

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 ☐ special extension (enter description)	☐ automatic extension ☐ the DFVC program

Part II	Basic Plan Information —enter all requested information		
1a	Name of plan <u>INTERCONNECT SYSTEMS INC 401(K) PLAN</u>	1b	Three-digit plan number (PN) ► <u>001</u>
		1c	Effective date of plan <u>01/01/1996</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>INTERCONNECT SYSTEMS INC</u> <u>759 FLYNN ROAD</u> <u>CAMARILLO, CA 93012</u>	2b	Employer Identification Number (EIN) <u>05-0427767</u>
		2c	Plan Sponsor's telephone number <u>805-482-2870</u>
		2d	Business code (see instructions) <u>334410</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.	10/13/2017	LOUIS BULDAIN
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE
Preparer's name (including firm name, if applicable) and address (include room or suite number)			Preparer's telephone number

3a Plan administrator's name and address ☒ Same as Plan Sponsor	3b Administrator's EIN 3c Administrator's telephone number <div style="background-color: #cccccc; height: 40px; width: 100%;"></div>
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	5 176
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) 150 6a(2) 151 6b 1 6c 23 6d 175 6e 1 6f 176 6g 174 6h 0
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item).....	7
8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions: 2E 2F 2G 2J 2K 2T 3D 3H b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristics Codes in the instructions:	
9a Plan funding arrangement (check all that apply) (1) ☐ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor	9b Plan benefit arrangement (check all that apply) (1) ☐ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor
10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)	
a Pension Schedules (1) ☒ R (Retirement Plan Information) (2) ☐ MB (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary (3) ☐ SB (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary	b General Schedules (1) ☒ H (Financial Information) (2) ☐ I (Financial Information – Small Plan) (3) ☐ 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 INTERCONNECT SYSTEMS INC 401(K) PLAN	B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 INTERCONNECT SYSTEMS INC	D Employer Identification Number (EIN) 05-0427767

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 FIDELITY INVESTMENTS INSTITUTIONAL
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04-2647786

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

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

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

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	RECORDKEEPER	13497	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☒ No ☐

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

SOARES, SANDALL, BERNACCHI & PETRO

95-1888001

(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	8250	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

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

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

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

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

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

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

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

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

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
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.
ALZGI NFJ DIV VL ADM - BOSTON FINA P.O. BOX 8480 BOSTON, MA 02266		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.
AM CENT EQUITY INC - AMERICAN CENT 44-0619208		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.
ARTISAN MID CAP VAL - BOSTON FINAN 04-2526037		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.	
COL/ACORN INTL Z - COLUMBIA MGT IN 04-2838628	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.	
DOMINI IMPACT EQ INV - BNY MELLON 101 SABIN STREET PAWTUCKET, RI 02860	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.	
MSIF MID CAP GRTH A - MORGAN STANL 13-3799749	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.	
NB LG CAP VAL TR - STATE STREET BA 04-0025081	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.	
PIMCO REAL RTN BD AD - BOSTON FINA P.O. BOX 8480 BOSTON, MA 02266	0.25%	
(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.	
TMPL GLOBAL BOND A - FRANKLIN TEMP 94-3167260	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.
VRS PARTNERS A - FIS INVESTOR SERV 4249 EASTON WAY, SUITE 400 COLUMBUS, OH 43219	0.55%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation		(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation		(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE H (Form 5500) <small>Internal Revenue Service</small> <small>Department of Labor</small> <small>Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	Financial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ► File as an attachment to Form 5500.	<small>OMB No. 1210-0110</small> 2016 This Form is Open to Public Inspection
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For calendar plan year 2016 or fiscal plan year beginning <u>01/01/2016</u> and ending <u>12/31/2016</u>		
A Name of plan <u>INTERCONNECT SYSTEMS INC 401(K) PLAN</u>	B Three-digit plan number (PN) ►	<u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>INTERCONNECT SYSTEMS INC</u>	D Employer Identification Number (EIN) <u>05-0427767</u>	

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	0
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions.....	1b(1)	0	0
(2) Participant contributions	1b(2)	0	0
(3) Other.....	1b(3)	0	0
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit).....	1c(1)	2005499	2801009
(2) U.S. Government securities	1c(2)	0	0
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)	0	0
(B) All other.....	1c(3)(B)	0	0
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)	0	0
(B) Common.....	1c(4)(B)	0	0
(5) Partnership/joint venture interests	1c(5)	0	0
(6) Real estate (other than employer real property).....	1c(6)	0	0
(7) Loans (other than to participants)	1c(7)	0	0
(8) Participant loans.....	1c(8)	539759	491320
(9) Value of interest in common/collective trusts	1c(9)	0	0
(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)	12559332	13067772
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)		
(15) Other	1c(15)	0	0

1d Employer-related investments:

		(a) Beginning of Year	(b) End of Year
(1) Employer securities	1d(1)	0	0
(2) Employer real property	1d(2)	0	0
e Buildings and other property used in plan operation	1e	0	0
f Total assets (add all amounts in lines 1a through 1e)	1f	15104590	16360101

Liabilities

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

Net Assets

l Net assets (subtract line 1k from line 1f)	1l	15104590	16360101
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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)	590027	
(B) Participants	2a(1)(B)	971126	
(C) Others (including rollovers)	2a(1)(C)	12166	
(2) Noncash contributions	2a(2)	0	1573319
(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)	1351	
(B) U.S. Government securities	2b(1)(B)	0	
(C) Corporate debt instruments	2b(1)(C)	0	
(D) Loans (other than to participants)	2b(1)(D)	0	
(E) Participant loans	2b(1)(E)	28729	
(F) Other	2b(1)(F)	0	
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		30080
(2) Dividends: (A) Preferred stock	2b(2)(A)	0	566394
(B) Common stock	2b(2)(B)	0	
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	566394	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		566394
(3) Rents	2b(3)		0
(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)	0	0
(B) Aggregate carrying amount (see instructions)	2b(4)(B)	0	
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)		
(5) Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)	0	0
(B) Other	2b(5)(B)	0	
(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)		0
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		0
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		0
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		0
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds).....	2b(10)		322229
c Other income.....	2c		0
d Total income. Add all income amounts in column (b) and enter total.....	2d		2492022

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	1170163	
(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)		1170163
f Corrective distributions (see instructions)	2f		36505
g Certain deemed distributions of participant loans (see instructions)	2g		5138
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)	2699	
(4) Other	2i(4)	22006	
(5) Total administrative expenses. Add lines 2i(1) through (4).....	2i(5)		24705
j Total expenses. Add all expense amounts in column (b) and enter total	2j		1236511

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		1255511
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: **SOARES, SANDALL, BERNACCHI & PETROV**

(2) EIN: **95-1888001**

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		500000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?	4f		X	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?	4g		X	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?	4h		X	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	4i	X		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked, and see instructions for format requirements.)	4j		X	
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?	4k		X	
l Has the plan failed to provide any benefit when due under the plan?	4l	X		1167
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	4m		X	
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.	4n		X	
o Defined Benefit Plan or Money Purchase Pension Plan Only: Were any distributions made during the plan year to an employee who attained age 62 and had not separated from service?	4o			

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

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

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

5c If the plan is a defined benefit plan, is it covered under the PBGC insurance program (See ERISA section 4021.)? ☐ Yes ☐ No ☐ Not determined
If "Yes" is checked, enter the My PAA confirmation number from the PBGC premium filing for this plan year (See instructions.)

Part V Trust Information

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

SCHEDULE R (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Retirement Plan Information This schedule is required to be filed under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110 2016 This Form is Open to Public Inspection.
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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>INTERCONNECT SYSTEMS INC 401(K) PLAN</u>	B Three-digit plan number (PN) ▶ <u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>INTERCONNECT SYSTEMS INC</u>	D Employer Identification Number (EIN) <u>05-0427767</u>

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

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

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

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
--	-----------------------------------	-----------------------------------	-------------------------------	-----------------------------

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 / / .	

INTERCONNECT SYSTEMS INC 401(k) PLAN

FINANCIAL STATEMENTS

December 31, 2016 and 2015

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Soares, Sandall, Bernacchi & Petrovich, LLP

CERTIFIED PUBLIC ACCOUNTANTS

FRANK J. SOARES (1908-1991)
THOMAS W. PETROVICH (1937-2013)
DEBRA N. DETTENMAYER (1955-2014)

PARTNERS
BILLIE JO RODRIGUEZ, C.P.A. RICK C. HELDWEIN, C.P.A.
JUAN M. SOTO, C.P.A. SHARON I. ROBERTS, C.P.A.
PRAJESH (RAJ) ACHARYA, C.P.A.

CONSULTANTS
RICK B. SMITH, C.P.A. KENNETH R. MERIDETH, C.P.A.
BERNARD D. BERNACCHI GEORGE E. SANDALL, C.P.A.

Trustees
Interconnect Systems Inc. 401(k) Plan
Camarillo, California

Independent Auditors' Report

Report on the Financial Statements

We were engaged to audit the accompanying financial statements of Interconnect Systems Inc. 401(k) 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 notes to the financial statements.

Management's Responsibility for the Financial Statements

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

Auditors' Responsibility

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

Basis for Disclaimer of Opinion

As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Note 4, which was certified by Fidelity Management Trust Company, trustee of the Plan, except for comparing the information with the related information included in the financial statements and supplemental schedule. We have been informed by the plan administrator that the trustee holds the Plan's investment assets and executes investment transactions. The plan administrator has obtained a certification from the trustee as of and for the years ended December 31, 2016 and 2015, that the information provided to the plan administrator by the trustee is complete and accurate.

Disclaimer of Opinion

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

Other Matter

The supplemental schedule of Form 5500, Schedule H as of and for the year ended December 31, 2016 is required by the Department of Labor's (DOL) Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 and is presented for the purpose of additional analysis and is not a required part of the financial statements. Because of the significance of the matter described in the Basis for Disclaimer of Opinion paragraph, we do not express an opinion on this supplemental schedule.

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

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

Soares, Sandall, Bernacchi & Petrovich, LLP

SOARES, SANDALL, BERNACCHI & PETROVICH, LLP
Certified Public Accountants

October 12, 2017

INTERCONNECT SYSTEMS INC 401(k) PLAN
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
December 31, 2016 and 2015

ASSETS	<u>2016</u>	<u>2015</u>
INVESTMENTS		
Interest-bearing cash	\$ 2,801,009	\$ 2,005,499
Registered investment companies, at fair value	<u>13,067,772</u>	<u>12,559,332</u>
TOTAL INVESTMENTS	<u>15,868,781</u>	<u>14,564,831</u>
RECEIVABLES		
Notes receivable from participants	491,320	539,759
Employer contribution	<u>631,740</u>	<u>590,027</u>
TOTAL RECEIVABLES	<u>1,123,060</u>	<u>1,129,786</u>
TOTAL ASSETS	16,991,841	15,694,617
LIABILITIES	<u>-</u>	<u>-</u>
NET ASSETS AVAILABLE FOR BENEFITS	<u><u>\$16,991,841</u></u>	<u><u>\$15,694,617</u></u>

See accompanying notes to financial statements and independent auditors' report.

INTERCONNECT SYSTEMS INC 401(k) PLAN
STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
Year Ended December 31, 2016

ADDITIONS TO NET ASSETS ATTRIBUTED TO:

Investment income:		
Net appreciation in fair value of investments	\$	322,229
Interest and dividends		<u>567,745</u>
	TOTAL INVESTMENT INCOME	<u>889,974</u>
Interest income on notes receivable from participants		<u>28,729</u>
Contributions:		
Employee		971,126
Employer		631,740
Other, including rollovers		<u>12,166</u>
	TOTAL CONTRIBUTIONS	<u>1,615,032</u>
	TOTAL ADDITIONS	<u>2,533,735</u>

DEDUCTIONS FROM NET ASSETS ATTRIBUTED TO:

Benefits paid to participants	1,170,163
Corrective distributions	36,505
Deemed distributions	5,138
Administrative fees	<u>24,705</u>
	TOTAL DEDUCTIONS
	<u>1,236,511</u>
	NET INCREASE
	1,297,224

NET ASSETS AVAILABLE FOR BENEFITS

Beginning of year	<u>15,694,617</u>
	END OF YEAR
	<u>\$16,991,841</u>

See accompanying notes to financial statements and independent auditors' report.

INTERCONNECT SYSTEMS INC 401(k) PLAN
NOTES TO FINANCIAL STATEMENTS
December 31, 2016 and 2015

NOTE 1 - DESCRIPTION OF PLAN

The following description of the Interconnect Systems Inc 401(k) Plan (the Plan) provides only general information. Participants should refer to the Plan agreement for a more complete description of the Plan's provisions.

General. The Plan is a defined contribution plan covering all employees of Interconnect Systems Inc., and their wholly owned subsidiaries Nallatech, Inc., Emulation Technology, Inc. and Innovative Intergration Inc. (Company) who have completed three months of eligibility service, and are age eighteen or older. Fidelity Management Trust Company is the Plan's trustee. Interconnect Systems Inc 401(k) Plan has adopted Fidelity Basic Plan Document No. 14 and amendments to that Plan. On December 31, 2015, the Plan has adopted the Fidelity Basic Plan Document No. 17. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA). In April 2016, the Sponsor has been acquired by Molex LLC. Molex is a global manufacturer of electronic solutions. There is no immediate change in the Plan structure and will continue to operate as intended.

Automatic Enrollment. Effective March 1, 2007, the Plan adopted an automatic enrollment feature. If the participant is eligible to participate and does not take action, they are automatically enrolled at a default deferral rate of 3%. The default investment is the Fidelity Freedom Fund that most closely aligns with the participant's projected retirement date based upon their birth year. The new hire pamphlet and enrollment package explain the automatic enrollment process, including how to opt out of participation and how to change the contribution rate and/or investment option.

Contributions. Participants may contribute up to 90% of pretax compensation, as defined in the Plan. The employer may allow participants to enter into a special salary reduction agreement to make additional deferral contributions in an amount up to 100% of their compensation for the payroll periods in the final month of the Plan year. Total deferrals in any taxable year may not exceed the amount set by federal tax laws, \$18,000 for 2016. The employer may make discretionary matching contributions during each Plan year. Employees must be employed by the employer on the last day of the Plan year and have earned at least 501 hours of service to receive a matching contribution. The Plan allows certain participants to make additional pre-tax "catch up" contributions to the Plan in an amount not to exceed the federal tax laws for that calendar year.

Expenses. Certain expenses of maintaining the Plan are paid by the Plan unless otherwise paid by the Company. Expenses that are paid by the Company are excluded from these financial statements. Fees related to the administration of notes receivable from participants are charged directly to the participant's account and are included in administrative expenses. Investment related expenses are included in the net appreciation of fair value of investments.

Participant Accounts. Each participant's account is credited with the participant's contributions, allocations of the employer's contributions, Plan earnings, and charged with an allocation of administrative expenses. Allocations are based on participant earnings or account balances, as defined. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

INTERCONNECT SYSTEMS INC 401(k) PLAN
NOTES TO FINANCIAL STATEMENTS
December 31, 2016 and 2015

NOTE 1 - DESCRIPTION OF PLAN - Continued

Vesting. Participants are immediately vested in their contributions plus actual earnings thereon. Vesting in the employer's non-elective contributions and matching contributions portion of their accounts plus actual earnings thereon is based on years of credited service. A participant is 100% vested after five years of credited service.

Notes Receivable from Participants. Participants may borrow from their participant accounts a minimum of \$1,000 up to a maximum of \$50,000 or 50% of their vested account balance, whichever is less. The loans are secured by the balance in the participant's account and bear a reasonable interest rate as determined by the plan administrator. Principal and interest are paid ratably through payroll deductions over a five year period; ten years if the loan is for the purchase of a principal residence.

Payment of Benefits. A distribution may be made to participants upon request due to disability, retirement, or termination of employment. Upon the death of a participant, their beneficiary may request a distribution on their vested account balance. Participants upon reaching age 59-1/2, even if still employed, may elect to withdraw all or a portion of their account. Participants may elect to withdraw their vested account balance after reaching the Plan's normal retirement age of 65, or delay it until they retire. A participant may withdraw balances in their rollover contributions account.

Forfeited Accounts. Any forfeitures occurring during a plan year will be transferred to the forfeiture account and will first be used to pay administrative expenses of the Plan. Any remaining amounts will be used to reduce future Company contributions to the Plan. At December 31, 2016, forfeited non-vested accounts totaled \$28,003.

Investment Options. Each employee is permitted to direct the investment of funds in his or her individual account among any of the investment funds permitted under the Plan. The Plan offers various investment options with Fidelity Investments and each participant can select from one or more. To the extent that the employee directs the investment of his individual account, the trustees are relieved of their fiduciary responsibilities as provided in Section 404(a)(1)(C) of ERISA.

NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of Presentation. The accompanying financial statements of the Plan have been prepared on the accrual basis and are presented in accordance with generally accepted accounting principles.

Estimates. The preparation of financial statements in conformity with generally accepted accounting principles requires the plan administrator to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results may differ from those estimates.

Investment Valuation and Income Recognition. Investments are reported at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. The Plan's investment committee determines the Plan's valuation policies utilizing information provided by the investment advisers, custodians and insurance company. See Note 3 for discussion of fair value measurements.

INTERCONNECT SYSTEMS INC 401(k) PLAN
NOTES TO FINANCIAL STATEMENTS
December 31, 2016 and 2015

NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES - Continued

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

Concentration of Credit Risk. The Plan's exposure to credit loss in the event of nonperformance of investments is limited to the carrying value of such investments.

Payment of Benefits. Benefits are recorded when paid.

Notes Receivable from Participants. Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest, which approximates the fair value. Delinquent participant loans are reclassified as distributions based upon the terms of the Plan document.

Reclassifications. Certain amounts in the 2015 financial statements have been reclassified for comparison purposes to conform to the current year presentation.

Subsequent Events. The Plan has evaluated subsequent events through October 12, 2017, the date the financial statements were available to be issued. The Plan did not experience material subsequent events requiring financial statements disclosure.

NOTE 3 - FAIR VALUE MEASUREMENTS

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

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

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

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

INTERCONNECT SYSTEMS INC 401(k) PLAN
NOTES TO FINANCIAL STATEMENTS
December 31, 2016 and 2015

NOTE 3 - FAIR VALUE MEASUREMENTS - Continued

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

Following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodologies used at December 31, 2016 and 2015.

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

Mutual funds: Valued at the quoted net asset value of shares held by the Plan at year end.

Interest-bearing cash: Includes investment in a money market account and is valued at carrying value which approximates fair value due to the short maturity of this instrument.

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

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

	Investments at Fair Value as of December 31, 2016			
	Level 1	Level 2	Level 3	Total
Interest-bearing cash:				
Money market	\$ 2,801,009	\$ -	\$ -	\$ 2,801,009
Total interest-bearing cash	2,801,009	-	-	2,801,009
Mutual funds:				
Asset allocation	748,515	-	-	748,515
Bond	968,000	-	-	968,000
Domestic equity	5,167,766	-	-	5,167,766
International equity	893,271	-	-	893,271
Lifecycle	4,961,391	-	-	4,961,391
Specialty	328,830	-	-	328,830
Total mutual funds	13,067,773	-	-	13,067,773
Total investments at fair value	\$ 15,868,782	\$ -	\$ -	\$ 15,868,782

INTERCONNECT SYSTEMS INC 401(k) PLAN
NOTES TO FINANCIAL STATEMENTS
December 31, 2016 and 2015

NOTE 3 - FAIR VALUE MEASUREMENTS - Continued

	Investments at Fair Value as of December 31, 2015			
	Level 1	Level 2	Level 3	Total
Interest-bearing cash:				
Money market	\$ 2,005,499	\$ -	\$ -	\$ 2,005,499
Total interest-bearing cash	2,005,499	-	-	2,005,499
Mutual funds:				
Asset allocation	432,069	-	-	432,069
Bond	954,942	-	-	954,942
Domestic equity	5,181,709	-	-	5,181,709
International equity	1,148,861	-	-	1,148,861
Lifecycle	4,611,579	-	-	4,611,579
Specialty	230,172	-	-	230,172
Total mutual funds	12,559,332	-	-	12,559,332
Total investments at fair value	\$ 14,564,831	\$ -	\$ -	\$ 14,564,831

NOTE 4 - INFORMATION PREPARED AND CERTIFIED BY TRUSTEE (UNAUDITED)

In accordance with 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the plan administrator has received certification from the trustee, Fidelity Management Trust Company, as to the accuracy and completeness of certain financial information. Accordingly, as permitted under such regulations, the plan administrator instructed its independent auditors not to perform, and they did not perform, any auditing procedures with respect to the information certified by the trustee, except for comparing that information to the financial statements. The trustee has certified the accuracy and completeness of investments of \$15,868,781 and \$14,564,831 and notes receivable from participants of \$491,320 and \$539,759 at December 31, 2016 and 2015, and investment income of \$889,974 and interest income on notes receivable from participants of \$28,729 for the year ending December 31, 2016.

NOTE 5 - INVESTMENTS

The following presents investments at December 31, 2016, that represent 5% or more of the Plan's net assets:

Fidelity MMT Retirement Government Money Market	\$ 2,801,009
Fidelity Contrafund	\$ 884,990
Fidelity Freedom 2030	\$ 895,722

INTERCONNECT SYSTEMS INC 401(k) PLAN
NOTES TO FINANCIAL STATEMENTS
December 31, 2016 and 2015

NOTE 5 - INVESTMENTS - Continued

The following presents investments at December 31, 2015, that represent 5% or more of the Plan's net assets:

Fidelity MMT Retirement Government Money Market	\$ 2,005,499
Fidelity Contrafund	\$ 1,038,347
Fidelity 500 Index ADV	\$ 787,166
Fidelity Capital Appreciation	\$ 805,436
Fidelity Freedom 2040	\$ 813,374

During 2016, the Plan's investments, including gains and losses on investments bought and sold, as well as held during the year, appreciated in fair value by \$889,974.

**NOTE 6 - RECONCILIATION OF FINANCIAL STATEMENTS TO FORM 5500
SCHEDULE H**

The financial statements are prepared on the accrual basis of accounting. Schedule H of Form 5500 has been prepared on the cash basis. The following is a reconciliation of net assets available for benefits per the financial statements to Schedule H of Form 5500:

	<u>2016</u>	<u>2015</u>
Net assets available for benefits per financial statements	\$16,991,841	\$15,694,617
Less: Receivables - Employer contributions	<u>631,740</u>	<u>590,027</u>
 NET ASSETS AVAILABLE FOR BENEFITS PER FORM 5500 SCHEDULE H	 <u><u>\$16,360,101</u></u>	 <u><u>\$15,104,590</u></u>

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

Net increase per the financial statements	\$ 1,297,224
Add: change in contributions receivable - employer	<u>(41,713)</u>
 NET INCREASE PER SCHEDULE H OF FORM 5500	 <u><u>\$ 1,255,511</u></u>

NOTE 7 - PARTIES-IN-INTEREST TRANSACTIONS

Certain Plan investments are shares of Fidelity Investments mutual funds. Fidelity Management Trust Company owned by Fidelity Investments, is the investment trustee as defined by the Plan and, therefore, these transactions qualify as party-in-interest transactions.

INTERCONNECT SYSTEMS INC 401(k) PLAN
NOTES TO FINANCIAL STATEMENTS
December 31, 2016 and 2015

NOTE 8 - RISKS AND UNCERTAINTIES

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

The Plan invests through some mutual funds in the securities of foreign companies, which involve special risks and considerations not typically associated with investing in U.S. companies. These risks include devaluation of currencies, less reliable information about issuers, different securities transaction clearance and settlement practices, and possible adverse political and economic developments. Moreover, securities of many foreign companies and their markets may be less liquid and their prices more volatile than those of securities of comparable U.S. companies.

NOTE 9 - PLAN TERMINATION

Although it has not expressed intent to do so, the Company has the right under the Plan to discontinue its contributions at any time and amend or modify, or to terminate the Plan subject to the provisions of ERISA. In the event of plan termination, participants will become 100% vested in their accounts.

NOTE 10 - TAX STATUS

The Plan was established to qualify under section 401(a) and section 401(k) of the Internal Revenue Code (IRC) by adopting the terms and conditions of Non-Standardized Adoption Agreement No. 001 for use with Fidelity Basic Plan Document No. 14 and amendments to that standardized plan. The Internal Revenue Service has determined and informed Fidelity Management and Research Company that their standardized plan and amendments are acceptable under Section 401 of the IRC, the most recent of which was effective March 31, 2008. Since December 31, 2015, Interconnect Systems Inc 401(k) Plan adopted Fidelity Basic Plan Document No. 17. The Internal Revenue Service has determined and informed Fidelity Management and Research Company that their standardized plan and amendments are acceptable under Section 401 of the IRC, the most recent of which was effective March 31, 2014. Interconnect Systems Inc 401(k) Plan has not received an IRS determination letter, however, the plan administrator believes that by adopting Fidelity Basic Plan Document No. 14 and 17, standardized plan and amendments to that standardized plan, the Plan is designed and is currently being operated in compliance with the applicable requirements of the IRC.

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

SUPPLEMENTAL INFORMATION

SCHEDULE H (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Financial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). File as an attachment to Form 5500.	OMB No. 1210-0110 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 Interconnect Systems Inc 401(k) Plan	B Three-digit plan number (PN) 001	
C Plan sponsor's name as shown on line 2a of Form 5500 Interconnect Systems Inc	D Employer Identification Number (EIN) 05-0427767	

Part I Asset and Liability Statement		
1 Current value of plan assets and liabilities at the beginning and end of the plan year. Combine the value of plan assets held in more than one trust. Report the value of the plan's interest in a commingled fund containing the assets of more than one plan on a line-by-line basis unless the value is reportable on lines 1c(9) through 1c(14). Do not enter the value of that portion of an insurance contract which guarantees, during this plan year, to pay a specific dollar benefit at a future date. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 1b(1), 1b(2), 1c(8), 1g, 1h, and 1i. CCTs, PSAs, and 103-12 IEs also do not complete lines 1d and 1e. See instructions.		
Assets	(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a 0	0
b Receivables (less allowance for doubtful accounts):		
(1) Employer contributions	1b(1) 0	0
(2) Participant contributions	1b(2) 0	0
(3) Other	1b(3) 0	0
c General investments:		
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1) 2,005,499	2,801,009
(2) U.S. Government securities	1c(2) 0	0
(3) Corporate debt instruments (other than employer securities):		
(A) Preferred	1c(3)(A) 0	0
(B) All other	1c(3)(B) 0	0
(4) Corporate stocks (other than employer securities):		
(A) Preferred	1c(4)(A) 0	0
(B) Common	1c(4)(B) 0	0
(5) Partnership/joint venture interests	1c(5) 0	0
(6) Real estate (other than employer real property)	1c(6) 0	0
(7) Loans (other than to participants)	1c(7) 0	0
(8) Participant loans	1c(8) 539,759	491,320
(9) Value of interest in common/collective trusts	1c(9) 0	0
(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) 12,559,332	13,067,772
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14) 0	0
(15) Other	1c(15) 0	0

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

Schedule H (Form 5500) 2016
v.160205

1d Employer-related investments:

		(a) Beginning of Year	(b) End of Year
(1) Employer securities.....	1d(1)	0	0
(2) Employer real property.....	1d(2)	0	0
e Buildings and other property used in plan operation.....	1e	0	0
f Total assets (add all amounts in lines 1a through 1e).....	1f	15,104,590	16,360,101

Liabilities

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

Net Assets

l Net assets (subtract line 1k from line 1f).....	1l	15,104,590	16,360,101
--	----	------------	------------

Part II Income and Expense Statement

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

Income**a** Contributions:

		(a) Amount	(b) Total
(1) Received or receivable in cash from: (A) Employers.....	2a(1)(A)	590,027	
(B) Participants.....	2a(1)(B)	971,126	
(C) Others (including rollovers).....	2a(1)(C)	12,166	
(2) Noncash contributions.....	2a(2)	0	
(3) Total contributions. Add lines 2a(1)(A), (B), (C), and line 2a(2).....	2a(3)		1,573,319

b Earnings on investments:

(1) Interest:

(A) Interest-bearing cash (including money market accounts and certificates of deposit).....	2b(1)(A)	1,351	
(B) U.S. Government securities.....	2b(1)(B)	0	
(C) Corporate debt instruments.....	2b(1)(C)	0	
(D) Loans (other than to participants).....	2b(1)(D)	0	
(E) Participant loans.....	2b(1)(E)	28,729	
(F) Other.....	2b(1)(F)	0	
(G) Total interest. Add lines 2b(1)(A) through (F).....	2b(1)(G)		30,080

(2) Dividends: (A) Preferred stock.....

(B) Common stock.....	2b(2)(B)	0	
(C) Registered investment company shares (e.g. mutual funds).....	2b(2)(C)	566,394	
(D) Total dividends. Add lines 2b(2)(A), (B), and (C).....	2b(2)(D)		566,394

(3) Rents.....

	2b(3)		0
--	-------	--	---

(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds.....

(B) Aggregate carrying amount (see instructions).....	2b(4)(B)	0	
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result.....	2b(4)(C)		0

(5) Unrealized appreciation (depreciation) of assets: (A) Real estate.....

(B) Other.....	2b(5)(B)	0	
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B).....	2b(5)(C)		0

	(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)	0
(7) Net investment gain (loss) from pooled separate accounts	2b(7)	0
(8) Net investment gain (loss) from master trust investment accounts	2b(8)	0
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)	0
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)	322,229
c Other income	2c	0
d Total income. Add all income amounts in column (b) and enter total	2d	2,492,022

Expenses

e Benefit payment and payments to provide benefits:		
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	1,170,163
(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)	1,170,163
f Corrective distributions (see instructions)	2f	36,505
g Certain deemed distributions of participant loans (see instructions)	2g	5,138
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)	2,699
(4) Other	2i(4)	22,006
(5) Total administrative expenses. Add lines 2i(1) through (4)	2i(5)	24,705
j Total expenses. Add all expense amounts in column (b) and enter total	2j	1,236,511

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k	1,255,511
l Transfers of assets:		
(1) To this plan	2l(1)	0
(2) From this plan	2l(2)	0

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: Soares, Sandall, Bernacchi & Petrov

(2) EIN: 95-1888001

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.)		X	
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)		X	
e Was this plan covered by a fidelity bond?	X		500,000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		X	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	X		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked, and see instructions for format requirements.)		X	
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?		X	
l Has the plan failed to provide any benefit when due under the plan?	X		1,167
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)		X	
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.		X	
o Defined Benefit Plan or Money Purchase Pension Plan Only: Were any distributions made during the plan year to an employee who attained age 62 and had not separated from the service.			

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

Interconnect Systems Inc 401(k) Plan
#05-0427767
Year Ended 12/31/16
Plan #01

Attached to Schedule H, Part 4, Item I

Schedule of Assets Held For Investment Purposes At End of Year

(a)	(b)	(c)	(d)	(e)
	Identify of issue, borrower, lessor	Description of Investment	Cost	Current Value
*	Fidelity Contrafund	Domestic Equity	764,806	884,990
*	Fidelity Capital & Income Fund	Bond	165,984	169,857
*	Fidelity Leveraged Company Stock	Domestic Equity	472,993	498,043
*	Fidelity Balanced	Asset Allocation	723,045	748,515
*	Fidelity International Discovery	International Equity	459,958	500,906
*	Fidelity Capital Appreciation	Domestic Equity	726,773	713,047
*	Fidelity Export & Multinational	Domestic Equity	203,216	200,547
*	Fidelity Stock Selector Small Cap	Domestic Equity	96,587	125,240
*	Fidelity Freedom Income	Lifecycle	250,805	245,035
*	Fidelity Freedom 2045	Lifecycle	231,252	234,870
*	Fidelity Freedom 2050	Lifecycle	218,530	228,365
*	Fidelity Freedom 2010	Lifecycle	291,262	308,036
*	Fidelity Freedom 2020	Lifecycle	456,180	467,041
*	Fidelity Freedom 2030	Lifecycle	870,114	895,722
*	Fidelity Freedom 2040	Lifecycle	606,561	632,613
*	Fidelity Short Term Bond	Bond	6,429	6,400
*	Fidelity US Bond IDX Adv	Bond	467,666	456,192
*	Fidelity Stock Selector Large Cap Value	Domestic Equity	159,568	181,017
*	Fidelity Freedom 2005	Lifecycle	435	468
*	Fidelity Freedom 2015	Lifecycle	360,392	378,265
*	Fidelity Freedom 2025	Lifecycle	783,448	826,842
*	Fidelity Freedom 2035	Lifecycle	665,141	706,124
*	Fidelity Freedom 2055	Lifecycle	37,031	38,010
	NB Lg Cap Val Tr	Domestic Equity	43,339	42,730
	Temple Global Bond A	Bond	199,278	189,827
	Artisan Mid Cap Value	Domestic Equity	684,044	740,171
	AM Century Equity Income	Domestic Equity	371,470	374,150
	VRS Partners A	Domestic Equity	231,500	231,881
	Col/Acorn International	International Equity	83,708	71,521
	MSIF Mid Cap Growth	Domestic Equity	54,040	27,100
	Pimco Real Return Bond Ad	Bond	104,712	102,234
	Allianz NFJ Dividend Value	Domestic Equity	24,683	26,360
*	Fidelity Emerging Markets	International Equity	8,625	8,304
*	Fidelity Real Estate Invs	Specialty	309,010	328,830
*	Fidelity Ext MKT IDX ADV	Domestic Equity	191,294	226,579
*	Fidelity 500 Index Adv	Domestic Equity	555,275	627,574
	NB International Equity Trust	International Equity	227,985	249,303
*	Fid LTD Term Govt	Bond	44,053	43,490
*	Fidelity International Index ADV	International Equity	71,844	63,237
*	Fid Stk Sel Mid Cap	Domestic Equity	82,345	103,394
	Domini Social Eq Inv	Domestic Equity	176,389	164,943
*	Fidelity MMT Retirement Govt Mny Mkt II	Money Market	2,801,009	2,801,009
	Participant Loans	5.25% - 8.75% interest		491,320
				<u>16,360,101</u>

INTERCONNECT SYSTEMS INC 401(k) PLAN

FINANCIAL STATEMENTS

December 31, 2016 and 2015

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Soares, Sandall, Bernacchi & Petrovich, LLP

CERTIFIED PUBLIC ACCOUNTANTS

PARTNERS

BILLIE JO RODRIGUEZ, C.P.A. RICK C. HELDWEIN, C.P.A.
JUAN M. SOTO, C.P.A. SHARON I. ROBERTS, C.P.A.
PRAJESH (RAJ) ACHARYA, C.P.A.

FRANK J. SOARES (1908-1991)
THOMAS W. PETROVICH (1937-2013)
DEBRA N. DETTENMAYER (1955-2014)

CONSULTANTS

RICK B. SMITH, C.P.A. KENNETH R. MERIDETH, C.P.A.
BERNARD D. BERNACCHI GEORGE E. SANDALL, C.P.A.

Trustees
Interconnect Systems Inc. 401(k) Plan
Camarillo, California

Independent Auditors' Report

Report on the Financial Statements

We were engaged to audit the accompanying financial statements of Interconnect Systems Inc. 401(k) 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 notes to the financial statements.

Management's Responsibility for the Financial Statements

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

Auditors' Responsibility

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

Basis for Disclaimer of Opinion

As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Note 4, which was certified by Fidelity Management Trust Company, trustee of the Plan, except for comparing the information with the related information included in the financial statements and supplemental schedule. We have been informed by the plan administrator that the trustee holds the Plan's investment assets and executes investment transactions. The plan administrator has obtained a certification from the trustee as of and for the years ended December 31, 2016 and 2015, that the information provided to the plan administrator by the trustee is complete and accurate.

Disclaimer of Opinion

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

Other Matter

The supplemental schedule of Form 5500, Schedule H as of and for the year ended December 31, 2016 is required by the Department of Labor's (DOL) Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 and is presented for the purpose of additional analysis and is not a required part of the financial statements. Because of the significance of the matter described in the Basis for Disclaimer of Opinion paragraph, we do not express an opinion on this supplemental schedule.

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

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

Soares, Sandall, Bernacchi & Petrovich, LLP

SOARES, SANDALL, BERNACCHI & PETROVICH, LLP
Certified Public Accountants

October 12, 2017

INTERCONNECT SYSTEMS INC 401(k) PLAN
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
December 31, 2016 and 2015

ASSETS	<u>2016</u>	<u>2015</u>
INVESTMENTS		
Interest-bearing cash	\$ 2,801,009	\$ 2,005,499
Registered investment companies, at fair value	<u>13,067,772</u>	<u>12,559,332</u>
TOTAL INVESTMENTS	<u>15,868,781</u>	<u>14,564,831</u>
RECEIVABLES		
Notes receivable from participants	491,320	539,759
Employer contribution	<u>631,740</u>	<u>590,027</u>
TOTAL RECEIVABLES	<u>1,123,060</u>	<u>1,129,786</u>
TOTAL ASSETS	16,991,841	15,694,617
LIABILITIES	<u>-</u>	<u>-</u>
NET ASSETS AVAILABLE FOR BENEFITS	<u><u>\$16,991,841</u></u>	<u><u>\$15,694,617</u></u>

See accompanying notes to financial statements and independent auditors' report.

INTERCONNECT SYSTEMS INC 401(k) PLAN
STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
Year Ended December 31, 2016

ADDITIONS TO NET ASSETS ATTRIBUTED TO:

Investment income:	
Net appreciation in fair value of investments	\$ 322,229
Interest and dividends	<u>567,745</u>
TOTAL INVESTMENT INCOME	<u>889,974</u>
Interest income on notes receivable from participants	<u>28,729</u>
Contributions:	
Employee	971,126
Employer	631,740
Other, including rollovers	<u>12,166</u>
TOTAL CONTRIBUTIONS	<u>1,615,032</u>
TOTAL ADDITIONS	<u>2,533,735</u>

DEDUCTIONS FROM NET ASSETS ATTRIBUTED TO:

Benefits paid to participants	1,170,163
Corrective distributions	36,505
Deemed distributions	5,138
Administrative fees	<u>24,705</u>
TOTAL DEDUCTIONS	<u>1,236,511</u>
NET INCREASE	1,297,224

NET ASSETS AVAILABLE FOR BENEFITS

Beginning of year	<u>15,694,617</u>
END OF YEAR	<u><u>\$16,991,841</u></u>

See accompanying notes to financial statements and independent auditors' report.

INTERCONNECT SYSTEMS INC 401(k) PLAN
NOTES TO FINANCIAL STATEMENTS
December 31, 2016 and 2015

NOTE 1 - DESCRIPTION OF PLAN

The following description of the Interconnect Systems Inc 401(k) Plan (the Plan) provides only general information. Participants should refer to the Plan agreement for a more complete description of the Plan's provisions.

General. The Plan is a defined contribution plan covering all employees of Interconnect Systems Inc., and their wholly owned subsidiaries Nallatech, Inc., Emulation Technology, Inc. and Innovative Intergration Inc. (Company) who have completed three months of eligibility service, and are age eighteen or older. Fidelity Management Trust Company is the Plan's trustee. Interconnect Systems Inc 401(k) Plan has adopted Fidelity Basic Plan Document No. 14 and amendments to that Plan. On December 31, 2015, the Plan has adopted the Fidelity Basic Plan Document No. 17. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA). In April 2016, the Sponsor has been acquired by Molex LLC. Molex is a global manufacturer of electronic solutions. There is no immediate change in the Plan structure and will continue to operate as intended.

Automatic Enrollment. Effective March 1, 2007, the Plan adopted an automatic enrollment feature. If the participant is eligible to participate and does not take action, they are automatically enrolled at a default deferral rate of 3%. The default investment is the Fidelity Freedom Fund that most closely aligns with the participant's projected retirement date based upon their birth year. The new hire pamphlet and enrollment package explain the automatic enrollment process, including how to opt out of participation and how to change the contribution rate and/or investment option.

Contributions. Participants may contribute up to 90% of pretax compensation, as defined in the Plan. The employer may allow participants to enter into a special salary reduction agreement to make additional deferral contributions in an amount up to 100% of their compensation for the payroll periods in the final month of the Plan year. Total deferrals in any taxable year may not exceed the amount set by federal tax laws, \$18,000 for 2016. The employer may make discretionary matching contributions during each Plan year. Employees must be employed by the employer on the last day of the Plan year and have earned at least 501 hours of service to receive a matching contribution. The Plan allows certain participants to make additional pre-tax "catch up" contributions to the Plan in an amount not to exceed the federal tax laws for that calendar year.

Expenses. Certain expenses of maintaining the Plan are paid by the Plan unless otherwise paid by the Company. Expenses that are paid by the Company are excluded from these financial statements. Fees related to the administration of notes receivable from participants are charged directly to the participant's account and are included in administrative expenses. Investment related expenses are included in the net appreciation of fair value of investments.

Participant Accounts. Each participant's account is credited with the participant's contributions, allocations of the employer's contributions, Plan earnings, and charged with an allocation of administrative expenses. Allocations are based on participant earnings or account balances, as defined. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

INTERCONNECT SYSTEMS INC 401(k) PLAN
NOTES TO FINANCIAL STATEMENTS
December 31, 2016 and 2015

NOTE 1 - DESCRIPTION OF PLAN - Continued

Vesting. Participants are immediately vested in their contributions plus actual earnings thereon. Vesting in the employer's non-elective contributions and matching contributions portion of their accounts plus actual earnings thereon is based on years of credited service. A participant is 100% vested after five years of credited service.

Notes Receivable from Participants. Participants may borrow from their participant accounts a minimum of \$1,000 up to a maximum of \$50,000 or 50% of their vested account balance, whichever is less. The loans are secured by the balance in the participant's account and bear a reasonable interest rate as determined by the plan administrator. Principal and interest are paid ratably through payroll deductions over a five year period; ten years if the loan is for the purchase of a principal residence.

Payment of Benefits. A distribution may be made to participants upon request due to disability, retirement, or termination of employment. Upon the death of a participant, their beneficiary may request a distribution on their vested account balance. Participants upon reaching age 59-1/2, even if still employed, may elect to withdraw all or a portion of their account. Participants may elect to withdraw their vested account balance after reaching the Plan's normal retirement age of 65, or delay it until they retire. A participant may withdraw balances in their rollover contributions account.

Forfeited Accounts. Any forfeitures occurring during a plan year will be transferred to the forfeiture account and will first be used to pay administrative expenses of the Plan. Any remaining amounts will be used to reduce future Company contributions to the Plan. At December 31, 2016, forfeited non-vested accounts totaled \$28,003.

Investment Options. Each employee is permitted to direct the investment of funds in his or her individual account among any of the investment funds permitted under the Plan. The Plan offers various investment options with Fidelity Investments and each participant can select from one or more. To the extent that the employee directs the investment of his individual account, the trustees are relieved of their fiduciary responsibilities as provided in Section 404(a)(1)(C) of ERISA.

NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of Presentation. The accompanying financial statements of the Plan have been prepared on the accrual basis and are presented in accordance with generally accepted accounting principles.

Estimates. The preparation of financial statements in conformity with generally accepted accounting principles requires the plan administrator to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results may differ from those estimates.

Investment Valuation and Income Recognition. Investments are reported at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. The Plan's investment committee determines the Plan's valuation policies utilizing information provided by the investment advisers, custodians and insurance company. See Note 3 for discussion of fair value measurements.

INTERCONNECT SYSTEMS INC 401(k) PLAN
NOTES TO FINANCIAL STATEMENTS
December 31, 2016 and 2015

NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES - Continued

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

Concentration of Credit Risk. The Plan's exposure to credit loss in the event of nonperformance of investments is limited to the carrying value of such investments.

Payment of Benefits. Benefits are recorded when paid.

Notes Receivable from Participants. Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest, which approximates the fair value. Delinquent participant loans are reclassified as distributions based upon the terms of the Plan document.

Reclassifications. Certain amounts in the 2015 financial statements have been reclassified for comparison purposes to conform to the current year presentation.

Subsequent Events. The Plan has evaluated subsequent events through October 12, 2017, the date the financial statements were available to be issued. The Plan did not experience material subsequent events requiring financial statements disclosure.

NOTE 3 - FAIR VALUE MEASUREMENTS

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

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

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

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

INTERCONNECT SYSTEMS INC 401(k) PLAN
NOTES TO FINANCIAL STATEMENTS
December 31, 2016 and 2015

NOTE 3 - FAIR VALUE MEASUREMENTS - Continued

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

Following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodologies used at December 31, 2016 and 2015.

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

Mutual funds: Valued at the quoted net asset value of shares held by the Plan at year end.

Interest-bearing cash: Includes investment in a money market account and is valued at carrying value which approximates fair value due to the short maturity of this instrument.

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

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

	Investments at Fair Value as of December 31, 2016			
	Level 1	Level 2	Level 3	Total
Interest-bearing cash:				
Money market	\$ 2,801,009	\$ -	\$ -	\$ 2,801,009
Total interest-bearing cash	2,801,009	-	-	2,801,009
Mutual funds:				
Asset allocation	748,515	-	-	748,515
Bond	968,000	-	-	968,000
Domestic equity	5,167,766	-	-	5,167,766
International equity	893,271	-	-	893,271
Lifecycle	4,961,391	-	-	4,961,391
Specialty	328,830	-	-	328,830
Total mutual funds	13,067,773	-	-	13,067,773
Total investments at fair value	\$15,868,782	\$ -	\$ -	\$15,868,782

INTERCONNECT SYSTEMS INC 401(k) PLAN
NOTES TO FINANCIAL STATEMENTS
December 31, 2016 and 2015

NOTE 3 - FAIR VALUE MEASUREMENTS - Continued

	Investments at Fair Value as of December 31, 2015			
	Level 1	Level 2	Level 3	Total
Interest-bearing cash:				
Money market	\$ 2,005,499	\$ -	\$ -	\$ 2,005,499
Total interest-bearing cash	2,005,499	-	-	2,005,499
Mutual funds:				
Asset allocation	432,069	-	-	432,069
Bond	954,942	-	-	954,942
Domestic equity	5,181,709	-	-	5,181,709
International equity	1,148,861	-	-	1,148,861
Lifecycle	4,611,579	-	-	4,611,579
Specialty	230,172	-	-	230,172
Total mutual funds	12,559,332	-	-	12,559,332
Total investments at fair value	\$ 14,564,831	\$ -	\$ -	\$ 14,564,831

NOTE 4 - INFORMATION PREPARED AND CERTIFIED BY TRUSTEE (UNAUDITED)

In accordance with 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the plan administrator has received certification from the trustee, Fidelity Management Trust Company, as to the accuracy and completeness of certain financial information. Accordingly, as permitted under such regulations, the plan administrator instructed its independent auditors not to perform, and they did not perform, any auditing procedures with respect to the information certified by the trustee, except for comparing that information to the financial statements. The trustee has certified the accuracy and completeness of investments of \$15,868,781 and \$14,564,831 and notes receivable from participants of \$491,320 and \$539,759 at December 31, 2016 and 2015, and investment income of \$889,974 and interest income on notes receivable from participants of \$28,729 for the year ending December 31, 2016.

NOTE 5 - INVESTMENTS

The following presents investments at December 31, 2016, that represent 5% or more of the Plan's net assets:

Fidelity MMT Retirement Government Money Market	\$ 2,801,009
Fidelity Contrafund	\$ 884,990
Fidelity Freedom 2030	\$ 895,722

INTERCONNECT SYSTEMS INC 401(k) PLAN
NOTES TO FINANCIAL STATEMENTS
December 31, 2016 and 2015

NOTE 5 - INVESTMENTS - Continued

The following presents investments at December 31, 2015, that represent 5% or more of the Plan's net assets:

Fidelity MMT Retirement Government Money Market	\$ 2,005,499
Fidelity Contrafund	\$ 1,038,347
Fidelity 500 Index ADV	\$ 787,166
Fidelity Capital Appreciation	\$ 805,436
Fidelity Freedom 2040	\$ 813,374

During 2016, the Plan's investments, including gains and losses on investments bought and sold, as well as held during the year, appreciated in fair value by \$889,974.

**NOTE 6 - RECONCILIATION OF FINANCIAL STATEMENTS TO FORM 5500
SCHEDULE H**

The financial statements are prepared on the accrual basis of accounting. Schedule H of Form 5500 has been prepared on the cash basis. The following is a reconciliation of net assets available for benefits per the financial statements to Schedule H of Form 5500:

	<u>2016</u>	<u>2015</u>
Net assets available for benefits per financial statements	\$16,991,841	\$15,694,617
Less: Receivables - Employer contributions	<u>631,740</u>	<u>590,027</u>
 NET ASSETS AVAILABLE FOR BENEFITS PER FORM 5500 SCHEDULE H	 <u><u>\$16,360,101</u></u>	 <u><u>\$15,104,590</u></u>

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

Net increase per the financial statements	\$ 1,297,224
Add: change in contributions receivable - employer	<u>(41,713)</u>
NET INCREASE PER SCHEDULE H OF FORM 5500	<u><u>\$ 1,255,511</u></u>

NOTE 7 - PARTIES-IN-INTEREST TRANSACTIONS

Certain Plan investments are shares of Fidelity Investments mutual funds. Fidelity Management Trust Company owned by Fidelity Investments, is the investment trustee as defined by the Plan and, therefore, these transactions qualify as party-in-interest transactions.

INTERCONNECT SYSTEMS INC 401(k) PLAN
NOTES TO FINANCIAL STATEMENTS
December 31, 2016 and 2015

NOTE 8 - RISKS AND UNCERTAINTIES

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

The Plan invests through some mutual funds in the securities of foreign companies, which involve special risks and considerations not typically associated with investing in U.S. companies. These risks include devaluation of currencies, less reliable information about issuers, different securities transaction clearance and settlement practices, and possible adverse political and economic developments. Moreover, securities of many foreign companies and their markets may be less liquid and their prices more volatile than those of securities of comparable U.S. companies.

NOTE 9 - PLAN TERMINATION

Although it has not expressed intent to do so, the Company has the right under the Plan to discontinue its contributions at any time and amend or modify, or to terminate the Plan subject to the provisions of ERISA. In the event of plan termination, participants will become 100% vested in their accounts.

NOTE 10 - TAX STATUS

The Plan was established to qualify under section 401(a) and section 401(k) of the Internal Revenue Code (IRC) by adopting the terms and conditions of Non-Standardized Adoption Agreement No. 001 for use with Fidelity Basic Plan Document No. 14 and amendments to that standardized plan. The Internal Revenue Service has determined and informed Fidelity Management and Research Company that their standardized plan and amendments are acceptable under Section 401 of the IRC, the most recent of which was effective March 31, 2008. Since December 31, 2015, Interconnect Systems Inc 401(k) Plan adopted Fidelity Basic Plan Document No. 17. The Internal Revenue Service has determined and informed Fidelity Management and Research Company that their standardized plan and amendments are acceptable under Section 401 of the IRC, the most recent of which was effective March 31, 2014. Interconnect Systems Inc 401(k) Plan has not received an IRS determination letter, however, the plan administrator believes that by adopting Fidelity Basic Plan Document No. 14 and 17, standardized plan and amendments to that standardized plan, the Plan is designed and is currently being operated in compliance with the applicable requirements of the IRC.

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

SUPPLEMENTAL INFORMATION

SCHEDULE H (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Financial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). File as an attachment to Form 5500.	OMB No. 1210-0110 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 Interconnect Systems Inc 401(k) Plan	B Three-digit plan number (PN) 001	
C Plan sponsor's name as shown on line 2a of Form 5500 Interconnect Systems Inc	D Employer Identification Number (EIN) 05-0427767	

Part I Asset and Liability Statement	
1 Current value of plan assets and liabilities at the beginning and end of the plan year. Combine the value of plan assets held in more than one trust. Report the value of the plan's interest in a commingled fund containing the assets of more than one plan on a line-by-line basis unless the value is reportable on lines 1c(9) through 1c(14). Do not enter the value of that portion of an insurance contract which guarantees, during this plan year, to pay a specific dollar benefit at a future date. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 1b(1), 1b(2), 1c(8), 1g, 1h, and 1i. CCTs, PSAs, and 103-12 IEs also do not complete lines 1d and 1e. See instructions.	
Assets	(a) Beginning of Year (b) End of Year
a Total noninterest-bearing cash	1a 0 0
b Receivables (less allowance for doubtful accounts):	
(1) Employer contributions	1b(1) 0 0
(2) Participant contributions	1b(2) 0 0
(3) Other	1b(3) 0 0
c General investments:	
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1) 2,005,499 2,801,009
(2) U.S. Government securities	1c(2) 0 0
(3) Corporate debt instruments (other than employer securities):	
(A) Preferred	1c(3)(A) 0 0
(B) All other	1c(3)(B) 0 0
(4) Corporate stocks (other than employer securities):	
(A) Preferred	1c(4)(A) 0 0
(B) Common	1c(4)(B) 0 0
(5) Partnership/joint venture interests	1c(5) 0 0
(6) Real estate (other than employer real property)	1c(6) 0 0
(7) Loans (other than to participants)	1c(7) 0 0
(8) Participant loans	1c(8) 539,759 491,320
(9) Value of interest in common/collective trusts	1c(9) 0 0
(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) 12,559,332 13,067,772
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14) 0 0
(15) Other	1c(15) 0 0

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

Schedule H (Form 5500) 2016
v.160205

1d Employer-related investments:

		(a) Beginning of Year	(b) End of Year
(1) Employer securities.....	1d(1)	0	0
(2) Employer real property.....	1d(2)	0	0
e Buildings and other property used in plan operation.....	1e	0	0
f Total assets (add all amounts in lines 1a through 1e).....	1f	15,104,590	16,360,101

Liabilities

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

Net Assets

l Net assets (subtract line 1k from line 1f).....	1l	15,104,590	16,360,101
--	----	------------	------------

Part II Income and Expense Statement

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

Income**a** Contributions:

		(a) Amount	(b) Total
(1) Received or receivable in cash from: (A) Employers.....	2a(1)(A)	590,027	
(B) Participants.....	2a(1)(B)	971,126	
(C) Others (including rollovers).....	2a(1)(C)	12,166	
(2) Noncash contributions.....	2a(2)	0	
(3) Total contributions. Add lines 2a(1)(A), (B), (C), and line 2a(2).....	2a(3)		1,573,319

b Earnings on investments:

(1) Interest:

(A) Interest-bearing cash (including money market accounts and certificates of deposit).....	2b(1)(A)	1,351	
(B) U.S. Government securities.....	2b(1)(B)	0	
(C) Corporate debt instruments.....	2b(1)(C)	0	
(D) Loans (other than to participants).....	2b(1)(D)	0	
(E) Participant loans.....	2b(1)(E)	28,729	
(F) Other.....	2b(1)(F)	0	
(G) Total interest. Add lines 2b(1)(A) through (F).....	2b(1)(G)		30,080

(2) Dividends: (A) Preferred stock.....

(B) Common stock.....	2b(2)(B)	0	
(C) Registered investment company shares (e.g. mutual funds).....	2b(2)(C)	566,394	
(D) Total dividends. Add lines 2b(2)(A), (B), and (C).....	2b(2)(D)		566,394

(3) Rents.....

2b(3)		0
-------	--	---

(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds.....

(B) Aggregate carrying amount (see instructions).....	2b(4)(B)	0	
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result.....	2b(4)(C)		0

(5) Unrealized appreciation (depreciation) of assets: (A) Real estate.....

(B) Other.....	2b(5)(B)	0	
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B).....	2b(5)(C)		0

	(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)	0
(7) Net investment gain (loss) from pooled separate accounts	2b(7)	0
(8) Net investment gain (loss) from master trust investment accounts	2b(8)	0
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)	0
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)	322,229
c Other income	2c	0
d Total income. Add all income amounts in column (b) and enter total	2d	2,492,022

Expenses

e Benefit payment and payments to provide benefits:		
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	1,170,163
(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)	1,170,163
f Corrective distributions (see instructions)	2f	36,505
g Certain deemed distributions of participant loans (see instructions)	2g	5,138
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)	2,699
(4) Other	2i(4)	22,006
(5) Total administrative expenses. Add lines 2i(1) through (4)	2i(5)	24,705
j Total expenses. Add all expense amounts in column (b) and enter total	2j	1,236,511

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k	1,255,511
l Transfers of assets:		
(1) To this plan	2l(1)	0
(2) From this plan	2l(2)	0

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: Soares, Sandall, Bernacchi & Petrov

(2) EIN: 95-1888001

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.)		X	
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)		X	
e Was this plan covered by a fidelity bond?	X		500,000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		X	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	X		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked, and see instructions for format requirements.)		X	
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?		X	
l Has the plan failed to provide any benefit when due under the plan?	X		1,167
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)		X	
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.		X	
o Defined Benefit Plan or Money Purchase Pension Plan Only: Were any distributions made during the plan year to an employee who attained age 62 and had not separated from the service.			

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

Interconnect Systems Inc 401(k) Plan
#05-0427767
Year Ended 12/31/16
Plan #01

Attached to Schedule H, Part 4, Item I

Schedule of Assets Held For Investment Purposes At End of Year

(a)	(b)	(c)	(d)	(e)
	Identify of issue, borrower, lessor	Description of Investment	Cost	Current Value
*	Fidelity Contrafund	Domestic Equity	764,806	884,990
*	Fidelity Capital & Income Fund	Bond	165,984	169,857
*	Fidelity Leveraged Company Stock	Domestic Equity	472,993	498,043
*	Fidelity Balanced	Asset Allocation	723,045	748,515
*	Fidelity International Discovery	International Equity	459,958	500,906
*	Fidelity Capital Appreciation	Domestic Equity	726,773	713,047
*	Fidelity Export & Multinational	Domestic Equity	203,216	200,547
*	Fidelity Stock Selector Small Cap	Domestic Equity	96,587	125,240
*	Fidelity Freedom Income	Lifecycle	250,805	245,035
*	Fidelity Freedom 2045	Lifecycle	231,252	234,870
*	Fidelity Freedom 2050	Lifecycle	218,530	228,365
*	Fidelity Freedom 2010	Lifecycle	291,262	308,036
*	Fidelity Freedom 2020	Lifecycle	456,180	467,041
*	Fidelity Freedom 2030	Lifecycle	870,114	895,722
*	Fidelity Freedom 2040	Lifecycle	606,561	632,613
*	Fidelity Short Term Bond	Bond	6,429	6,400
*	Fidelity US Bond IDX Adv	Bond	467,666	456,192
*	Fidelity Stock Selector Large Cap Value	Domestic Equity	159,568	181,017
*	Fidelity Freedom 2005	Lifecycle	435	468
*	Fidelity Freedom 2015	Lifecycle	360,392	378,265
*	Fidelity Freedom 2025	Lifecycle	783,448	826,842
*	Fidelity Freedom 2035	Lifecycle	665,141	706,124
*	Fidelity Freedom 2055	Lifecycle	37,031	38,010
	NB Lg Cap Val Tr	Domestic Equity	43,339	42,730
	Temple Global Bond A	Bond	199,278	189,827
	Artisan Mid Cap Value	Domestic Equity	684,044	740,171
	AM Century Equity Income	Domestic Equity	371,470	374,150
	VRS Partners A	Domestic Equity	231,500	231,881
	Col/Acorn International	International Equity	83,708	71,521
	MSIF Mid Cap Growth	Domestic Equity	54,040	27,100
	Pimco Real Return Bond Ad	Bond	104,712	102,234
	Allianz NFJ Dividend Value	Domestic Equity	24,683	26,360
*	Fidelity Emerging Markets	International Equity	8,625	8,304
*	Fidelity Real Estate Invs	Specialty	309,010	328,830
*	Fidelity Ext MKT IDX ADV	Domestic Equity	191,294	226,579
*	Fidelity 500 Index Adv	Domestic Equity	555,275	627,574
	NB International Equity Trust	International Equity	227,985	249,303
*	Fid LTD Term Govt	Bond	44,053	43,490
*	Fidelity International Index ADV	International Equity	71,844	63,237
*	Fid Stk Sel Mid Cap	Domestic Equity	82,345	103,394
	Domini Social Eq Inv	Domestic Equity	176,389	164,943
*	Fidelity MMT Retirement Govt Mny Mkt II	Money Market	2,801,009	2,801,009
	Participant Loans	5.25% - 8.75% interest		491,320
				<u>16,360,101</u>