IS		9,731
*	Fidelity	VANG INFO TEC IDX AD		244,490
*	Fidelity	VANG TARGET RET 2060		156,789
*	Fidelity	DFA REAL EST SEC I		138,637
*	Fidelity	DFA INTL SUS CORE 1		107,398
*	Fidelity	VANG MDCPVAL IDX ADM		354,483
*	Fidelity	FID INTL INDEX INV		103,312
*	Fidelity	MIP CL 1		204,975
*	Fidelity	FID US BOND IDX IS		124,682
	Total Investments			19,148,735

* Party-in-Interest.

CENTRO INC. 401(K) SAVINGS PLAN

FINANCIAL STATEMENTS

FOR THE YEARS ENDED
DECEMBER 31, 2016 AND 2015

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NOTE: A schedule of reportable transactions has not been prepared because there were no individual reportable transactions exceeding 5% of the current value of plan assets threshold.

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INDEPENDENT AUDITORS' REPORT

Board of Trustees
Centro Inc. 401(k) Savings Plan
Chicago, Illinois

Report on the Financial Statements

We were engaged to audit the accompanying financial statements of Centro Inc. 401(k) Savings Plan (the Plan), which comprise the statements of net assets available for benefits as of December 31, 2016 and 2015, and the related statement of changes in net assets 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

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 conducting the audit in accordance with auditing standards generally accepted in the United States of America. Because of the matter described in the *Basis for Disclaimer of Opinion* paragraph, however, we were not able to obtain sufficient appropriate audit evidence to provide a basis for an audit opinion.

Basis for Disclaimer of Opinion

As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Note L, which was certified by the Fidelity Management Trust Company, the Trustee of the Plan, except for comparing the information with the related information included in the 2016 financial statements and supplemental schedule. We have been informed by the plan administrator that the Trustee holds the Plan's investment assets and executes investment transactions. The plan administrator has obtained a certification from the Trustee as of December 31, 2016 and 2015 and for the year ended December 31, 2016, that the information provided to the plan administrator by the Trustee is complete and accurate.

Disclaimer of Opinion

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

(Continued)

Other Matter

The supplemental schedule (Schedule H, line 4i – Schedule of Assets for Investment) as of December 31, 2016 is required by the Department of Labor's (DOL) Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 and is presented for the purpose of additional analysis and is not a required part of the financial statements. Because of the significance of the matter described in the *Basis for Disclaimer of Opinion* Paragraph, we do not express an opinion of these supplemental schedules.

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

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

R. J. Augustine & Associates, Ltd.

R.J. Augustine & Associates, Ltd.
CERTIFIED PUBLIC ACCOUNTANTS

September 30, 2017

CENTRO INC. 401(K) SAVINGS PLAN
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
DECEMBER 31, 2016 AND 2015

PARTICIPANT DIRECTED

	2016	2015
ASSETS		
Investments at Fair Value	**$ 19,149,240**	$ 13,961,439
RECEIVABLES		
Employer's Contributions	**1,578,660**	1,509,672
TOTAL ASSETS	**20,727,900**	15,471,111
TOTAL LIABILITIES	**-**	-
NET ASSETS AVAILABLE FOR BENEFITS	**$ 20,727,900**	$ 15,471,111

See independent auditors' report.
The accompanying notes are an integral part of the financial statements.

CENTRO INC. 401(K) SAVINGS PLAN
STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
FOR THE YEAR ENDED DECEMBER 31, 2016

PARTICIPANT DIRECTED

ADDITIONS		
Additions to Net Assets		
Contributions		
Participants	$	3,855,975
Employer 401(k) Match and Safe Harbor		1,579,776
Rollovers		438,964
Total Contributions		5,874,715
Investment Income		
Net Appreciation in Fair Value of Investments		1,141,962
Interest and Dividends		442,398
Total Investment Income		1,584,360
TOTAL ADDITIONS		7,459,075
DEDUCTIONS		
Deductions from Net Assets:		
Benefits Paid to Participants		2,098,216
Administrative Expense		104,070
TOTAL DEDUCTIONS		2,202,286
INCREASE IN NET ASSETS AVAILABLE FOR BENEFITS		5,256,789
NET ASSETS AVAILABLE FOR BENEFITS		
Beginning of Year		15,471,111
End of Year	$	20,727,900

See independent auditors' report.
The accompanying notes are an integral part of the financial statements.

CENTRO INC. 401(K) SAVINGS PLAN
NOTES TO FINANCIAL STATEMENTS
FOR THE YEARS ENDED DECEMBER 31, 2016 AND 2015

A. DESCRIPTION OF PLAN:

The following brief description of the Centro Inc. (the Company) 401(k) Savings Plan (the Plan) is provided for general information purposes only. Interested parties should refer to the Plan agreement for more complete information.

1. *General.* The Plan is a defined contribution plan covering eligible employees of Centro Inc.(the Company) It is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA).

2. *Plan Administration.* The Plan is administered by the board of trustees of the Company. The Plan's trustee, Fidelity Management Trust Company (the Trustee), is responsible for the custody and management of the Plan's assets.

3. *Eligibility for Elective Deferrals.* The eligibility requirements for the purpose of making Elective Deferrals to the Plan are as follows:

    a. **General Eligibility Requirements:** For the purpose of making elective deferrals only, an eligible employee will enter the Plan as a participant on the applicable entry date upon reaching Age 21. This Plan has no minimum service requirement to participate.

    b. **Eligible Classes of Employees:** For the purpose of making elective deferrals, all employees are eligible to participate in the Plan upon satisfying the eligibility requirements.

    c. **Entry Date for Elective Deferrals:** In order to make elective deferrals, an eligible employee will enter the Plan as a participant on the first day of the month coinciding with or next following the date you satisfy the eligibility conditions described above.

4. *Contributions.* Each Plan Year the employer may elect to make a contribution to the Plan, the amount of which will be determined in accordance with the following provisions:

    a. **Participant Contributions:** Each participant may enter into a salary deferral agreement authorizing the employer to withhold a percentage of the participant's compensation as an elective deferral. The amount of each participant's elective deferral for any plan year will be determined in accordance with the following provision, subject to any limitations thereon that may be imposed by the Administrator:

        1. **Deferral Percentage:** For each contribution period, a participant may elect that up to the maximum amount of compensation that will not cause the Plan to violate the ADP Test for the plan year be withheld as an elective deferral. Elective deferrals may be made in whole percentages of compensation or in specific dollar amounts as designated by the participant. The plan administrator will have the right to direct that such percentages of compensation be rounded to the next highest or lowest dollar. Furthermore, on a uniform nondiscriminatory basis, the plan administrator may permit a participant to identify separate components of the participant's compensation (such as base salary, bonuses, etc.) and to specify that a different percentage (or dollar amount) apply to each such component.

CENTRO INC. 401(K) SAVINGS PLAN
NOTES TO FINANCIAL STATEMENTS
FOR THE YEARS ENDED DECEMBER 31, 2016 AND 2015

A. DESCRIPTION OF PLAN (CONTINUED):

2. **Annual Dollar Limitation:** The actual dollar amount withheld during the course of a Plan Year under subparagraph (1) cannot exceed the lesser of (A) the maximum dollar amount permitted for that Plan Year under Code §402(g)(5), or (B) the maximum amount permitted for that Plan Year under subparagraph (1).

3. **Deferral Election with Respect to Bonuses and Severance:** On an uniform nondiscriminatory basis, and subject to the limits set forth in subparagraph (2) above, the plan administrator may permit a participant to make an election to defer up to 100% of (A) compensation received as a bonus that is paid after the end of the plan year for which the bonus is payable, but which is not paid more than two and one-half months after the last day of the plan year; and (B) compensation received as severance pay provided such compensation is received in a single lump sum payment. Severance pay that is received in the form of installment payments is not eligible for elective deferrals under this Plan.

4. **Roth Deferral:** Participants are eligible to make designated Roth deferrals to their respective accounts, if eligible.

b. **Employer Contributions:** The employer may in its sole discretion make a basic Employer Contribution to the Plan in accordance with the Plan:

1. **Employer Contribution Formula:** For each plan year or other contribution period in which a matching contribution is made, such matching contribution may be made in any specific dollar amount (including zero) and/or any specific percentage (including zero) of elective deferrals, as determined by the Company.

2. **Certain Amounts not Required to be Matched:** Notwithstanding subparagraph (1) above, for any plan year in which matching contributions are only contributed to the Plan on an annual basis, no matching contribution will be required with respect to that portion of an elective deferral or an excess contribution.

3. **Catch-up Contributions:** Participants may elect to make contributions to the Plan in an amount which does not exceed $18,000 (additional catch-up contributions of $6,000 are allowed if the participant is over 50 years old).

5. *Vesting.* Participants are vested immediately in employer contributions, their contributions, plus actual earnings thereon.

6. *Payments of Benefits.* On retirement, death, disability or termination of service, a participant (or participant's beneficiary in the event of death) may elect to receive a lump-sum distribution equal to the participant's vested account balance. In addition, financial hardship distributions are permitted if certain criteria are met.

7. *Forfeitures.* Forfeitures are not applicable with this plan as all participants are 100% vested in all participant contributions immediately.

CENTRO INC. 401(K) SAVINGS PLAN
NOTES TO FINANCIAL STATEMENTS
FOR THE YEARS ENDED DECEMBER 31, 2016 AND 2015

A. DESCRIPTION OF PLAN (CONTINUED):

8. *Participant Accounts.* Individual accounts are maintained for each of the Plan's participants to reflect the participant's contributions and related employer matching contributions, as well as the participant's share of the Plan's income and any related administrative expenses. Allocation of income and expenses are based on the proportion of that each participant's account balance bears to the total of all participant account balances.

9. *Notes Receivable from Participants.* Loans to participants are not permitted.

B. SUMMARY OF ACCOUNTING POLICIES:

1. *Basis of Accounting.* The Plan's financial statements are prepared on the accrual basis of accounting, whereby employer contributions and investment income are recorded as additions to net assets in the year to which they pertain.

2. *Investments Valuation and Income Recognition.* Investments are reported at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. See Note D for discussion of fair value measurements.

   Purchases and sales of securities are recorded on a trade-date basis.

3. *Payment of Benefits.* Benefits are recorded when paid.

4. *Administrative Expenses.* Certain expenses incurred in connection with the general administration of the Plan are paid by the Plan and are recorded in the accompanying statement of changes in net assets available for benefits.

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

6. *Subsequent events.* In accordance with the requirements in FASB ASC 855, *Subsequent Events*, the Plan has evaluated all subsequent events through September 30, 2017 (the date the Plan's financial statements were available to be issued). There were no material subsequent events that required recognition or additional disclosures in these financial statements.

7. *Adoption of New Accounting Standards.* During the year ended December 31, 2016, the Company adopted Accounting Standards Update No. 2015-07 related to fair value measurement and the disclosures for investments in certain entities that calculate net asset value ("NAV") per share (or its equivalent). The updated guidance applies to reporting entities that elect to measure the fair value of certain investments using the NAV per share (or its equivalent) of the investment as a practical expedient. Currently, investments valued using the practical expedient are categorized within the fair value hierarchy on the basis of when the investment is redeemable with the investee at NAV. The amendment removes the requirement to categorize within the fair value hierarchy all investments for which fair value is measured using the NAV per share practical expedient.

CENTRO INC. 401(K) SAVINGS PLAN
NOTES TO FINANCIAL STATEMENTS
FOR THE YEARS ENDED DECEMBER 31, 2016 AND 2015

B. SUMMARY OF ACCOUNTING POLICIES (CONTINUED):

The total amount of the investment measured at NAV is disclosed so that total investments in the fair value tables can be reconciled to total investments at fair value on the statement of net assets.

The Company also adopted Accounting Standards Update No. 2015-12, Plan Accounting: Plan Accounting: Defined Benefit Pension Plans (Topic 960), Defined Contribution Pension Plans (Topic 962), and Health and Welfare Benefit Plans (Topic 965): Part (I) Fully Benefit-Responsive Investment Contracts, Part (II) Plan Investment Disclosures, Part (III) Measurement Date Practical Expedient. The guidance issued a three-part update to simplify plan accounting of employee benefit plans. The update simplifies employee benefit plan reporting as outlined in Part (I) for fully benefit-responsive investment contracts and in Part (II) for plan investments disclosures. Part (III) provides for a measurement date practical expedient. Part (III) does not apply to the Plan.

As required, Part (I) and (II) of the guidance were adopted for the year ended December 31, 2016. In addition, the disclosure of individual investments greater than 5% of net assets and the net appreciation or depreciation in fair value of investments by general type have been removed from the former Investments note.

This guidance requires that amendments are applied retrospectively to all periods presented. Information presented for the year ended December 31, 2015 has been reclassified to reflect this updated guidance.

C. INVESTMENTS:

During 2016, the Plan's pooled separate account investments (including gains and losses on investment bought and sold as well as held during the year) appreciated in value by $1,141,962.

CENTRO INC. 401(K) SAVINGS PLAN
NOTES TO FINANCIAL STATEMENTS
FOR THE YEARS ENDED DECEMBER 31, 2016 AND 2015

D. FAIR VALUE MEASUREMENTS:

The framework for measuring fair value 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) and the lowest priority to unobservable inputs (level 3). The three levels of the fair value hierarchy under FASB ASC 820, *Fair Value Measurements,* are described as follows:

Level 1	Inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets that the Plan has the ability to access.
Level 2	Inputs to the valuation methodology include: • quoted prices for similar assets or liabilities in active markets; • quoted prices for identical or similar assets or liabilities in inactive markets; • inputs other than quoted prices that are observable for the asset or liability; • inputs that are derived principally from or corroborated by observable market data by correlation or other means. If the asset or liability has a specified (contractual) term, the level 2 input must be observable for substantially the full term of the asset or liability.
Level 3	Inputs to the valuation methodology are unobservable and significant to the fair value measurement.

The asset or liability's fair market 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.

The 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 and 2015.

- *Pooled Separate Accounts (PSA).* PSAs are made up of a wide variety of underlying investments such as equities, preferred stock, bonds, real estate and mutual funds. Assets of the separate accounts are assets of the insurance company but are not commingled with the insurance company's general assets. The net asset value (NAV) of a PSA is based on the market value of its underlying investments but the PSA NAV is not a publicly quoted price in an active market. Based on these facts, PSA will be categorized as a level 2 fair value.

CENTRO INC. 401(K) SAVINGS PLAN
NOTES TO FINANCIAL STATEMENTS
FOR THE YEARS ENDED DECEMBER 31, 2016 AND 2015

D. FAIR VALUE MEASUREMENTS (CONTINUED):

The following table sets forth by level, within the fair value hierarchy, the Plan's assets at fair value as of December 31, 2016 and 2015:

	Assets at Fair Value as of December 31, 2016			
	Level 1	Level 2	Level 3	Total
Pooled Separate Accounts	$ 18,943,761	$ 205,479	$ -	$ 19,149,240
	$ 18,943,761	$ 205,479	$ -	$ 19,149,240

	Assets at Fair Value as of December 31, 2015			
	Level 1	Level 2	Level 3	Total
Pooled Separate Accounts	$ 13,827,783	$ 133,656	$ -	$ 13,961,439
	$ 13,827,783	$ 133,656	$ -	$ 13,961,439

Fair Value of Investments in Entities that Use Net Asset Value:

The following table summarizes investments measured at fair value based on net asset value (NAVs) per share as of December 31, 2016 and 2015, respectively.

December 31, 2016	Fair Value	Unfunded Commitments	Redemption Frequency (if Currently Eligible)	Redemption Notice Period
Pooled Separate Accounts - Various	$ 18,943,761	n/a	Daily	1 Day
Group Annuity Contact	$ 205,479	n/a	Daily	1 Day

December 31, 2015	Fair Value	Unfunded Commitments	Redemption Frequency (if Currently Eligible)	Redemption Notice Period
Pooled Separate Accounts - Various	$ 13,827,783	n/a	Daily	1 Day

CENTRO INC. 401(K) SAVINGS PLAN
NOTES TO FINANCIAL STATEMENTS
FOR THE YEARS ENDED DECEMBER 31, 2016 AND 2015

D. FAIR VALUE MEASUREMENTS (CONTINUED):

Unobservable (Level 3) Inputs

The following table presents quantitative information about unobservable inputs used in recurring Level 3 fair value investments:

Fund Name	Fair Value 12/31/2016	Valuation Technique	Unobservable Inputs	Range (Weighted Average)
Group Annuity Contract	$ 205,479	Contract Value	Contractual Interest Rate	1.98%

E. GUARANTEED ANNUITY CONTRACT:

Certain events limit the ability of the Plan to transact at contract value with the issuer. Such events include the following: (1) amendments to the Plan documents (including complete or partial Plan termination or merger with another plan), (2) changes to the Plan's prohibition on competing investment options for deletion of equity wash provisions, (3) bankruptcy of the Plan sponsor or other Plan sponsor events (for example, divestitures or spin-offs of a subsidiary) that cause a significant withdrawal from the Plan, or (4) the failure of the trust to qualify for exemption from federal income taxes or any required prohibited transactions exemption under ERISA. The Plan's management believe that any events that would limit the Plan's ability to transact at contract value with participants are probably of not occurring.

The average yields earned by the guaranteed investment contract are as follows:

Average yields	**2016**	**2015**
Based on actual earnings	1.98%	1.93%
Based on interest credited to participants	1.24%	1.17%

The following table sets forth a summary of changes in the fair value of the Plan's Level 3 assets for the year ended December 31, 2016:

CENTRO INC. 401(K) SAVINGS PLAN
NOTES TO FINANCIAL STATEMENTS
FOR THE YEARS ENDED DECEMBER 31, 2016 AND 2015

E. GUARANTEED ANNUITY CONTRACT (CONTINUED):

	Group Annuity Contract
Balance, Beginning of Year	$ 132,750
Interest	2,663
Purchases	147,021
Sales	(77,459)
Balance, End of Year	$ 204,975

F. SPECIAL RULE FOR CERTAIN PARTICIPANT - DIRECTED TRANSACTIONS:

The investment of transactions is directed by the participants; therefore, those transactions are no longer required to include the cost computation of the investments as reported on the schedule of assets held at end of year.

G. EMPLOYER CONTRIBUTIONS:

The Company's contributions are paid to the Plan each year no later than the due date of the Company's federal income tax returns, including extensions thereon. Participant contributions collected by the Company are remitted at the earliest date contributions can be reasonably segregated from the employer's general business assets, but no later than 15 business days following month in which contributions were withheld or received by employer.

H. RELATED PARTY TRANSACTIONS AND PARTY-IN-INTEREST TRANSACTIONS:

Certain Plan investments are shares of mutual funds managed by Fidelity Management Trust Company. Fidelity is the trustee as defined by the Plan and, therefore, these transactions qualify as party-in-interest transactions. Fees paid by the Plan for investment management services amounted to $0 and $0 for the years ended December 31, 2016 and 2015, respectively.

CENTRO INC. 401(K) SAVINGS PLAN
NOTES TO FINANCIAL STATEMENTS
FOR THE YEARS ENDED DECEMBER 31, 2016 AND 2015

I. TAX STATUS:

The Plan has received a favorable determination letter from the Internal Revenue Service and is qualified for exemption from federal income taxes under Section 401(a) of the Internal Revenue Code. Although the Plan has been amended since receiving the determination letter, the Plan administrator and the Plan's tax counsel believe that the Plan is designed and is currently being operated in compliance with the applicable requirements of the IRC and therefore believe that the Plan is qualified and the related trust is tax exempt.

Accounting principles generally accepted in the United States of America require plan management to evaluate tax positions taken by the Plan and recognize a tax liability (or asset) if the organization has taken an uncertain position that more likely than not would be sustained upon examination by the applicable tax authority. The Plan administrator has analyzed the tax positions taken by the Plan, and has concluded that as of December 31, 2016, there are no uncertain positions taken or expected to be taken that would require recognition of a liability (or asset) or disclosure in the financial statements. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress. The Plan administrator believes it is no longer subject to income tax examinations for years prior to 2013.

J. RISKS AND UNCERTAINTIES:

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

K. PLAN TERMINATION:

Although it has not expressed any intent to do so, the Company has the right under the Plan to discontinue its contributions at any time and to terminate the Plan subject to the provisions of ERISA. In the event of Plan termination, participants would become 100 percent vested in their employer contributions.

CENTRO INC. 401(K) SAVINGS PLAN
NOTES TO FINANCIAL STATEMENTS
FOR THE YEARS ENDED DECEMBER 31, 2016 AND 2015

L. INFORMATION CERTIFIED BY THE PLAN'S TRUSTEE:

The Plan administrator has elected the method of annual reporting compliance permitted by 29 CFR 2520.103-8 of the Department of Labor Rules and Regulations for Reporting and Disclosure under ERISA. Accordingly, the Trustee has certified that the following data included in the accompanying financial statements and the supplemental schedule is complete and accurate.

	December 31, 2016	December 31, 2015
Pooled Separate Accounts	$ 18,943,761	$ 13,827,783
Group Annuity Contract	205,479	133,656
Total	$ 19,149,240	$ 13,961,439

	Year Ended December 31, 2016
Investment Income:	
Net Appreciation in Fair Value of Investments	$ 1,141,962
Total Investment Income	$ 1,141,962

M. FULLY BENEFIT RESPONSIVE INVESTMENT CONTRACTS:

Investment contracts held by a defined contribution plan are required to be reported at fair value. However, contract value is the relevant measurement attribute for that portion of the net assets available for plan benefits of a defined contribution plan attributable to fully benefit-responsive investment contracts because contract value is the amount participants would receive if they were to initiate permitted transactions under the terms of the Plan. The statements of net assets available for plan benefits as of December 31, 2016 and 2015 present the fair value of the investment contracts as well as the adjustment of the fully benefit-responsive investment contracts from fair value to contract value. The statements of changes in net assets available for plan benefits are prepared on a contract value basis.

CENTRO INC. 401(K) SAVINGS PLAN
NOTES TO FINANCIAL STATEMENTS
FOR THE YEARS ENDED DECEMBER 31, 2016 AND 2015

M. FULLY BENEFIT RESPONSIVE INVESTMENT CONTRACTS (CONTINUED):

The following table outlines the credit rating, fair value and adjustment to contract value of the Plan's fully benefit-responsive investment contract at December 31, 2016 and 2015:

	December 31, 2016		
	Investment at Fair Value	Adjustment to Contract Value	Investment at Contract Value
Fidelity Management Trust Company: Managed Income Portfolio	205,479	504	204,975

	December 31, 2015		
	Investment at Fair Value	Adjustment to Contract Value	Investment at Contract Value
Fidelity Management Trust Company: Managed Income Portfolio	133,657	907	132,750

CENTRO INC. 401(K) SAVINGS PLAN

SUPPLEMENTAL SCHEDULE

FOR THE YEAR ENDED
DECEMBER 31, 2016

CENTRO INC. 401(K) SAVINGS PLAN
ASSETS HELD FOR INVESTMENT PURPOSES
FOR THE YEAR ENDED DECEMBER 31, 2016

Schedule H, line 4i

Schedule of Assets (Held At End of Year)

For the plan year beginning 01/01/2016 and ending 12/31/2016

Name of plan
Centro Inc. 401(k) Savings Plan

Employer Identification Number
36-4476242

Three-digit
Plan number 001

(a)	(b) Identity of issuer, borrower, lessor, or similar party	(c) Description of investment, including maturity date, rate of interest, collateral, par, or maturity value	(d) Cost	(e) Current value
*	Fidelity	BROKERAGELINK		174,465
*	Fidelity	VANG TARGET RET 2055		1,046,168
*	Fidelity	PIMCO INCOME INST		119,419
*	Fidelity	VANG TARGET RET 2020		1,113,437
*	Fidelity	VANG TARGET RET 2030		2,580,954
*	Fidelity	VANG TARGET RET 2040		2,273,681
*	Fidelity	VANG TARGET RET 2050		3,084,750
*	Fidelity	INVS COMSTOCK R6		84,903
*	Fidelity	DFA US TARGET VAL I		195,098
*	Fidelity	VANG 500 INDEX ADM		1,050,745
*	Fidelity	VANG HI YLD CORP ADM		102,828
*	Fidelity	VANG INTL GROWTH ADM		23,897
*	Fidelity	VANG SM CAP IDX ADM		283,088
*	Fidelity	VANG MIDCAP IDX ADM		200,829
*	Fidelity	VANGUARD ENERGY ADM		173,326
*	Fidelity	VANG EXPLORER ADM		168,653
*	Fidelity	LOOMIS CORE PL BD N		57,699
*	Fidelity	VANG TARGET RET INC		13,561
*	Fidelity	VANG TARGET RET 2015		369,653
*	Fidelity	VANG TARGET RET 2025		16,514
*	Fidelity	VANG TARGET RET 2035		775,505
*	Fidelity	VANG TARGET RET 2045		2,726,674
*	Fidelity	FKLN UTILITIES R6		126,699
*	Fidelity	JPM DISCPL EQUITY R6		125,516
*	Fidelity	GS INFL-PRO SECS IS		39,486
*	Fidelity	VANG MDCPGR IDX ADM		179,209
*	Fidelity	AF NEW PERSPECT R6		123,098
*	Fidelity	AF AMCAP R6		355,788
*	Fidelity	AF NEW WORLD R6		118,593
*	Fidelity	LM BW GLB OPP BD IS		9,731
*	Fidelity	VANG INFO TEC IDX AD		244,490
*	Fidelity	VANG TARGET RET 2060		156,789
*	Fidelity	DFA REAL EST SEC I		138,637
*	Fidelity	DFA INTL SUS CORE 1		107,398
*	Fidelity	VANG MDCPVAL IDX ADM		354,483
*	Fidelity	FID INTL INDEX INV		103,312
*	Fidelity	MIP CL 1		204,975
*	Fidelity	FID US BOND IDX IS		124,682
	Total Investments			19,148,735

* Party-in-Interest.