Form 5500

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Annual Return/Report of Employee Benefit Plan

This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6057(b) and 6058(a) of the Internal Revenue Code (the Code).

▶ **Complete all entries in accordance with the instructions to the Form 5500.**

OMB Nos. 1210-0110
1210-0089

2016

This Form is Open to Public Inspection

Part I Annual Report Identification Information

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

A This return/report is for:
- [ ] a multiemployer plan
- [ ] a multiple-employer plan (Filers checking this box must attach a list of participating employer information in accordance with the form instructions.)
- [X] a single-employer plan
- [ ] a DFE (specify) ____

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

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

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

Part II Basic Plan Information—enter all requested information

1a Name of plan
IMAGING HEALTHCARE SPECIALISTS, LLC 401(K) SALARY SAVINGS PLAN

1b Three-digit plan number (PN) ▶ 003

1c Effective date of plan 01/01/1992

2a Plan sponsor's name (employer, if for a single-employer plan)
Mailing address (include room, apt., suite no. and street, or P.O. Box)
City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions)
IMAGING HEALTHCARE SPECIALISTS, LLC

150 W WASHINGTON STREET
SAN DIEGO, CA 92103

2b Employer Identification Number (EIN) 20-3872122

2c Plan Sponsor's telephone number 866-558-4320

2d Business code (see instructions) 621111

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

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

SIGN HERE	Filed with authorized/valid electronic signature.	10/13/2017	DANIEL LOCH
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

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

Preparer's telephone number

3a Plan administrator's name and address [X] Same as Plan Sponsor	**3b** Administrator's EIN	
	3c Administrator's telephone number	
4 If the name and/or EIN of the plan sponsor has changed since the last return/report filed for this plan, enter the name, EIN and the plan number from the last return/report:	**4b** EIN	
a Sponsor's name	**4c** PN	
5 Total number of participants at the beginning of the plan year	**5**	349
6 Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines **6a(1), 6a(2), 6b, 6c,** and **6d**).		
a(1) Total number of active participants at the beginning of the plan year	**6a(1)**	272
a(2) Total number of active participants at the end of the plan year	**6a(2)**	267
b Retired or separated participants receiving benefits	**6b**	0
c Other retired or separated participants entitled to future benefits	**6c**	64
d Subtotal. Add lines **6a(2)**, **6b**, and **6c**.	**6d**	331
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	**6e**	0
f Total. Add lines **6d** and **6e**.	**6f**	331
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**	274
h Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested	**6h**	9
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 2H 2J 2R 2S 2T

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

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

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

a Pension Schedules

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

b General Schedules

- **(1)** [X] **H** (Financial Information)
- **(2)** [ ] **I** (Financial Information – Small Plan)
- **(3)** [ ] 0 **A** (Insurance Information)
- **(4)** [X] **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)	Service Provider Information	OMB No. 1210-0110
Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ **File as an attachment to Form 5500.**	**2016** **This Form is Open to Public Inspection.**

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

A Name of plan
IMAGING HEALTHCARE SPECIALISTS, LLC 401(K) SALARY SAVINGS PLAN

B Three-digit plan number (PN) ▶ 003

C Plan sponsor's name as shown on line 2a of Form 5500
IMAGING HEALTHCARE SPECIALISTS, LLC

D Employer Identification Number (EIN)
20-3872122

Part I Service Provider Information (see instructions)

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

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

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

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

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

MG TRUST COMPANY DBA MATRIX TRUST C

75-3182674

(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?
15 16 19 36 37 38 50 60 62 64 65	CUSTODIAN/RECORDKEEPER	30564	Yes [X] No [ ]	Yes [X] No [ ]	50031	Yes [X] No [ ]

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

STOLPER & COMPANY

550 WEST C STREET
SUITE 960
SAN DIEGO, CA 92101

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
26 51	INVESTMENT MANAGER	12244	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

CITY NATIONAL ROCHDALE

400 NORTH ROXBURY DRIVE
BEVERLY HILLS, CA 90210

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
26 51	INVESTMENT MANAGER	10797	Yes [ ] No [X]	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)

SNYDER CAPITAL MGMT LP

1100 NORTH MARKET ST
WILMINGTON, DE 19801

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
26 51	INVESTMENT MANAGER	6800	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

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

(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
MATRIX TRUST COMPANY	62	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.
MATRIX TRUST COMPANY 75-3182674	SEE ATTACHMENT MATRIX TRUST COMPANY SCHEDULE C DISCLOSURES

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
MATRIX TRUST COMPANY	68	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.
MATRIX TRUST COMPANY 75-3182674	SEE ATTACHMENT MATRIX TRUST COMPANY SCHEDULE C DISCLOSURES

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
CITY NATIONAL BANK	68	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.
BROKERS USED BY CITY NATIONAL BANK 95-1780067	SEE ATTACHMENT CITY NATIONAL BANK SOFT DOLLAR DISCLOSURE

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
TD AMERITRADE, INC.	59 60 63 68	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.
TD AMERITRADE, INC. 82-0543156	SEE ATTACHMENT 731_IMH_2016_5500

(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

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

(complete as many entries as needed)

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE H (Form 5500)

Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Financial Information

This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code).

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

OMB No. 1210-0110

2016

This Form is Open to Public Inspection

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

A Name of plan
IMAGING HEALTHCARE SPECIALISTS, LLC 401(K) SALARY SAVINGS PLAN

B Three-digit plan number (PN) ▶ 003

C Plan sponsor's name as shown on line 2a of Form 5500
IMAGING HEALTHCARE SPECIALISTS, LLC

D Employer Identification Number (EIN)
20-3872122

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	1331	830
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	466978	465055
(2) Participant contributions	1b(2)	0	0
(3) Other	1b(3)		
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	262235	94676
(2) U.S. Government securities	1c(2)		
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(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)	2497497	2051618
(5) Partnership/joint venture interests	1c(5)	11371	0
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)	352308	382934
(9) Value of interest in common/collective trusts	1c(9)		
(10) Value of interest in pooled separate accounts	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	15738838	14068039
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other	1c(15)	0	0

			(a) Beginning of Year	(b) End of Year
1d	Employer-related investments:			
	(1) Employer securities	**1d(1)**		
	(2) Employer real property	**1d(2)**		
e	Buildings and other property used in plan operation	**1e**		
f	Total assets (add all amounts in lines 1a through 1e)	**1f**	19330558	17063152
	Liabilities			
g	Benefit claims payable	**1g**		
h	Operating payables	**1h**		
i	Acquisition indebtedness	**1i**		
j	Other liabilities	**1j**		
k	Total liabilities (add all amounts in lines 1g through1j)	**1k**	0	0
	Net Assets			
l	Net assets (subtract line 1k from line 1f)	**1l**	19330558	17063152

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)**	465055	
	(B) Participants	**2a(1)(B)**	874331	
	(C) Others (including rollovers)	**2a(1)(C)**	36887	
	(2) Noncash contributions	**2a(2)**	0	
	(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	**2a(3)**		1376273
b	**Earnings on investments:**			
	(1) Interest:			
	(A) Interest-bearing cash (including money market accounts and certificates of deposit)	**2b(1)(A)**	25	
	(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)**	13723	
	(F) Other	**2b(1)(F)**	5393	
	(G) Total interest. Add lines **2b(1)(A)** through **(F)**	**2b(1)(G)**		19141
	(2) Dividends: **(A)** Preferred stock	**2b(2)(A)**	0	
	(B) Common stock	**2b(2)(B)**	38692	
	(C) Registered investment company shares (e.g. mutual funds)	**2b(2)(C)**	548050	
	(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	**2b(2)(D)**		586742
	(3) Rents	**2b(3)**		0
	(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	**2b(4)(A)**	1305944	
	(B) Aggregate carrying amount (see instructions)	**2b(4)(B)**	1298195	
	(C) Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result	**2b(4)(C)**		7749
	(5) Unrealized appreciation (depreciation) of assets: **(A)** Real estate	**2b(5)(A)**	0	
	(B) Other	**2b(5)(B)**	215964	
	(C) Total unrealized appreciation of assets. Add lines **2b(5)(A)** and **(B)**	**2b(5)(C)**		215964

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		249445
c Other income	2c		
d Total income. Add all **income** amounts in column (b) and enter total	2d		2455314
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	4655913	
(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)		4655913
f Corrective distributions (see instructions)	2f		0
g Certain deemed distributions of participant loans (see instructions)	2g		0
h Interest expense	2h		0
i Administrative expenses: **(1)** Professional fees	2i(1)	66807	
(2) Contract administrator fees	2i(2)	0	
(3) Investment advisory and management fees	2i(3)	0	
(4) Other	2i(4)	0	
(5) Total administrative expenses. Add lines **2i(1)** through **(4)**	2i(5)		66807
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		4722720
Net Income and Reconciliation			
k Net income (loss). Subtract line **2j** from line **2d**	2k		-2267406
l Transfers of assets:			
(1) To this plan	2l(1)		
(2) From this plan	2l(2)		

Part III Accountant's Opinion

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

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

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

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

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

(1) Name: CONSIDINE & CONSIDINE **(2)** EIN: 95-2694444

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

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

Part IV Compliance Questions

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

During the plan year:

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

			Yes	No	Amount
c	Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)	4c		X	
d	Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)	4d		X	
e	Was this plan covered by a fidelity bond?	4e	X		500000
f	Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?	4f		X	
g	Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?	4g		X	
h	Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?	4h		X	
i	Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	4i	X		
j	Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked, and see instructions for format requirements.)	4j		X	
k	Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?	4k		X	
l	Has the plan failed to provide any benefit when due under the plan?	4l		X	
m	If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	4m		X	
n	If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3	4n			
o	Defined Benefit Plan or Money Purchase Pension Plan Only: Were any distributions made during the plan year to an employee who attained age 62 and had not separated from service?	4o			

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

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

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

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

Part V Trust Information

6a Name of trust	**6b** Trust's EIN

6c Name of trustee or custodian	**6d** Trustee's or custodian's telephone number

SCHEDULE R (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Retirement Plan Information

This schedule is required to be filed under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code).

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

OMB No. 1210-0110

2016

This Form is Open to Public Inspection.

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

A Name of plan
IMAGING HEALTHCARE SPECIALISTS, LLC 401(K) SALARY SAVINGS PLAN

B Three-digit plan number (PN) ▶ 003

C Plan sponsor's name as shown on line 2a of Form 5500
IMAGING HEALTHCARE SPECIALISTS, LLC

D Employer Identification Number (EIN)
20-3872122

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** 0

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): 27-1228437

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

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

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

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

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

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

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

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

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

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

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

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

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

Part III Amendments

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

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

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

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

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

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

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

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

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

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

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

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

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

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

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

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

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

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

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

a Enter the percentage of plan assets held as:
Stock: 0.0 % Investment-Grade Debt: _____% High-Yield Debt: _____% Real Estate: _____% Other: _____%

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

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

Part VII IRS Compliance Questions

20a Is the plan a 401(k) plan? If "No," skip b	☐ Yes	☐ No
20b How did the plan satisfy the nondiscrimination requirements for employee deferrals under section 401(k)(3) for the plan year? Check all that apply:	☐ Design-based safe harbor ☐ "Current year" ADP test	☐ "Prior 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 ____/____/____.

IMAGING HEALTHCARE SPECIALISTS, LLC
401(K) SALARY SAVINGS PLAN
FINANCIAL STATEMENTS
DECEMBER 31, 2016 AND 2015

IMAGING HEALTHCARE SPECIALISTS, LLC 401(K) SALARY SAVINGS PLAN

		Pages
I.	Index	1
II.	Independent Auditor's Report	2 - 3
III.	Statements of Net Assets Available for Plan Benefits	4
IV.	Statements of Changes in Net Assets Available for Plan Benefits	5
V.	Notes to the Financial Statements	6 - 17
VI.	Required Supplemental Information:	
	- Schedule H, Line 4i - Schedule of Assets (Held at End of Year)	18 - 27

CONSIDINE & CONSIDINE
CERTIFIED PUBLIC ACCOUNTANTS

INDEPENDENT AUDITOR'S REPORT

To the Retirement Administrative Committee of
the Imaging Healthcare Specialists, LLC 401(k) Salary Savings Plan

Report on the Financial Statements

We were engaged to audit the accompanying financial statements of Imaging Healthcare Specialists, LLC 401(k) Salary Savings Plan which comprise the statements of net assets available for plan benefits as of December 31, 2016 and 2015, and the related statements of changes in net assets available for plan benefits for the years then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

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

Auditor's 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 section 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 City National Bank, the trustee of the Plan, except for comparing the information with the related information included in the financial statements and supplemental schedules. 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.

Emphasis of Matter

Department of Labor Rules and Regulations and generally accepted accounting principles require plan investments to be valued at fair value as of the end of the Plan year. As described in Note 5, investments totaling $0 and $13,396 (0% and 0.07% of net assets available for benefits, respectively) as of December 31, 2016 and 2015, have been valued at estimated fair value as determined by the Retirement Administrative Committee. Plan management does not have adequate procedures to properly value certain investments as of year end and therefore these investments may not be presented in compliance with Department of Labor Rules and Regulations or in conformity with generally accepted accounting principles. The effects on the financial statements and supplemental schedules of not applying adequate procedures to determine the fair value of these investments has not been determined. Our disclaimer of opinion is not modified with respect to this matter.

Other Matter

The supplemental schedule of assets (held at end of year) as of or for the year ended December 31, 2016 is required by the Department of Labor's 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 the supplemental schedule referred to above.

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.

Considine & Considine

CONSIDINE & CONSIDINE
An Accountancy Corporation

October 6, 2017

IMAGING HEALTHCARE SPECIALISTS, LLC 401(K) SALARY SAVINGS PLAN
STATEMENTS OF NET ASSETS AVAILABLE FOR PLAN BENEFITS
DECEMBER 31, 2016 AND 2015

	2016	2015
ASSETS		
INVESTMENTS AT FAIR VALUE		
Nonsegregated (Notes 4 and 6)	$ 14,996,034	$ 14,417,715
Segregated (Notes 4 and 6)	1,219,129	4,072,613
Segregated - Partnerships and Other Assets (Notes 4, 5 and 6)	-	22,969
	16,215,163	18,513,297
RECEIVABLES		
Employer Contributions	465,055	522,065
Notes Receivable from Participants (Note 4)	382,934	352,308
	847,989	874,373
TOTAL ASSETS	17,063,152	19,387,670
LIABILITIES	-	-
NET ASSETS AVAILABLE FOR PLAN BENEFITS	$ 17,063,152	$ 19,387,670

IMAGING HEALTHCARE SPECIALISTS, LLC 401(K) SALARY SAVINGS PLAN
STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
FOR THE YEARS ENDED DECEMBER 31, 2016 AND 2015

	2016	2015
ADDITIONS TO NET ASSETS ATTRIBUTED TO:		
INVESTMENT INCOME		
Net Appreciation /(Depreciation) in Fair Value of Investments (Notes 4 and 5)	$ 471,133	$ (896,533)
Interest and Dividends	592,160	1,130,698
Other Income	-	9,034
Investment Advisory Fees	(34,754)	(110,605)
	1,028,539	132,594
Interest Income on Notes Receivable from Participants (Note 4)	13,723	18,184
CONTRIBUTIONS		
Employee	874,331	955,926
Employer	409,968	522,065
Rollover	36,887	28,458
	1,321,186	1,506,449
TOTAL ADDITIONS	2,363,448	1,657,227
DEDUCTIONS FROM NET ASSETS ATTRIBUTED TO:		
Benefits Paid to Participants (Note 1)	4,655,913	23,463,484
Administration Fees	32,053	44,388
	4,687,966	23,507,872
NET DECREASE	(2,324,518)	(21,850,645)
NET ASSETS AVAILABLE FOR PLAN BENEFITS:		
BEGINNING OF YEAR	19,387,670	41,238,315
END OF YEAR	$ 17,063,152	$ 19,387,670

See Accompanying Notes

NOTE 1 DESCRIPTION OF PLAN

The following description of the Imaging Healthcare Specialists, LLC 401(k) Salary Savings 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 established and sponsored by Imaging Healthcare Specialists, LLC (the "Company"). The Plan was established on January 1, 1992 to enable eligible employees to share in the Company's earnings and permit employees to make pre-tax contributions to the Plan; thereby, providing employees with an opportunity to accumulate funds for their retirement. The Plan Trustee has the authority and responsibility for the management and investment of plan assets. The Plan is administered by the Plan's Retirement Administrative Committee. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA).

During April 2015, there was a Company ownership change that resulted in the Plan being amended ("2015 Plan Amendment") to remove two previously included commonly owned entities. Participant distributions from these entities are included in benefits paid to participants on the Statements of Changes in Net Assets Available for Benefits.

ELIGIBILITY

An employee is eligible to participate in the profit sharing portion of the Plan on the first day of the month, following the completion of 30 days from the date the employee first commenced his or her employment with the employer. A participant must be employed as of the last day of the Plan year in order to share in any contributions, unless termination was due to death, disability, or retirement.

An employee is eligible to participate in the employee elective deferral portion of the Plan on the first day of the month, following the completion of 30 days from the date the employee first commenced his or her employment with the employer.

An employee is not eligible to participate in the Plan if the employee is a member of a collective bargaining agreement with the Company or is a nonshareholder employee of Physician Radiology Medical Group, Inc.

NOTE 1 DESCRIPTION OF PLAN (Continued)

CONTRIBUTIONS

Contributions to the Plan are as follows:

1) Employee Contributions - Participants may elect to contribute up to 100% of compensation received from the Company for the portion of the Plan year in which the employee was a participant, subject to the Internal Revenue Service annual maximum limit of $18,000 ($24,000 for participants age 50 or older) in both 2016 and 2015.

2) Rollover Contributions - The Plan allows for participants in a former employer's qualified plan to contribute direct rollovers to this plan.

3) Non-elective Employer Contributions - Each year, as of the last day of the Plan year, discretionary contributions made by the Company will be allocated, as defined in the Plan, to eligible participants. This contribution is determined annually by the Company's Retirement Administrative Committee. Non-elective Employer Contributions totaled $409,968 and $522,065 for the years ended December 31, 2016 and 2015, respectively.

PARTICIPANT ACCOUNTS

Each participant's account is credited with the participant's contribution, an allocation of the Company's contributions, the Plan earnings or losses, and charged with an allocation of administrative expenses. Allocations are based on the participant's compensation or account balance, as defined in the Plan. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

NOTE 1 DESCRIPTION OF PLAN (Continued)

VESTING

Participants are 100% vested in their deferral contributions and rollover contributions. Non-elective employer contributions, including earnings, vest at the following rates:

Years of Service	% Vested
2 Years	20%
3 Years	40%
4 Years	60%
5 Years	80%
6 Years	100%

A participant is 100% vested in their employer contributions upon events such as death, permanent disability, or reaching normal retirement age.

NOTES RECEIVABLE FROM PARTICIPANTS

A participant may borrow from his/her 401(k) account. The loan is available only from the elective employee contributions. The amount of the loan may not exceed the lesser of $50,000 or one half of the participant's vested account balance. The loans are secured by the balance in the participant's account and bear an interest rate of 4.25% which is commensurate with similar loans from commercial lending institutions.

NOTE 1 DESCRIPTION OF PLAN (Continued)

PAYMENT OF BENEFITS

The Plan provides for benefits to be distributed in periodic installments, in a lump sum, or a combination thereof, or may be deferred to a later time. Participants are entitled to receive the full value of their vested benefits when they retire, die, or become permanently disabled. Participants who terminate employment for any other reason are entitled to the value of their vested interest.

Participants may withdraw any or all of their salary deferred account balances at any time during the Plan year provided certain hardship conditions, as defined in the Plan, have been met.

In the event of a mandatory distribution greater than $1,000, but no more than $5,000, in accordance with the payment provisions of the Plan, if the Participant does not elect to have such distributions paid directly to an eligible retirement plan specified by the Participant in a direct rollover or to receive the distribution directly under any form of payment allowed under the Plan, then the distribution will be paid in a direct rollover to an individual retirement plan designated by the plan administrator. Mandatory distributions of $1,000 or less will continue to be paid in cash as directed by the plan administrator, unless the Participant elects a direct rollover or elects to receive the distribution under another form permitted by the Plan.

ADMINISTRATIVE EXPENSES

Direct fees and expenses related to the operation of the Plan may be paid with forfeitures. Expenses not covered by forfeitures are paid from plan assets. Substantially all of the administrative expenses of the Plan were paid by the Plan for the years ended December 31, 2016 and 2015. Amounts totaling $32,053 and $44,388, were paid directly by the plan for fees and expenses relating to the operation of the Plan for the years ended December 31, 2016 and 2015, respectively.

FORFEITED ACCOUNTS

The Plan provides that forfeited amounts in participants' Company contribution accounts are used to reduce future contributions of the Company or pay administrative expenses at the discretion of the Retirement Administrative Committee. During 2016 and 2015, there were $52,878 and $55,087, respectively, of forfeitures used to reduce employer contributions. As of December 31, 2016 and 2015, there were $0 of unallocated forfeitures.

NOTE 1 DESCRIPTION OF PLAN (Continued)

INVESTMENT OPTIONS

All participants may segregate their funds or choose from the investment alternatives in the trust established by the Retirement Administrative Committee. There are no non-participant directed investments. All earnings and losses are credited directly to the participants' accounts.

NOTE 2 SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of Accounting - The accompanying financial statements have been prepared using the accrual method of accounting in conformity with accounting principles generally accepted in the United States of America (GAAP).

Estimates - The preparation of financial statements in conformity with GAAP requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities at the date of the financial statements and the reported amounts of revenue and expenses during the reporting period. Actual results could differ from those estimates.

Investment Valuation and Income Recognition - Investments are valued at current market value or estimated fair value as certified by the institution that holds the Plan's assets as an investment manager and are under the custody of the Plan's trustee. The limited partnership interests are valued using fair value and are not certified by the Plan's trustee. Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded on the accrual basis. Dividends are recorded on the ex-dividend date. Net appreciation includes the Plan's gains and losses on investments bought and sold as well as held during the year.

Fair Value Measurement - The Plan follows accounting standards consistent with the FASB codification which defines fair value, establishes a framework for measuring fair value and enhances disclosures about fair value measurements for all financial assets and liabilities.

Notes Receivable from Participants - Loans to participants are reported at their unpaid principal balances plus any accrued but unpaid interest.

Payment of Benefits - Benefits are recorded when paid.

Income Taxes - The pension plan is tax exempt under the Internal Revenue Code Section 401(A) and consequently pays no income tax.

NOTE 2 SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

The Plan obtained its latest determination letter on March 31, 2014, in which the Internal Revenue Service stated that the Plan, as then designed, was in compliance with the applicable requirements of the Internal Revenue Code. The Plan has been amended since receiving the determination letter. However, the Plan administrator and the Plan's tax counsel believe that the Plan is currently designed and being operated in compliance with the applicable requirements of the Internal Revenue Code. Therefore, no provision for income taxes has been included in the Plan's financial statements.

The Plan follows accounting standards for uncertainty in income taxes recognized in the Plan's financial statements and prescribes a recognition threshold and measurement attribute for the financial statement recognition and measurement of a tax position taken or expected to be taken in a tax return. It also provides guidance on derecognition and measurement of a tax position taken or to be taken in a tax return. As of December 31, 2016 and 2015, the Plan has not accrued interest or penalties related to uncertain tax positions. The Plan files tax returns in the U.S. Federal jurisdiction.

The Plan retrospectively adopted FASB ASU 2015-12, Plan Accounting: Defined Contribution Pension Plans (Topic 962): Part (I) Fully Benefit-Responsive Investment Contracts, Part (II) Plan Investment Disclosures, Part (III) Measurement Date Practical Expendient. This three-part standard simplifies employee benefit plan reporting with respect to fully benefit-responsive investment contracts and plan investment disclosures, and provides for a measurement-date practical expedient. Part I and II are effective for fiscal years beginning after december 15, 2015 and should be applied retrospectively, with early application permitted. Part III is effective for fiscal years beginning after December 15, 2015 and should be applied prospectively, with early application permitted.

Management has elected to adopt Part II. Accordingly, the amendments were retrospectively applied resulting in no material differences in these financial statements. Parts I and III are not applicable to this Plan.

NOTE 3 PLAN TERMINATION

Although it has not expressed any intent to do so, the Company has the right under the Plan to discontinue its contributions at any time and to terminate the Plan subject to the provisions of ERISA. In the event of plan termination, the rights of all employees to account balances accrued to the date of the termination are fully vested and non-forfeitable.

NOTE 4 INFORMATION PREPARED AND CERTIFIED BY THE TRUSTEE

The Company has obtained certification from City National Bank ("CNB"), the trustee of the Plan, that all of the information provided to the Company by CNB is complete and accurate. CNB certification applies to substantially all of the Plan's investment assets, transactions, and supplemental schedules. CNB reports such information primarily on the cash basis while the accompanying financial statements and supplemental schedules are presented on the accrual basis. Therefore, certain amounts reflected in the financial statements and supplemental schedules may differ from the information certified by CNB.

The December 31, 2016 and 2015 Statements of Net Assets Available for Plan Benefits, the investment activities included on the Statements of Changes in Net Assets Available for Benefits for the years ended December 31, 2016 and 2015, and the accompanying notes to the financial statements were prepared in part or entirely from information certified by CNB 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 following is information certified by CNB, which is included in the Statements of Net Assets Available for Benefits as of December 31, 2016 and 2015:

	2016	2015
Notes Receivable from Participants	$ 382,934	$ 352,308

	2016	2015
Investments at Fair Value:		
Mutual Funds	$ 14,068,039	$ 14,770,147
Equities	2,051,618	2,487,924
Cash and Cash Equivalents	95,506	1,232,257
Partnerships	-	22,969
	$ 16,215,163	$ 18,513,297

	2016	2015
Investment Income:		
Net Change in Fair Value of Investments	$ 466,590	$ (888,808)
Interest and Dividends	592,160	1,130,698
Interest on Notes Receivable from Participants	13,723	18,184
Other Income	-	9,034
Investment Fees	(34,754)	(110,605)
	$ 1,037,719	$ 158,503

NOTE 4 INFORMATION PREPARED AND CERTIFIED BY THE TRUSTEE (Continued)

During 2016 and 2015, the Plan's investments (including gains and losses on investments bought and sold, as well as held during the years) appreciated/(depreciated) in value as follows:

	2016	2015
Equities	$ 217,145	$ (149,497)
Partnerships	-	(14,006)
Mutual Funds	249,445	(724,323)
Corporate Obligations	-	(982)
	$ 466,590	$ (888,808)

NOTE 5 INVESTMENTS PREPARED AND UNCERTIFIED BY THE TRUSTEE

City National Bank attempts to determine the fair market value of certain segregated funds based on the tax basis of the interest. The following is a summary of the value of investments:

	Cost	Fair Value
Investments at Estimated Fair Value at December 31, 2016:		
Prime Steaks III, LLC	$ -	$ -

	Cost	Fair Value
Investments at Estimated Fair Value at December 31, 2015:		
Prime Steaks III, LLC	$ 50,000	$ 13,396

NOTE 5 INVESTMENTS PREPARED AND UNCERTIFIED BY THE TRUSTEE (Continued)

During the years ended December 31, 2016 and 2015, the Plan's uncertified investments (including investments bought, sold and held during the year) appreciated/(depreciated) in value as follows:

	2016	2015
Prime Steaks III, LLC	$ 4,543	$ (7,725)

NOTE 6 FAIR VALUE MEASUREMENT

The Plan follows the methods of fair value measurement to value its financial assets and liabilities. Fair value is based on 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. In order to increase consistency and comparability in fair value measurements, a fair value hierarchy that prioritizes observable and unobservable inputs used to measure fair value into three broad levels has been established, which are described below:

Level 1: Quoted prices (unadjusted) in active markets that are accessible at the measurement date for identical assets or liabilities. The fair value hierarchy gives the highest priority to Level 1 inputs.

Level 2: Observable inputs other than Level 1 prices such as quoted prices for similar assets or liabilities; quoted prices in inactive markets; or model-derived valuations in which all significant inputs are observable or can be derived principally from or corroborated with observable market data.

Level 3: Unobservable inputs are used when little or no market data is available. The fair value hierarchy gives the lowest priority to Level 3 inputs.

Mutual Funds, Equities, Publicly Traded Partnerships and Cash and Cash Equivalents: The shares are valued at quoted market prices in an exchange and active market, which represent the net asset values of shares held by the Plan at year end and are classified as Level 1 investments.

NOTE 6 FAIR VALUE MEASUREMENT (Continued)

Non-Publicly Traded Partnerships: These partnership investments are valued at estimated fair market value by the Plan's retirement administrative committee on an annual basis and are classified as Level 3 investments.

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

The following table presents the Plan's investments on the statement of net assets available for benefits measured at fair value on a recurring basis by level within the valuation hierarchy as of December 31, 2016:

	Level 1	Level 2	Level 3	Total
Assets				
Mutual Funds	$ 14,068,039	$ -	$ -	$ 14,068,039
Equities				
Common Stocks	2,033,743	-	-	2,033,743
REIT	17,875	-	-	17,875
Cash and Cash Equivalents	95,506	-	-	95,506
	$ 16,215,163	$ -	$ -	$ 16,215,163

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

	Partnerships
Balance at December 31, 2015	$ 13,396
Gains or Losses (Realized/Unrealized) Included in Earnings	4,543
Purchases	-
Issuances	-
Settlements	(17,939)
Transfers In/Out of Level 3	-
Balance at December 31, 2016	$ -

NOTE 6 FAIR VALUE MEASUREMENT (Continued)

The following table presents the Plan's investments on the statement of net assets available for benefits measured at fair value on a recurring basis by level within the valuation hierarchy as of December 31, 2015:

	Level 1	Level 2	Level 3	Total
Assets				
Mutual Funds	$ 14,770,147	$ -	$ -	$ 14,770,147
Equities				
Common Stocks	2,399,108	-	-	2,399,108
REIT	88,816	-	-	88,816
Cash and Cash Equivalents	1,232,257	-	-	1,232,257
Partnerships	9,573	-	13,396	22,969
	$ 18,499,901	$ -	$ 13,396	$ 18,513,297

The following sets forth a summary of changes in the fair value of the Plan's partnership investments classified within Level 3 for the year ended December 31, 2015:

	Partnerships
Balance at December 31, 2014	$ 21,121
Gains or Losses (Realized/Unrealized) Included in Earnings	(7,725)
Purchases	-
Issuances	-
Settlements	-
Transfers In/Out of Level 3	-
Balance at December 31, 2015	$ 13,396

NOTE 7 RISKS AND UNCERTAINTIES

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

NOTE 8 PARTY-IN-INTEREST TRANSACTIONS

Certain Plan investments are managed by the trustee, City National Bank, which qualifies these transactions as party-in-interest transactions. Administrative fees incurred by the Plan to City National Bank totaled $66,807 and $43,754 for the years ended December 31, 2016 and 2015, respectively. The Company also pays certain administrative fees of the Plan, which are not reimbursed. In addition the Company provides administrative services to the Plan at no cost to the Plan.

NOTE 9 RECONCILIATION OF FINANCIAL STATEMENTS TO FORM 5500

The following is a reconciliation of net assets available for benefits per the financial statements for the year December 31, 2016 and 2015 to Form 5500:

	2016	2015
Net Assets Available for Plan Benefits per Financial Statements	$ 17,063,152	$ 19,387,670
Employer Contributions Receivable	-	(55,087)
Other assets	-	(2,025)
Net Assets Available for Plan Benefits per Form 5500	$ 17,063,152	$ 19,330,558

	2016	2015
Changes in Net Assets Available for Plan Benefits Per Financial Statements	$ (2,324,518)	$ (21,850,645)
Employer Contributions Receivable	55,087	(55,087)
Other Income	2,025	(2,025)
Changes in Net Assets Available for Plan Benefits per Form 5500	$ (2,267,406)	$ (21,907,757)

NOTE 10 SUBSEQUENT EVENTS

The Company has evaluated subsequent events through October 6, 2017, the date which the financial statements were available to be issued. There were no material subsequent events which affected the amounts or disclosures in the financial statements.

IMAGING HEALTHCARE SPECIALISTS, LLC 401(K) SALARY SAVINGS PLAN
REQUIRED SUPPLEMENTAL INFORMATION
SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)
DECEMBER 31, 2016

Plan Sponsor's EIN: 20-3872122
Plan Number: 003

(a)	(b) Identity of issuer, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par or maturity value	(d) Cost	(e) Current Value
	Vanguard Interm Term Invst Grade Admiral	Mutual Fund	**	$ 1,218,861
	Dreyfus S&P 500 Index	Mutual Fund	**	1,200,175
*	City Natl Rochdale Gov Mm-Sv	Mutual Fund	**	1,032,762
	William Blair Small Mid Cap G I	Mutual Fund	**	773,966
	American Balanced Fund Cl R-4 Shs	Mutual Fund	**	664,518
	Prudential Total Ret Bond-Z	Mutual Fund	**	633,885
*	City National Rochdale Government Bond Fund Svc	Mutual Fund	**	484,442
	Fidelity Advisor Freedom 2045 A	Mutual Fund	**	480,190
	Columbia Contrarian Core Z	Mutual Fund	**	479,895
	Fidelity Adv H/I Advant A	Mutual Fund	**	451,445
	Dreyfus Midcap Index Fund Inv	Mutual Fund	**	443,419
	Fidelity Adv Freedom 2040-A	Mutual Fund	**	410,183
	T Rowe Price Blue Chip Adv	Mutual Fund	**	365,578
	Eagle Small Cap Growth A	Mutual Fund	**	351,128
	Janus Enterprise Fund	Mutual Fund	**	348,974
	John Hancock III Discpln V A	Mutual Fund	**	326,758
	Amer Funds Europac R4	Mutual Fund	**	318,859
	Fidelity Adv Freedom 2030-A	Mutual Fund	**	303,665
	Templeton Global Bond A	Mutual Fund	**	286,419
	Natixis Loomis Say Growth-Y	Mutual Fund	**	283,136
	Fidelity Advisor Freedom 2050 A	Mutual Fund	**	252,485
	Fidelity Advisor Freedom 2020 A	Mutual Fund	**	239,435

IMAGING HEALTHCARE SPECIALISTS, LLC 401(K) SALARY SAVINGS PLAN
REQUIRED SUPPLEMENTAL INFORMATION
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DECEMBER 31, 2016

Plan Sponsor's EIN: 20-3872122
Plan Number: 003

(a)	(b) Identity of issuer, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par or maturity value	(d) Cost	(e) Current Value
	Fidelity Adv Freedom 2025-A	Mutual Fund	**	233,664
	Fidelity Adv Freedom 2035-A	Mutual Fund	**	231,180
	Columbia Acorn International Fund Z	Mutual Fund	**	212,881
	Harbor Intl Growth	Mutual Fund	**	212,379
	Delaware Small Cap Value A	Mutual Fund	**	210,618
	Deutsche Real Estate Securities Fund-A	Mutual Fund	**	203,888
*	City National Rochdale Fixed Income Opportunities Fund Cl N	Mutual Fund	**	152,634
	Wilmington U.S. Government Money Market Fund Select Shs	Mutual Fund	**	151,687
	Fidelity Adv Tech A	Mutual Fund	**	130,172
	Dreyfus Sm Cap Stk Indx Fund Inv	Mutual Fund	**	128,489
	American New World Fund-R4	Mutual Fund	**	126,567
	Cty Natl Rochdale Corp Bd-Sv	Mutual Fund	**	119,257
	Fidelity Adv Freedom 2015-A	Mutual Fund	**	106,844
	Davis NY Venture A	Mutual Fund	**	103,267
*	City National Rochdale Prime Money Market Fund	Money Market	**	94,676
	Fidelity Advisor Freedom 2055 Fund A	Mutual Fund	**	84,934
*	City Natl Rochdale Em Mkt-Y	Mutual Fund	**	83,030
	Apple Inc	Common Stock	**	75,515
	Alphabet Inc CL A	Common Stock	**	62,604
	JPMorgan Chase & Co	Common Stock	**	50,480
	Tweedy Browne Global Value	Mutual Fund	**	48,289
	Microsoft Corporation	Common Stock	**	48,159

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REQUIRED SUPPLEMENTAL INFORMATION
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DECEMBER 31, 2016

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(a)	(b) Identity of issuer, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par or maturity value	(d) Cost	(e) Current Value
	Columbia Mid Cap Value Z	Mutual Fund	**	45,495
	Comcast Corp Cl A	Common Stock	**	39,359
	Home Depot Incorporated	Common Stock	**	38,883
	Citigroup Inc	Common Stock	**	37,381
	Vanguard High Yield Corp Admiral	Mutual Fund	**	35,245
	Amazon Com Inc	Common Stock	**	32,994
	Copart Inc	Common Stock	**	32,526
	Kar Auction Services Inc	Common Stock	**	31,965
	Heico Corp New Cl A	Common Stock	**	31,302
	Bank Of America Corp	Common Stock	**	29,946
	Ingredion Inc	Common Stock	**	29,616
	Chevron Corp	Common Stock	**	29,425
	RBC Bearings Inc	Common Stock	**	28,678
	Idex Corp	Common Stock	**	28,189
	Facebook Inc-A	Common Stock	**	28,187
	Celgene Corp	Common Stock	**	28,012
	Ugi Corp New	Common Stock	**	27,510
	Visa Inc Class A Shares	Common Stock	**	26,917
	American International Group	Common Stock	**	26,124
	Touchstone Small Cap Fund Y	Mutual Fund	**	25,728
	Exxon-Mobil Corporation	Common Stock	**	25,724
	Disney Walt Co	Common Stock	**	23,971

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REQUIRED SUPPLEMENTAL INFORMATION
SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)
DECEMBER 31, 2016

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(a)	(b) Identity of issuer, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par or maturity value	(d) Cost	(e) Current Value
	Woodward Inc	Common Stock	**	23,132
	Clean Harbors Inc	Common Stock	**	22,650
	Honeywell International	Common Stock	**	22,591
	Cardtronics PLC CL A	Common Stock	**	21,828
	Entegris Inc	Common Stock	**	21,283
	Davis Financial A	Mutual Fund	**	21,086
	Vanguard Reit ETF	Mutual Fund	**	21,045
	Schlumberger Ltd	Common Stock	**	20,568
	At&t Inc	Common Stock	**	20,202
	Graco Inc	Common Stock	**	19,942
	Vanguard Glbl Ex-Us Real Est	Mutual Fund	**	19,332
	Esterline Technologies	Common Stock	**	18,821
	Teledyne Inc	Common Stock	**	18,696
	Cisco Systems Inc	Common Stock	**	18,434
	Simpson Mfg. Co. Inc.	Common Stock	**	17,456
	Anadarko Pete Corp.	Common Stock	**	17,084
	Raytheon Co	Common Stock	**	17,040
	Adobe Systems Inc.	Common Stock	**	16,987
	Power Integrations	Common Stock	**	16,895
	Charter Communications New Cl A	Common Stock	**	16,699
	Eli Lilly & Company	Common Stock	**	16,549
	Helen Of Troy Corp Ltd	Common Stock	**	16,299

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REQUIRED SUPPLEMENTAL INFORMATION
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DECEMBER 31, 2016

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(a)	(b) Identity of issuer, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par or maturity value	(d) Cost	(e) Current Value
	Thermo Fisher Scientific Inc	Common Stock	**	16,227
	Prudential Finl Inc	Common Stock	**	16,129
	Canadian Natural Resources	Common Stock	**	15,940
	Morgan Stanley	Common Stock	**	15,844
	Gilead Sciences Inc	Common Stock	**	15,754
	American Water Works Co Inc	Common Stock	**	15,557
	Starbucks Corp.	Common Stock	**	15,268
	Abbvie Inc	Common Stock	**	15,029
	Dorman Products Inc	Common Stock	**	14,831
	Norfolk Southern Co.	Common Stock	**	14,589
	Mastercard Inc A	Common Stock	**	14,455
	Unitedhealth Group Inc	Common Stock	**	14,404
	Whitewave Foods Co - A (acquired 04/12/17)	Common Stock	**	14,400
	Goldman Sachs Group Inc	Common Stock	**	14,367
	Dow Chemical Corp	Common Stock	**	14,305
	Emergent Biosolutions Inc	Common Stock	**	14,154
	Covanta Holding Corp	Common Stock	**	14,071
	Legacy Texas Financial Group	Common Stock	**	13,908
	CVS Health Corp	Common Stock	**	13,809
	Verizon Communications	Common Stock	**	13,505
	Rli Corp.	Common Stock	**	13,447
	US Bancorp - Del	Common Stock	**	13,356

IMAGING HEALTHCARE SPECIALISTS, LLC 401(K) SALARY SAVINGS PLAN
REQUIRED SUPPLEMENTAL INFORMATION
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DECEMBER 31, 2016

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(a)	(b) Identity of issuer, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par or maturity value	(d) Cost	(e) Current Value
	Cognex Corp	Common Stock	**	13,297
	Marsh & Mclennan Inc.	Common Stock	**	13,180
	Csx Corp	Common Stock	**	13,114
	Kaman Corp Cl A	Common Stock	**	13,064
	Federal Express Corp	Common Stock	**	13,034
	Hexcel Corp New	Common Stock	**	12,860
	Danaher Corp Del	Common Stock	**	12,454
	Boeing Company	Common Stock	**	12,454
	Wabtec	Common Stock	**	12,453
	Cabot Corp	Common Stock	**	12,079
	Union Pacific Corp.	Common Stock	**	11,923
	Waste Connections Inc	Common Stock	**	11,789
	Sensient Tech Corp	Common Stock	**	11,708
	Pdf Solutions Inc	Common Stock	**	11,568
	HCA Healthcare Inc	Common Stock	**	11,473
	Alibaba Group Holding-Sp ADR	Common Stock	**	11,415
	General Electric Co	Common Stock	**	11,218
	Johnson & Johnson	Common Stock	**	10,945
	Magna Int'l Inc.	Common Stock	**	10,850
	Mid America Apt Community	Common Stock	**	10,477
	FBC Financial Holdings-Cl A	Common Stock	**	10,399
	Analogic Corp	Common Stock	**	9,456

IMAGING HEALTHCARE SPECIALISTS, LLC 401(K) SALARY SAVINGS PLAN
REQUIRED SUPPLEMENTAL INFORMATION
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DECEMBER 31, 2016

Plan Sponsor's EIN: 20-3872122
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(a)	(b) Identity of issuer, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par or maturity value	(d) Cost	(e) Current Value
	Time Warner Inc	Common Stock	**	9,170
	Colgate-Palmolive	Common Stock	**	9,162
	Pg&e Corp	Common Stock	**	9,116
	Ishares Core S&P Mid-Cap ETF	Mutual Fund	**	9,094
	Textron Inc	Common Stock	**	8,984
	Cabot Microelectronics	Common Stock	**	8,970
	Halliburton Company	Common Stock	**	8,654
	United Community Banks/GA	Common Stock	**	8,649
	Halozyme Therapeutics Inc	Common Stock	**	8,625
	Bristol-Myers Squibb Co	Common Stock	**	8,474
	Boston Scientific	Common Stock	**	8,436
	NXP Semiconductors Nv	Common Stock	**	8,331
	Synchrony Financial	Common Stock	**	8,161
	Altria Group Inc	Common Stock	**	8,114
	Zoetis Inc	Common Stock	**	8,030
	Stanley Black and Decker Inc	Common Stock	**	8,028
	Costco Wholesale Corp-New	Common Stock	**	8,006
	Mohawk Ind	Common Stock	**	7,987
	Martin Marietta Materials	Common Stock	**	7,975
	Salesforce.Com Inc	Common Stock	**	7,873
	Chemical Financial Corp	Common Stock	**	7,855
	Pepsico Inc	Common Stock	**	7,847

IMAGING HEALTHCARE SPECIALISTS, LLC 401(K) SALARY SAVINGS PLAN
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DECEMBER 31, 2016

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(a)	(b) Identity of issuer, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par or maturity value	(d) Cost	(e) Current Value
	Pfizer Incorporated	Common Stock	**	7,633
	Advance Auto Parts Inc	Common Stock	**	7,610
	American Tower REIT Inc	Common Stock	**	7,398
	Pulte Group Inc	Common Stock	**	7,352
	Minerals Technologies	Common Stock	**	7,184
	Procter & Gamble Co	Common Stock	**	7,147
	Electronic Arts	Common Stock	**	7,088
	Southern Company	Common Stock	**	6,641
	Paypal Holdings Inc	Common Stock	**	6,513
	Genesco Inc	Common Stock	**	6,396
	Azz Inc	Common Stock	**	6,390
	Thermon Group Holdings Inc	Common Stock	**	6,242
	Cerner Corp	Common Stock	**	6,158
	Keyw Holding Corp/The	Common Stock	**	5,812
	T-Mobile US Inc	Common Stock	**	5,176
	Northrop Grumman Corp	Common Stock	**	4,652
	WestRock	Common Stock	**	4,569
	Omnicell Inc	Common Stock	**	3,729
	Principal Cash	Money Market	**	830
	Fidelity Advisor Freedom 2060 A	Mutual Fund	**	747
	Fidelity Adv Freedom Income A	Mutual Fund	**	308
	PrairieSky Royalty Ltd	Common Stock	**	190

IMAGING HEALTHCARE SPECIALISTS, LLC 401(K) SALARY SAVINGS PLAN
REQUIRED SUPPLEMENTAL INFORMATION
SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)
DECEMBER 31, 2016

Plan Sponsor's EIN: 20-3872122
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(a)	(b) Identity of issuer, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par or maturity value	(d) Cost	(e) Current Value
	AdvanSix Inc	Common Stock	**	111
	Fidelity Adv Freedom 2005-A	Mutual Fund	**	1
				$ 16,215,163

* Indicates an identified person known to be a party-in-interest to the Plan.
** Cost has been omitted as investment is participant directed.

IMAGING HEALTHCARE SPECIALISTS, LLC 401(K) SALARY SAVINGS PLAN
REQUIRED SUPPLEMENTAL INFORMATION
SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)
DECEMBER 31, 2016

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(a)	(b) Identity of issue, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par or maturity value	(d) Cost	(e) Current Value
*	Notes Receivable from Participants	Various Maturity Dates Interest rates 4.25%	$ -	$ 382,934

* Indicates an identified person known to be a party-in-interest to the Plan.



IMAGING HEALTHCARE SPECIALISTS 401(K) SALARY SAVINGS PLAN
150 W WASHINGTON ST
SAN DIEGO CA 92103-2005

TD Ameritrade
Institutional

January 10, 2017

Dear Plan Sponsor,

Re: 2016 Supplemental Form 5500 Schedule C

As part of our ongoing effort to assist you in efficiently offering TD Ameritrade brokerage to your plan participants, we are enclosing the "Supplemental Form 5500 Schedule C" for your plan.

This information represents year-end fee disclosure information for your plan's brokerage assets held at TD Ameritrade for plan year 2016, or for the portion of 2016 that TD Ameritrade provided services to your plan.

The enclosed Schedule C summarizes the compensation paid to TD Ameritrade for services related to the self-directed brokerage accounts in your plan. Amounts paid from the plan may be reportable on the plan's annual Form 5500, Schedule C. Please refer to the instructions for Form 5500, Schedule C, to determine whether your plan is required to file the form and for additional details of what should be reported.

We appreciate the opportunity to provide brokerage services to your plan. If you have any questions or need additional information, please contact our Partner Services team at 866-423-2683, or PartnerServices@tdameritrade.com. The team is available to assist you from 9 am to 5:30 pm ET, Monday through Friday (excluding market holidays).

Sincerely,

John V. Tovar
Managing Director, Brokerage Services
TD Ameritrade Institutional

Have comments, feedback or suggestions?

Visit: www.research.net/r/SDPSReportSurvey

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TD Ameritrade Institutional

Supplemental Form 5500 Information

Plan Name: IMAGING HEALTHCARE SPECIALISTS 401(K) SALARY SAVINGS PLAN
Plan ID: 731IMH

Reporting Period: 1/1/2016 through 12/31/2016

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TABLE OF CONTENTS

I. SCHEDULE C

FORM 5500, SCHEDULE C

	PLAN YEAR START DATE	PLAN YEAR END DATE
For	**1/1/2016**	**12/31/2016**

This information summarizes the compensation paid to TD Ameritrade for services related to the self-directed brokerage accounts in your plan. Information provided is for the period shown above or for the portion of the plan year that TD Ameritrade provided services for your plan. Amounts paid from the plan may be reportable on the plan's annual Form 5500, Schedule C, if applicable. Please refer to the instructions for Form 5500, Schedule C to determine if your plan is required to file the form and for more details of what should be reported.

Direct Compensation

1. COMMISSIONS	89.91	
2. MISC FEES	800.00	
3. TRANSFER FEES	0.00	
4. TOTAL DIRECT COMPENSATION		**889.91**

Indirect Compensation

Mutual Fund Revenue

If a participant invests in one or more mutual funds, the following information applies to those investments. TD Ameritrade receives fees for marketing and distribution, recordkeeping, subaccounting, sub-transfer agency, and/or shareholder servicing services with respect to mutual funds in which the plan invests. These fees may be paid by the fund, by the fund's distributor, transfer agent, administrator, or investment advisor (Fund Affiliate), by a third-party fund service provider, or by a combination of them, pursuant to TD Ameritrade, Inc.'s and/or TD Ameritrade Clearing, Inc.'s agreement with the particular fund, Fund Affiliate, and/or by a by a third-party fund service provider.

The amount of these fees may vary among mutual fund groups, and some mutual funds and Fund Affiliates do not make some or any of these payments available. The maximum amount of marketing and distribution fees that maybe paid to TD Ameritrade depends on the class of shares held by the plan but will not exceed the annual rate of 1.00% of the value of the plan's shares. Typically, shares held by a plan are subject to distribution and/or shareholder servicing fees that will not exceed the annual rate of 0.25% to 0.40%. Fees paid to TD Ameritrade for TD Ameritrade, Inc. and TD Ameritrade Clearing, Inc.'s subaccounting, sub-transfer agency, or similar recordkeeping services may be based on the number of plan accounts (and range from $3.00 to $19.00 per account) or on the assets in the plan accounts (and range from an annual rate of 0.10% to 0.45%), depending on the agreement with the particular fund or Fund Affiliate. Funds may also be subject to a monthly minimum service fee payable to TD Ameritrade, Inc. of $300.

To the extent that fees for marketing and distribution, recordkeeping, subaccounting, sub-transfer agency, and/or shareholder servicing services are paid out of fund assets, they are included in the fund's annual expense ratio and are indirectly borne by the fund's shareholders. For more information regarding such payments made by a particular mutual fund or its Fund Affiliate and details on the particular services to which the payments relate, please go to the fund's website and review its prospectus and statement of additional information or request a copy of these documents from the fund.

In addition to fees paid from fund assets, TD Ameritrade may receive fees for these services from Fund Affiliates and/or third-party fund service providers. These fees may be paid out of the resources of the Fund Affiliate. This compensation may be at different annual rates up to a generally maximum annual rate of 0.15% on plan assets invested in the fund.

Fees paid by a mutual fund, Fund Affiliate, and/or third-party fund service provider are paid through TD Ameritrade Clearing, Inc., who collects these fees on behalf of TD Ameritrade, Inc.

Payment for Order-Flow. TD Ameritrade Clearing, Inc. receives, and shares with TD Ameritrade, payment for order flow some market centers. This involves a payment to TD Ameritrade for routing orders to that exchange or market maker. This payment is used to offset costs of doing business and ultimately helps to reduce the overall cost to our clients. The amount of order-flow payments received by TD Ameritrade currently range from approximately $.0005 to $.0040 per share, and $.40 to $.50 per option contract (each prior to offset from charges paid for removal of market liquidity). These amounts are received and paid pursuant to contractual arrangements with the market centers.

Deposit and Savings Account Fees. Under its agreement with TD Bank and TD Bank USA, TD Ameritrade, Inc,. and TD Ameritrade clearing, Inc received from TD Bank USA a fee for marketing and related recordkeeping services in connection with the IDA and Savings. The fee is derived by applying a formula, which results in the fee varying from month to month depending on the interest rate and other market conditions. For example, the marketing fee is generally less in a low interest environment. The rate of the fee may exceed the interest rate or effective yield the depositors receive from the deposit accounts. TD Ameritrade Clearing, Inc. retains 40% of the fee payable to TD Ameritrade Clearing, Inc. and TD Ameritrade, Inc for clearing services and remits the remaining 60% to TD Ameritrade, Inc. Further information regarding the IDA is available in your client agreement.

Sweep Vehicle Fees. If a plan fiduciary selects a TD Assets Management USA Funds, Inc. (TDAM), an affiliated money market fund as a sweep vehicle, or if a participant chooses to invest in a fund within TDAM, the following information is applicable. Pursuant to certain agreements by and among TDAM, its distributor, SEI Investments Distribution Co., TD Ameritrade Clearing, Inc. and TD Ameritrade, Inc., fee payments of up to an aggregate of approximately 80bps are paid by TDAM or its distributor to TD Ameritrade Inc. and TD Ameritrade Clearing, Inc. for sweep, subdistribution, shareholder services, subtransfer agency, recordkeeping, and administrative services. TDAM is managed by TDAM USA, Inc., an affiliate of TD Ameritrade, Inc. and TD Ameritrade Clearing Inc. The amount paid to TD Ameritrade, Inc. and TD Ameritrade Clearing Inc. includes 12b-1 fees, absent the voluntary waivers of such fees that are currently in place, and is calculated on net assets of TDAM distributed through TD Ameritrade, Inc. and TD Ameritrade Clearing Inc. TD Ameritrade, Inc. receives and retains the shareholder servicing fees. TD Ameritrade Clearing, Inc. receives and retains the subtransfer agency fees. TD Ameritrade Clearing Inc. receives the 12b-1 fees, to the extent they have not been waived as noted above, and remits them to TD Ameritrade, Inc.

Proceeds of Corrective Transactions. TD Ameritrade receives investment instructions from participants or fiduciaries, such as an investment advisor, of the plan. Although rare, occasional errors in the instructions themselves or the processing of instructions may occur. The causes of such errors may include, but are not necessarily limited to, entry of an erroneous trade ("buy" vs. "sell," or vice versa), dollar amount, or number of shares, incorrect identification of the security, duplication of orders (i.e., instruction entered more than once), or untimely transmittal of instructions.

When an error is discovered, action is taken to correct the transaction in a manner intended to avoid or minimize harm or disruption to the plan. This generally includes processing corrective transactions through a “trade error account” maintained by TD Ameritrade, apart from the plan’s account, for TD Ameritrade individually (in-house account) or on behalf of an investment advisor. In addition, when requested by a plan representative, TD Ameritrade may communicate with the broker-dealer and attempt to cancel a trade through similar corrective transactions.

Because the price of an affected security may change between the time of processing the erroneous instruction or transaction and the execution of corrective transactions, a gain or loss may occur in the TD Ameritrade trade error account. For example, in the case of a sell order that is corrected to a price lower than the original intended transaction, or a purchase order corrected at a higher price, the corrective transaction may result in a loss. If, on the other hand, the sell order is corrected to a price higher than the original intended transaction, or the purchase order corrected at a lower price, the corrective transaction may result in a gain.

Important 2016 Form 5500 Schedule C Disclosures

April 2017

Matrix Trust's Role in Assisting Plan Sponsors in Completing Schedule C
Plan sponsors are responsible for completing the annual Form 5500 filing and are tasked with identifying and reviewing the reportable Schedule C compensation paid to plan service providers. The information in this communication is being provided to help in the completion of Schedule C for the Form 5500 filing for the 2016 plan year (which would be filed during 2017).

It is important for TPAs and plan sponsors to understand that Matrix Trust Company ("Matrix Trust") can only provide information related to its compensation as a service provider. Matrix Trust can provide activity related to payments made to other service providers only to the extent that the compensation flows through either the trust or a fund service fee account. Investment product disclosures, annual reports and prospectuses (as applicable) should be reviewed for other components of reportable compensation under Schedule C.

Where compensation can be classified as Eligible Indirect Compensation (EIC), Matrix Trust has provided the appropriate disclosures in this document rather than a set dollar amount for each plan, as permitted under guidance issued by the U.S. Department of Labor.

Reporting Requirements
Plan sponsors of retirement plans with over 100 participants must identify persons who indirectly or directly received $5,000 in compensation during the plan year for services rendered to the plan on Schedule C of Form 5500.

Direct Compensation
Direct compensation paid to Matrix Trust by your plan is reported on your account statement or other reports provided by Matrix Trust, for example, a check register. These reports enable you to determine payments made directly from plan assets.

Indirect Compensation
Matrix Trust or an affiliate may have received indirect compensation from sources other than your plan during the past calendar year. Matrix Trust is providing a description of the formula used to calculate or determine indirect compensation so that you can report this compensation as "Eligible Indirect Compensation" paid to Matrix Trust or an affiliate on Schedule C of the Form 5500 for its 2016 plan year, if compensation paid meets the reporting thresholds.

Indirect Compensation may include:

- Fees and expense reimbursement payments from mutual funds, collective investment funds, insurance company pooled separate accounts, and other separately managed accounts in which the fees charged against the fund or account are reflected in the value of the plan's investment (such as sub-transfer agent fees, shareholder servicing fees, and 12b-1 fees);
- Finder's Fees;
- Float revenue;
- Brokerage Commissions

Please see the "Fund Service Fee Collection" section for additional information.

"Float" Earnings
Non-interest bearing general or omnibus accounts are maintained at M&T Bank and JP Morgan Chase, N.A., in order to facilitate transactions of retirement plans. Matrix Trust may receive earnings for the period that the funds are held in these accounts. The earnings credited on these amounts are known as "float". The rate at which Matrix Trust earn float

over the time periods described above is generally comparable to the effective Federal Funds Rate as reported in the Wall Street Journal over the applicable time frame. This compensation varies, but a reasonable estimate based on a blend of rates is from 0.50% to 0.75%.

Float earnings are eligible indirect compensation for Schedule C of Form 5500 purposes and indirect compensation under ERISA Section 408(b)(2). Information with respect to the determination of float earnings is incorporated on page 3 of this document.

Fund Service Fee Collection

Depending on your plan's investments during the year, Matrix Trust or MSCS Financial Services Division of Broadridge Business Process Outsourcing, LLC ("**MSCS Financial**"), an affiliate of Matrix Trust, may facilitate the collection of revenue sharing or other administrative or service payments available from mutual funds or collective investment funds, to the extent any such fees are applicable (the "Fees"). The actual dollar amount of the Fees depends upon each fund's revenue sharing or commission recapture program. The amount of the Fees is typically based upon the aggregate net asset value of the funds held by your plan. The amount of available revenue sharing is subject to change at the discretion of the mutual fund company or collective investment fund sponsor.

If applicable, the Fees are reported on your plan's related fund service fee account statement. In addition, payments to parties other than MSCS Financial or Matrix Trust from the related fund service fee account statement may be reportable as direct or indirect compensation paid to those parties.

Additional Potential Indirect Compensation Related to Certain Brokerage Accounts

Where you and/or your authorized representative(s) have a pre-existing TD Ameritrade Brokerage Account and/or directed Matrix Trust to establish a TD Ameritrade Brokerage Account, after April 11, 2015, TD Ameritrade pays to Matrix Trust indirect compensation for certain services rendered by Matrix Trust, including account reconciliation services, account set-up and maintenance, related money movement of cash between the plan core accounts and brokerage firm for contribution and disbursement activity and the performance of related administrative tasks. For these services, Matrix Trust receives quarterly, in arrears, an amount equal to 1.5 basis points of the value of plan assets in TD Ameritrade brokerage account(s) during such quarter, based on the average of the plan assets held in the brokerage account(s) on the last business day of each month in the applicable quarter.

Completing Schedule C

You will need the following information to complete Schedule C:

Matrix Trust Company (Matrix Trust) 717 17th Street, Suite 1300 Denver CO 80202 Employer Identification Number: 75-3182674	MSCS Financial Services Division of Broadridge Business Process Outsourcing, LLC 717 17th Street, Suite 1300 Denver CO 80202 Employer Identification Number: 33-1151291

For **Direct Compensation**, you will be required to provide the Matrix Trust address or Employer Identification Number.

For Indirect Compensation, Matrix Trust provided you with a formula so that you can report this arrangement as **Eligible Indirect Compensation**, and you will be required to enter the MSCS Financial and Matrix Trust names and Employer Identification Numbers or addresses.

If you have any questions regarding this information, please contact your Matrix Trust Relationship Manager.

These materials and any attachments do not constitute tax or legal advice. The recipient is encouraged to consult with an attorney or tax professional and not rely on these materials as tax advice or attempt to apply them to specific situations.

MATRIX TRUST
FLOAT DISCLOSURE FOR EMPLOYEE BENEFIT PLANS

I. ADDITIONAL COMPENSATION ATTRIBUTABLE TO FLOAT

Matrix Trust Company ("Matrix Trust) may derive compensation from the use of cash held on behalf of client plans pending investment, distribution or other processing. This compensation is referred to as "float." The disclosures contained in the following paragraphs have been prepared in accordance with U.S. Department of Labor guidance contained in Field Assistance Bulletin 2002-3 concerning service provider float disclosure obligations to employee benefit plan customers.

In connection with Matrix Trust's provision of services to plan customers, Matrix Trust maintains various banking arrangements to facilitate movements of cash as necessary to process plan customer transactions, including arrangements with one or more banks. Under these arrangements, cash may be held in general or "omnibus" bank accounts established by or at the direction of Matrix Trust, pending investment, trade settlement, or the presentment of distribution checks for payment. These accounts generate float earnings for Matrix Trust. The proportionate share of those earnings attributable to the funds of a particular plan constitutes compensation that is paid by the plan and retained by Matrix Trust in connection with Matrix Trust's services and is in addition to any other fees or compensation payable under the service arrangement.

As of the date of this disclosure, M&T Bank, provides all of the banking arrangements described above with the exception of certain disbursement account arrangements provided by JP Morgan Chase, N.A. Both M&T Bank and JP Morgan Chase, N.A. are unaffiliated institutions to Matrix Trust.

The paragraphs below describe the specific circumstances under which float will be earned and retained, the time frames applicable to float earnings periods, and a general description of the rate of float earnings.

II. CIRCUMSTANCES AND TIME FRAMES DURING WHICH FLOAT MAY BE EARNED

1. Contributions

Plans direct cash contributions to Matrix Trust through a demand deposit account Matrix Trust maintains for that purpose. Matrix Trust credits the amount of a plan's cash contribution to the plan's Matrix Trust account ("Client Account") on the business day it is received. If the Client Account uses a cash sweep, the cash contribution is swept from the demand deposit account and invested on the plan's behalf on the next business day. Matrix Trust earns float on the cash contribution between the business day of deposit and the next business day. A "business day" is a day on which the New York Stock Exchange is open for business.

If a Client Account does not use a cash sweep, Matrix Trust earns float on the cash contribution from the business day of deposit until Matrix Trust receives investment instructions from the plan and the investment transaction settles. Upon Matrix Trust's receipt of investment instructions in good order, settlement of mutual fund trades generally occurs within one business day and settlement of individual securities trades (i.e. stocks and bonds) generally occurs within three business days.

2. Purchases of Securities for the Client Account

When Matrix Trust receives instructions, in good order and in accordance with prescribed procedures, to purchase a security for a Client Account, Matrix Trust places the purchase trade order that same business day if the instructions are received prior to Matrix Trust trading cut-off times. If instructions are received after the Matrix Trust trading cut-off times, the purchase trade order is placed on the next business day.

When Matrix Trust settles a purchase trade order for a Client Account, Client Account assets required to pay for the purchase are transferred to a demand deposit account maintained by Matrix Trust on the trade settlement date. When a purchase trade order is cancelled or rejected, the funds previously set aside to pay for the purchase are re-credited to the Client Account and either invested through the cash sweep, if applicable, or retained in the deposit account pending other investment instructions, as described above.

3. Sales of Securities for the Client Account

When Matrix Trust receives instructions, in good order and in accordance with prescribed procedures, to sell a security for a Client Account, Matrix Trust places the sale trade order that same business day if the instructions are received prior to Matrix Trust trading cut-off times. If instructions are received after the Matrix Trust trading cut-off times, the sale trade order will be placed on the next business day.

When Matrix Trust places or settles a sale trade for a Client Account, the Client Account receives the sales proceeds on the trade settlement date. If the Client Account does not use a sweep, Matrix Trust will earn float from the date Matrix Trust receives the sale settlement proceeds until Matrix Trust receives instructions to reinvest the sale proceeds as described above.

4. Payments from Client Accounts

Matrix Trust may earn float when it issues checks on behalf of plans including checks for (i) distributions to participants and/or beneficiaries, (ii) participant loan distributions, or (iii) fees paid to plan service providers. Matrix Trust do not earn float when payments or distributions are made by direct deposit (ACH) or by a federal funds wire transfer.

Matrix Trust will mail a distribution check to a plan participant or beneficiary on the payable date (the date printed on the check). On the same day, Matrix Trust debits the Client Account in the amount of the check. Matrix Trust will earn float on the amount of the check from the date the check is issued until the date the check is presented and paid.

Where Matrix Trust has been directed to establish periodic or recurring distribution checks, such payments are typically mailed to plan participants and beneficiaries prior to the payable date (for example, effective July 1, 2015, periodic payments are mailed six business days prior to the payable date). Matrix Trust debits the Client Account in the amount of the checks on the payable date. Matrix is able to mail the checks before assets are withdrawn from the Client Account and sold because periodic distributions are of a predictable amount (generally a set dollar amount each payment cycle). Matrix Trust will only earn float on the amount of the check from the date the check is payable until the date check is presented and paid.

On a periodic basis, Matrix Trust will notify clients of outstanding periodic and lump sum distribution checks Matrix Trust has issued. If an originally-issued check is reported lost or missing, Matrix Trust will re-issue the check upon receipt of direction from the client. If the participant or beneficiary does not negotiate the check within a reasonable time, Matrix Trust reserves the right to recredit (redeposit) the payment to the Client Account and to invest these funds at the direction of a Client Account fiduciary, or to disburse the funds as directed or otherwise in accordance with applicable law.

III. RATE ON FLOAT EARNINGS

The rate at which Matrix Trust earn float over the time periods described above is generally comparable to the effective Federal Funds Rate as reported in the Wall Street Journal over the applicable time frame. This compensation varies, but a reasonable estimate based on a blend of rates is from 0.50% to 0.75%.

Assets Held at End of Year

IMAGING HEALTHCARE SPECIALISTS 401(K) SALARY SAVINGS PLAN

a6854

CONSOLIDATED

As of December 31, 2016

IDENTITY OF ISSUE, BORROWER, LESSOR OR SIMILAR PARTY	QUANTITY	REVALUED COST	ORIGINAL COST	CURRENT VALUE
ASSETS				
NON-INTEREST BEARING CASH				
CASH	830.47	830.47	830.47	830.47
TOTAL NON-INTEREST BEARING CASH		**830.47**	**830.47**	
GENERAL INVESTMENTS				
Interest-Bearing Cash				
City National Rochdale Government Money Market Fund Svc (cnix.x)		94,675.58	94,675.58	94,675.58
TotalInterest-Bearing Cash		**94,675.58**	**94,675.58**	**94,675.58**
Corporate Stocks (Other Than Employer Securities) – Common				
Abbvie Inc	240.000	15,250.50	15,250.50	15,028.80
Adobe Systems Inc.	165.000	15,914.59	13,182.81	16,986.75
Advance Auto Parts Inc	45.000	7,932.47	7,932.47	7,610.40
AdvanSix Inc	5.000	66.93	66.93	110.70
Alibaba Group Holding-Sp ADR	130.000	11,774.19	12,333.98	11,415.30
Alphabet Inc CL A	79.000	61,462.79	37,340.83	62,603.55
Altria Group Inc	120.000	7,673.95	7,673.95	8,114.40
Amazon Com Inc	44.000	30,412.91	21,036.59	32,994.28
American International Group	400.000	24,709.89	22,815.35	26,124.00
American Tower REIT Inc	70.000	6,909.46	5,165.79	7,397.60
American Water Works Co Inc	215.000	12,846.25	7,982.73	15,557.40
Anadarko Pete Corp.	245.000	14,681.89	14,681.89	17,083.85
Analogic Corp	114.000	9,477.45	9,195.11	9,456.30
Apple Inc	652.000	68,677.62	58,837.24	75,514.64
At&t Inc	475.000	16,907.78	16,907.78	20,201.75
Azz Inc	100.000	5,557.00	4,207.68	6,390.00
Bank Of America Corp	1,355.000	24,844.44	20,606.55	29,945.50
Boeing Company	80.000	11,567.20	12,131.50	12,454.40
Boston Scientific	390.000	7,167.38	6,029.82	8,435.70
Bristol-Myers Squibb Co	145.000	7,407.35	7,407.35	8,473.80
Cabot Corp	239.000	9,770.32	7,087.73	12,079.06
Cabot Microelectronics	142.000	6,216.76	4,147.07	8,970.14
Canadian Natural Resources	500.000	13,910.50	13,910.50	15,940.00
Cardtronics PLC CL A	400.000	15,924.00	11,275.71	21,828.00
Celgene Corp	242.000	28,993.53	20,553.07	28,011.50
Cerner Corp	130.000	7,822.10	8,986.54	6,158.10
Charter Communications New Cl A	58.000	13,897.44	14,219.69	16,699.36
Chemical Financial Corp	145.000	5,426.82	5,426.82	7,854.65
Chevron Corp	250.000	24,066.11	25,441.81	29,425.00
Cisco Systems Inc	610.000	16,703.70	16,667.94	18,434.20
Citigroup Inc	629.000	32,091.55	29,565.18	37,381.47
Clean Harbors Inc	407.000	17,050.39	11,488.21	22,649.55
Cognex Corp	209.000	7,057.93	2,419.51	13,296.58
Colgate-Palmolive	140.000	9,050.71	9,050.71	9,161.60
Comcast Corp Cl A	570.000	32,714.91	26,790.84	39,358.50
Copart Inc	587.000	22,311.87	9,762.53	32,525.67
Costco Wholesale Corp-New	50.000	8,075.00	5,121.08	8,005.50
Covanta Holding Corp	902.000	13,821.99	13,159.40	14,071.20
Csx Corp	365.000	11,232.09	11,232.09	13,114.45
CVS Health Corp	175.000	17,109.75	8,189.38	13,809.25
Danaher Corp Del	160.000	12,524.04	7,168.07	12,454.40
Disney Walt Co	230.000	23,989.98	12,540.96	23,970.60
Dorman Products Inc	203.000	9,636.41	9,358.44	14,831.18
Dow Chemical Corp	250.000	12,870.00	12,409.61	14,305.00
Electronic Arts	90.000	7,363.35	7,363.35	7,088.40
Eli Lilly & Company	225.000	18,852.27	17,092.28	16,548.75
Emergent Biosolutions Inc	431.000	14,380.72	13,263.80	14,154.04
Entegris Inc	1,189.000	15,778.03	9,773.82	21,283.10
Esterline Technologies	211.000	16,984.49	8,991.56	18,821.20
Exxon-Mobil Corporation	285.000	22,207.42	24,637.99	25,724.10
Facebook Inc-A	245.000	25,641.70	18,657.07	28,187.25
FBC Financial Holdings-Cl A	218.000	7,403.59	6,604.02	10,398.60

Assets Held at End of Year

IMAGING HEALTHCARE SPECIALISTS 401(K) SALARY SAVINGS PLAN

a6854

CONSOLIDATED

As of December 31, 2016

IDENTITY OF ISSUE, BORROWER, LESSOR OR SIMILAR PARTY	QUANTITY	REVALUED COST	ORIGINAL COST	CURRENT VALUE
Federal Express Corp	70.000	10,646.97	10,646.97	13,034.00
General Electric Co	355.000	12,326.34	10,283.50	11,218.00
Genesco Inc	103.000	5,853.49	6,877.39	6,396.30
Gilead Sciences Inc	220.000	22,261.80	7,479.41	15,754.20
Goldman Sachs Group Inc	60.000	10,813.80	7,330.54	14,367.00
Graco Inc	240.000	17,315.97	8,050.80	19,941.60
Halliburton Company	160.000	6,909.53	6,909.53	8,654.40
Halozyme Therapeutics Inc	873.000	7,754.07	7,754.07	8,625.24
HCA Healthcare Inc	155.000	10,482.65	10,697.40	11,473.10
Heico Corp New Cl A	461.000	22,681.20	5,508.72	31,301.90
Helen Of Troy Corp Ltd	193.000	17,286.41	17,324.14	16,298.85
Hexcel Corp New	250.000	11,612.50	10,336.17	12,860.00
Home Depot Incorporated	290.000	38,352.50	14,724.96	38,883.20
Honeywell International	195.000	19,809.82	19,280.58	22,590.75
Idex Corp	313.000	23,978.93	9,171.33	28,188.78
Ingredion Inc	237.000	22,714.08	7,709.18	29,615.52
Johnson & Johnson	95.000	11,023.98	11,023.98	10,944.95
JPMorgan Chase & Co	585.000	38,630.33	26,792.93	50,479.65
Kaman Corp Cl A	267.000	10,904.31	7,933.88	13,064.31
Kar Auction Services Inc	750.000	27,772.50	10,065.26	31,965.00
Keyw Holding Corp/The	493.000	4,631.98	4,631.98	5,812.47
Legacy Texas Financial Group	323.000	8,035.03	6,908.12	13,908.38
Magna Int'l Inc.	250.000	10,140.00	7,228.18	10,850.00
Marsh & Mclennan Inc.	195.000	10,911.23	7,935.12	13,180.05
Martin Marietta Materials	36.000	8,163.33	8,163.33	7,975.08
Mastercard Inc A	140.000	13,630.40	8,306.01	14,455.00
Microsoft Corporation	775.000	44,909.12	32,890.66	48,158.50
Mid America Apt Community	107.000	9,716.67	6,223.82	10,477.44
Minerals Technologies	93.000	5,724.19	5,724.19	7,184.25
Mohawk Ind	40.000	7,622.86	7,622.86	7,987.20
Morgan Stanley	375.000	11,532.96	11,532.96	15,843.75
Norfolk Southern Co.	135.000	12,516.02	12,516.02	14,589.45
Northrop Grumman Corp	20.000	4,359.30	4,359.30	4,651.60
NXP Semiconductors Nv	85.000	7,161.25	7,234.17	8,330.85
Omnicell Inc	110.000	3,418.80	3,164.86	3,729.00
Paypal Holdings Inc	165.000	5,973.00	4,923.65	6,512.55
Pdf Solutions Inc	513.000	5,560.92	9,712.99	11,568.15
Pepsico Inc	75.000	7,494.00	7,424.59	7,847.25
Pfizer Incorporated	235.000	7,585.80	7,833.46	7,632.80
Pg&e Corp	150.000	7,978.50	8,316.75	9,115.50
Power Integrations	249.000	12,108.87	9,904.51	16,894.65
PrairieSky Royalty Ltd	8.000	361.39	361.39	190.29
Procter & Gamble Co	85.000	7,090.51	7,090.51	7,146.80
Prudential Finl Inc	155.000	12,618.55	8,670.58	16,129.30
Pulte Group Inc	400.000	7,128.00	7,884.44	7,352.00
Raytheon Co	120.000	15,195.72	13,822.22	17,040.00
RBC Bearings Inc	309.000	19,958.31	8,516.95	28,678.29
Rli Corp.	213.000	13,152.75	8,021.40	13,446.69
Salesforce.Com Inc	115.000	8,666.73	8,481.40	7,872.90
Schlumberger Ltd	245.000	17,223.76	19,749.03	20,567.75
Sensient Tech Corp	149.000	8,577.87	8,577.87	11,708.42
Simpson Mfg. Co. Inc.	399.000	13,625.85	10,869.10	17,456.25
Southern Company	135.000	7,224.85	7,224.85	6,640.65
Stanley Black and Decker Inc	70.000	8,337.08	8,337.08	8,028.30
Starbucks Corp.	275.000	15,149.58	14,748.42	15,268.00
Synchrony Financial	225.000	6,842.25	6,846.98	8,160.75
T-Mobile US Inc	90.000	3,520.80	2,773.54	5,175.90
Teledyne Inc	152.000	13,482.40	5,725.73	18,696.00
Textron Inc	185.000	7,771.85	5,243.95	8,983.60
Thermo Fisher Scientific Inc	115.000	16,312.75	7,206.80	16,226.50
Thermon Group Holdings Inc	327.000	5,532.84	6,693.79	6,242.43
Time Warner Inc	95.000	7,521.90	7,521.90	9,170.35
Ugi Corp New	597.000	20,154.72	4,646.23	27,509.76

Assets Held at End of Year

IMAGING HEALTHCARE SPECIALISTS 401(K) SALARY SAVINGS PLAN

a6854

CONSOLIDATED

As of December 31, 2016

IDENTITY OF ISSUE, BORROWER, LESSOR OR SIMILAR PARTY	QUANTITY	REVALUED COST	ORIGINAL COST	CURRENT VALUE
Union Pacific Corp.	115.000	8,993.00	8,081.92	11,923.20
United Community Banks/GA	292.000	6,136.22	6,136.22	8,649.04
Unitedhealth Group Inc	90.000	10,587.60	8,925.37	14,403.60
US Bancorp - Del	260.000	11,480.61	11,480.61	13,356.20
Verizon Communications	253.000	11,693.66	11,727.38	13,505.14
Visa Inc Class A Shares	345.000	26,963.50	25,267.50	26,916.90
Wabtec	150.000	10,668.00	7,028.20	12,453.00
Waste Connections Inc	150.000	9,820.50	3,574.56	11,788.50
WestRock	90.000	3,185.67	3,185.67	4,569.30
Whitewave Foods Co - A (acquired 04/12/17)	259.000	10,077.69	3,694.53	14,400.40
Woodward Inc	335.000	16,636.10	10,375.66	23,131.75
Zoetis Inc	150.000	7,967.28	7,967.28	8,029.50
TotalCorporate Stocks (Other Than Employer Securities) – Common		**1,790,087.18**	**1,388,060.93**	**2,051,617.65**
Participant Loans				
Master Participant Loan		382,933.52	382,933.52	382,933.52
TotalParticipant Loans		**382,933.52**	**382,933.52**	**382,933.52**
Value of Interest in Registered Investment Companies				
Amer Funds Europac R4	7,205.856	320,238.07	297,163.06	318,859.13
American Balanced Fund Cl R-4 Shs	26,838.364	640,648.85	552,444.64	664,517.89
American New World Fund-R4	2,473.456	123,311.57	136,183.05	126,566.74
City National Rochdale Fixed Income Opportunities Fund Cl N	5,971.580	146,552.65	156,104.60	152,633.58
City National Rochdale Government Bond Fund Svc	46,313.800	486,426.80	489,398.71	484,442.35
City Natl Rochdale Em Mkt-Y	2,140.491	82,259.07	79,000.00	83,029.65
City Natl Rochdale Gov Mm-Sv	1,032,762.400	1,032,762.40	1,032,762.40	1,032,762.40
Columbia Acorn International Fund Z	5,640.713	220,647.55	200,551.54	212,880.51
Columbia Contrarian Core Z	21,328.646	446,285.50	542,865.16	479,894.54
Columbia Mid Cap Value Z	3,103.347	43,410.39	48,233.49	45,495.07
Cty Natl Rochdale Corp Bd-Sv	11,511.287	118,906.01	119,000.00	119,256.93
Davis Financial A	473.095	18,616.48	19,078.62	21,085.84
Davis NY Venture A	3,383.597	104,025.23	115,276.95	103,267.38
Delaware Small Cap Value A	3,520.863	163,641.32	156,543.86	210,618.02
Deutsche Real Estate Securities Fund-A	10,138.648	214,186.86	226,238.52	203,888.21
Dreyfus Midcap Index Fund Inv	12,647.446	413,771.46	437,293.03	443,419.46
Dreyfus S&P 500 Index	24,659.450	1,196,222.50	1,089,880.41	1,200,175.43
Dreyfus Sm Cap Stk Indx Fund Inv	4,267.334	110,311.89	110,138.21	128,489.43
Eagle Small Cap Growth A	6,694.523	330,222.15	305,226.74	351,127.73
Fidelity Adv Freedom 2005-A	0.102	1.15	1.22	1.17
Fidelity Adv Freedom 2015-A	8,970.914	105,015.51	92,279.80	106,843.59
Fidelity Adv Freedom 2025-A	18,663.261	228,295.41	225,815.59	233,664.03
Fidelity Adv Freedom 2030-A	22,763.509	296,251.87	302,196.62	303,665.21
Fidelity Adv Freedom 2035-A	18,089.177	223,855.67	232,918.73	231,179.68
Fidelity Adv Freedom 2040-A	29,984.129	397,514.05	404,545.16	410,182.88
Fidelity Adv Freedom Income A	28.823	302.47	317.62	308.12
Fidelity Adv H/I Advant A	42,191.098	419,111.34	413,226.42	451,444.75
Fidelity Adv Tech A	3,354.087	119,321.09	102,235.23	130,172.12
Fidelity Advisor Freedom 2020 A	18,838.351	234,154.13	241,988.42	239,435.44
Fidelity Advisor Freedom 2045 A	45,386.625	464,144.56	470,279.86	480,190.49
Fidelity Advisor Freedom 2050 A	24,000.506	243,201.54	248,991.31	252,485.32
Fidelity Advisor Freedom 2055 Fund A	7,417.823	81,731.61	83,661.70	84,934.07
Fidelity Advisor Freedom 2060 A	73.838	740.66	740.66	746.50
Harbor Intl Growth	17,408.104	214,079.96	201,245.50	212,378.87
Ishares Core S&P Mid-Cap ETF	55.000	7,662.60	6,922.75	9,093.70
Janus Henderson Enterprise Fund S Shares	3,769.841	319,208.47	343,685.97	348,974.18
John Hancock III Discpln V A	16,378.864	291,301.23	269,556.44	326,758.34
Natixis Loomis Say Growth-Y	23,614.336	298,364.70	298,364.70	283,135.89
Prudential Total Ret Bond-Z	45,020.259	631,561.52	656,744.70	633,885.25
T Rowe Price Blue Chip Adv	5,099.426	361,926.15	337,369.83	365,577.85
Templeton Global Bond A	23,868.240	275,368.57	297,461.29	286,418.88
Touchstone Small Cap Fund Y	1,471.873	23,152.56	23,811.00	25,728.34
Tweedy Browne Global Value	1,928.472	47,170.43	52,144.79	48,288.94
Vanguard Glbl Ex-Us Real Est	390.000	19,418.20	20,604.66	19,332.30

Assets Held at End of Year

IMAGING HEALTHCARE SPECIALISTS 401(K) SALARY SAVINGS PLAN

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CONSOLIDATED

As of December 31, 2016

IDENTITY OF ISSUE, BORROWER, LESSOR OR SIMILAR PARTY	QUANTITY	REVALUED COST	ORIGINAL COST	CURRENT VALUE
Vanguard High Yield Corp Admiral	6,045.378	33,491.39	36,000.00	35,244.55
Vanguard Interm Term Invst Grade Admiral	126,437.857	1,223,369.78	1,244,901.35	1,218,860.94
Vanguard Reit ETF	255.000	22,723.30	20,314.26	21,045.15
William Blair Small Mid Cap G I	38,659.617	745,115.57	515,456.24	773,965.53
Wilmington U.S. Government Money Market Fund Select Shs	151,687.100	151,687.10	151,687.10	151,687.10
TotalValue of Interest in Registered Investment Companies		**13,691,689.36**	**13,408,851.92**	**14,068,039.48**
TOTAL GENERAL INVESTMENTS		**15,959,385.64**	**15,274,521.95**	**16,597,266.23**
TOTAL ASSETS		**15,960,216.11**	**15,275,352.42**	**16,598,096.70**
TOTAL NET ASSETS		**15,960,216.11**	**15,275,352.42**	**16,598,096.70**