

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

Part II	Basic Plan Information —enter all requested information		
1a	Name of plan <u>HARRIS CORPORATION RETIREMENT PLAN</u>	1b	Three-digit plan number (PN) ▶ <u>015</u>
		1c	Effective date of plan <u>06/30/1945</u>
2a	Plan sponsor's name (employer, if for a single-employer plan) Mailing address (include room, apt., suite no. and street, or P.O. Box) City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions) <u>HARRIS CORPORATION</u> <u>1025 WEST NASA BLVD</u> <u>MAIL STOP A-11L</u> <u>MELBOURNE, FL 32919</u>	2b	Employer Identification Number (EIN) <u>34-0276860</u>
		2c	Plan Sponsor's telephone number <u>321-724-3554</u>
		2d	Business code (see instructions) <u>334200</u>

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

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

SIGN HERE	Filed with authorized/valid electronic signature.	<u>10/12/2017</u>	<u>ANDREA HARTMAN</u>
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE
Preparer's name (including firm name, if applicable) and address (include room or suite number)			Preparer's telephone number

3a Plan administrator's name and address ☐ Same as Plan Sponsor HARRIS CORPORATION EMPLOYEE BENEFITS COMMITTEE 1025 WEST NASA BLVD MAIL STOP A-11L MELBOURNE, FL 32919	3b Administrator's EIN 34-0276860 3c Administrator's telephone number 321-724-3554
4 If the name and/or EIN of the plan sponsor has changed since the last return/report filed for this plan, enter the name, EIN and the plan number from the last return/report: a Sponsor's name	4b EIN 4c PN
5 Total number of participants at the beginning of the plan year	5 22278
6 Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines 6a(1) , 6a(2) , 6b , 6c , and 6d). a(1) Total number of active participants at the beginning of the plan year..... a(2) Total number of active participants at the end of the plan year b Retired or separated participants receiving benefits..... c Other retired or separated participants entitled to future benefits d Subtotal. Add lines 6a(2) , 6b , and 6c e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits. f Total. Add lines 6d and 6e g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item) h Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested	6a(1) 11061 6a(2) 19830 6b 1810 6c 12079 6d 33719 6e 126 6f 33845 6g 32868 6h 231
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: 3H 2E 2F 2G 2J 2K 2R 2S 2T 3F b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristics Codes in the instructions:	

9a Plan funding arrangement (check all that apply) (1) ☐ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor	9b Plan benefit arrangement (check all that apply) (1) ☐ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor
10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)	
a Pension Schedules (1) ☒ R (Retirement Plan Information) (2) ☐ MB (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary (3) ☐ SB (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary	b General Schedules (1) ☒ H (Financial Information) (2) ☐ I (Financial Information – Small Plan) (3) ☐ <u>0</u> A (Insurance Information) (4) ☒ C (Service Provider Information) (5) ☒ D (DFE/Participating Plan Information) (6) ☐ G (Financial Transaction Schedules)

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

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

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

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

11c Enter the Receipt Confirmation Code for the 2016 Form M-1 annual report. If the plan was not required to file the 2016 Form M-1 annual report, enter the Receipt Confirmation Code for the most recent Form M-1 that was required to be filed under the Form M-1 filing requirements. (Failure to enter a valid Receipt Confirmation Code will subject the Form 5500 filing to rejection as incomplete.)

Receipt Confirmation Code _____

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

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

A Name of plan HARRIS CORPORATION RETIREMENT PLAN	B Three-digit plan number (PN) ▶ 015
C Plan sponsor's name as shown on line 2a of Form 5500 HARRIS CORPORATION	D Employer Identification Number (EIN) 34-0276860

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

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

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

06-1349805

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation
FEDERATED INVESTORS, INC.
1001 LIBERTY AVENUE PITTSBURGH, PA 15222

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation
GALLIARD CAPITAL MANAGEMENT, INC.

41-1813702

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation
PRINCIPAL GLOBAL INVESTORS
PO BOX 8024 BOSTON, MA 02266

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

THE HARTFORD

06-1455341

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

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

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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?
37 60 64 65 71	RECORDKEEPER	1874098	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☒ No ☐

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

T ROWE PRICE STABLE ASSET MNGMT INC

52-0556948

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 50 51 68	INVESTMENT MANAGER	1736569	Yes ☒ No ☐	Yes ☒ No ☐		Yes ☐ No ☒

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

BLACKROCK INSTITUTIONAL TRUST CO.

94-3112180

(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?
21 24 28 50 51	INVESTMENT MANAGER	1579063	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)

SANDS CAPITAL MANAGEMENT

20-2830751

(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?
51 68	INVESTMENT MANAGER	991674	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☐ No ☒

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

NORTHERN TRUST COMPANY

36-1561860

(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?
21	TRUSTEE	804938	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

BROWN ADVISORY

26-4560299

(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?
26	INVESTMENT ADVISORY	690343	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)

STRATEGIC ADVISORS, INC.

04-2654524

(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	667563	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

CALLAN ASSOCIATES, INC.

94-2192581

(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?
16	CONSULTING	230728	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

ING INSTITUTIONAL PLAN SERVICES, LL

02-0488491

(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?
99	OTHER	221097	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)

FIDELITY INSTITUTIONAL OPERATIONS

04-3304255

(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?
16	CONSULTANT	213171	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

SIDLEY AUSTIN, LLP

36-4474078

(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?
29	LEGAL	180757	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

STATE STREET BANK & TRUST CO.

94-2192581

(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	INVESTMENT MANAGEMENT	171123	Yes ☐ No ☒	Yes ☐ No ☒	0	Yes ☐ No ☒

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

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

BUCHBINDER TUNICK & CO. LLP

13-1578842

(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?
99	OTHER	64500	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

CARR, RIGGS & INGRAM, LLC

36-4474078

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
10	AUDITOR	34000	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

EVERCORE TRUST COMPANY, N.A.

26-4691954

(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	INVESTMENT MANAGEMENT	17500	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)

GRENNAN FENDER MCCRADY HESS

46-1685270

(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?
99	OTHER	16168	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.
JOHCM INTERNATIONAL SELECT FUND CL 14 RYDER STREET RYDER COURT GROUND LONDON, GB 00SW1Y6QB GB		0.08%
(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.
VALUE LINE ASSET ALLOCATION 7 TIMES SQUARE 21ST FL NEW YORK, NY 10036		0.40%
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation		(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
GOLD AND PRECIOUS METALS FUND 7900 CALLAGHAN SAN ANTONIO, TX 78229		0.40%

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.
USAA HIGH INCOME FUND RETAIL 9800 FREDERICKSBURG RD. SAN ANTONIO, TX 78288	0.10%	
(a) Enter service provider name as it appears on line 2		(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.
MARKETFIELD FUND CLASS I 777 EAST WISCONSIN AVENUE MK WI T4M MILWAUKEE, WI 53202	0.40%	
(a) Enter service provider name as it appears on line 2		(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.
TOUCHSTONE SANDS CAP SEL GRWTH Z 303 BROADWAY SUITE 1100 CINCINNATI, OH 45202-4203	0.40%	

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		
TOCQUEVILLE GOLD FUND 40 W 57TH STREET 19TH FL NEW YORK, NY 10019	0.40%	
(a) Enter service provider name as it appears on line 2		
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation		
TIAA CREF INSTIT HIGH YIELD BOND II 730 THIRD AVENUE NEW YORK, NY 10017	0.12%	
(a) Enter service provider name as it appears on line 2		
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation		
THIRD AVENUE REAL ESTATE VALUE INVS 622 THIRD AVENUE 32 FLOOR NEW YORK, NY 10017	0.40%	

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		
SOUND SHORE FD INC 8 SOUND SHORE DRIVE SUITE 180 GREENWICH, CT 06830	0.40%	
(a) Enter service provider name as it appears on line 2		
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation		
SCOUT INTERNATIONAL FUND 235 W. GALENA STREET MILWAUKEE, WI 53212-3948	0.40%	
(a) Enter service provider name as it appears on line 2		
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation		
SCHWAB CORE EQUITY 211 MAIN ST SAN FRANCISCO, CA 94105	0.40%	

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.
SSGA S & P 500 INDEX ONE LINCOLN ST. STATE STREET FINANC BOSTON, MA 02111-2900	0.05%	
(a) Enter service provider name as it appears on line 2		(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.
RYDEX INVERSE S&P 500 2X STRATEGY C 9601 BLACKWELL RD. STE. 500 ROCKVILLE, MD 20850	0.40%	
(a) Enter service provider name as it appears on line 2		(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.
T ROWE PRICE REAL ESTATE FUND 4515 PAINTERS MILL RD OWINGS MILLS, MD 21117	0.04%	

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		
T ROWE PRICE PERSNL STRATEGY INCOME 4515 PAINTERS MILL RD OWINGS MILLS, MD 21117	0.04%	
(a) Enter service provider name as it appears on line 2		
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation		
T ROWE PRICE TOTAL EQUITY MARKET IN 4515 PAINTERS MILL RD OWINGS MILLS, MD 21117	0.04%	
(a) Enter service provider name as it appears on line 2		
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation		
T ROWE PRICE BLUE CHIP GROWTH INC 4515 PAINTERS MILL RD OWINGS MILLS, MD 21117	0.04%	

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.
HODGES SMALL INTRIN VALUE RETAIL 2905 MAPLE AVENUE DALLAS, TX 75201		0.40%
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation		(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
THE OSTERWEIS STRATEGIC INCOME FD 777 E. WISCONSIN AVE 4TH FL MILWAUKEE, WI 53202		0.06%
(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.
AKRE FOCUS FUND RETAIL 777 E. WISCONSIN AVE. 4TH FL MILWAUKEE, WI 53202		0.40%

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.
T ROWE PRICE RETIRE 2050 FUND	4515 PAINTERS MILL RD OWINGS MILLS, MD 21117	0.04%
(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.
T ROWE PRICE TAX FREE HIGH YIELD	4515 PAINTERS MILL RD OWINGS MILLS, MD 21117	0.04%
(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.
T ROWE PRICE HEALTH SCIENCES	4515 PAINTERS MILL RD OWINGS MILLS, MD 21117	0.04%

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		
T ROWE PRICE MEDIA & TELECOMMUNICAT 4515 PAINTERS MILL RD OWINGS MILLS, MD 21117	0.04%	
(a) Enter service provider name as it appears on line 2		
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation		
PIMCO INCOME FUND CL D 1633 BROADWAY NEW YORK, NY 10019	0.38%	
(a) Enter service provider name as it appears on line 2		
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation		
PARNASSUS ENDEAVOR FUND ONE MARKET STREET STEUART TOWER SUI SAN FRANCISCO, CA 94105	0.40%	

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		
PIN OAK EQUITY FUND 1290 BROADWAY SUITE 1100 DENVER, CO 80203	0.40%	
(a) Enter service provider name as it appears on line 2		
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation		
PACIFIC FINANC FLEX GRWTH INCOME CL 777 108TH AVE NE STE 2100 BELLEVUE, WA 98004	0.40%	
(a) Enter service provider name as it appears on line 2		
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation		
PACIFIC FINANCIAL DYNAMIC ALLOC INV 777 108TH AVE NE STE 2100 BELLEVUE, WA 98004	0.40%	

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.
PFG CORE EQUITY FUND INVESTOR 777 108TH AVE NE STE 2100 BELLEVUE, WA 98004	0.40%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation		(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
PFG EXPLORER FUND INVESTOR CLASS 777 108TH AVE NE STE 2100 BELLEVUE, WA 98004	0.40%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation		(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
PFG INTERNATIONAL FUND INVESTOR CL 777 108TH AVE NE STE 2100 BELLEVUE, WA 98004	0.40%	

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.
PFG STRATEGIC CONSERVATIVE INVST 777 108TH AVE NE STE 2100 BELLEVUE, WA 98004	0.40%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation		(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
PFG TACTICAL FUND INVESTOR CLASS 777 108TH AVE NE STE 2100 BELLEVUE, WA 98004	0.40%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation		(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
NICHOLAS FUND 700 N. WATER ST. 10TH FLOOR MILWAUKEE, WI 53202	0.12%	

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.
AMERICAN NEW PERSPECTIVE CL F2 3500 WISEMAN BLVD SAN ANTONIO, TX 78251-4321	0.12%	
(a) Enter service provider name as it appears on line 2		(b) Service Codes (see instructions)
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.
METROPOLITAN WEST TOT RETURN BOND C 865 SOUTH FIGUEROA ST. #1400 LOS ANGELES, CA 90017	0.35%	
(a) Enter service provider name as it appears on line 2		(b) Service Codes (see instructions)
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.
MATTHEWS INDIA FUND 4 EMBARCADERO CENTER SUITE 550 SAN FRANCISCO, CA 94111	0.40%	

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.
MATTHEWS ASIAN GROWTH & INCOME FUND	4 EMBARCADERO CENTER SUITE 550 SAN FRANCISCO, CA 94111	0.40%
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation		(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
MFS INTERNATIONAL VALUE FUND CL A	111 HUNTINGTON AVE BOSTON, MA 02199-7632	0.40%
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation		(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
LOOMIS SAYLES BOND RETAIL SHARES	399 BOYLSTON STREET 8TH FL BOSTON, MA 02116	0.35%

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation		(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
LOOMIS SAYLES GLOBAL BOND RETAIL	399 BOYLSTON STREET 8TH FL BOSTON, MA 02116	0.35%
(a) Enter service provider name as it appears on line 2		(b) Service Codes (see instructions)
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.
LAZARD EMERGING MRKTCORE EQUITY OPE	30 ROCKEFELLER PLAZA 57TH FL. NEW YORK, NY 10112	0.40%
(a) Enter service provider name as it appears on line 2		(b) Service Codes (see instructions)
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.
JPMORGAN INVESTOR GROWTH FUND CLASS	1111 POLARIS PARKWAY COLUMBUS, OH 43240	0.40%

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.
JPMORGAN SMALL CAP EQUITY CLASS A 1111 POLARIS PARKWAY COLUMBUS, OH 43240	0.40%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation		(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
JPMORGAN INTREPID EUROPEAN CLASS L 1111 POLARIS PARKWAY COLUMBUS, OH 43240	0.07%	
(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.
JPMORGAN EMERGING MARKETS EQUITY CL 1111 POLARIS PARKWAY COLUMBUS, OH 43240	0.40%	

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.
JENSEN QUALITY GROWTH FD CL J	811 E. WISCONSIN AVE 8TH FLOOR MILWAUKEE, WI 53202	0.40%
(a) Enter service provider name as it appears on line 2		(b) Service Codes (see instructions)
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation		(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
JANUS RESEARCH FUND CLASS T	151 DETROIT ST. DENVER, CO 80206	0.35%
(a) Enter service provider name as it appears on line 2		(b) Service Codes (see instructions)
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation		(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
JANUS ENTERPRISE FUND CLASS T SHARE	151 DETROIT ST. DENVER, CO 80206	0.35%

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation		(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
JANUS GLOBAL LIFE SCIENCES FUND CL 151 DETROIT ST. DENVER, CO 80206	0.35%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation		(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
JANUS TRITON FUND CLASS T SHARES 151 DETROIT ST. DENVER, CO 80206	0.35%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation		(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
JAMES BALANCED GOLDEN RAINBOW I 1290 BROADWAY ST. SUITE 1100 DENVER, CO 80203	0.12%	

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		
ICON ENERGY CL S 5299 DTC BLVD. SUITE 1200 GREENWOOD VILLAGE, CO 80111	0.40%	
(a) Enter service provider name as it appears on line 2		
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation		
HENNESSY GAS UTILITYINVESTOR CL 7250 REDWOOD BLVD. STE 200 NOVATO, CA 94945	0.40%	
(a) Enter service provider name as it appears on line 2		
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation		
HENNESSY CORNERSTONE MID CAP 30 INS 7250 REDWOOD BLVD. STE 200 NOVATO, CA 94945	0.12%	

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.
HENNESSY CORNERSTONEMID CAP 30 INV 7250 REDWOOD BLVD. STE 200 NOVATO, CA 94945		0.40%
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation		(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
OAKMARK SELECT I 111 SOUTH WACKER DR. CHICAGO, IL 60606		0.35%
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation		(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
OAKMARK INTERNATIONAL CL I 111 SOUTH WACKER DR. CHICAGO, IL 60606		0.35%

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation		(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
HARDING LOEVNER FRNTEMERG MRKTS PO BOX 4766 INV CHICAGO, IL 60680		0.40%
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation		(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
HARBOR INTERNATIONALINVESTOR 111 S. WACKER DR 34TH FLOOR SHARES CHICAGO, IL 60606		0.35%
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation		(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
GOLDMAN SACHS RISING DIVIDEND 71 S. WACKER DRIVE 4TH FLOOR GROWT CHICAGO, IL 60606		0.10%

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation		(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
GLENMEDE LARGE CAP CORE 1650 MARKET ST. SUITE 1200 PHILADELPHIA, PA 19103	0.40%	
(a) Enter service provider name as it appears on line 2		(b) Service Codes (see instructions)
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.
GAMCO GLOBAL GROWTH FUND AAA 401 THEODORE FREMD. AVE. RYE, NY 10580	0.40%	
(a) Enter service provider name as it appears on line 2		(b) Service Codes (see instructions)
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.
FIRST EAGLE GOLD CLASS A 1345 AVENUE OF THE AMERICAS 43RD FL NEW YORK, NY 10105	0.40%	

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		
FEDERATED STRATEGIC VALUE DIVIDEND 4000 ERICSSON DRIVE WARRENDALE, PA 15086-7515	0.40%	
(a) Enter service provider name as it appears on line 2		
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation		
FMI INTERNATIONAL 777 EAST WISCONSIN AVENUE MK WI T4M MILWAUKEE, WI 53202	0.40%	
(a) Enter service provider name as it appears on line 2		
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation		
PARAMETRIC EMERGING MKTS INV CL TWO INTERNATIONAL PLACE BOSTON, MA 02110	0.40%	

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.
EATON VANCE GREATER INDIA FUND CLAS TWO INTERNATIONAL PLACE BOSTON, MA 02110		0.40%
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation		(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
DREYFUS APPRECIATIONFUND 144 GLENN CURTISS BLVD 8TH FLOOR UNIONDALE, NY 11556		0.40%
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation		(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
DOUBLELINE TOTAL RT BOND FD CL N 777 EAST WISCONSIN AVENUE MILWAUKEE, WI 53202		0.40%

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.
DAVIS FINANCIAL CLASS A	2949 EAST ELVIRA ROAD SUITE 101 TUCSON, AZ 85756	0.40%
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation		(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
COMMERCE VALUE INSTITUTIONAL	922 WALNUT ST 4TH FLOOR KANSAS CITY, MO 64106	0.35%
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation		(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
CALAMOS MARKET NEUTRAL INCOME CL A	2020 CALAMOS COURT NAPERVILLE, IL 60563	0.40%

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		
BUFFALO DISCOVERY FUND 615 E. MICHIGAN STREET MILWAUKEE, WI 53202	0.40%	
(a) Enter service provider name as it appears on line 2		
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation		
QUEENS ROAD SMALL CAP VALUE FUND 1031 SOUTH CALDWELL ST SUITE 200 CHARLOTTE, NC 28203	0.40%	
(a) Enter service provider name as it appears on line 2		
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation		
BLACKROCK HEALTH SCIENCES OPP PRT A 40 EAST 52ND STREET NEW YORK, NY 10022	0.40%	

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.
BARON EMERGING MARKETS FUND RETAIL 767 5TH AVENUE 49TH FLOOR NEW YORK, NY 10153		0.40%
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation		(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
BLACKROCK S&P 500 INDEX INV A 40 EAST 52ND STREET NEW YORK, NY 10022		0.30%
(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.
BLACKROCK LARGE CAP INDEX INV A 40 EAST 52ND STREET NEW YORK, NY 10022		0.05%

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		
BAIRD CORE PLUS BOND FD INVESTOR CL 777 E. WISCONSIN AVE 18TH FL MILWAUKEE, WI 53202	0.28%	
(a) Enter service provider name as it appears on line 2		
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation		
ARTISAN VALUE FUND INVESTOR CL 875 EAST WISCONSIN AVENUE SUITE 800 MILWAUKEE, WI 53202	0.40%	
(a) Enter service provider name as it appears on line 2		
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation		
AMERICAN CENTURY SELECT INVESTOR CL 4400 MAIN ST 1ST FLOOR KANSAS CITY, MO 64111	0.35%	

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation		
AMERICAN CENTURY INFLN ADJ BOND INV 4400 MAIN ST 1ST FLOOR KANSAS CITY, MO 64111	0.25%	
(a) Enter service provider name as it appears on line 2		
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation		
AMERICAN CENTURY EQUITY GROWTH INV 4400 MAIN ST 1ST FLOOR KANSAS CITY, MO 64111	0.35%	
(a) Enter service provider name as it appears on line 2		
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation		
AMERICAN CENTURY MIDCAP VALUE INV S 4400 MAIN ST 1ST FLOOR KANSAS CITY, MO 64111	0.35%	

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation		(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
AMERICAN CENTURY EQUITY INCOME INV 4400 MAIN ST 1ST FLOOR KANSAS CITY, MO 64111		0.35%
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation		(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
ALGER SPECTRA FUND CLASS CL A 600 PLAZA ONE 6TH FL JERSEY CITY, NJ 07311		0.40%
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation		(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
AMG YACKTMAN FUND I 600 STEAMBOAT ROAD SUITE 300 GREENWICH, CT 06830		0.40%

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		
AMG YACKTMAN FOCUSED S	600 STEAMBOAT ROAD SUITE 300 GREENWICH, CT 06830	0.40%
(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		
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation		
AMG MANAGERS SKYLINESPECIAL EQUITIE	600 STEAMBOAT ROAD SUITE 300 GREENWICH, CT 06830	0.40%
(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		
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation		
INVESCO DIVIDEND INCOME FUND A	11 GREENWAY PLAZA SUITE 100 HOUSTON, TX 77046	0.40%
(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 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.	
INVESCO DIVERSIFIED DIVIDEND CLASS 11 GREENWAY PLAZA SUITE 100 HOUSTON, TX 77046	0.40%	
(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) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small>	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 <div style="text-align: center; font-size: 1.2em; font-weight: bold;">2016</div> This Form is Open to Public Inspection.
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For calendar plan year 2016 or fiscal plan year beginning 01/01/2016 and ending 12/31/2016

A Name of plan <u>HARRIS CORPORATION RETIREMENT PLAN</u>	B Three-digit plan number (PN) ►	<u>015</u>
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 <u>HARRIS CORPORATION</u>	D Employer Identification Number (EIN) <u>34-0276860</u>	

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)
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a Name of MTIA, CCT, PSA, or 103-12 IE: <u>BLACKROCK RUSSELL 2000 INDEX NL</u>		
b Name of sponsor of entity listed in (a): <u>BLACKROCK INSTITUTIONAL TRUST CO NA</u>		
c EIN-PN <u>45-4352674-001</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>BLACKROCK US TIPS NL M</u>		
b Name of sponsor of entity listed in (a): <u>BLACKROCK INSTITUTIONAL TRUST CO NA</u>		
c EIN-PN <u>45-4544033-001</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>WELLS FARGO/BLACKROCK STIF N</u>		
b Name of sponsor of entity listed in (a): <u>WELLS FARGO, NA</u>		
c EIN-PN <u>41-6292499-001</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>NT COLLECTIVE RUSSELL 1000 INDEX</u>		
b Name of sponsor of entity listed in (a): <u>NORTHERN TRUST GLOBAL INVESTORS</u>		
c EIN-PN <u>45-6138589-006</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 169856597
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>GALLIARD CAP MGT WFB STIF FUND S</u>		
b Name of sponsor of entity listed in (a): <u>WELLS FARGO, N.A.</u>		
c EIN-PN <u>41-6292499-001</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 30494195
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>NT COLLECTIVE GOVERNMENT STIF REGIS</u>		
b Name of sponsor of entity listed in (a): <u>NOTHERN TRUST GLOBAL INVESTORS</u>		
c EIN-PN <u>45-6138589-006</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 11241675
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>NT COLLECTIVE AGGREGATE BOND INDEX</u>		
b Name of sponsor of entity listed in (a): <u>NORTHERN TRUST GLOBAL INVESTORS</u>		
c EIN-PN <u>45-6138589-006</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 388749762

a Name of MTIA, CCT, PSA, or 103-12 IE: NT COLLECTIVE EXTENDED EQUITY INDEX			
b Name of sponsor of entity listed in (a): NORTHERN TRUST GLOBAL INVESTORS			
c EIN-PN 45-6138589-006	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	223598332
a Name of MTIA, CCT, PSA, or 103-12 IE: NT COLLECTIVE S&P 500 INDEX FUND			
b Name of sponsor of entity listed in (a): NORTHERN TRUST GLOBAL INVESTORS			
c EIN-PN 45-6138589-006	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	542977395
a Name of MTIA, CCT, PSA, or 103-12 IE: PRIN GLOBAL INV COTV INTL EQTY 50			
b Name of sponsor of entity listed in (a): UNION BOND & TRUST COMPANY			
c EIN-PN 26-6746540-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	256439920
a Name of MTIA, CCT, PSA, or 103-12 IE: BLACKROCK LIFEPATH INDEX 2030			
b Name of sponsor of entity listed in (a): BLACKROCK INST. TRUST COMPANY, N.A.			
c EIN-PN 26-4020542-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	288125452
a Name of MTIA, CCT, PSA, or 103-12 IE: BLACKROCK LIFEPATH INDEX 2060			
b Name of sponsor of entity listed in (a): BLACKROCK INST. TRUST COMPANY, N.A.			
c EIN-PN 47-2022883-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	2519980
a Name of MTIA, CCT, PSA, or 103-12 IE: BLACKROCK LIFEPATH INDEX 2020			
b Name of sponsor of entity listed in (a): BLACKROCK INST. TRUST COMPANY, N.A.			
c EIN-PN 26-4020374-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	367783264
a Name of MTIA, CCT, PSA, or 103-12 IE: BLACKROCK LIFEPATH INDEX 2025			
b Name of sponsor of entity listed in (a): BLACKROCK INST. TRUST COMPANY, N.A.			
c EIN-PN 26-4020456-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	434165406
a Name of MTIA, CCT, PSA, or 103-12 IE: LIFECYCLE FUND 2035			
b Name of sponsor of entity listed in (a): BLACKROCK INST. TRUST COMPANY, N.A.			
c EIN-PN 26-4020637-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	174890649
a Name of MTIA, CCT, PSA, or 103-12 IE: BLACKROCK LIFEPATH INDEX 2045			
b Name of sponsor of entity listed in (a): BLACKROCK INST. TRUST COMPANY, N.A.			
c EIN-PN 26-4020794-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	114580799
a Name of MTIA, CCT, PSA, or 103-12 IE: BLACKROCK LIFEPATH INDEX 2055			
b Name of sponsor of entity listed in (a): BLACKROCK INST. TRUST COMPANY, N.A.			
c EIN-PN 27-1620812-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	21527657

a Name of MTIA, CCT, PSA, or 103-12 IE: BLACKROCK LIFEPAATH INDEX 2050

b Name of sponsor of entity listed in (a): BLACKROCK INST. TRUST COMPANY, N.A.

c EIN-PN 26-4020887-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 78127870
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a Name of MTIA, CCT, PSA, or 103-12 IE: BLACKROCK LIFEPAATH INDEX RETIREMENT

b Name of sponsor of entity listed in (a): BLACKROCK INST. TRUST COMPANY, N.A.

c EIN-PN 26-4019464-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 326158175
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a Name of MTIA, CCT, PSA, or 103-12 IE: BLACKROCK LIFEPAATH INDEX 2040

b Name of sponsor of entity listed in (a): BLACKROCK INST. TRUST COMPANY, N.A.

c EIN-PN 26-4020715-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 127470844
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a Name of MTIA, CCT, PSA, or 103-12 IE: LACKROCK STRATEGIC COMPLETION FD F

b Name of sponsor of entity listed in (a): BLACKROCK INST. TRUST COMPANY, N.A.

c EIN-PN 45-2777766-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 64440930
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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)
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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)
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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)
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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)
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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)
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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)
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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
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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 HARRIS CORPORATION RETIREMENT PLAN	B Three-digit plan number (PN) ►	015
C Plan sponsor's name as shown on line 2a of Form 5500 HARRIS CORPORATION	D Employer Identification Number (EIN) 34-0276860	

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

Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a	0	43000
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions.....	1b(1)	1782429	2597685
(2) Participant contributions	1b(2)	4246435	7237133
(3) Other.....	1b(3)	2084434	2611947
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit).....	1c(1)	510301790	9655581
(2) U.S. Government securities	1c(2)	0	0
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)	101745	587560
(B) All other.....	1c(3)(B)	0	0
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)	1471455	5892955
(B) Common.....	1c(4)(B)	628539297	894101330
(5) Partnership/joint venture interests	1c(5)	0	868562
(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)	65778392	63583318
(9) Value of interest in common/collective trusts	1c(9)	2407292110	3623148902
(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)	1578871132	204454745
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)		
(15) Other.....	1c(15)	657241584	1180990669

1d Employer-related investments:

		(a) Beginning of Year	(b) End of Year
(1) Employer securities	1d(1)	207505295	236683363
(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	6065216098	6232456750

Liabilities

g Benefit claims payable	1g	1138553	627697
h Operating payables	1h	0	0
i Acquisition indebtedness	1i	0	0
j Other liabilities	1j	1277720	6033853
k Total liabilities (add all amounts in lines 1g through 1j)	1k	2416273	6661550

Net Assets

l Net assets (subtract line 1k from line 1f)	1l	6062799825	6225795200
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Part II Income and Expense Statement

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

Income

		(a) Amount	(b) Total
a Contributions:			
(1) Received or receivable in cash from: (A) Employers	2a(1)(A)	76567677	
(B) Participants	2a(1)(B)	185116919	
(C) Others (including rollovers)	2a(1)(C)	27703001	
(2) Noncash contributions	2a(2)	0	289387597
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	552	
(B) U.S. Government securities	2b(1)(B)	0	
(C) Corporate debt instruments	2b(1)(C)	41314	
(D) Loans (other than to participants)	2b(1)(D)	2698269	
(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)		2740135
(2) Dividends: (A) Preferred stock	2b(2)(A)	57000	15772409
(B) Common stock	2b(2)(B)	15527613	
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	187796	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		0
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)	561543968	22150999
(B) Aggregate carrying amount (see instructions)	2b(4)(B)	539392969	
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)		
(5) Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)	0	390303860
(B) Other	2b(5)(B)	390303860	
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		14074756
(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)		-8016193
c Other income.....	2c		0
d Total income. Add all income amounts in column (b) and enter total.....	2d		726413563

Expenses**e** Benefit payment and payments to provide benefits:

(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	554240949	
(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)		554240949
f Corrective distributions (see instructions)	2f		41783
g Certain deemed distributions of participant loans (see instructions)	2g		174988
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)	8960468	
(5) Total administrative expenses. Add lines 2i(1) through (4).....	2i(5)		8960468
j Total expenses. Add all expense amounts in column (b) and enter total	2j		563418188

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		162995375
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) ☐ Disclaimer (4) ☐ Adverse

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

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

(1) Name: CARR, RIGGS & INGRAM, LLC

(2) EIN: 72-1396621

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

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

Part IV Compliance Questions

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

During the plan year:

a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.).....

b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)

	Yes	No	Amount
4a		X	
4b		X	

		Yes	No	Amount
c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)	4c		X	
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)	4d		X	
e Was this plan covered by a fidelity bond?	4e	X		20000000
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		73069
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	4m		X	
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.	4n			
o Defined Benefit Plan or Money Purchase Pension Plan Only: Were any distributions made during the plan year to an employee who attained age 62 and had not separated from service?	4o			

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

A Name of plan <u>HARRIS CORPORATION RETIREMENT PLAN</u>	B Three-digit plan number (PN) ▶ <u>015</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>HARRIS CORPORATION</u>	D Employer Identification Number (EIN) <u>34-0276860</u>

Part I	Distributions
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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): <u>04-6568107</u>		
Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.		
3 Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year	3	

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

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

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

Schedule R (Form 5500) 2016
v. 160205

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

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

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

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

INDEPENDENT AUDITORS' REPORT

To the Participants and the Harris Corporation Employee Benefits Committee of the
Harris Corporation Retirement Plan

We have audited the accompanying financial statements of Harris Corporation Retirement 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.

Auditor's Responsibility

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

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

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

Opinion

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

Report on Supplemental Information

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

Cam, Riggs & Ingram, L.L.C.

Tampa, Florida
June 23, 2017

HARRIS CORPORATION RETIREMENT PLAN
Statements of Net Assets Available for Benefits

	December 31, 2016	December 31, 2015
ASSETS		
Investments at fair value:		
Interest bearing cash	\$ 9,665,581	\$ 510,301,790
Preferred stocks	5,892,955	1,471,455
Brokerage window account	23,792,241	12,320,538
Corporate bonds & debentures	587,560	101,745
Partnership interests	868,563	-
Common stocks	1,130,784,693	836,044,592
Registered investment companies	204,454,745	1,578,871,132
Common/collective trust funds	3,623,148,902	2,407,292,110
Total investments at fair value	4,999,195,240	5,346,403,362
Investments at contract value:		
Synthetic guaranteed investment contracts	1,149,589,327	638,913,025
Receivables:		
Accrued interest and dividends	1,184,128	867,588
Participant contributions receivable	7,237,133	4,246,435
Employer matching contributions receivable	2,597,685	1,782,429
Notes receivable from participants	63,583,318	65,778,392
Due from broker for securities sold	1,427,819	1,216,846
Total receivables	76,030,083	73,891,690
Total assets	6,224,814,650	6,059,208,077
LIABILITIES		
Accrued administrative expenses	854,177	529,802
Due to broker for securities purchased	5,179,676	747,918
Total liabilities	6,033,853	1,277,720
Net assets available for benefits	\$ 6,218,780,797	\$ 6,057,930,357

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

HARRIS CORPORATION RETIREMENT PLAN
Statement of Changes in Net Assets Available for Benefits
For the year ended December 31, 2016

Additions to net assets attributed to:	
Investment income:	
Net appreciation in fair value of investments	\$ 391,500,536
Net appreciation in contract value of investments	25,378,807
Dividends	15,772,409
Total	432,651,752
Contributions:	
Participant rollovers	27,703,001
Employer matching	76,567,677
Participant (other than rollovers)	185,116,919
Total contributions	289,387,597
Interest on notes receivable from participants	2,740,135
Total additions	724,779,484
Deductions from net assets attributed to:	
Benefits paid to participants	554,968,576
Administrative expenses	8,960,468
Total deductions	563,929,044
Net change in plan assets available for benefits	160,850,440
Net assets available for benefits:	
Beginning of year	6,057,930,357
End of year	\$ 6,218,780,797

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

HARRIS CORPORATION RETIREMENT PLAN

Notes to the Financial Statements
December 31, 2016 and 2015

NOTE 1 — DESCRIPTION OF PLAN

The following description of the Harris Corporation Retirement Plan (the “Plan”) provides only general information. Participants should refer to the Plan document for a more complete description of the Plan’s provisions.

- A. **General** — The Plan is a defined contribution plan with a 401(k) feature covering eligible employees of Harris Corporation and certain of its subsidiaries (collectively, the “Company” or “Employer”) as defined in the Plan document. The Plan Administrator is the Harris Corporation Employee Benefits Committee comprised of persons appointed by Harris Corporation. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974, as amended (“ERISA”).
- B. **Contributions** — Participants may contribute a percentage of eligible compensation, as defined in the Plan document and subject to Internal Revenue Code (the “Code”) limitations, on a pre-tax and/or an after-tax basis. After-tax contributions may be made either on a regular after-tax basis or on a designated Roth after-tax basis. Participants age 50 and older by the end of the calendar year can contribute an additional amount above the annual pre-tax/designated Roth after-tax limitation, as defined in the Plan document and subject to Code limitations. The Company matches up to 50% or 100% (depending on business unit) of pre-tax and after-tax contributions subject to a limit of 4%, 5% or 6% (depending on business unit) of eligible compensation for any eligible employee who has completed one year of service with the Company and is not accruing a benefit under the Company’s defined benefit pension plan. Special matching rules apply to participants who are subject to a collective bargaining agreement. Full-time regular participants who are not subject to a collective bargaining agreement and who make no election with respect to their contribution percentage are deemed to have elected deferment of 6% of eligible compensation on a pre-tax basis. The Company may make discretionary profit sharing contributions to the Plan in an amount determined by the Company, allocated to eligible participants based on eligible compensation as defined in the Plan document. For the year ended December 31, 2016, no profit sharing contributions were made. Additional Company contributions may be made on behalf of participants who are subject to a collective bargaining agreement or to satisfy, in part, the Company’s obligations to certain participants under wage determination or similar laws. In addition, participants may rollover amounts to the Plan from other qualified plans or certain individual retirement accounts (“IRAs”).
- C. **Payments of Benefits** — Prior to termination of employment, a participant may withdraw all or any portion of his or her regular after-tax account balance or rollover balance. A participant may also receive a distribution while employed for financial hardship, as defined in the Plan document, after attainment of age 59 ¹/₂ or in certain cases, in connection with active military duty. Upon retirement or other termination of employment, a participant may elect to receive either a lump-sum amount equal to all or a portion of the participant’s vested account, or installments of his or her vested account over a future period. Alternatively, a participant generally will be eligible to rollover his or her vested account to an eligible retirement plan or IRA. In addition, certain other distribution options applicable to assets merged into the Plan have been preserved, as legally required.
- D. **Participant Loans** — The participant loan program permits participants to borrow against their pre-tax, regular after-tax, qualified non-elective, designated Roth after-tax and rollover contributions. A participant may borrow in increments of \$100 from a minimum of \$500 to a maximum of 50% of the vested portion of the participant’s account or \$50,000 whichever is lower, within certain limitations established by the Plan document. Payback periods range from one to five years unless the loan is to be used for the purchase of a principal residence, in which case the payback period generally may not exceed ten years. Interest rates are established by the Plan Administrator based on market rates. Loans are paid back ratably through payroll deductions (or, if the participant is not receiving paychecks, then they are paid back by personal, certified or cashier’s check, money order or electronic transfer). The outstanding loans have been established as a separate fund.
- E. **Participant Accounts** — Each participant’s account is credited with the participant’s contribution, including the contribution, if any, in respect of the participant’s election under the Company’s Performance Reward Plan (or similar plan), and allocations of (a) the Company’s contributions and (b) Plan earnings, and is charged with an allocation of Plan losses and administrative expenses. The benefit to which a participant is entitled is the benefit that can be provided from the participant’s vested account.
- F. **Vesting** — Participants are immediately vested in their pre-tax, regular after-tax, designated Roth after-tax, qualified non-elective and rollover contributions plus earnings thereon. Participants also are immediately vested in Company contributions other than Employer matching and any profit sharing contributions, plus earnings thereon. Vesting in the Employer matching and any profit sharing contributions, plus earnings thereon, is based on years of service, as

defined in the Plan document. A participant is 100% vested after four years of service, based on the following schedule.

Years of Service	Vesting Percentage
Less than 1 year	0 %
1 year	25 %
2 years	50 %
3 years	75 %
4 years	100 %

However, certain vesting schedules applicable to assets merged into the Plan have been preserved, as legally required, and may result in the vesting of Employer matching and any profit sharing contributions, plus earnings thereon, more quickly than described above. In addition, in the event of a disposition by the Company of a business or substantially all of the assets of a business, the participants impacted by such disposition may in certain circumstances become 100% vested in Employer matching and any profit sharing contributions, plus earnings thereon.

A participant also becomes 100% vested in Employer matching and any profit sharing contributions, plus earnings thereon, upon his or her termination of employment after attaining age 55 or on account of his or her death or disability (as defined in the Plan document), or if a participant dies while on leave of absence due to qualified military service.

In addition, special vesting applies to certain participants in the Plan who are subject to a collective bargaining agreement. Certain of such participants are immediately vested in their Employer matching and any profit sharing contributions, plus earnings thereon, and others become vested in their Employer matching and any profit sharing contributions, plus earnings thereon, as follows:

Years of Service	Vesting Percentage
Less than 1 year	0 %
1 year	20 %
2 years	40 %
3 years	60 %
4 years	80 %
5 years	100 %

- G. **Forfeitures** — A terminated participant who is not 100% vested will forfeit the non-vested portion of the Company's contributions plus earnings thereon unless the participant returns to employment within five years. The forfeited contributions are used first, to restore the accounts of recently located missing participants, as defined in the Plan document; next, to restore the accounts of participants who are reemployed prior to incurring a break in service of five consecutive years; next, to fund any Company contributions to be allocated to participants who are reemployed after a period of qualified military service, as defined in the Plan document; and finally, to reduce future contributions to the Plan by the Company. Forfeited amounts included in Plan assets at December 31, 2016 and 2015 were \$952,678 and \$122,958, respectively. For the year ended December 31, 2016, Company contributions to the Plan were reduced by \$799,205 from forfeited non-vested accounts.
- H. **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 will become 100% vested in their accounts.
- I. **Investment Options** — Upon enrollment into the Plan, a participant may direct Company and participant contributions into any of several investment options (including the Harris Stock Fund) and/or a brokerage window account. A participant may transfer amounts from other investment options into the Harris Stock Fund, provided that no transfer shall cause more than 20% of a participant's account to be invested in the Harris Stock Fund. The Harris Stock Fund has been designated as an "employee stock ownership plan," which means that the Company is entitled to a deduction for dividends paid on shares held in the Harris Stock Fund. Any such dividends are 100% vested and participants are permitted to elect that such dividends either be maintained in the Plan and reinvested in the Harris Stock Fund or paid from the Plan in cash to the participant.

The investment options are described in detail in the Plan’s “Summary Plan Description,” which is available to all participants. In the event no investment option is selected by a participant, the default investment option for contributions is the LifeCycle Fund that is age-appropriate for the participant. Elections to change investment options can be made daily; however, amounts in the Stable Value Fund cannot be transferred directly to the Money Market Fund. Investments are also governed by other limitations described in the Plan document and the “Summary Plan Description.”

NOTE 2 — SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of Accounting — The accounting records of the Plan are maintained on the accrual basis and have been prepared in conformity with accounting principles generally accepted in the United States of America (“U.S. GAAP”).

Valuation of Investments — Investments are stated at fair value or contract value. For investments stated at fair value, quoted market prices are used, when available, to value investments. Investments for which quoted market prices are not available are stated at fair values as reported by the Trustee or investee company. See Note 6 — Financial Instruments for further information on the valuation of investments.

Notes Receivable from Participants — Notes receivable from participants represent participant loans recorded at their unpaid principal balance plus any accrued but unpaid interest. Interest income on notes receivable from participants is recorded when it is earned. Related fees are recorded as administrative expenses and are expensed when they are incurred. No allowance for credit losses has been recorded as of December 31, 2016 or 2015. If a participant ceases to make loan repayments and the Plan Administrator deems the participant loan to be a distribution, the participant loan balance is reduced and a benefit payment is recorded upon the participant’s eligibility for a plan distribution.

Use of Estimates — The preparation of financial statements in conformity with U.S. GAAP requires the Plan Administrator to make estimates and assumptions that affect certain reported amounts, disclosures, and schedules. Accordingly, actual results may differ from those estimates.

Administrative Expenses — Unless otherwise elected by the Company, all reasonable charges and expenses incurred in connection with the administration of the Plan are paid by the Trustee from the assets of the trust.

New Accounting Standards — In January 2016, the Financial Accounting Standards Board (“FASB”) issued Accounting Standards Update (“ASU”) No. 2016-01, *Financial Instruments-Overall (Subtopic 825-10)*. ASU No. 2016-01 requires equity investments (except those accounted for under the equity method of accounting, or those that result in consolidation of the investee) to be measured at fair value with changes in fair value recognized in net income. ASU No. 2016-01 also requires public business entities to use the exit price notion when measuring the fair value of financial instruments for disclosure purposes. ASU No. 2016-01 is effective for employee benefit plans for fiscal years beginning after December 15, 2018. Management is currently evaluating the impact of ASU No. 2016-01 on the Plan’s financial statements.

NOTE 3 — RELATED-PARTY TRANSACTIONS

Certain Plan investments are shares of common stock of Harris Corporation and balances in common/collective trust funds that are managed by Northern Trust or Wells Fargo. Harris Corporation is the Plan sponsor and Northern Trust is the Trustee of the Plan and Wells Fargo was the trustee of the Exelis Retirement Savings Plan (which was merged into the Plan effective December 31, 2015) and, therefore, these transactions qualified as exempt party-in-interest transactions under the provisions of ERISA. Wells Fargo was not a related party or party-in-interest as of December 31, 2016.

The Plan's investments in Harris Corporation common stock (included with other common stock) and in common/collective trust funds managed by Northern Trust or Wells Fargo (included with other common/collective trust funds) were as follows:

	December 31, 2016		December 31, 2015	
	Shares	Fair Value	Shares	Fair Value
Common stock				
Harris Corporation common stock	2309782	\$ 236,683,362	2387863	\$ 207,505,295
Common/collective trust funds				
NT Collective Russell 1000 Index Fund — Non Lending	6938870	169,856,597	7797664	170,324,384
NT Collective Extended Equity Index Fund — Non Lending	832192	223,598,332	670313	155,285,280
NT Collective S&P 500 Index Fund-DC-Non Lending (Tier J)	72240	542,977,395	50457	338,740,880
NT Collective Aggregate Bond Index Fund — Non Lending	2864562	388,749,762	2198541	290,932,866
NTGI Coltv Govt STIF Registered	11241675	11,241,675	3886449	3,886,449
Wells Fargo / Blackrock STIF N	^	^	153135119	153,135,119
Wells Fargo / Blackrock STIF S	^	^	48582487	48,591,053

During 2016, the Plan made the following purchases and sales of related party investments:

	Purchases	Sales
Common stock		
Harris Corporation common stock	\$ 21,723,805	\$ 25,093,230
Common/collective trust funds		
NT Collective Russell 1000 Index Fund — Non Lending	51,052,559	71,019,032
NT Collective Extended Equity Index Fund — Non Lending	75,925,883	37,308,324
NT Collective S&P 500 Index Fund-DC-Non Lending (Tier J)	225,231,611	81,959,242
NT Collective Aggregate Bond Index Fund — Non Lending	116,532,494	26,894,768
NTGI Coltv Govt STIF Registered	*	*

^ Wells Fargo was not a related party to the Plan as of December 31, 2016 .

* Activity in this fund represents overnight interest bearing deposits (sweeps) of otherwise un-invested daily cash.

NOTE 4 — INCOME TAX STATUS

The Plan has received a determination letter from the Internal Revenue Service ("IRS") dated May 30, 2017 stating that the Plan is qualified under Section 401(a) of the Code and the related trust is exempt from taxation. Although the Plan has been amended since receiving the determination letter, the Plan's sponsor and the Plan's tax counsel believe the Plan, as amended, is qualified and the related trust is exempt from taxation.

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

NOTE 5 — CREDIT RISKS AND UNCERTAINTIES

Cash amounts at the Trustee may exceed the federally insured limit from time to time. The Plan provides for investments in various investment securities, which, in general, are exposed to certain risks, such as interest rate, credit and overall market volatility risks. Due to the level of risk associated with certain investment securities, it is reasonably possible that changes in

the values of investment securities will occur in the near term, and such changes could materially affect participant account balances and the amounts reported in the Statements of Net Assets Available for Benefits.

NOTE 6 — FINANCIAL INSTRUMENTS

Fair value is defined as the price that would be received to sell an asset or paid to transfer a liability in the principal market (or most advantageous market, in the absence of a principal market) for the asset or liability in an orderly transaction between market participants at the measurement date (i.e., an exit price). A three-level fair value hierarchy 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 and liabilities (Level 1) and the lowest priority to unobservable inputs (Level 3). The three levels of the fair value hierarchy are described below:

- Level 1 — inputs are based upon unadjusted quoted prices for identical instruments traded in active markets.
- Level 2 — inputs are based upon quoted prices for similar instruments in active markets, quoted prices for identical or similar instruments in markets that are not active, and model-based valuation techniques for which all significant assumptions are observable in the market or can be corroborated by observable market data for substantially the full term of the assets or liabilities.
- Level 3 — inputs are generally unobservable and typically reflect management's estimates of assumptions that market participants would use in pricing the asset or liability. The fair values are therefore determined using model-based techniques that include option pricing models, discounted cash flow models and similar techniques for which some or all significant assumptions are not observable.

The following section describes the valuation methodologies the Plan uses to measure financial assets at fair value.

In general, and where applicable, the Plan uses quoted prices in active markets for identical assets to determine fair value. This pricing methodology applies to the Plan's Level 1 assets which include interest bearing cash, common stocks, corporate bonds and debentures, partnership interests, the brokerage window account and registered investment companies. If quoted prices in active markets for identical assets are not available to determine fair value, then the Plan uses quoted prices for similar assets or inputs other than the quoted prices that are observable either directly or indirectly. These assets are included in Level 2 and consist of preferred stocks. Assets for which fair value is determined by management using assumptions that market participants would use in pricing assets are included in Level 3. As of December 31, 2016 and 2015, there were no Level 3 assets held by the Plan.

Assets Measured at Fair Value on a Recurring Basis

Assets measured at fair value on a recurring basis at December 31, 2016 are as follows:

	Level 1	Level 2	Level 3	Total
Assets				
Interest bearing cash	\$ 9,665,581	\$ —	\$ —	\$ 9,665,581
Preferred stocks	—	5,892,955	—	5,892,955
Brokerage window account	23,792,241	—	—	23,792,241
Corporate bonds & debentures	587,560	—	—	587,560
Partnership interests	868,563	—	—	868,563
Common stocks	1,130,784,693	—	—	1,130,784,693
Registered investment companies	204,454,745	—	—	204,454,745
Total Assets Measured at Fair Value	\$ 1,370,153,383	\$ 5,892,955	\$ —	\$ 1,376,046,338

Assets measured at fair value on a recurring basis at December 31, 2015 are as follows:

	Level 1	Level 2	Level 3	Total
Assets				
Interest bearing cash	\$ 510,301,790	\$ —	\$ —	\$ 510,301,790
Preferred stocks	—	1,471,455	—	1,471,455
Brokerage window account	12,320,538	—	—	12,320,538
Corporate bonds & debentures	101,745	—	—	101,745
Common stocks	836,044,592	—	—	836,044,592
Registered investment companies	1,578,871,132	—	—	1,578,871,132
Total Assets Measured at Fair Value	\$ 2,937,639,797	\$ 1,471,455	\$ —	\$ 2,939,111,252

NOTE 7 — COMMON/COLLECTIVE TRUST FUNDS

Common/collective trust funds share the common goal of first growing then later preserving principal and contain a mix of U.S. stocks, U.S. issued bonds and cash. There are currently no redemption restrictions on these investments. The fair values of the investments in this category have been estimated using the net asset value per unit calculated by the investment's issuer utilizing quoted market prices, most recent bid prices in the principal market in which the securities are normally traded, pricing services and dealer quotes. Net asset values are reported by the funds and are supported by the underlying share prices of actual purchases and sale transactions occurring as of or close to the financial statement date. Assets measured at net asset value are exempt from the fair value hierarchy. Fair values estimated using net asset value per unit were as follows:

	December 31, 2016	December 31, 2015

Common/collective trust funds	\$	3,623,148,902	\$	2,407,292,110
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NOTE 8 — SYNTHETIC GUARANTEED INVESTMENT CONTRACTS

During 2016 and 2015, the Plan held fully benefit-responsive, synthetic guaranteed investment contracts (“synthetic GICs”) in its Stable Value Fund (the “Fund”) which are stated at contract value. A corresponding contract wrapper with the issuer of the synthetic GICs was also held in order to provide a variable rate of return on the cost of the investment. The interest crediting rate of synthetic GICs is based on the contract value, and the fair value, duration and yield to maturity of the portfolio of bonds underlying the synthetic GICs. The interest crediting rate is reset quarterly. The minimum crediting rate is zero percent.

The interest crediting rate reset allows the contract value to converge with the fair value of the underlying portfolio over time, assuming the portfolio continues to earn the current yield for a period of time equal to the current portfolio duration.

The primary variables impacting the future interest crediting rates of synthetic GICs include the current yield of the assets underlying the contract, the duration of the assets underlying the contract and the existing difference between the fair value and contract value of the assets underlying the contract.

Synthetic GICs generally provide for withdrawals associated with certain events which are not in the ordinary course of Plan operations. These withdrawals are paid with a market value adjustment applied to the withdrawal as defined in the investment contract. Each contract issuer specifies the events which may trigger a market value adjustment. Such events include but are not limited to the following: material amendments to the Plan or in the administration of the Fund; changes to the Plan’s competing investment options including the elimination of equity wash provisions; complete or partial termination of the Plan; the failure of the Plan to qualify for exemption from federal income taxes or any required prohibited transaction exemption under ERISA; the redemption of all or a portion of the interests in the Fund held by the Plan at the direction of the Plan sponsor, including withdrawals due to the removal of a specifically identifiable group of employees from coverage under the Plan (such as a group layoff or early retirement incentive program), the closing or sale of a subsidiary, employing unit or affiliate, the bankruptcy or insolvency of the Plan sponsor, the merger of the Plan with another plan, or the Plan sponsor’s establishment of another tax qualified defined contribution plan; any change in law, regulation, ruling, administrative or judicial position or accounting requirement, applicable to the Fund or the Plan; or the delivery of any communication to Plan participants designed to influence a participant not to invest in the Fund.

At this time, the Plan does not believe that the occurrence of any such market value adjustment-triggering event, which would limit the Plan’s ability to transact at contract value with participants, has occurred or is probable.

If the Plan defaults in its obligations under any synthetic GIC (including the issuer’s determination that the agreement constitutes a non-exempt prohibited transaction as defined under ERISA), and such default is not corrected within the time permitted by the contract, then the contract may be terminated by the issuer and the Plan will receive the fair value of the underlying investments as of the date of termination. With the exception of this circumstance, termination of the contract by the issuer would be settled at contract value.

NOTE 9 — RECONCILIATION OF PLAN FINANCIAL STATEMENTS TO THE FORM 5500

Form 5500 requires the recording of a liability for benefit amounts processed prior to year-end but not yet paid and requires fully benefit-responsive contracts to be reported at fair value. These requirements conflict with U.S. GAAP and the presentation of such amounts in the financial statements where they remain as part of net assets available for benefits and are stated at contract value, respectively.

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

	December 31, 2016	December 31, 2015
Net assets available for benefits per the financial statements	\$ 6,218,780,797	\$ 6,057,930,357
Benefits due to participants	(627,697)	(1,138,553)
Adjustment to fair value from contract value for fully benefit-responsive investment contracts	7,609,100	6,008,021
Net assets available for benefits per the Form 5500	\$ 6,225,762,200	\$ 6,062,799,825

The following is a reconciliation of benefits paid to participants per the financial statements to the Form 5500 for the year ended December 31, 2016:

Benefits paid to participants per the financial statements	\$	554,968,576
Add: benefits due but unpaid at December 31, 2016		627,697
Less: benefits due but unpaid at December 31, 2015		<u>(1,138,553)</u>
Total benefit payments, corrective distributions and deemed distributions per the Form 5500	\$	<u><u>554,457,720</u></u>

The following is a reconciliation of investment income per the financial statements to the Form 5500 for the year ended December 31, 2016:

Net change in Plan assets per the financial statements	\$	160,850,440
Adjustment from fair value to contract value for fully benefit-responsive investment contracts at December 31, 2015		(6,008,021)
Adjustment from fair value to contract value for fully benefit-responsive investment contracts at December 31, 2016		7,609,100
Benefits due but unpaid at December 31, 2016		(627,697)
Benefits due but unpaid at December 31, 2015		<u>1,138,553</u>
Net income and transfers in per the Form 5500	\$	<u><u>162,962,375</u></u>

SUPPLEMENTAL INFORMATION
Harris Corporation Retirement Plan
E.I.N. 34-0276860
Plan Number 015
Schedule H, Line 4(i)
Schedule of Assets (Held at End of Year)
December 31, 2016

(a)	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value (In Shares/Par Value Except Notes Receivable from Participants)	(d) Cost	(e) Value
Value of Interest in Interest Bearing Cash				
	United States dollar		9665580	\$ 9,665,581
	Total Value of Interest in Interest Bearing Cash			\$ 9,665,581
Value of Interest in Preferred Stocks				
	AIRBNB INC SERIES D CVT PFD STOCK TROWE PRICE ONLY		1693	\$ 206,782
	DTE ENERGY CO CORPORATE UNIT		11487	608,811
	GREAT PLAINS DEP SHS REPSTG 1/20TH INT MANDATORY CONV PFD SER B 7%		18793	950,926
	NEXTERA ENERGY INC CORPORATE UNIT		47819	2,342,175
	PVTPL AIRBNB INC SER E CVT PFD STK T-ROWE		2468	229,757
	PVTPL FLIPKART - TROWE PRICE ONLY SER E PFD STK		337	38,341
	PVTPL FLIPKART LIMITED SERIES G PREFERENCE SHARES - T ROWE PRICE ONLY		1541	184,550
	PVTPL FLIPKART LTD - TROWE PRICE ONLY ORDINARY SHARES		300	34,132

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(a)	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value (In Shares/Par Value Except Notes Receivable from Participants)	(d) Cost	(e) Value
	PVTPL FLIPKART LTD - TROWE PRICE ONLY SER A PFD STK	404		11,832
	PVTPL FLIPKART LTD - TROWE PRICE ONLY SER C PFD STK	181		20,593
	PVTPL MAGIC LEAP INC PP SERIES C CVT PFD STOCK T-ROWE PRICE ONLY	10325		237,816
	PVTPL SNAPCHAT INC SER F CVT PFD STK T-ROWE	9273		284,867
	PVTPL UBER TECHNOLOGIES INC SER G CVTPFD STK T-ROWE	4873		237,667
	SER C CVT PFD STK DROPBOX SERIES C PREFERRED TROWE PRICE ONLY	10857		207,382
	UBER TECHNOLOGIES INC SER E PFD STK-TROWE PRICE ONLY	8924		297,324
	Total Value of Interest in Preferred Stocks		\$	5,892,955
Value of Interest in Brokerage Window Account				
	BROKERAGE WINDOW ACCOUNT		\$	23,792,241
	Total Value of Interest in Brokerage Window Account		\$	23,792,241
Value of Interest in Corporate Bonds & Debentures				
	PVTPL WESTERN DIG CORP SR NT 144A FIXED 10.5% DUE 04-01- 2024	470000	\$	555,775
	PVTPL VALEANT PHARMACEUTICALS SR NT 144A6.375% DUE 10-15- 2020/10-04-2012 BEO	37000		31,785
	Total Value of Interest in Corporate Bonds & Debentures		\$	587,560
Value of Interest in Partnerships				
	MLP GREEN PLAINS PARTNERS LP COM UNIT REPSTG LTD PARTNER INT	23075	\$	456,885
	MLP STAR GAS PARTNERS L P UNIT LTD PARTNERSHIP INT	38260		411,678
	Total Value of Interest in Partnerships		\$	868,563

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Value of Interest in Common Stocks				
	5TH 3RD BANCORP COM	124700	\$	3,363,159
	ACTUANT CORP CL A NEW	32381		840,287
	ADDUS HOMECARE CORP COM STK	15568		545,658
	ADIENT PLC ADIENT PLC LTD COM	37954		2,224,104
	ADOBE SYS INC COM	73400		7,556,530
	ADR ALIBABA GROUP HOLDING LTD SPONSORED ADS	114500		10,054,245
	ADR ASML HLDG NV NY	20000		2,244,000
	ADR BAIDU INC SPONSORED ADR REPSTG ORD SHS CL A	35500		5,836,555
	ADR ROYAL DUTCH SHELL PLC SPONSORED ADR REPSTG A SHS	97000		5,274,860
	ADR TENCENT HLDGS LTD ADR	66600		1,613,052
	ADVISORY BRD CO COM	23555		783,204
	AERIE PHARMACEUTICALS INC COM	10182		385,389
	AES CORP COM	288300		3,350,046
	AETNA INC	13800		1,711,338
	AIR METHODS CORP COM NEW	84307		2,685,178

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(a)	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value (In Shares/Par Value Except Notes Receivable from Participants)	(d) Cost	(e) Value
	ALASKA AIR GROUP INC COM	35200		3,123,296
	ALBANY INTL CORP NEW CL A	100916		4,672,411
	ALEXION PHARMACEUTICALS INC COM	66169		8,095,777
	ALLEGiant TRAVEL CO COM	5446		906,214
	ALLERGAN PLC. COM STK	7062		1,483,091
	ALPHABET INC CAP STK CL C	10280		7,934,310
	ALPHABET INC CL A CAP STK CL A	20035		15,876,736
	AMAZON COM INC	33086		24,810,199
	AMC ENTMT HLDGS INC CL A COM	15603		525,041
	AMEDISYS INC COM	19147		816,237
	AMERICAN AIRLINES INC COM USD1	76800		3,585,792
	AMERICAN CAP CASH AND STOCK MERGER ARES	215038		3,853,481
	AMERICAN EAGLE OUTFITTERS INC NEW COM	78352		1,188,600
	AMERICAN EXPRESS CO	62400		4,622,592
	AMERIPRISE FINL INC COM	41500		4,604,010

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(a)	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value (In Shares/Par Value Except Notes Receivable from Participants)	(d) Cost	(e) Value
	AMICUS THERAPEUTICS INC COM	60916		302,753
	ANALOG DEVICES INC COM	46200		3,355,044
	ANTHEM INC COM	41395		5,951,359
	APACHE CORP COM	57135		3,626,358
	APPLE INC COM STK	27100		3,138,722
	APPLIED MATERIALS INC COM	114600		3,698,142
	ARCHER-DANIELS-MIDLAND CO COM	97200		4,437,180
	ASPEN TECHNOLOGY INC COM	13667		747,312
	ASSURANT INC COM	31832		2,955,920
	AT HOME GROUP INC COM	33116		484,487
	ATHENAHEALTH INC COMMON STOCK	23600		2,482,012
	ATN INTL INC COM	38782		3,107,602
	AVON PRODUCTS INC COM	132400		667,296
	BANK NEW YORK MELLON CORP COM STK	69800		3,307,124
	BANK OF AMERICA CORP	159964		3,535,204

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(a)	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value (In Shares/Par Value Except Notes Receivable from Participants)	(d) Cost	(e) Value
	BANK OF THE OZARKS INC COM	26263		1,381,171
	BEACON ROOFING SUPPLY INC COM	16419		756,423
	BECTON DICKINSON & CO COM	16000		2,648,800
	BIG LOTS INC COM	20497		1,029,154
	BIOGEN INC COMMON STOCK	18910		5,362,498
	BIOMARIN PHARMACEUTICAL INC COM	52900		4,382,236
	BLUE BUFFALO PET PRODS INC COM	32767		787,719
	BOEING CO COM	77256		12,027,214
	BOISE CASCADE CO COM	39424		887,040
	BOYD GAMING CORP COM	55347		1,116,349
	BRIGHT HORIZONS FA COM	20678		1,447,874
	BRISTOL MYERS SQUIBB CO COM	76700		4,482,348
	BROADRIDGE FINL SOLUTIONS INC COM STK	31693		2,101,246
	BROADSOFT INC COM	26655		1,099,519
	CA INC COM	19400		616,338
	CALAMP CORP COM	33231		481,850

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(a)	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value (In Shares/Par Value Except Notes Receivable from Participants)	(d) Cost	(e) Value
	CALATLANTIC GROUP INC COM	22126		752,505
	CALLAWAY GOLF CO COM	20314		222,641
	CAMPING WORLD HLDGS INC CL A	10012		326,291
	CAP BK FINL CORP CL A COM	73811		2,897,082
	CARDTRONICS PLC CARDTRONICS PLC	19995		1,091,127
	CARNIVAL CORP COM PAIRED	50200		2,613,412
	CARRIAGE SERVICES INC COM	6283		179,945
	CARRIZO OIL & GAS INC COM	20674		772,174
	CASEYS GEN STORES INC COM	11120		1,321,946
	CATO CORP NEW CL A	16680		501,734
	CDN NAT RES COM STK	53700		1,711,956
	CEB INC	10457		633,694
	CELGENE CORP COM	11300		1,307,975
	CENTENE CORP DEL COM	19700		1,113,247
	CENTURYLINK INC COM	64375		1,530,838
	CF INDS HLDGS INC COM	90000		2,833,200

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(a)	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value (In Shares/Par Value Except Notes Receivable from Participants)	(d) Cost	(e) Value
	CHARLES RIV LABORATORIES INTL INC COM	10480		798,471
	CHEESECAKE FACTORY INC COM	21464		1,285,264
	CHEVRON CORP COM	36278		4,269,921
	CHILDRENS PL INC NEW COM	7351		742,083
	CHIPOTLE MEXICAN GRILL INC COM STK	10300		3,886,396
	CHUBB LTD ORD	5270		696,272
	CIGNA CORPORATION	10300		1,373,917
	CIRCOR INTL INC COM	13316		863,942
	CISCO SYSTEMS INC	152600		4,611,572
	CITIGROUP INC COM NEW	90700		5,390,301
	CITIZENS FINL GROUP INC COM	21300		758,919
	CLARCOR INC COM	10784		889,356
	CLEARWATER PAPER CORP COM STK	29469		1,931,693
	CLUBCORP HLDGS INC COM	36358		521,737
	CME GROUP INC COM STK	10133		1,168,842
	COGENT COMMUNICATIONS HLDGS INC	12807		529,569

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(a)	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value (In Shares/Par Value Except Notes Receivable from Participants)	(d) Cost	(e) Value
	COHERENT INC COM	4307		591,717
	COMCAST CORP NEW-CL A	64600		4,460,630
	COML METALS CO COM	34133		743,417
	COMMVAULT SYS INC COM STK	19891		1,022,397
	CONTINENTAL BLDG PRODS INC COM	59215		1,367,867
	CORE-MARK HLDG CO INC COM	59910		2,580,324
	COSTCO WHOLESALE CORP NEW COM	6900		1,104,759
	COTY INC COM CL A	91607		1,677,324
	CRAY INC COM NEW STK	27522		569,705
	CROWN CASTLE INTL CORP NEW COM	11100		963,147
	CTS CORP COM	89101		1,995,862
	CULP INC COM	24048		893,383
	CUMMINS INC	15900		2,173,053
	CYNOSURE INC	23136		1,055,002
	CYPRESS SEMICONDUCTOR CORP COM	72919		834,193

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(a)	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value (In Shares/Par Value Except Notes Receivable from Participants)	(d) Cost	(e) Value
	DANA INC COM	44884		851,898
	DANAHER CORP COM	44352		3,452,360
	DELTIC TIMBER CORP COM	33639		2,592,558
	DENNYS CORP COM	180287		2,313,082
	DEPOMED INC COM	11298		203,590
	DIAGEO ORD PLC	79419		2,070,629
	DIGITALGLOBE INC COM NEW	54211		1,553,145
	DOLLAR GEN CORP NEW COM	29200		2,162,844
	DRIL-QUIP INC COM	6046		363,062
	DROPBOX INC CL A COM STK - TROWE PRICE ONLY	2210		42,214
	DST SYS INC COM	9591		1,027,676
	DU PONT E I DE NEMOURS & CO COM STK	75700		5,556,380
	EASTGROUP PPTYS INC REIT	13720		1,013,085
	ECHOSTAR CORPORATION	77703		3,993,157
	EDISON INTL COM	46300		3,333,137
	EDWARDS LIFESCIENCES CORP COM	42600		3,991,620

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(a)	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value <i>(In Shares/Par Value Except Notes Receivable from Participants)</i>	(d) Cost	(e) Value
	ELECTRONICS FOR IMAGING INC COM	22582		990,447
	ELLIE MAE INC COM STK	6373		533,293
	EMERSON ELECTRIC CO COM	65300		3,640,475
	ENPRO INDS INC COM	52886		3,562,401
	EPAM SYS INC COM STK	20951		1,347,359
	EPIZYME INC COM	31555		381,816
	EQT CORP COM	17080		1,117,032
	EQTY RESDNTL	36800		2,368,448
	EURONET WORLDWIDE INC COM	10667		772,611
	EVERCORE PARTNERS INC CL A	11591		796,302
	EVERSOURCE ENERGY COM	3150		173,975
	EXELIXIS INC COM STK	26804		399,648
	EXELON CORP COM	96100		3,410,589
	EXTENDED STAY AMER INC PAIRED SHS COMPRISED 1 COM 1 CL B COM	50410		814,122
	EXXON MOBIL CORP COM	112126		10,120,493
	FACEBOOK INC CL A	152792		17,578,720

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(a)	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value (In Shares/Par Value Except Notes Receivable from Participants)	(d) Cost	(e) Value
	FAIR ISAAC CORPORATION COM	11467		1,367,096
	FARMERS CAP BK CORP COM	15012		631,255
	FEDERAL SIGNAL CORP COM	64636		1,008,968
	FEDEX CORP COM	11400		2,122,680
	FERRARI N V COMMON S TOCK	17662		1,026,869
	FIRST REP BK SAN FRANCISCO CALIF NEW COM	3491		321,661
	FIRSTENERGY CORP COM	73752		2,284,099
	FLIR SYS INC COM	20549		743,668
	FLOWSERVE CORP COM	39382		1,892,305
	FORD MTR CO DEL COM	83400		1,011,642
	FOREST CITY RLTY TR INC COM CL A	162356		3,383,499
	FORTIVE CORP COMMON STOCK	28326		1,519,123
	FTI CONSULTING INC COM	25222		1,137,008
	FULLER H B CO COM	18828		909,581
	GEN MTRS CO COM	18427		641,997
	GENERAL ELECTRIC CO	229000		7,236,400

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(a)	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value (In Shares/Par Value Except Notes Receivable from Participants)	(d) Cost	(e) Value
	GILEAD SCIENCES INC	23200		1,661,352
	GLAXOSMITHKLINE ORD	107864		2,081,867
	GREAT PLAINS ENERGY INC COM	4765		130,323
	GREIF INC	15180		778,886
	GUIDEWIRE SOFTWARE INC COM	15236		751,592
	HALOZYME THERAPEUTICS INC COM	38617		381,536
	*HARRIS CORP COM	2309782		236,683,362
	HAWAIIAN TELCOM HOLDCO INC COM	11676		289,331
	HEALTHCARE SVCS GROUP INC COM	28354		1,110,626
	HEALTHSOUTH CORP COM NEW STK	25361		1,045,888
	HECLA MNG CO COM	73885		387,157
	HERSHEY COMPANY COM STK	6200		641,266
	HESS CORP COM STK	72500		4,516,025
	HILL-ROM HLDGS INC COM STK	13453		755,251
	HILTON WORLDWIDE	90993		2,475,010
	HOME DEPOT INC COM	11200		1,501,696

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(a)	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value (In Shares/Par Value Except Notes Receivable from Participants)	(d) Cost	(e) Value
	HORIZON PHARMA INC COMMON STOCK	24856		402,170
	HUMANA INC COM	11447		2,335,531
	ILL TOOL WKS INC COM	31000		3,796,260
	ILLUMINA INC COM	34583		4,428,007
	IMAX CORP COM	33173		1,041,632
	IMPAX LABORATORIES INC COM	29375		389,219
	INCYTE CORP COM	36200		3,629,774
	INFINERA CORP COM STK	81596		692,750
	INTEGRATED DEVICE TECHNOLOGY INC COM	52337		1,233,060
	INTERCONTINENTAL EXCHANGE INC COM	43550		2,457,091
	INTL PAPER CO COM	79796		4,233,976
	INTUIT COM	12021		1,377,727
	INTUITIVE SURGICAL INC COM NEW STK	5358		3,397,883
	J2 GLOBAL INC COM	13511		1,105,200
	JACK IN THE BOX INC COM	6817		761,050

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(a)	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value (In Shares/Par Value Except Notes Receivable from Participants)	(d) Cost	(e) Value
	JANUS CAP GROUP INC COM	58965		782,466
	JOHNSON & JOHNSON COM	53700		6,186,777
	JOHNSON CTLS INTL PLC COM	144249		5,941,616
	JPMORGAN CHASE & CO COM	148224		12,790,249
	KADANT INC COM	32527		1,990,652
	KAPSTONEPAPER AND PACKAGING CORP COMMON STOCK	34230		754,772
	KELLOGG CO COM	26600		1,960,686
	KEYCORP NEW COM	158200		2,890,314
	KMG CHEMICALS INC COM	19599		762,205
	KNIGHT TRANSN INC COM	25941		857,350
	KOHL'S CORP COM	56800		2,804,784
	LAS VEGAS SANDS CORP COM STK	64200		3,428,922
	LENDINGCLUB CORP COM	247000		1,296,750
	LEXICON PHARMACEUTICALS INC FORMERLY LE COMMON STOCK	18959		262,203
	LIBERTY INTERACTIVE CORP LIBERTY VENTURES COM SER A NEW	14039		517,618

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(a)	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value (In Shares/Par Value Except Notes Receivable from Participants)	(d) Cost	(e) Value
	LIFE STORAGE INC COM	7419		632,544
	LIGAND PHARMACEUTICALS INCORPORATED CL BCOMMON STOCK	4930		500,937
	LINDSAY CORPORATION COM	13026		971,870
	LITTELFUSE INC COM	6391		969,962
	LOEWS CORP COM	131500		6,158,145
	LORAL SPACE & COMMUNICATIONS INC COM	10447		428,849
	LOWES COS INC COM	9100		647,192
	LUMINEX CORP DEL COM	18185		367,883
	MACROGENICS INC COM	12256		250,513
	MACYS INC COM STK	52100		1,865,701
	MAIDEN HOLDINGS LTD\COM STK	31137		543,341
	MANHATTAN ASSOCS INC COM	12865		682,231
	MARSH & MCLENNAN CO'S INC COM	65200		4,406,868
	MASIMO CORP COM STK	13563		914,146
	MATCH GROUP INC COM	23445		400,910

See Independent Auditors' Report

(a)	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value (In Shares/Par Value Except Notes Receivable from Participants)	(d) Cost	(e) Value
	MATTEL INC COM	110800		3,052,540
	MAXIMUS INC COM	26411		1,473,470
	MCGRATH RENTCORP COM	74228		2,908,995
	MEDLEY MGMT INC CL A COM	34733		343,857
	MEDTRONIC PLC COMMON STOCK	29600		2,108,408
	MERCK & CO INC NEW COM	67982		4,002,100
	MERIT MED SYS INC COM	36704		972,656
	METLIFE INC COM STK	113100		6,094,959
	MFA FINL INC	303305		2,314,217
	MGIC INVT CORP WIS COM	71847		732,121
	MGM RESORTS INTERNATIONAL COM	121262		3,495,983
	MGP INGREDIENTS INC NEW COM	7506		375,150
	MICROSEMI CORP COM	18478		997,258
	MICROSOFT CORP COM	230900		14,348,126
	MINERALS TECHNOLOGIES INC COM	12773		986,714

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(a)	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value (In Shares/Par Value Except Notes Receivable from Participants)	(d) Cost	(e) Value
	MKS INSTRS INC COM	5600		332,640
	MLP OCH-ZIFF CAP MGMT GROUP CL A SHS	97000		321,070
	MOBILEYE NV	71500		2,725,580
	MONOLITHIC PWR SYS INC COM	8721		714,512
	MONRO MUFFLER BRAKE INC COM	16680		954,096
	MONSTER BEVERAGE CORP NEW COM	109266		4,844,854
	MORGAN STANLEY COM STK	284548		12,022,153
	MURPHY USA INC COM	46844		2,879,501
	MYOVANT SCIENCES LTD	9339		116,177
	NATIONAL GEN HLDGS CORP COM	56574		1,413,784
	NATIONAL INSTRS CORP COM	23770		732,591
	NATUS MED INC DEL COM	24236		843,413
	NAUTILUS INC COM	33825		625,763
	NEENAH PAPER INC COM	31137		2,652,872
	NEOGEN CORP COM	7752		511,632
	NETFLIX INC COM STK	68250		8,449,350

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(a)	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value (In Shares/Par Value Except Notes Receivable from Participants)	(d) Cost	(e) Value
	NETSCOUT SYS INC COM	22944		722,736
	NEWS CORP NEW CL A	214200		2,454,732
	NEXSTAR MEDIA GROUP INC CL A	36697		2,322,920
	NISOURCE INC COM	177000		3,918,780
	NORTHERN TR CORP COM	53000		4,719,650
	NORTHSTAR ASSET PLAN OF REORG COLONY NORTHSTAR 2E13A42 01-11-2017	339585		5,106,795
	NUCOR CORP COM	40900		2,434,368
	NUVASIVE INC COM	15589		1,050,075
	NVIDIA CORP COM	8111		865,768
	NXP SEMICONDUCTORS N V COM STK	31295		3,067,223
	O REILLY AUTOMOTIVE INC NEW COM	3400		946,594
	OCCIDENTAL PETROLEUM CORP	49900		3,554,377
	OCEANFIRST FINL CORP COM	55879		1,678,046
	OMNICELL INC COM	6780		229,842
	ORITANI FINL CORP NEW COM STK	17514		328,388
	OWENS & MINOR INC NEW COM	11113		392,178

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(a)	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value (In Shares/Par Value Except Notes Receivable from Participants)	(d) Cost	(e) Value
	PAC PREMIER BANCORP COM	32249		1,140,002
	PACIRA PHARMACEUTICALS INC COM	14507		468,576
	PALO ALTO NETWORKS INC COM	36200		4,526,810
	PAR PACIFIC HOLDINGS INC COM NEW	120543		1,752,695
	PAYCOM SOFTWARE INC COM	7878		358,370
	PAYPAL HLDGS INC COM	87000		3,433,890
	PEBBLEBROOK HOTEL TR COM STK	19171		570,337
	PENTAIR PLC COM STK	38000		2,130,660
	PEPSICO INC COM	39700		4,153,811
	PFIZER INC COM	227547		7,390,727
	PG& E CORP COM	75300		4,575,981
	PHILIP MORRIS INTL COM STK NPV	36000		3,293,640
	PLANET FITNESS INC CL A	38931		782,513
	PNC FINANCIAL SERVICES GROUP COM STK	28800		3,368,448
	POLYONE CORP COM	19237		616,353
	POOL CORP COM STK	7009		731,319

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(a)	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value (In Shares/Par Value Except Notes Receivable from Participants)	(d) Cost	(e) Value
	PORTOLA PHARMACEUTICALS INC COM	15139		339,719
	POWER INTEGRATIONS INC COM	11418		774,711
	PRESTIGE BRANDS HLDGS INC COM	17222		897,266
	PRIMERICA INC COM	44898		3,104,697
	PROOFPOINT INC COM	7529		531,924
	PROS HLDGS INC COM	20112		432,810
	PROTHENA CORP PLC	9391		461,943
	PROVIDENCE SVC CORP COM STK	25994		989,072
	QTS RLTY TR INC COM CL A	23062		1,145,028
	QUALCOMM INC COM	73100		4,766,120
	QUALYS INC COM	10351		327,609
	RADIUS HEALTH INC COM NEW	8369		318,273
	RAPID7 INC COM	35672		434,128
	RAYONIER INC REIT	83900		2,231,740
	RED HAT INC COM	18300		1,275,510
	REGAL BELOIT CORP COM	12153		841,595

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	REGENERON PHARMACEUTICALS INC COM	12000		4,405,080
	REGIS CORP MINN COM	195855		2,843,815
	RENASANT CORP COM	32388		1,367,421
	RINGCENTRAL INC CL A	37144		765,166
	ROSS STORES INC COM	19100		1,252,960
	ROYAL BK SCOT GRP ORD	562522		1,561,150
	S.W. AIRL CO COM	28200		1,405,488
	SAGE THERAPEUTICS INC COM	5517		281,698
	SALESFORCE COM INC COM STK	176700		12,096,882
	SCHLUMBERGER LTD COM	45000		3,777,750
	SCHWAB CHARLES CORP COM NEW	144000		5,683,680
	SELECT MED HLDGS CORP COM	51531		682,786
	SERVICENOW INC COM	58936		4,381,302
	SIMPSON MFG INC COM	20400		892,500
	SONIC CORP COM	27804		737,084
	SOUTHERN CO COM STK	21400		1,052,666

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	SPLUNK INC COMSTK COM USD0.001	86300		4,414,245
	SPS COMM INC COM	14087		984,540
	STAPLES INC COM	21900		198,195
	STARBUCKS CORP COM	20400		1,132,608
	STATE STR CORP COM	99693		7,748,140
	STRYKER CORP	16822		2,015,444
	SURGICAL CARE	14083		651,620
	SYNAPTICS INC COM	19047		1,020,538
	SYNCHRONOSS TECHNOLOGIES INC COM STK	20849		798,517
	SYNOVUS FINL CORP COM NEW	108283		4,448,266
	TARGA RES CORP COM	6500		364,455
	TD AMERITRADE HLDG CORP COM STK	60795		2,650,662
	TE CONNECTIVITY LTD	16900		1,170,832
	TEAM HEALTH	7515		326,527
	TELEDYNE TECHNOLOGIES INC COM	8581		1,055,463
	TELEFONICA SA EUR1	126806		1,179,663

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(a)	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value (In Shares/Par Value Except Notes Receivable from Participants)	(d) Cost	(e) Value
	TERRENO RLTY CORP	19689		560,940
	TESLA INC COM	10930		2,335,632
	TEXAS INSTRUMENTS INC COM	46900		3,422,293
	TEXTRON INC COM	19400		942,064
	TFS FINL CORP COM STK	106754		2,032,596
	THE PRICELINE GROUP INC	13339		19,555,774
	TIME WARNER INC	4800		463,344
	T-MOBILE US INC COM	29900		1,719,549
	TORO CO COM	12096		676,771
	TOTAL EUR2.5	129688		6,664,331
	TRACTOR SUPPLY CO COM	17903		1,357,226
	TRISTATE CAP HLDGS INC COM	22797		503,814
	TRIUMPH BANCORP INC COM	27523		719,726
	TRUEBLUE INC COM STK	34481		849,957
	TWENTY-FIRST CENTY FOX INC CL B	174400		4,752,400
	ULTRAGENYX PHARMACEUTICAL INC COM	4841		340,371

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	UNDER ARMOR INC CL A	46000		1,336,300
	UNDER ARMOUR INC CL C COM	46347		1,166,554
	UNION PAC CORP COM	24000		2,488,320
	UNIT CORP COM	17569		472,079
	UNITED PARCEL SVC INC CL B	29500		3,381,880
	UNITED TECHNOLOGIES CORP COM	7900		865,998
	UNITEDHEALTH GROUP INC COM	25400		4,065,016
	UNVL ELECTRS INC COM	11249		726,123
	URBAN EDGE PPTYS COM	20514		564,340
	US BANCORP	35900		1,844,183
	US ECOLOGY INC COM	14484		711,889
	VALVOLINE INC COM	21147		454,661
	VECTOR GROUP LTD COM STK	23866		542,713
	VERIZON COMMUN COM	119191		6,361,156
	VERTEX PHARMACEUTICALS INC COM	18300		1,348,161
	VIRTU FINL INC CL A	32676		521,182

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	VIRTUS INVT PARTNERS INC COM	27384		3,232,681
	VISA INC COM CL A STK	282600		22,048,452
	VODAFONE GROUP ORD	431911		1,066,581
	VULCAN MATERIALS CO COM	35400		4,430,310
	WAL-MART STORES INC COM	45300		3,131,136
	WALT DISNEY CO	20200		2,105,244
	WATTS WTR TECHNOLOGIES INC	14613		952,768
	WELLS FARGO & CO NEW COM STK	120600		6,646,266
	WESTERN ALLIANCE BANCORPORATION COM	11365		553,589
	WESTN DIGITAL CORP COM	35200		2,391,840
	WEYERHAEUSER CO COM	92445		2,781,670
	WILLIS TOWERS WATSON PLC COM	14158		1,731,240
	WOODWARD INC COM	13550		935,628
	WORKDAY INC CL A COM USD0.001	13000		859,170
	WORTHINGTON INDS INC COM	12585		597,032
	XCEL ENERGY INC COM	68600		2,792,020

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	XENIA HOTELS & RESORTS INC COM	88267		1,714,145
	XL GROUP LTD COM NPV	26500		987,390
	YUM BRANDS INC COM	10900		690,293
	Total Value of Interest in Common Stocks		\$	1,130,784,693
Value of Interest in Registered Investment Companies				
	MFO ALLIANZ FDS ALLIANZGI TECHNOLOGY FD INSTL CL	2110729	\$	114,211,519
	MFO RESV INVT FDS INC	6694145		6,694,145
	MFC ISHARES TR RUSSELL 2000 GROWTH ETF	4492		691,498
	MFO MONEY MKT OBLIGS TR FEDT GOVT OBLIGSFD INSTL SHS	82857582		82,857,583
	Total Value of Interest in Registered Companies		\$	204,454,745
Value of Interest in Common/Collective Trust Funds				
	*MFB NT COLLECTIVE AGGREGATE BOND INDEX FUND-NON LENDING	2864562	\$	388,749,762
	*MFB NT COLLECTIVE RUSSELL 1000 INDEX FUND - NON LENDING	6938870		169,856,597
	MFO BLACKROCK LIFEPATH 2060 NL F	235755		2,519,980
	MFO BLACKROCK LIFEPATH INDEX 2020 NL FUND F	18315535		367,783,264
	MFO BLACKROCK LIFEPATH INDEX 2030 NL FUND F	12905435		288,125,452
	MFO BLACKROCK LIFEPATH INDEX 2040 NL FUND F	5259848		127,470,844
	MFO BLACKROCK LIFEPATH INDEX 2050 NL FUND F	3008806		78,127,870

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	MFO BLACKROCK LIFEPAATH INDEX 2055 NON LENDING FD F	1146607		21,527,657
	MFO BLACKROCK LIFEPAATH INDEX RETIREMENT 2025 NL CL F	20383065		434,165,406
	MFO BLACKROCK LIFEPAATH INDEX RETIREMENT 2035 NL CL F	7496513		174,890,649
	MFO BLACKROCK LIFEPAATH INDEX RETIREMENT 2045 NL CL F	4558779		114,580,799
	MFO BLACKROCK LIFEPAATH INDEX RETIREMENT NL CL F	18412868		326,158,175
	MFO BLACKROCK STRATEGIC COMPLETION NL FUND F	6152173		64,440,931
	MFO PRIN GLOBAL INVS COLTV INVT TR DIVERSIFIED INTL EQTY FD 50 BP FEE CL	1169131		256,439,920
	*NT COLLECTIVE EXTENDED EQUITY INDEX FD -NONLENDING	832192		223,598,332
	*NT COLLECTIVE S&P500 INDEX FUND-DC-NON LENDING (TIER J)	72240		542,977,395
	*NTGI COLTV GOVT STIF REGI STERED	11241675		11,241,675
	Wells Fargo /BlackRock Short-Term Investment Fund S (a)	30494195		30,494,194
	Total Value of Interest in Common/Collective Trust Funds		\$	3,623,148,902
Value of Interest in Synthetic Security-Backed Investment Contracts				
	Galliard Capital Management American General Life Ins. Co., #1629650		\$	219,962,852
	Galliard Capital Management Pacific Life Ins. Co., #G-27236.01.0001			245,877,562
	Galliard Capital Management Transamerica Premier Life Ins. Co., #MDA01077TR			245,741,547

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(a)	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value (In Shares/Par Value Except Notes Receivable from Participants)	(d) Cost	(e) Value
	Galliard Capital Management Prudential Life Ins. Co., #GA-62487			215,800,595
	Galliard Capital Management State Street Bank and Trust, #105004			222,206,771
	Total Value of Interest in Synthetic Security-Backed Investment Contracts		\$	1,149,589,327

Value of Interest in Notes Receivable from Participants

*PARTICIPANT LOAN ASSET-HARRIS CORP.	\$ 63,583,318
Total Value of Interest in Notes Receivable from Participants	\$ 63,583,318
GRAND TOTAL	\$ 6,212,367,885

Note: Cost information has not been included in column (d) because all investments are participant-directed.

* Party-in-interest to the Plan

See Independent Auditors' Report

SUPPLEMENTAL INFORMATION
Harris Corporation Retirement Plan

E.I.N. 34-0276860
Plan Number 015
Schedule H, Line 4(j)
Schedule of Reportable Transactions
December 31, 2016

Identity of Party Involved	Description of Asset	Purchase Price	Selling Price	Lease Rental	Expense Incurred with Transaction	Cost of Asset	Current Value of Asset on Transaction Date	Net Gain or (Loss)
Northern Trust	Blackrock Lifepath Index Retirement NL	\$ 345,628,133	\$ —	\$ —	\$ —	\$ 345,628,133	\$ 345,628,133	\$ —
Northern Trust	Blackrock Lifepath Index 2025 NL	\$ 379,122,491	\$ —	\$ —	\$ —	\$ 379,122,491	\$ 379,122,491	\$ —
Northern Trust	Blackrock Lifepath Index 2020 NL	\$ 344,627,873	\$ —	\$ —	\$ —	\$ 344,627,873	\$ 344,627,873	\$ —
Northern Trust	Galliard Capital Management	\$ 692,774,471	\$ —	\$ —	\$ —	\$ 692,774,471	\$ 692,774,471	\$ —
Northern Trust	Common Collective Trust Funds Government STIF	\$ 395,868,920	\$ —	\$ —	\$ —	\$ 395,868,920	\$ 395,868,920	\$ —

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INDEPENDENT AUDITORS' REPORT

To the Participants and the Harris Corporation Employee Benefits Committee of the
Harris Corporation Retirement Plan

We have audited the accompanying financial statements of Harris Corporation Retirement 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.

Auditor's Responsibility

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

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

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

Opinion

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

Report on Supplemental Information

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

Cam, Riggs & Ingram, L.L.C.

Tampa, Florida
June 23, 2017

HARRIS CORPORATION RETIREMENT PLAN
Statements of Net Assets Available for Benefits

	December 31, 2016	December 31, 2015
ASSETS		
Investments at fair value:		
Interest bearing cash	\$ 9,665,581	\$ 510,301,790
Preferred stocks	5,892,955	1,471,455
Brokerage window account	23,792,241	12,320,538
Corporate bonds & debentures	587,560	101,745
Partnership interests	868,563	-
Common stocks	1,130,784,693	836,044,592
Registered investment companies	204,454,745	1,578,871,132
Common/collective trust funds	3,623,148,902	2,407,292,110
Total investments at fair value	4,999,195,240	5,346,403,362
Investments at contract value:		
Synthetic guaranteed investment contracts	1,149,589,327	638,913,025
Receivables:		
Accrued interest and dividends	1,184,128	867,588
Participant contributions receivable	7,237,133	4,246,435
Employer matching contributions receivable	2,597,685	1,782,429
Notes receivable from participants	63,583,318	65,778,392
Due from broker for securities sold	1,427,819	1,216,846
Total receivables	76,030,083	73,891,690
Total assets	6,224,814,650	6,059,208,077
LIABILITIES		
Accrued administrative expenses	854,177	529,802
Due to broker for securities purchased	5,179,676	747,918
Total liabilities	6,033,853	1,277,720
Net assets available for benefits	\$ 6,218,780,797	\$ 6,057,930,357

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

HARRIS CORPORATION RETIREMENT PLAN
Statement of Changes in Net Assets Available for Benefits
For the year ended December 31, 2016

Additions to net assets attributed to:	
Investment income:	
Net appreciation in fair value of investments	\$ 391,500,536
Net appreciation in contract value of investments	25,378,807
Dividends	15,772,409
Total	432,651,752
Contributions:	
Participant rollovers	27,703,001
Employer matching	76,567,677
Participant (other than rollovers)	185,116,919
Total contributions	289,387,597
Interest on notes receivable from participants	2,740,135
Total additions	724,779,484
Deductions from net assets attributed to:	
Benefits paid to participants	554,968,576
Administrative expenses	8,960,468
Total deductions	563,929,044
Net change in plan assets available for benefits	160,850,440
Net assets available for benefits:	
Beginning of year	6,057,930,357
End of year	\$ 6,218,780,797

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

HARRIS CORPORATION RETIREMENT PLAN

Notes to the Financial Statements
December 31, 2016 and 2015

NOTE 1 — DESCRIPTION OF PLAN

The following description of the Harris Corporation Retirement Plan (the “Plan”) provides only general information. Participants should refer to the Plan document for a more complete description of the Plan’s provisions.

- A. **General** — The Plan is a defined contribution plan with a 401(k) feature covering eligible employees of Harris Corporation and certain of its subsidiaries (collectively, the “Company” or “Employer”) as defined in the Plan document. The Plan Administrator is the Harris Corporation Employee Benefits Committee comprised of persons appointed by Harris Corporation. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974, as amended (“ERISA”).
- B. **Contributions** — Participants may contribute a percentage of eligible compensation, as defined in the Plan document and subject to Internal Revenue Code (the “Code”) limitations, on a pre-tax and/or an after-tax basis. After-tax contributions may be made either on a regular after-tax basis or on a designated Roth after-tax basis. Participants age 50 and older by the end of the calendar year can contribute an additional amount above the annual pre-tax/designated Roth after-tax limitation, as defined in the Plan document and subject to Code limitations. The Company matches up to 50% or 100% (depending on business unit) of pre-tax and after-tax contributions subject to a limit of 4%, 5% or 6% (depending on business unit) of eligible compensation for any eligible employee who has completed one year of service with the Company and is not accruing a benefit under the Company’s defined benefit pension plan. Special matching rules apply to participants who are subject to a collective bargaining agreement. Full-time regular participants who are not subject to a collective bargaining agreement and who make no election with respect to their contribution percentage are deemed to have elected deferment of 6% of eligible compensation on a pre-tax basis. The Company may make discretionary profit sharing contributions to the Plan in an amount determined by the Company, allocated to eligible participants based on eligible compensation as defined in the Plan document. For the year ended December 31, 2016, no profit sharing contributions were made. Additional Company contributions may be made on behalf of participants who are subject to a collective bargaining agreement or to satisfy, in part, the Company’s obligations to certain participants under wage determination or similar laws. In addition, participants may rollover amounts to the Plan from other qualified plans or certain individual retirement accounts (“IRAs”).
- C. **Payments of Benefits** — Prior to termination of employment, a participant may withdraw all or any portion of his or her regular after-tax account balance or rollover balance. A participant may also receive a distribution while employed for financial hardship, as defined in the Plan document, after attainment of age 59 ¹/₂ or in certain cases, in connection with active military duty. Upon retirement or other termination of employment, a participant may elect to receive either a lump-sum amount equal to all or a portion of the participant’s vested account, or installments of his or her vested account over a future period. Alternatively, a participant generally will be eligible to rollover his or her vested account to an eligible retirement plan or IRA. In addition, certain other distribution options applicable to assets merged into the Plan have been preserved, as legally required.
- D. **Participant Loans** — The participant loan program permits participants to borrow against their pre-tax, regular after-tax, qualified non-elective, designated Roth after-tax and rollover contributions. A participant may borrow in increments of \$100 from a minimum of \$500 to a maximum of 50% of the vested portion of the participant’s account or \$50,000 whichever is lower, within certain limitations established by the Plan document. Payback periods range from one to five years unless the loan is to be used for the purchase of a principal residence, in which case the payback period generally may not exceed ten years. Interest rates are established by the Plan Administrator based on market rates. Loans are paid back ratably through payroll deductions (or, if the participant is not receiving paychecks, then they are paid back by personal, certified or cashier’s check, money order or electronic transfer). The outstanding loans have been established as a separate fund.
- E. **Participant Accounts** — Each participant’s account is credited with the participant’s contribution, including the contribution, if any, in respect of the participant’s election under the Company’s Performance Reward Plan (or similar plan), and allocations of (a) the Company’s contributions and (b) Plan earnings, and is charged with an allocation of Plan losses and administrative expenses. The benefit to which a participant is entitled is the benefit that can be provided from the participant’s vested account.
- F. **Vesting** — Participants are immediately vested in their pre-tax, regular after-tax, designated Roth after-tax, qualified non-elective and rollover contributions plus earnings thereon. Participants also are immediately vested in Company contributions other than Employer matching and any profit sharing contributions, plus earnings thereon. Vesting in the Employer matching and any profit sharing contributions, plus earnings thereon, is based on years of service, as

defined in the Plan document. A participant is 100% vested after four years of service, based on the following schedule.

Years of Service	Vesting Percentage
Less than 1 year	0 %
1 year	25 %
2 years	50 %
3 years	75 %
4 years	100 %

However, certain vesting schedules applicable to assets merged into the Plan have been preserved, as legally required, and may result in the vesting of Employer matching and any profit sharing contributions, plus earnings thereon, more quickly than described above. In addition, in the event of a disposition by the Company of a business or substantially all of the assets of a business, the participants impacted by such disposition may in certain circumstances become 100% vested in Employer matching and any profit sharing contributions, plus earnings thereon.

A participant also becomes 100% vested in Employer matching and any profit sharing contributions, plus earnings thereon, upon his or her termination of employment after attaining age 55 or on account of his or her death or disability (as defined in the Plan document), or if a participant dies while on leave of absence due to qualified military service.

In addition, special vesting applies to certain participants in the Plan who are subject to a collective bargaining agreement. Certain of such participants are immediately vested in their Employer matching and any profit sharing contributions, plus earnings thereon, and others become vested in their Employer matching and any profit sharing contributions, plus earnings thereon, as follows:

Years of Service	Vesting Percentage
Less than 1 year	0 %
1 year	20 %
2 years	40 %
3 years	60 %
4 years	80 %
5 years	100 %

- G. **Forfeitures** — A terminated participant who is not 100% vested will forfeit the non-vested portion of the Company's contributions plus earnings thereon unless the participant returns to employment within five years. The forfeited contributions are used first, to restore the accounts of recently located missing participants, as defined in the Plan document; next, to restore the accounts of participants who are reemployed prior to incurring a break in service of five consecutive years; next, to fund any Company contributions to be allocated to participants who are reemployed after a period of qualified military service, as defined in the Plan document; and finally, to reduce future contributions to the Plan by the Company. Forfeited amounts included in Plan assets at December 31, 2016 and 2015 were \$952,678 and \$122,958, respectively. For the year ended December 31, 2016, Company contributions to the Plan were reduced by \$799,205 from forfeited non-vested accounts.
- H. **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 will become 100% vested in their accounts.
- I. **Investment Options** — Upon enrollment into the Plan, a participant may direct Company and participant contributions into any of several investment options (including the Harris Stock Fund) and/or a brokerage window account. A participant may transfer amounts from other investment options into the Harris Stock Fund, provided that no transfer shall cause more than 20% of a participant's account to be invested in the Harris Stock Fund. The Harris Stock Fund has been designated as an "employee stock ownership plan," which means that the Company is entitled to a deduction for dividends paid on shares held in the Harris Stock Fund. Any such dividends are 100% vested and participants are permitted to elect that such dividends either be maintained in the Plan and reinvested in the Harris Stock Fund or paid from the Plan in cash to the participant.

The investment options are described in detail in the Plan’s “Summary Plan Description,” which is available to all participants. In the event no investment option is selected by a participant, the default investment option for contributions is the LifeCycle Fund that is age-appropriate for the participant. Elections to change investment options can be made daily; however, amounts in the Stable Value Fund cannot be transferred directly to the Money Market Fund. Investments are also governed by other limitations described in the Plan document and the “Summary Plan Description.”

NOTE 2 — SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of Accounting — The accounting records of the Plan are maintained on the accrual basis and have been prepared in conformity with accounting principles generally accepted in the United States of America (“U.S. GAAP”).

Valuation of Investments — Investments are stated at fair value or contract value. For investments stated at fair value, quoted market prices are used, when available, to value investments. Investments for which quoted market prices are not available are stated at fair values as reported by the Trustee or investee company. See Note 6 — Financial Instruments for further information on the valuation of investments.

Notes Receivable from Participants — Notes receivable from participants represent participant loans recorded at their unpaid principal balance plus any accrued but unpaid interest. Interest income on notes receivable from participants is recorded when it is earned. Related fees are recorded as administrative expenses and are expensed when they are incurred. No allowance for credit losses has been recorded as of December 31, 2016 or 2015. If a participant ceases to make loan repayments and the Plan Administrator deems the participant loan to be a distribution, the participant loan balance is reduced and a benefit payment is recorded upon the participant’s eligibility for a plan distribution.

Use of Estimates — The preparation of financial statements in conformity with U.S. GAAP requires the Plan Administrator to make estimates and assumptions that affect certain reported amounts, disclosures, and schedules. Accordingly, actual results may differ from those estimates.

Administrative Expenses — Unless otherwise elected by the Company, all reasonable charges and expenses incurred in connection with the administration of the Plan are paid by the Trustee from the assets of the trust.

New Accounting Standards — In January 2016, the Financial Accounting Standards Board (“FASB”) issued Accounting Standards Update (“ASU”) No. 2016-01, *Financial Instruments-Overall (Subtopic 825-10)*. ASU No. 2016-01 requires equity investments (except those accounted for under the equity method of accounting, or those that result in consolidation of the investee) to be measured at fair value with changes in fair value recognized in net income. ASU No. 2016-01 also requires public business entities to use the exit price notion when measuring the fair value of financial instruments for disclosure purposes. ASU No. 2016-01 is effective for employee benefit plans for fiscal years beginning after December 15, 2018. Management is currently evaluating the impact of ASU No. 2016-01 on the Plan’s financial statements.

NOTE 3 — RELATED-PARTY TRANSACTIONS

Certain Plan investments are shares of common stock of Harris Corporation and balances in common/collective trust funds that are managed by Northern Trust or Wells Fargo. Harris Corporation is the Plan sponsor and Northern Trust is the Trustee of the Plan and Wells Fargo was the trustee of the Exelis Retirement Savings Plan (which was merged into the Plan effective December 31, 2015) and, therefore, these transactions qualified as exempt party-in-interest transactions under the provisions of ERISA. Wells Fargo was not a related party or party-in-interest as of December 31, 2016.

The Plan's investments in Harris Corporation common stock (included with other common stock) and in common/collective trust funds managed by Northern Trust or Wells Fargo (included with other common/collective trust funds) were as follows:

	December 31, 2016		December 31, 2015	
	Shares	Fair Value	Shares	Fair Value
Common stock				
Harris Corporation common stock	2309782	\$ 236,683,362	2387863	\$ 207,505,295
Common/collective trust funds				
NT Collective Russell 1000 Index Fund — Non Lending	6938870	169,856,597	7797664	170,324,384
NT Collective Extended Equity Index Fund — Non Lending	832192	223,598,332	670313	155,285,280
NT Collective S&P 500 Index Fund-DC-Non Lending (Tier J)	72240	542,977,395	50457	338,740,880
NT Collective Aggregate Bond Index Fund — Non Lending	2864562	388,749,762	2198541	290,932,866
NTGI Coltv Govt STIF Registered	11241675	11,241,675	3886449	3,886,449
Wells Fargo / Blackrock STIF N	^	^	153135119	153,135,119
Wells Fargo / Blackrock STIF S	^	^	48582487	48,591,053

During 2016, the Plan made the following purchases and sales of related party investments:

	Purchases		Sales	
Common stock				
Harris Corporation common stock	\$	21,723,805	\$	25,093,230
Common/collective trust funds				
NT Collective Russell 1000 Index Fund — Non Lending		51,052,559		71,019,032
NT Collective Extended Equity Index Fund — Non Lending		75,925,883		37,308,324
NT Collective S&P 500 Index Fund-DC-Non Lending (Tier J)		225,231,611		81,959,242
NT Collective Aggregate Bond Index Fund — Non Lending		116,532,494		26,894,768
NTGI Coltv Govt STIF Registered		*		*

^ Wells Fargo was not a related party to the Plan as of December 31, 2016 .

* Activity in this fund represents overnight interest bearing deposits (sweeps) of otherwise un-invested daily cash.

NOTE 4 — INCOME TAX STATUS

The Plan has received a determination letter from the Internal Revenue Service ("IRS") dated May 30, 2017 stating that the Plan is qualified under Section 401(a) of the Code and the related trust is exempt from taxation. Although the Plan has been amended since receiving the determination letter, the Plan's sponsor and the Plan's tax counsel believe the Plan, as amended, is qualified and the related trust is exempt from taxation.

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

NOTE 5 — CREDIT RISKS AND UNCERTAINTIES

Cash amounts at the Trustee may exceed the federally insured limit from time to time. The Plan provides for investments in various investment securities, which, in general, are exposed to certain risks, such as interest rate, credit and overall market volatility risks. Due to the level of risk associated with certain investment securities, it is reasonably possible that changes in

the values of investment securities will occur in the near term, and such changes could materially affect participant account balances and the amounts reported in the Statements of Net Assets Available for Benefits.

NOTE 6 — FINANCIAL INSTRUMENTS

Fair value is defined as the price that would be received to sell an asset or paid to transfer a liability in the principal market (or most advantageous market, in the absence of a principal market) for the asset or liability in an orderly transaction between market participants at the measurement date (i.e., an exit price). A three-level fair value hierarchy 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 and liabilities (Level 1) and the lowest priority to unobservable inputs (Level 3). The three levels of the fair value hierarchy are described below:

- Level 1 — inputs are based upon unadjusted quoted prices for identical instruments traded in active markets.
- Level 2 — inputs are based upon quoted prices for similar instruments in active markets, quoted prices for identical or similar instruments in markets that are not active, and model-based valuation techniques for which all significant assumptions are observable in the market or can be corroborated by observable market data for substantially the full term of the assets or liabilities.
- Level 3 — inputs are generally unobservable and typically reflect management's estimates of assumptions that market participants would use in pricing the asset or liability. The fair values are therefore determined using model-based techniques that include option pricing models, discounted cash flow models and similar techniques for which some or all significant assumptions are not observable.

The following section describes the valuation methodologies the Plan uses to measure financial assets at fair value.

In general, and where applicable, the Plan uses quoted prices in active markets for identical assets to determine fair value. This pricing methodology applies to the Plan's Level 1 assets which include interest bearing cash, common stocks, corporate bonds and debentures, partnership interests, the brokerage window account and registered investment companies. If quoted prices in active markets for identical assets are not available to determine fair value, then the Plan uses quoted prices for similar assets or inputs other than the quoted prices that are observable either directly or indirectly. These assets are included in Level 2 and consist of preferred stocks. Assets for which fair value is determined by management using assumptions that market participants would use in pricing assets are included in Level 3. As of December 31, 2016 and 2015, there were no Level 3 assets held by the Plan.

Assets Measured at Fair Value on a Recurring Basis

Assets measured at fair value on a recurring basis at December 31, 2016 are as follows:

	Level 1	Level 2	Level 3	Total
Assets				
Interest bearing cash	\$ 9,665,581	\$ —	\$ —	\$ 9,665,581
Preferred stocks	—	5,892,955	—	5,892,955
Brokerage window account	23,792,241	—	—	23,792,241
Corporate bonds & debentures	587,560	—	—	587,560
Partnership interests	868,563	—	—	868,563
Common stocks	1,130,784,693	—	—	1,130,784,693
Registered investment companies	204,454,745	—	—	204,454,745
Total Assets Measured at Fair Value	\$ 1,370,153,383	\$ 5,892,955	\$ —	\$ 1,376,046,338

Assets measured at fair value on a recurring basis at December 31, 2015 are as follows:

	Level 1	Level 2	Level 3	Total
Assets				
Interest bearing cash	\$ 510,301,790	\$ —	\$ —	\$ 510,301,790
Preferred stocks	—	1,471,455	—	1,471,455
Brokerage window account	12,320,538	—	—	12,320,538
Corporate bonds & debentures	101,745	—	—	101,745
Common stocks	836,044,592	—	—	836,044,592
Registered investment companies	1,578,871,132	—	—	1,578,871,132
Total Assets Measured at Fair Value	\$ 2,937,639,797	\$ 1,471,455	\$ —	\$ 2,939,111,252

NOTE 7 — COMMON/COLLECTIVE TRUST FUNDS

Common/collective trust funds share the common goal of first growing then later preserving principal and contain a mix of U.S. stocks, U.S. issued bonds and cash. There are currently no redemption restrictions on these investments. The fair values of the investments in this category have been estimated using the net asset value per unit calculated by the investment's issuer utilizing quoted market prices, most recent bid prices in the principal market in which the securities are normally traded, pricing services and dealer quotes. Net asset values are reported by the funds and are supported by the underlying share prices of actual purchases and sale transactions occurring as of or close to the financial statement date. Assets measured at net asset value are exempt from the fair value hierarchy. Fair values estimated using net asset value per unit were as follows:

	December 31, 2016	December 31, 2015

Common/collective trust funds	\$	3,623,148,902	\$	2,407,292,110
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NOTE 8 — SYNTHETIC GUARANTEED INVESTMENT CONTRACTS

During 2016 and 2015, the Plan held fully benefit-responsive, synthetic guaranteed investment contracts (“synthetic GICs”) in its Stable Value Fund (the “Fund”) which are stated at contract value. A corresponding contract wrapper with the issuer of the synthetic GICs was also held in order to provide a variable rate of return on the cost of the investment. The interest crediting rate of synthetic GICs is based on the contract value, and the fair value, duration and yield to maturity of the portfolio of bonds underlying the synthetic GICs. The interest crediting rate is reset quarterly. The minimum crediting rate is zero percent.

The interest crediting rate reset allows the contract value to converge with the fair value of the underlying portfolio over time, assuming the portfolio continues to earn the current yield for a period of time equal to the current portfolio duration.

The primary variables impacting the future interest crediting rates of synthetic GICs include the current yield of the assets underlying the contract, the duration of the assets underlying the contract and the existing difference between the fair value and contract value of the assets underlying the contract.

Synthetic GICs generally provide for withdrawals associated with certain events which are not in the ordinary course of Plan operations. These withdrawals are paid with a market value adjustment applied to the withdrawal as defined in the investment contract. Each contract issuer specifies the events which may trigger a market value adjustment. Such events include but are not limited to the following: material amendments to the Plan or in the administration of the Fund; changes to the Plan’s competing investment options including the elimination of equity wash provisions; complete or partial termination of the Plan; the failure of the Plan to qualify for exemption from federal income taxes or any required prohibited transaction exemption under ERISA; the redemption of all or a portion of the interests in the Fund held by the Plan at the direction of the Plan sponsor, including withdrawals due to the removal of a specifically identifiable group of employees from coverage under the Plan (such as a group layoff or early retirement incentive program), the closing or sale of a subsidiary, employing unit or affiliate, the bankruptcy or insolvency of the Plan sponsor, the merger of the Plan with another plan, or the Plan sponsor’s establishment of another tax qualified defined contribution plan; any change in law, regulation, ruling, administrative or judicial position or accounting requirement, applicable to the Fund or the Plan; or the delivery of any communication to Plan participants designed to influence a participant not to invest in the Fund.

At this time, the Plan does not believe that the occurrence of any such market value adjustment-triggering event, which would limit the Plan’s ability to transact at contract value with participants, has occurred or is probable.

If the Plan defaults in its obligations under any synthetic GIC (including the issuer’s determination that the agreement constitutes a non-exempt prohibited transaction as defined under ERISA), and such default is not corrected within the time permitted by the contract, then the contract may be terminated by the issuer and the Plan will receive the fair value of the underlying investments as of the date of termination. With the exception of this circumstance, termination of the contract by the issuer would be settled at contract value.

NOTE 9 — RECONCILIATION OF PLAN FINANCIAL STATEMENTS TO THE FORM 5500

Form 5500 requires the recording of a liability for benefit amounts processed prior to year-end but not yet paid and requires fully benefit-responsive contracts to be reported at fair value. These requirements conflict with U.S. GAAP and the presentation of such amounts in the financial statements where they remain as part of net assets available for benefits and are stated at contract value, respectively.

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

	December 31, 2016	December 31, 2015
Net assets available for benefits per the financial statements	\$ 6,218,780,797	\$ 6,057,930,357
Benefits due to participants	(627,697)	(1,138,553)
Adjustment to fair value from contract value for fully benefit-responsive investment contracts	7,609,100	6,008,021
Net assets available for benefits per the Form 5500	\$ 6,225,762,200	\$ 6,062,799,825

The following is a reconciliation of benefits paid to participants per the financial statements to the Form 5500 for the year ended December 31, 2016:

Benefits paid to participants per the financial statements	\$	554,968,576
Add: benefits due but unpaid at December 31, 2016		627,697
Less: benefits due but unpaid at December 31, 2015		<u>(1,138,553)</u>
Total benefit payments, corrective distributions and deemed distributions per the Form 5500	\$	<u><u>554,457,720</u></u>

The following is a reconciliation of investment income per the financial statements to the Form 5500 for the year ended December 31, 2016:

Net change in Plan assets per the financial statements	\$	160,850,440
Adjustment from fair value to contract value for fully benefit-responsive investment contracts at December 31, 2015		(6,008,021)
Adjustment from fair value to contract value for fully benefit-responsive investment contracts at December 31, 2016		7,609,100
Benefits due but unpaid at December 31, 2016		(627,697)
Benefits due but unpaid at December 31, 2015		<u>1,138,553</u>
Net income and transfers in per the Form 5500	\$	<u><u>162,962,375</u></u>

SUPPLEMENTAL INFORMATION
Harris Corporation Retirement Plan
E.I.N. 34-0276860
Plan Number 015
Schedule H, Line 4(i)
Schedule of Assets (Held at End of Year)
December 31, 2016

(a)	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value <i>(In Shares/Par Value Except Notes Receivable from Participants)</i>	(d) Cost	(e) Value
Value of Interest in Interest Bearing Cash				
	United States dollar		9665580	\$ 9,665,581
	Total Value of Interest in Interest Bearing Cash			\$ 9,665,581
Value of Interest in Preferred Stocks				
	AIRBNB INC SERIES D CVT PFD STOCK TROWE PRICE ONLY		1693	\$ 206,782
	DTE ENERGY CO CORPORATE UNIT		11487	608,811
	GREAT PLAINS DEP SHS REPSTG 1/20TH INT MANDATORY CONV PFD SER B 7%		18793	950,926
	NEXTERA ENERGY INC CORPORATE UNIT		47819	2,342,175
	PVTPL AIRBNB INC SER E CVT PFD STK T-ROWE		2468	229,757
	PVTPL FLIPKART - TROWE PRICE ONLY SER E PFD STK		337	38,341
	PVTPL FLIPKART LIMITED SERIES G PREFERENCE SHARES - T ROWE PRICE ONLY		1541	184,550
	PVTPL FLIPKART LTD - TROWE PRICE ONLY ORDINARY SHARES		300	34,132

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(a)	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value (In Shares/Par Value Except Notes Receivable from Participants)	(d) Cost	(e) Value
	PVTPL FLIPKART LTD - TROWE PRICE ONLY SER A PFD STK	404		11,832
	PVTPL FLIPKART LTD - TROWE PRICE ONLY SER C PFD STK	181		20,593
	PVTPL MAGIC LEAP INC PP SERIES C CVT PFD STOCK T-ROWE PRICE ONLY	10325		237,816
	PVTPL SNAPCHAT INC SER F CVT PFD STK T-ROWE	9273		284,867
	PVTPL UBER TECHNOLOGIES INC SER G CVTPFD STK T-ROWE	4873		237,667
	SER C CVT PFD STK DROPBOX SERIES C PREFERRED TROWE PRICE ONLY	10857		207,382
	UBER TECHNOLOGIES INC SER E PFD STK-TROWE PRICE ONLY	8924		297,324
	Total Value of Interest in Preferred Stocks		\$	5,892,955
Value of Interest in Brokerage Window Account				
	BROKERAGE WINDOW ACCOUNT		\$	23,792,241
	Total Value of Interest in Brokerage Window Account		\$	23,792,241
Value of Interest in Corporate Bonds & Debentures				
	PVTPL WESTERN DIG CORP SR NT 144A FIXED 10.5% DUE 04-01- 2024	470000	\$	555,775
	PVTPL VALEANT PHARMACEUTICALS SR NT 144A6.375% DUE 10-15- 2020/10-04-2012 BEO	37000		31,785
	Total Value of Interest in Corporate Bonds & Debentures		\$	587,560
Value of Interest in Partnerships				
	MLP GREEN PLAINS PARTNERS LP COM UNIT REPSTG LTD PARTNER INT	23075	\$	456,885
	MLP STAR GAS PARTNERS L P UNIT LTD PARTNERSHIP INT	38260		411,678
	Total Value of Interest in Partnerships		\$	868,563

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(a)	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value (In Shares/Par Value Except Notes Receivable from Participants)	(d) Cost	(e) Value
Value of Interest in Common Stocks				
	5TH 3RD BANCORP COM	124700	\$	3,363,159
	ACTUANT CORP CL A NEW	32381		840,287
	ADDUS HOMECARE CORP COM STK	15568		545,658
	ADIENT PLC ADIENT PLC LTD COM	37954		2,224,104
	ADOBE SYS INC COM	73400		7,556,530
	ADR ALIBABA GROUP HOLDING LTD SPONSORED ADS	114500		10,054,245
	ADR ASML HLDG NV NY	20000		2,244,000
	ADR BAIDU INC SPONSORED ADR REPSTG ORD SHS CL A	35500		5,836,555
	ADR ROYAL DUTCH SHELL PLC SPONSORED ADR REPSTG A SHS	97000		5,274,860
	ADR TENCENT HLDGS LTD ADR	66600		1,613,052
	ADVISORY BRD CO COM	23555		783,204
	AERIE PHARMACEUTICALS INC COM	10182		385,389
	AES CORP COM	288300		3,350,046
	AETNA INC	13800		1,711,338
	AIR METHODS CORP COM NEW	84307		2,685,178

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(a)	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value (In Shares/Par Value Except Notes Receivable from Participants)	(d) Cost	(e) Value
	ALASKA AIR GROUP INC COM	35200		3,123,296
	ALBANY INTL CORP NEW CL A	100916		4,672,411
	ALEXION PHARMACEUTICALS INC COM	66169		8,095,777
	ALLEGiant TRAVEL CO COM	5446		906,214
	ALLERGAN PLC. COM STK	7062		1,483,091
	ALPHABET INC CAP STK CL C	10280		7,934,310
	ALPHABET INC CL A CAP STK CL A	20035		15,876,736
	AMAZON COM INC	33086		24,810,199
	AMC ENTMT HLDGS INC CL A COM	15603		525,041
	AMEDISYS INC COM	19147		816,237
	AMERICAN AIRLINES INC COM USD1	76800		3,585,792
	AMERICAN CAP CASH AND STOCK MERGER ARES	215038		3,853,481
	AMERICAN EAGLE OUTFITTERS INC NEW COM	78352		1,188,600
	AMERICAN EXPRESS CO	62400		4,622,592
	AMERIPRISE FINL INC COM	41500		4,604,010

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(a)	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value (In Shares/Par Value Except Notes Receivable from Participants)	(d) Cost	(e) Value
	AMICUS THERAPEUTICS INC COM	60916		302,753
	ANALOG DEVICES INC COM	46200		3,355,044
	ANTHEM INC COM	41395		5,951,359
	APACHE CORP COM	57135		3,626,358
	APPLE INC COM STK	27100		3,138,722
	APPLIED MATERIALS INC COM	114600		3,698,142
	ARCHER-DANIELS-MIDLAND CO COM	97200		4,437,180
	ASPEN TECHNOLOGY INC COM	13667		747,312
	ASSURANT INC COM	31832		2,955,920
	AT HOME GROUP INC COM	33116		484,487
	ATHENAHEALTH INC COMMON STOCK	23600		2,482,012
	ATN INTL INC COM	38782		3,107,602
	AVON PRODUCTS INC COM	132400		667,296
	BANK NEW YORK MELLON CORP COM STK	69800		3,307,124
	BANK OF AMERICA CORP	159964		3,535,204

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	BANK OF THE OZARKS INC COM	26263		1,381,171
	BEACON ROOFING SUPPLY INC COM	16419		756,423
	BECTON DICKINSON & CO COM	16000		2,648,800
	BIG LOTS INC COM	20497		1,029,154
	BIOGEN INC COMMON STOCK	18910		5,362,498
	BIOMARIN PHARMACEUTICAL INC COM	52900		4,382,236
	BLUE BUFFALO PET PRODS INC COM	32767		787,719
	BOEING CO COM	77256		12,027,214
	BOISE CASCADE CO COM	39424		887,040
	BOYD GAMING CORP COM	55347		1,116,349
	BRIGHT HORIZONS FA COM	20678		1,447,874
	BRISTOL MYERS SQUIBB CO COM	76700		4,482,348
	BROADRIDGE FINL SOLUTIONS INC COM STK	31693		2,101,246
	BROADSOFT INC COM	26655		1,099,519
	CA INC COM	19400		616,338
	CALAMP CORP COM	33231		481,850

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	CALATLANTIC GROUP INC COM	22126		752,505
	CALLAWAY GOLF CO COM	20314		222,641
	CAMPING WORLD HLDGS INC CL A	10012		326,291
	CAP BK FINL CORP CL A COM	73811		2,897,082
	CARDTRONICS PLC CARDTRONICS PLC	19995		1,091,127
	CARNIVAL CORP COM PAIRED	50200		2,613,412
	CARRIAGE SERVICES INC COM	6283		179,945
	CARRIZO OIL & GAS INC COM	20674		772,174
	CASEYS GEN STORES INC COM	11120		1,321,946
	CATO CORP NEW CL A	16680		501,734
	CDN NAT RES COM STK	53700		1,711,956
	CEB INC	10457		633,694
	CELGENE CORP COM	11300		1,307,975
	CENTENE CORP DEL COM	19700		1,113,247
	CENTURYLINK INC COM	64375		1,530,838
	CF INDS HLDGS INC COM	90000		2,833,200

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	CHARLES RIV LABORATORIES INTL INC COM	10480		798,471
	CHEESECAKE FACTORY INC COM	21464		1,285,264
	CHEVRON CORP COM	36278		4,269,921
	CHILDRENS PL INC NEW COM	7351		742,083
	CHIPOTLE MEXICAN GRILL INC COM STK	10300		3,886,396
	CHUBB LTD ORD	5270		696,272
	CIGNA CORPORATION	10300		1,373,917
	CIRCOR INTL INC COM	13316		863,942
	CISCO SYSTEMS INC	152600		4,611,572
	CITIGROUP INC COM NEW	90700		5,390,301
	CITIZENS FINL GROUP INC COM	21300		758,919
	CLARCOR INC COM	10784		889,356
	CLEARWATER PAPER CORP COM STK	29469		1,931,693
	CLUBCORP HLDGS INC COM	36358		521,737
	CME GROUP INC COM STK	10133		1,168,842
	COGENT COMMUNICATIONS HLDGS INC	12807		529,569

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	COHERENT INC COM	4307		591,717
	COMCAST CORP NEW-CL A	64600		4,460,630
	COML METALS CO COM	34133		743,417
	COMMVAULT SYS INC COM STK	19891		1,022,397
	CONTINENTAL BLDG PRODS INC COM	59215		1,367,867
	CORE-MARK HLDG CO INC COM	59910		2,580,324
	COSTCO WHOLESALE CORP NEW COM	6900		1,104,759
	COTY INC COM CL A	91607		1,677,324
	CRAY INC COM NEW STK	27522		569,705
	CROWN CASTLE INTL CORP NEW COM	11100		963,147
	CTS CORP COM	89101		1,995,862
	CULP INC COM	24048		893,383
	CUMMINS INC	15900		2,173,053
	CYNOSURE INC	23136		1,055,002
	CYPRESS SEMICONDUCTOR CORP COM	72919		834,193

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	DANA INC COM	44884		851,898
	DANAHER CORP COM	44352		3,452,360
	DELTIC TIMBER CORP COM	33639		2,592,558
	DENNYS CORP COM	180287		2,313,082
	DEPOMED INC COM	11298		203,590
	DIAGEO ORD PLC	79419		2,070,629
	DIGITALGLOBE INC COM NEW	54211		1,553,145
	DOLLAR GEN CORP NEW COM	29200		2,162,844
	DRIL-QUIP INC COM	6046		363,062
	DROPBOX INC CL A COM STK - TROWE PRICE ONLY	2210		42,214
	DST SYS INC COM	9591		1,027,676
	DU PONT E I DE NEMOURS & CO COM STK	75700		5,556,380
	EASTGROUP PPTYS INC REIT	13720		1,013,085
	ECHOSTAR CORPORATION	77703		3,993,157
	EDISON INTL COM	46300		3,333,137
	EDWARDS LIFESCIENCES CORP COM	42600		3,991,620

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	ELECTRONICS FOR IMAGING INC COM	22582		990,447
	ELLIE MAE INC COM STK	6373		533,293
	EMERSON ELECTRIC CO COM	65300		3,640,475
	ENPRO INDS INC COM	52886		3,562,401
	EPAM SYS INC COM STK	20951		1,347,359
	EPIZYME INC COM	31555		381,816
	EQT CORP COM	17080		1,117,032
	EQTY RESDNTL	36800		2,368,448
	EURONET WORLDWIDE INC COM	10667		772,611
	EVERCORE PARTNERS INC CL A	11591		796,302
	EVERSOURCE ENERGY COM	3150		173,975
	EXELIXIS INC COM STK	26804		399,648
	EXELON CORP COM	96100		3,410,589
	EXTENDED STAY AMER INC PAIRED SHS COMPRISED 1 COM 1 CL B COM	50410		814,122
	EXXON MOBIL CORP COM	112126		10,120,493
	FACEBOOK INC CL A	152792		17,578,720

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	FAIR ISAAC CORPORATION COM	11467		1,367,096
	FARMERS CAP BK CORP COM	15012		631,255
	FEDERAL SIGNAL CORP COM	64636		1,008,968
	FEDEX CORP COM	11400		2,122,680
	FERRARI N V COMMON S TOCK	17662		1,026,869
	FIRST REP BK SAN FRANCISCO CALIF NEW COM	3491		321,661
	FIRSTENERGY CORP COM	73752		2,284,099
	FLIR SYS INC COM	20549		743,668
	FLOWSERVE CORP COM	39382		1,892,305
	FORD MTR CO DEL COM	83400		1,011,642
	FOREST CITY RLTY TR INC COM CL A	162356		3,383,499
	FORTIVE CORP COMMON STOCK	28326		1,519,123
	FTI CONSULTING INC COM	25222		1,137,008
	FULLER H B CO COM	18828		909,581
	GEN MTRS CO COM	18427		641,997
	GENERAL ELECTRIC CO	229000		7,236,400

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	GILEAD SCIENCES INC	23200		1,661,352
	GLAXOSMITHKLINE ORD	107864		2,081,867
	GREAT PLAINS ENERGY INC COM	4765		130,323
	GREIF INC	15180		778,886
	GUIDEWIRE SOFTWARE INC COM	15236		751,592
	HALOZYME THERAPEUTICS INC COM	38617		381,536
	*HARRIS CORP COM	2309782		236,683,362
	HAWAIIAN TELCOM HOLDCO INC COM	11676		289,331
	HEALTHCARE SVCS GROUP INC COM	28354		1,110,626
	HEALTHSOUTH CORP COM NEW STK	25361		1,045,888
	HECLA MNG CO COM	73885		387,157
	HERSHEY COMPANY COM STK	6200		641,266
	HESS CORP COM STK	72500		4,516,025
	HILL-ROM HLDGS INC COM STK	13453		755,251
	HILTON WORLDWIDE	90993		2,475,010
	HOME DEPOT INC COM	11200		1,501,696

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	HORIZON PHARMA INC COMMON STOCK	24856		402,170
	HUMANA INC COM	11447		2,335,531
	ILL TOOL WKS INC COM	31000		3,796,260
	ILLUMINA INC COM	34583		4,428,007
	IMAX CORP COM	33173		1,041,632
	IMPAX LABORATORIES INC COM	29375		389,219
	INCYTE CORP COM	36200		3,629,774
	INFINERA CORP COM STK	81596		692,750
	INTEGRATED DEVICE TECHNOLOGY INC COM	52337		1,233,060
	INTERCONTINENTAL EXCHANGE INC COM	43550		2,457,091
	INTL PAPER CO COM	79796		4,233,976
	INTUIT COM	12021		1,377,727
	INTUITIVE SURGICAL INC COM NEW STK	5358		3,397,883
	J2 GLOBAL INC COM	13511		1,105,200
	JACK IN THE BOX INC COM	6817		761,050

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	JANUS CAP GROUP INC COM	58965		782,466
	JOHNSON & JOHNSON COM	53700		6,186,777
	JOHNSON CTLS INTL PLC COM	144249		5,941,616
	JPMORGAN CHASE & CO COM	148224		12,790,249
	KADANT INC COM	32527		1,990,652
	KAPSTONEPAPER AND PACKAGING CORP COMMON STOCK	34230		754,772
	KELLOGG CO COM	26600		1,960,686
	KEYCORP NEW COM	158200		2,890,314
	KMG CHEMICALS INC COM	19599		762,205
	KNIGHT TRANSN INC COM	25941		857,350
	KOHL'S CORP COM	56800		2,804,784
	LAS VEGAS SANDS CORP COM STK	64200		3,428,922
	LENDINGCLUB CORP COM	247000		1,296,750
	LEXICON PHARMACEUTICALS INC FORMERLY LE COMMON STOCK	18959		262,203
	LIBERTY INTERACTIVE CORP LIBERTY VENTURES COM SER A NEW	14039		517,618

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	LIFE STORAGE INC COM	7419		632,544
	LIGAND PHARMACEUTICALS INCORPORATED CL BCOMMON STOCK	4930		500,937
	LINDSAY CORPORATION COM	13026		971,870
	LITTELFUSE INC COM	6391		969,962
	LOEWS CORP COM	131500		6,158,145
	LORAL SPACE & COMMUNICATIONS INC COM	10447		428,849
	LOWES COS INC COM	9100		647,192
	LUMINEX CORP DEL COM	18185		367,883
	MACROGENICS INC COM	12256		250,513
	MACYS INC COM STK	52100		1,865,701
	MAIDEN HOLDINGS LTD\COM STK	31137		543,341
	MANHATTAN ASSOCS INC COM	12865		682,231
	MARSH & MCLENNAN CO'S INC COM	65200		4,406,868
	MASIMO CORP COM STK	13563		914,146
	MATCH GROUP INC COM	23445		400,910

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	MATTEL INC COM	110800		3,052,540
	MAXIMUS INC COM	26411		1,473,470
	MCGRATH RENTCORP COM	74228		2,908,995
	MEDLEY MGMT INC CL A COM	34733		343,857
	MEDTRONIC PLC COMMON STOCK	29600		2,108,408
	MERCK & CO INC NEW COM	67982		4,002,100
	MERIT MED SYS INC COM	36704		972,656
	METLIFE INC COM STK	113100		6,094,959
	MFA FINL INC	303305		2,314,217
	MGIC INVT CORP WIS COM	71847		732,121
	MGM RESORTS INTERNATIONAL COM	121262		3,495,983
	MGP INGREDIENTS INC NEW COM	7506		375,150
	MICROSEMI CORP COM	18478		997,258
	MICROSOFT CORP COM	230900		14,348,126
	MINERALS TECHNOLOGIES INC COM	12773		986,714

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	MKS INSTRS INC COM	5600		332,640
	MLP OCH-ZIFF CAP MGMT GROUP CL A SHS	97000		321,070
	MOBILEYE NV	71500		2,725,580
	MONOLITHIC PWR SYS INC COM	8721		714,512
	MONRO MUFFLER BRAKE INC COM	16680		954,096
	MONSTER BEVERAGE CORP NEW COM	109266		4,844,854
	MORGAN STANLEY COM STK	284548		12,022,153
	MURPHY USA INC COM	46844		2,879,501
	MYOVANT SCIENCES LTD	9339		116,177
	NATIONAL GEN HLDGS CORP COM	56574		1,413,784
	NATIONAL INSTRS CORP COM	23770		732,591
	NATUS MED INC DEL COM	24236		843,413
	NAUTILUS INC COM	33825		625,763
	NEENAH PAPER INC COM	31137		2,652,872
	NEOGEN CORP COM	7752		511,632
	NETFLIX INC COM STK	68250		8,449,350

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	NETSCOUT SYS INC COM	22944		722,736
	NEWS CORP NEW CL A	214200		2,454,732
	NEXSTAR MEDIA GROUP INC CL A	36697		2,322,920
	NISOURCE INC COM	177000		3,918,780
	NORTHERN TR CORP COM	53000		4,719,650
	NORTHSTAR ASSET PLAN OF REORG COLONY NORTHSTAR 2E13A42 01-11-2017	339585		5,106,795
	NUCOR CORP COM	40900		2,434,368
	NUVASIVE INC COM	15589		1,050,075
	NVIDIA CORP COM	8111		865,768
	NXP SEMICONDUCTORS N V COM STK	31295		3,067,223
	O REILLY AUTOMOTIVE INC NEW COM	3400		946,594
	OCCIDENTAL PETROLEUM CORP	49900		3,554,377
	OCEANFIRST FINL CORP COM	55879		1,678,046
	OMNICELL INC COM	6780		229,842
	ORITANI FINL CORP NEW COM STK	17514		328,388
	OWENS & MINOR INC NEW COM	11113		392,178

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	PAC PREMIER BANCORP COM	32249		1,140,002
	PACIRA PHARMACEUTICALS INC COM	14507		468,576
	PALO ALTO NETWORKS INC COM	36200		4,526,810
	PAR PACIFIC HOLDINGS INC COM NEW	120543		1,752,695
	PAYCOM SOFTWARE INC COM	7878		358,370
	PAYPAL HLDGS INC COM	87000		3,433,890
	PEBBLEBROOK HOTEL TR COM STK	19171		570,337
	PENTAIR PLC COM STK	38000		2,130,660
	PEPSICO INC COM	39700		4,153,811
	PFIZER INC COM	227547		7,390,727
	PG& E CORP COM	75300		4,575,981
	PHILIP MORRIS INTL COM STK NPV	36000		3,293,640
	PLANET FITNESS INC CL A	38931		782,513
	PNC FINANCIAL SERVICES GROUP COM STK	28800		3,368,448
	POLYONE CORP COM	19237		616,353
	POOL CORP COM STK	7009		731,319

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	PORTOLA PHARMACEUTICALS INC COM	15139		339,719
	POWER INTEGRATIONS INC COM	11418		774,711
	PRESTIGE BRANDS HLDGS INC COM	17222		897,266
	PRIMERICA INC COM	44898		3,104,697
	PROOFPOINT INC COM	7529		531,924
	PROS HLDGS INC COM	20112		432,810
	PROTHENA CORP PLC	9391		461,943
	PROVIDENCE SVC CORP COM STK	25994		989,072
	QTS RLTY TR INC COM CL A	23062		1,145,028
	QUALCOMM INC COM	73100		4,766,120
	QUALYS INC COM	10351		327,609
	RADIUS HEALTH INC COM NEW	8369		318,273
	RAPID7 INC COM	35672		434,128
	RAYONIER INC REIT	83900		2,231,740
	RED HAT INC COM	18300		1,275,510
	REGAL BELOIT CORP COM	12153		841,595

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	REGENERON PHARMACEUTICALS INC COM	12000		4,405,080
	REGIS CORP MINN COM	195855		2,843,815
	RENASANT CORP COM	32388		1,367,421
	RINGCENTRAL INC CL A	37144		765,166
	ROSS STORES INC COM	19100		1,252,960
	ROYAL BK SCOT GRP ORD	562522		1,561,150
	S.W. AIRL CO COM	28200		1,405,488
	SAGE THERAPEUTICS INC COM	5517		281,698
	SALESFORCE COM INC COM STK	176700		12,096,882
	SCHLUMBERGER LTD COM	45000		3,777,750
	SCHWAB CHARLES CORP COM NEW	144000		5,683,680
	SELECT MED HLDGS CORP COM	51531		682,786
	SERVICENOW INC COM	58936		4,381,302
	SIMPSON MFG INC COM	20400		892,500
	SONIC CORP COM	27804		737,084
	SOUTHERN CO COM STK	21400		1,052,666

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	SPLUNK INC COMSTK COM USD0.001	86300		4,414,245
	SPS COMM INC COM	14087		984,540
	STAPLES INC COM	21900		198,195
	STARBUCKS CORP COM	20400		1,132,608
	STATE STR CORP COM	99693		7,748,140
	STRYKER CORP	16822		2,015,444
	SURGICAL CARE	14083		651,620
	SYNAPTICS INC COM	19047		1,020,538
	SYNCHRONOSS TECHNOLOGIES INC COM STK	20849		798,517
	SYNOVUS FINL CORP COM NEW	108283		4,448,266
	TARGA RES CORP COM	6500		364,455
	TD AMERITRADE HLDG CORP COM STK	60795		2,650,662
	TE CONNECTIVITY LTD	16900		1,170,832
	TEAM HEALTH	7515		326,527
	TELEDYNE TECHNOLOGIES INC COM	8581		1,055,463
	TELEFONICA SA EUR1	126806		1,179,663

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	TERRENO RLTY CORP	19689		560,940
	TESLA INC COM	10930		2,335,632
	TEXAS INSTRUMENTS INC COM	46900		3,422,293
	TEXTRON INC COM	19400		942,064
	TFS FINL CORP COM STK	106754		2,032,596
	THE PRICELINE GROUP INC	13339		19,555,774
	TIME WARNER INC	4800		463,344
	T-MOBILE US INC COM	29900		1,719,549
	TORO CO COM	12096		676,771
	TOTAL EUR2.5	129688		6,664,331
	TRACTOR SUPPLY CO COM	17903		1,357,226
	TRISTATE CAP HLDGS INC COM	22797		503,814
	TRIUMPH BANCORP INC COM	27523		719,726
	TRUEBLUE INC COM STK	34481		849,957
	TWENTY-FIRST CENTY FOX INC CL B	174400		4,752,400
	ULTRAGENYX PHARMACEUTICAL INC COM	4841		340,371

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	UNDER ARMOR INC CL A	46000		1,336,300
	UNDER ARMOUR INC CL C COM	46347		1,166,554
	UNION PAC CORP COM	24000		2,488,320
	UNIT CORP COM	17569		472,079
	UNITED PARCEL SVC INC CL B	29500		3,381,880
	UNITED TECHNOLOGIES CORP COM	7900		865,998
	UNITEDHEALTH GROUP INC COM	25400		4,065,016
	UNVL ELECTRS INC COM	11249		726,123
	URBAN EDGE PPTYS COM	20514		564,340
	US BANCORP	35900		1,844,183
	US ECOLOGY INC COM	14484		711,889
	VALVOLINE INC COM	21147		454,661
	VECTOR GROUP LTD COM STK	23866		542,713
	VERIZON COMMUN COM	119191		6,361,156
	VERTEX PHARMACEUTICALS INC COM	18300		1,348,161
	VIRTU FINL INC CL A	32676		521,182

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(a)	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value (In Shares/Par Value Except Notes Receivable from Participants)	(d) Cost	(e) Value
	VIRTUS INVT PARTNERS INC COM	27384		3,232,681
	VISA INC COM CL A STK	282600		22,048,452
	VODAFONE GROUP ORD	431911		1,066,581
	VULCAN MATERIALS CO COM	35400		4,430,310
	WAL-MART STORES INC COM	45300		3,131,136
	WALT DISNEY CO	20200		2,105,244
	WATTS WTR TECHNOLOGIES INC	14613		952,768
	WELLS FARGO & CO NEW COM STK	120600		6,646,266
	WESTERN ALLIANCE BANCORPORATION COM	11365		553,589
	WESTN DIGITAL CORP COM	35200		2,391,840
	WEYERHAEUSER CO COM	92445		2,781,670
	WILLIS TOWERS WATSON PLC COM	14158		1,731,240
	WOODWARD INC COM	13550		935,628
	WORKDAY INC CL A COM USD0.001	13000		859,170
	WORTHINGTON INDS INC COM	12585		597,032
	XCEL ENERGY INC COM	68600		2,792,020

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	XENIA HOTELS & RESORTS INC COM	88267		1,714,145
	XL GROUP LTD COM NPV	26500		987,390
	YUM BRANDS INC COM	10900		690,293
	Total Value of Interest in Common Stocks		\$	1,130,784,693
Value of Interest in Registered Investment Companies				
	MFO ALLIANZ FDS ALLIANZGI TECHNOLOGY FD INSTL CL	2110729	\$	114,211,519
	MFO RESV INVT FDS INC	6694145		6,694,145
	MFC ISHARES TR RUSSELL 2000 GROWTH ETF	4492		691,498
	MFO MONEY MKT OBLIGS TR FEDT GOVT OBLIGSFD INSTL SHS	82857582		82,857,583
	Total Value of Interest in Registered Companies		\$	204,454,745
Value of Interest in Common/Collective Trust Funds				
	*MFB NT COLLECTIVE AGGREGATE BOND INDEX FUND-NON LENDING	2864562	\$	388,749,762
	*MFB NT COLLECTIVE RUSSELL 1000 INDEX FUND - NON LENDING	6938870		169,856,597
	MFO BLACKROCK LIFEPATH 2060 NL F	235755		2,519,980
	MFO BLACKROCK LIFEPATH INDEX 2020 NL FUND F	18315535		367,783,264
	MFO BLACKROCK LIFEPATH INDEX 2030 NL FUND F	12905435		288,125,452
	MFO BLACKROCK LIFEPATH INDEX 2040 NL FUND F	5259848		127,470,844
	MFO BLACKROCK LIFEPATH INDEX 2050 NL FUND F	3008806		78,127,870

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(a)	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value (In Shares/Par Value Except Notes Receivable from Participants)	(d) Cost	(e) Value
	MFO BLACKROCK LIFEPAATH INDEX 2055 NON LENDING FD F	1146607		21,527,657
	MFO BLACKROCK LIFEPAATH INDEX RETIREMENT 2025 NL CL F	20383065		434,165,406
	MFO BLACKROCK LIFEPAATH INDEX RETIREMENT 2035 NL CL F	7496513		174,890,649
	MFO BLACKROCK LIFEPAATH INDEX RETIREMENT 2045 NL CL F	4558779		114,580,799
	MFO BLACKROCK LIFEPAATH INDEX RETIREMENT NL CL F	18412868		326,158,175
	MFO BLACKROCK STRATEGIC COMPLETION NL FUND F	6152173		64,440,931
	MFO PRIN GLOBAL INVS COLTV INVT TR DIVERSIFIED INTL EQTY FD 50 BP FEE CL	1169131		256,439,920
	*NT COLLECTIVE EXTENDED EQUITY INDEX FD -NONLENDING	832192		223,598,332
	*NT COLLECTIVE S&P500 INDEX FUND-DC-NON LENDING (TIER J)	72240		542,977,395
	*NTGI COLTV GOVT STIF REGI STERED	11241675		11,241,675
	Wells Fargo /BlackRock Short-Term Investment Fund S (a)	30494195		30,494,194
	Total Value of Interest in Common/Collective Trust Funds		\$	3,623,148,902
Value of Interest in Synthetic Security-Backed Investment Contracts				
	Galliard Capital Management American General Life Ins. Co., #1629650		\$	219,962,852
	Galliard Capital Management Pacific Life Ins. Co., #G-27236.01.0001			245,877,562
	Galliard Capital Management Transamerica Premier Life Ins. Co., #MDA01077TR			245,741,547

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(a)	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value (In Shares/Par Value Except Notes Receivable from Participants)	(d) Cost	(e) Value
	Galliard Capital Management Prudential Life Ins. Co., #GA-62487			215,800,595
	Galliard Capital Management State Street Bank and Trust, #105004			222,206,771
	Total Value of Interest in Synthetic Security-Backed Investment Contracts		\$	1,149,589,327

Value of Interest in Notes Receivable from Participants

*PARTICIPANT LOAN ASSET-HARRIS CORP.	\$ 63,583,318
Total Value of Interest in Notes Receivable from Participants	\$ 63,583,318
GRAND TOTAL	\$ 6,212,367,885

Note: Cost information has not been included in column (d) because all investments are participant-directed.

* Party-in-interest to the Plan

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SUPPLEMENTAL INFORMATION
Harris Corporation Retirement Plan

E.I.N. 34-0276860
Plan Number 015
Schedule H, Line 4(j)
Schedule of Reportable Transactions
December 31, 2016

Identity of Party Involved	Description of Asset	Purchase Price	Selling Price	Lease Rental	Expense Incurred with Transaction	Cost of Asset	Current Value of Asset on Transaction Date	Net Gain or (Loss)
Northern Trust	Blackrock Lifepath Index Retirement NL	\$ 345,628,133	\$ —	\$ —	\$ —	\$ 345,628,133	\$ 345,628,133	\$ —
Northern Trust	Blackrock Lifepath Index 2025 NL	\$ 379,122,491	\$ —	\$ —	\$ —	\$ 379,122,491	\$ 379,122,491	\$ —
Northern Trust	Blackrock Lifepath Index 2020 NL	\$ 344,627,873	\$ —	\$ —	\$ —	\$ 344,627,873	\$ 344,627,873	\$ —
Northern Trust	Galliard Capital Management	\$ 692,774,471	\$ —	\$ —	\$ —	\$ 692,774,471	\$ 692,774,471	\$ —
Northern Trust	Common Collective Trust Funds Government STIF	\$ 395,868,920	\$ —	\$ —	\$ —	\$ 395,868,920	\$ 395,868,920	\$ —

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