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
CMBS PROFIT SHARING 401(K) PLAN

1b Three-digit plan number (PN) ▶ 001

1c Effective date of plan 01/01/1995

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)
CALIFORNIA MEDICAL BUSINESS SERVICE

223 NORTH FIRST AVENUE STE. 201
ARCADIA, CA 91006

2b Employer Identification Number (EIN) 45-4468735

2c Plan Sponsor's telephone number 626-821-1411

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	ALICIA VASQUEZ
	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**	321
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)**	256
a(2) Total number of active participants at the end of the plan year	**6a(2)**	268
b Retired or separated participants receiving benefits	**6b**	0
c Other retired or separated participants entitled to future benefits	**6c**	66
d Subtotal. Add lines **6a(2)**, **6b**, and **6c**.	**6d**	334
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	**6e**	0
f Total. Add lines **6d** and **6e**.	**6f**	334
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**	333
h Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested	**6h**	24
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	**7**	

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

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

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

9a Plan funding arrangement (check all that apply)

- **(1)** [X] Insurance
- **(2)** [ ] Code section 412(e)(3) insurance contracts
- **(3)** [X] Trust
- **(4)** [ ] General assets of the sponsor

9b Plan benefit arrangement (check all that apply)

- **(1)** [ ] Insurance
- **(2)** [ ] Code section 412(e)(3) insurance contracts
- **(3)** [X] Trust
- **(4)** [ ] General assets of the sponsor

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

a Pension Schedules

- **(1)** [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)** [X] 1 **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 A (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Insurance Information

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

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

▶ Insurance companies are required to provide the information pursuant to ERISA section 103(a)(2).

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
CMBS PROFIT SHARING 401(K) PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
CALIFORNIA MEDICAL BUSINESS SERVICE

D Employer Identification Number (EIN)
45-4468735

Part I **Information Concerning Insurance Contract Coverage, Fees, and Commissions** Provide information for each contract on a separate Schedule A. Individual contracts grouped as a unit in Parts II and III can be reported on a single Schedule A.

1 Coverage Information:

(a) Name of insurance carrier
AMERICAN UNITED LIFE INSURANCE COMPANY

(b) EIN	**(c)** NAIC code	**(d)** Contract or identification number	**(e)** Approximate number of persons covered at end of policy or contract year	Policy or contract year	
				(f) From	**(g)** To
35-0145825	60895	K00118	333	01/01/2016	12/31/2016

2 Insurance fee and commission information. Enter the total fees and total commissions paid. List in line 3 the agents, brokers, and other persons in descending order of the amount paid.

(a) Total amount of commissions paid	**(b)** Total amount of fees paid
0	0

3 Persons receiving commissions and fees. (Complete as many entries as needed to report all persons).

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	

Part II Investment and Annuity Contract Information

Where individual contracts are provided, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

4	Current value of plan's interest under this contract in the general account at year end	4	2687716
5	Current value of plan's interest under this contract in separate accounts at year end	5	0

6 Contracts With Allocated Funds:

a State the basis of premium rates ▶

b	Premiums paid to carrier	6b	
c	Premiums due but unpaid at the end of the year	6c	
d	If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, enter amount.	6d	

Specify nature of costs ▶

e Type of contract: (1) ☐ individual policies (2) ☐ group deferred annuity

(3) ☐ other (specify) ▶

f If contract purchased, in whole or in part, to distribute benefits from a terminating plan, check here ▶ ☐

7 Contracts With Unallocated Funds (Do not include portions of these contracts maintained in separate accounts)

a Type of contract: (1) ☐ deposit administration (2) ☐ immediate participation guarantee

(3) ☐ guaranteed investment (4) ☒ other ▶ GROUP ANNUITY CONTRACT

b	Balance at the end of the previous year			7b	1984912
c	Additions: (1) Contributions deposited during the year	7c(1)	172209		
	(2) Dividends and credits	7c(2)	0		
	(3) Interest credited during the year	7c(3)	42308		
	(4) Transferred from separate account	7c(4)	845599		
	(5) Other (specify below)	7c(5)	30899		
	▶ LOAN REPAYMENT				
	(6) Total additions			7c(6)	1091015
d	Total of balance and additions (add lines **7b** and **7c(6)**)			7d	3075927
e	Deductions:				
	(1) Disbursed from fund to pay benefits or purchase annuities during year	7e(1)	63581		
	(2) Administration charge made by carrier	7e(2)	8351		
	(3) Transferred to separate account	7e(3)	295365		
	(4) Other (specify below)	7e(4)	20914		
	▶ LOANS ISSUED				
	(5) Total deductions			7e(5)	388211
f	Balance at the end of the current year (subtract line **7e(5)** from line **7d**)			7f	2687716

Part III Welfare Benefit Contract Information

If more than one contract covers the same group of employees of the same employer(s) or members of the same employee organizations(s), the information may be combined for reporting purposes if such contracts are experience-rated as a unit. Where contracts cover individual employees, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

8 Benefit and contract type (check all applicable boxes)

a ☐ Health (other than dental or vision) **b** ☐ Dental **c** ☐ Vision **d** ☐ Life insurance
e ☐ Temporary disability (accident and sickness) **f** ☐ Long-term disability **g** ☐ Supplemental unemployment **h** ☐ Prescription drug
i ☐ Stop loss (large deductible) **j** ☐ HMO contract **k** ☐ PPO contract **l** ☐ Indemnity contract
m ☐ Other (specify) ▶

9 Experience-rated contracts:				
a Premiums: (1) Amount received	**9a(1)**			
(2) Increase (decrease) in amount due but unpaid	**9a(2)**			
(3) Increase (decrease) in unearned premium reserve	**9a(3)**			
(4) Earned (**(1)** + **(2)** - **(3)**)			**9a(4)**	
b Benefit charges (1) Claims paid	**9b(1)**			
(2) Increase (decrease) in claim reserves	**9b(2)**			
(3) Incurred claims (add **(1)** and **(2)**)			**9b(3)**	
(4) Claims charged			**9b(4)**	
c Remainder of premium: (1) Retention charges (on an accrual basis) --				
(A) Commissions	**9c(1)(A)**			
(B) Administrative service or other fees	**9c(1)(B)**			
(C) Other specific acquisition costs	**9c(1)(C)**			
(D) Other expenses	**9c(1)(D)**			
(E) Taxes	**9c(1)(E)**			
(F) Charges for risks or other contingencies	**9c(1)(F)**			
(G) Other retention charges	**9c(1)(G)**			
(H) Total retention			**9c(1)(H)**	
(2) Dividends or retroactive rate refunds. (These amounts were ☐ paid in cash, or ☐ credited.)			**9c(2)**	
d Status of policyholder reserves at end of year: (1) Amount held to provide benefits after retirement			**9d(1)**	
(2) Claim reserves			**9d(2)**	
(3) Other reserves			**9d(3)**	
e Dividends or retroactive rate refunds due. (Do not include amount entered in line **9c(2)**.)			**9e**	
10 Nonexperience-rated contracts:				
a Total premiums or subscription charges paid to carrier			**10a**	
b If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, other than reported in Part I, line 2 above, report amount.			**10b**	

Specify nature of costs.

Part IV Provision of Information

11 Did the insurance company fail to provide any information necessary to complete Schedule A? ☐ Yes ☐ No

12 If the answer to line 11 is "Yes," specify the information not provided. ▶

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
CMBS PROFIT SHARING 401(K) PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
CALIFORNIA MEDICAL BUSINESS SERVICE

D Employer Identification Number (EIN)
45-4468735

Part I Service Provider Information (see instructions)

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

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

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

JOE PARK

BURNHAM GIBSON FINANCIAL GROUP INC.
2050 MAIN STREET, SUITE 510
IRVINE, CA 92614

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

M & T BANK

16-0538020

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

DARIN GIBSON

AXA ADVISORS LLC
525 WASHINGTON BOULEVARD 29TH FLOOR
JERSEY CITY, NJ 07310

(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)

UBS FINANCIAL SERVICES, INC.

17 WEST MCBEE AVENUE
GREENVILLE, SC 29601

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
27 50	NONE	15771	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

MORGAN STANLEY

335 MAPLE DR, SUITE 150
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?
27 50	NONE	15692	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

ALLIANCE BERNSTEIN LP

1999 AVENUE OF THE STARS 21ST FLOOR
LOS ANGELES, CA 90067

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
27 50	NONE	6800	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)

AXA ADVISORS LLC

57-2939337

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
27 50	NONE	6639	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

MCCREADY& KEENE INC

35-0500670

(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 37 38 50	NONE	6634	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

MG TRUST CO. DBA MATRIX TRUST CO

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?
18 19 21 25 49 50 51 59 60 61 62 63 65	NONE	1007	Yes [X] No [ ]	Yes [X] No [ ]	1736	Yes [X] 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
MG TRUST CO DBA MATRIX TRUST CO	49	1736
(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.	
MG TRUST CO DBA MATRIX TRUST CO 75-3182674	REVENUE SHARING ACCT FEE	

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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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

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

A Name of plan
CMBS PROFIT SHARING 401(K) PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
CALIFORNIA MEDICAL BUSINESS SERVICE

D Employer Identification Number (EIN)
45-4468735

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	550	0
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	1332736	1431583
(2) Participant contributions	1b(2)	4850	0
(3) Other	1b(3)		
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	1245910	15094
(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)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)	3244433	0
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)	593571	532608
(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)	19683558	14353137
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)	1984912	2687716
(15) Other	1c(15)	116332	11439776

			(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**	28206852	30459914
	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**	28206852	30459914

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)**	1431601	
	(B) Participants	**2a(1)(B)**	922098	
	(C) Others (including rollovers)	**2a(1)(C)**		
	(2) Noncash contributions	**2a(2)**		
	(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	**2a(3)**		2353699
b	**Earnings on investments:**			
	(1) Interest:			
	(A) Interest-bearing cash (including money market accounts and certificates of deposit)	**2b(1)(A)**	636	
	(B) U.S. Government securities	**2b(1)(B)**		
	(C) Corporate debt instruments	**2b(1)(C)**		
	(D) Loans (other than to participants)	**2b(1)(D)**		
	(E) Participant loans	**2b(1)(E)**	22458	
	(F) Other	**2b(1)(F)**	42553	
	(G) Total interest. Add lines **2b(1)(A)** through **(F)**	**2b(1)(G)**		65647
	(2) Dividends: **(A)** Preferred stock	**2b(2)(A)**		
	(B) Common stock	**2b(2)(B)**	84137	
	(C) Registered investment company shares (e.g. mutual funds)	**2b(2)(C)**	631829	
	(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	**2b(2)(D)**		715966
	(3) Rents	**2b(3)**		
	(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	**2b(4)(A)**	2358890	
	(B) Aggregate carrying amount (see instructions)	**2b(4)(B)**	2389071	
	(C) Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result	**2b(4)(C)**		-30181
	(5) Unrealized appreciation (depreciation) of assets: **(A)** Real estate	**2b(5)(A)**		
	(B) Other	**2b(5)(B)**	213325	
	(C) Total unrealized appreciation of assets. Add lines **2b(5)(A)** and **(B)**	**2b(5)(C)**		213325

		(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)		822061
c Other income	2c		70855
d Total income. Add all **income** amounts in column (b) and enter total	2d		4211372
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	1839222	
(2) To insurance carriers for the provision of benefits	2e(2)		
(3) Other	2e(3)		
(4) Total benefit payments. Add lines **2e(1)** through **(3)**	2e(4)		1839222
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions)	2g		
h Interest expense	2h		
i Administrative expenses: **(1)** Professional fees	2i(1)	1007	
(2) Contract administrator fees	2i(2)		
(3) Investment advisory and management fees	2i(3)	118081	
(4) Other	2i(4)		
(5) Total administrative expenses. Add lines **2i(1)** through **(4)**	2i(5)		119088
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		1958310
Net Income and Reconciliation			
k Net income (loss). Subtract line **2j** from line **2d**	2k		2253062
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)** [X] Disclaimer **(4)** [ ] Adverse

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

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

(1) Name: CLIFTONLARSONALLEN LLP **(2)** EIN: 41-0746749

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		1000000
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
CMBS PROFIT SHARING 401(K) PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
CALIFORNIA MEDICAL BUSINESS SERVICE

D Employer Identification Number (EIN)
45-4468735

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): 75-3182674

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

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

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

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

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

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

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

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

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

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

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

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

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

Part III Amendments

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

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

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

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

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

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

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

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

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

Part VII IRS Compliance Questions

20a Is the plan a 401(k) plan? If "No," skip b	☐ Yes ☐ No
20b How did the plan satisfy the nondiscrimination requirements for employee deferrals under section 401(k)(3) for the plan year? Check all that apply:	☐ Design-based safe harbor ☐ "Prior year" ADP test ☐ "Current year" ADP test ☐ N/A
21a What testing method was used to satisfy the coverage requirements under section 410(b) for the plan year? Check all that apply:	☐ Ratio percentage test ☐ Average benefit test ☐ N/A
21b Did the plan satisfy the coverage and nondiscrimination requirements of sections 410(b) and 401(a)(4) for the plan year by combining this plan with any other plan under the permissive aggregation rules?	☐ Yes ☐ No

22a If the plan is a master and prototype plan (M&P) or volume submitter plan that received a favorable IRS opinion letter or advisory letter, enter the date of the letter _____/_____/_____ and the serial number _____.

22b If the plan is an individually-designed plan that received a favorable determination letter from the IRS, enter the date of the most recent determination letter _____/_____/_____.

CMBS PROFIT SHARING 401(K) PLAN

FINANCIAL STATEMENTS AND SUPPLEMENTAL INFORMATION

YEARS ENDED DECEMBER 31, 2016 AND 2015

CMBS PROFIT SHARING 401(K) PLAN
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CliftonLarsonAllen LLP
CLAconnect.com

INDEPENDENT AUDITORS' REPORT

Investment Committee
CMBS Profit Sharing 401(k) Plan
Arcadia, California

Report on the Financial Statements

We were engaged to audit the accompanying financial statements of CMBS Profit Sharing 401(k) Plan (the Plan), which comprise the statements of net assets available for benefits as of December 31, 2016 and 2015, and the related statements of changes in net assets available for benefits for the years then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

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

Auditors' Responsibility

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

Basis for Disclaimer of Opinion on the Financial Statements

As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the Plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Note 3, which was certified by Matrix Trust Company, the custodian of the Plan, except for comparing such information with the related information included in the financial statements. We have been informed by the Plan administrator that Matrix Trust Company holds the Plan's investment assets and executes investment transactions. The Plan administrator has obtained a certification from the custodian as of and for the years ended December 31, 2016 and 2015, that the information provided to the Plan administrator by the custodian is complete and accurate.

Disclaimer of Opinion on the Financial Statements

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

Other Matter

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

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

The form and content of the information included in the financial statements and supplemental schedule, other than that derived from the information certified by the custodian, 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 ERISA.

CliftonLarsonAllen LLP

CliftonLarsonAllen LLP

Phoenix, Arizona
September 27, 2017

CMBS PROFIT SHARING 401(K) PLAN
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
DECEMBER 31, 2016 AND 2015

	2016	2015
ASSETS		
INVESTMENTS (at Fair Value)		
Cash and Money Market Funds	$ 15,094	$ 1,346
Collective Fund	2,687,716	1,984,912
Life Insurance Policy	-	116,332
Mutual Funds	14,353,137	13,013,996
Self Directed Brokerage Accounts	11,439,776	11,163,959
Total Investments	28,495,723	26,280,545
RECEIVABLES		
Employer Match Contributions	1,431,583	1,332,736
Notes Receivable from Participants	532,608	593,571
Total Receivables	1,964,191	1,926,307
NET ASSETS AVAILABLE FOR BENEFITS	$ 30,459,914	$ 28,206,852

See accompanying Notes to Financial Statements.

CMBS PROFIT SHARING 401(K) PLAN
STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
YEARS ENDED DECEMBER 31, 2016 AND 2015

	2016	2015
ADDITIONS:		
INVESTMENT INCOME (LOSS)		
Net Appreciation/(Depreciation) in Fair Value of Investments	$ 1,095,909	$ (881,278)
Interest and Dividends	739,306	870,767
Total Investment Income (Loss)	1,835,215	(10,511)
INTEREST INCOME ON NOTES RECEIVABLE FROM PARTICIPANTS	22,458	21,800
CONTRIBUTIONS		
Employee 401(k) Deferral	922,098	819,001
Employer	1,431,601	1,332,736
Rollover	-	80,504
Total Contributions	2,353,699	2,232,241
Total Additions	4,211,372	2,243,530
DEDUCTIONS:		
BENEFITS PAID TO PARTICIPANTS	1,839,222	1,473,801
ADMINISTRATIVE EXPENSES	119,088	109,911
Total Deductions	1,958,310	1,583,712
NET INCREASE	2,253,062	659,818
NET ASSETS AVAILABLE FOR BENEFITS:		
Beginning of Year	28,206,852	27,547,034
End of Year	$ 30,459,914	$ 28,206,852

See accompanying Notes to Financial Statements.

NOTE 1 DESCRIPTION OF PLAN

The following description of CMBS Profit Sharing 401(k) Plan (the Plan) provides only general information. Participants should refer to the Plan document for a more complete description of the Plan's provisions.

General

The Plan is a defined contribution plan originally effective January 1, 1995, for employees of California Medical Business Services, LLC and related employers, The Hill Medical Corporation and Arcadia Radiology Medical Group, Inc. (collectively, the Company). The Plan has been amended throughout the years to comply with tax legislation and most recently restated effective January 1, 2017. The Plan was amended effective January 1, 2016 to increase the auto-enrollment percentage. The Plan was also amended effective April 1, 2017 to allow for in-plan Roth transfers. The Plan excludes leased employees, nonresident aliens, and employees covered by a collective bargaining agreement. The Plan is subject to the Employee Retirement Income Security Act of 1974 (ERISA). The Investment Committee is responsible for oversight of the Plan and determines the appropriateness of the Plan's investment offerings, and monitors investment performance.

Eligibility

Employees are eligible to participate in the deferral component of the Plan on the later of 90 days of service (as defined by the Plan) or upon turning 21 years of age. Participants are eligible for the profit sharing contribution and matching contribution components of the Plan once they attain the age of 21 and complete one year of service with a minimum of 1,000 hours.

Contributions

The Plan includes a salary deferral arrangement allowed under Section 401(k) of the Internal Revenue Code (IRC). Eligible participants are permitted to elect to have a percentage, limited by Plan provisions, of their compensation contributed as pre-tax 401(k) or Roth contributions to the Plan. Effective July 1, 2014, the Plan includes an auto-enrollment provision whereby all newly eligible employees after July 1, 2014, are automatically enrolled in the Plan unless they affirmatively elect not to participate in the Plan. Automatically enrolled participants have their deferral rate set at 3% of eligible compensation, and their contributions invested in the designated default fund until changed by the participant. Effective January 1, 2016, the auto-enrollment percentage was increased to 5%. Participants who have attained age 50 before the end of the Plan year are eligible to make catch-up contributions.

The Company may, at its discretion, elect to make a qualified matching contribution or profit sharing contribution to the Plan. For the years ended December 31, 2016 and 2015, the Company profit sharing contribution was $1,431,601 and $1,332,736, respectively. There were no Company matching contributions for the years ended December 31, 2016 and 2015.

NOTE 1 DESCRIPTION OF PLAN (CONTINUED)

Contributions (Continued)

Participants may also contribute amounts representing distributions from other qualified defined benefit or defined contribution plans (rollover). Participants direct the investment of contributions into various investment options offered by the Plan. Contributions are subject to certain Internal Revenue Service (IRS) limitations.

Participant Accounts

Each participant's account is credited with the participant's contributions, the Company's matching contribution, an allocation of the Company's profit sharing contribution, and an allocation of Plan earnings or losses. Participant accounts are charged with an allocation of administrative expenses that are paid by the Plan. Allocations are based on participant earnings or account balances, or participant transactions, as defined. The benefit to which a participant is entitled is the benefit that can be provided by the participant's vested account.

Vesting

Participants are immediately vested in their contributions plus actual earnings thereon. Vesting in the Company matching and profit sharing contribution portion of their accounts, plus actual earnings thereon, is based on years of credited service. A participant is 100% vested after six years of credited service. Notwithstanding the above, a participant is fully vested upon reaching normal retirement age, death, or permanent disability.

Notes Receivable from Participants

Participants may borrow from their fund accounts a minimum of $1,000 up to a maximum equal to the lesser of $50,000 or 50% of their vested account balance. The notes are secured by the balance in the participant's account and bear interest at a rate commensurate with local prevailing rates as determined quarterly by the Plan administrator. Principal and interest is paid ratably through payroll deductions.

Benefit Payments

Upon termination of service due to death, disability, or retirement, a participant may elect to receive the value of the vested interest in his or her account in the form of a lump sum distribution or installments. The Plan allows for in-service distributions if a participant reaches age 59½ and has been a participant for at least 5 years and hardship distributions subject to Plan provisions. If a participant terminates employment and the participant's account balance does not exceed $1,000, the Plan administrator will authorize the benefit payment without the participant's consent. If the balance of the terminated participant's account is between $1,000 and $5,000, the Plan Sponsor may authorize that the benefit payment be rolled into an individual retirement account in the participant's name.

Forfeited Accounts

Forfeited nonvested accounts are first used to reduce administrative expenses and then are used to reduce future Company contributions. Forfeited nonvested accounts as of December 31, 2016 and 2015, totaled approximately $42,000 and $137,000, respectively. The forfeiture balances at December 31, 2016 and 2015 were used to offset the employer contributions receivable as of December 31, 2016 and 2015, respectively.

NOTE 2 SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of Accounting

The financial statements of the Plan are prepared on the accrual basis of accounting.

Use of Estimates

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

Investment Valuation and Income Recognition

The Plan's investments are reported at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. The Plan's Investment Committee determines the Plan's valuation policies utilizing information provided by the investment advisers, custodians, and insurance company. See Note 4 for discussion of fair value measurements.

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

Notes Receivable from Participants

Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest. Interest income is recorded on the accrual basis. Related fees are recorded as administrative expenses and are expensed when they are incurred. No allowance for credit losses has been recorded as of December 31, 2016 or 2015.

Benefit Payments

Benefits are recorded when paid.

Administrative Expenses

Certain expenses of maintaining the Plan are paid directly by the Company and are excluded from these financial statements. Fees related to the administration of notes receivable from participants and benefit payments are charged directly to the participant's account and are included in administrative expense. Investment related expenses are included in net appreciation (depreciation) of fair value of investments.

Subsequent Events

The Plan has evaluated subsequent events through September 27, 2017, the date the financial statements were available to be issued.

NOTE 3 CERTIFICATION OF INVESTMENT INFORMATION

Matrix Trust Company, the custodian of the Plan, has supplied the Plan administrator with a certification as to the completeness and accuracy of investments and notes receivables on the accompanying statements of net assets available for benefits as of December 31, 2016 and 2015, the statements of changes in net assets available for benefits for the years then ended, and the supplemental schedule of assets (held at end of year) as of December 31, 2016.

NOTE 4 FAIR VALUE OF INVESTMENTS

The framework for measuring fair value provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1) and the lowest priority to unobservable inputs (Level 3). The three levels of the fair value hierarchy are described as follows:

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

Level 2 – Inputs other than quoted prices included within Level 1 that are observable for the asset or liability, either directly or indirectly, such as:

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

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

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

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

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

Cash and Cash Equivalents: Valued based on cost, which approximates fair value.

NOTE 4 FAIR VALUE OF INVESTMENTS (CONTINUED)

Mutual Funds and Exchange Traded Funds: Valued at the daily closing price as reported by the fund. Mutual funds held by the Plan are open-end mutual funds that are registered with the Securities and Exchange Commission. These funds are required to publish their daily net asset value (NAV) and to transact at that price. The mutual funds held by the Plan are deemed to be actively traded.

Common Stock: Valued at closing prices reported on the active market on which the individual securities are traded.

Collective Fund: Valued at the net asset value (NAV) of units of the bank collective trust. NAV is a readily determinable fair value and is the basis for current transactions. Participant transactions (purchases and sales) may occur daily. If the Plan initiates a full redemption of the collective trust, the issuer reserves the right to temporarily delay withdrawal from the trust in order to ensure that securities liquidations will be carried out in an orderly business manner.

Life Insurance Policies: Valued at the cash surrender value as determined by the insurance company.

Self-Directed Brokerage Account: Self-directed brokerage accounts consist of mutual funds, common stock, exchange traded funds and cash equivalents that are valued on the basis of readily determinable market prices.

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

	2016			
	Level 1	Level 2	Level 3	Total
Cash and Money Market Funds	$ 15,094	$ -	$ -	$ 15,094
Collective Fund	-	2,687,716	-	2,687,716
Mutual Funds	14,353,137	-	-	14,353,137
Self Directed Brokerage Accounts	11,439,776	-	-	11,439,776
Total Investments at Fair Value	$ 25,808,007	$ 2,687,716	$ -	$ 28,495,723

	2015			
	Level 1	Level 2	Level 3	Total
Cash and Money Market Funds	$ 1,346	$ -	$ -	$ 1,346
Collective Fund	-	1,984,912		1,984,912
Life Insurance Policy	-	-	116,332	116,332
Mutual Funds	13,013,996	-		13,013,996
Self Directed Brokerage Accounts	11,163,959	-	-	11,163,959
Total Investments at Fair Value	$ 24,179,301	$ 1,984,912	$ 116,332	$ 26,280,545

NOTE 4 FAIR VALUE OF INVESTMENTS (CONTINUED)

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

	Life Insurance Policies	
	2016	2015
	Policies	Policies
Balance - Beginning of Year	$ 116,332	$ 116,332
Sales	(116,332)	-
Balance - End of Year	$ -	$ 116,332

The following table represents the Plan's Level 3 financial instruments, the valuation techniques used to measure the fair value of those financial instruments, and the significant unobservable inputs and the ranges of values for those inputs:

Instrument	2016 Fair Value	2015 Fair Value	Principal Valuation Technique	Unobservable Inputs	Range of Significant Input Values
Life Insurance Policies	$ -	$ 116,332	Cash Surrender Value	Surrender Charges	Various

NOTE 5 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 the 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 benefits.

NOTE 6 PLAN TERMINATION

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

NOTE 7 PLAN TAX STATUS

The Plan is placing reliance on an opinion letter dated March 31, 2014, received from the IRS on the prototype plan indicating that the Plan is qualified under Section 401 of the IRC and is therefore not subject to tax under current income tax law. The prototype plan has been amended since receiving the opinion letter. However, the Plan administrator believes that the Plan is designed, and is currently being operated, in compliance with the applicable requirements of the IRC and, therefore, believes that the Plan is qualified, and the related trust is tax-exempt.

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

NOTE 8 PARTY-IN-INTEREST TRANSACTIONS

Matrix Trust is the custodian as defined by the Plan and, therefore, the investment transactions qualify as party-in-interest transactions. Fees incurred by the Plan for the investment management services are included in net appreciation in fair value of the investment, as they are paid through revenue sharing, rather than a direct payment. The Plan made a direct payment to the third-party administrator of $119,088 and $109,911 which was not covered by revenue sharing for the years ended December 31, 2016 and 2015, respectively. The Plan Sponsor pays directly any other fees related to the Plan’s operations.

CMBS PROFIT SHARING 401(K) PLAN
E.I.N. 95-3929050 PLAN NO. 001
SCHEDULE H, LINE 4i—SCHEDULE OF ASSETS (HELD AT END OF YEAR)
DECEMBER 31, 2016

(a)	(b) Identity of Issue, Borrower, Lessor or Similar Party	(c) Description of Investment	(d) Cost Value **	(e) Current Value
	Various	Broadridge Matrix Trust Company (see attached statement)		$ 29,028,331
		Total Investments		$ 29,028,331

***Cost omitted for participant-directed accounts*

Matrix Trust Company

Portfolio Appraisal – Orig Cost Basis

December 31, 2016

Security Symbol	Quantity	Security	Unit Cost	Total Cost	Price	Market Value	Pct. Assets	Unrealized Gain/Loss	Pct G/L
MONEY MARKET									
radx.x	9,900.000	American Funds US Government Money Market R4	1.00	9,900.00	1.00	9,900.00	0.0	0.00	0.00
fdix.o	1,559.690	FDIC Insured Deposit Account	1.00	1,559.69	1.00	1,559.69	0.0	0.00	0.00
bdpx.o	136,244.180	Morgan Stanley Bank Deposit Program	1.00	136,244.18	1.00	136,244.18	0.5	0.00	0.00
rmgx.x	8,719.440	UBS RMA Government MMK Fund	1.00	8,719.44	1.00	8,719.44	0.0	0.00	0.00
				156,423.31		156,423.31	0.5	0.00	0.00
STOCKS									
abbv	551.000	Abbvie Inc	58.64	32,313.27	62.62	34,503.62	0.1	2,190.35	6.78
adbe	13.000	Adobe Systems Inc.	97.85	1,272.01	102.95	1,338.35	0.0	66.34	5.22
asix	11.000	AdvanSix Inc	13.17	144.82	22.14	243.54	0.0	98.72	68.16
aet	34.000	Aetna Inc	86.99	2,957.80	124.01	4,216.34	0.0	1,258.54	42.55
alxn	16.000	Alexion Pharmaceutical	122.45	1,959.13	122.35	1,957.60	0.0	-1.53	-0.08
baba	176.000	Alibaba Group Holding-Sp ADR	89.13	15,687.32	87.81	15,454.56	0.1	-232.76	-1.48
agn	200.000	Allergan plc	235.92	47,183.12	210.01	42,002.00	0.1	-5,181.12	-10.98
all	41.000	Allstate Corp	68.85	2,822.94	74.12	3,038.92	0.0	215.98	7.65
googl	95.000	Alphabet Inc CL A	584.58	55,534.75	792.45	75,282.75	0.3	19,748.00	35.56
goog	40.000	Alphabet Inc Cl C	569.05	22,761.93	771.82	30,872.80	0.1	8,110.87	35.63
mo	76.000	Altria Group Inc	51.85	3,940.78	67.62	5,139.12	0.0	1,198.34	30.41
amzn	243.000	Amazon Com Inc	339.94	82,605.98	749.87	182,218.41	0.6	99,612.43	120.59
aep	71.000	American Electric Power Co	58.49	4,152.92	62.96	4,470.16	0.0	317.24	7.64
axp	700.518	American Express Co.	78.98	55,328.02	74.08	51,894.39	0.2	-3,433.63	-6.21
aig	63.000	American International Group	52.76	3,323.85	65.31	4,114.53	0.0	790.68	23.79
amt	321.000	American Tower REIT Inc	96.43	30,955.05	105.68	33,923.28	0.1	2,968.23	9.59
amgn	51.328	Amgen Inc	149.25	7,660.46	146.21	7,504.67	0.0	-155.79	-2.03
03524a108	220.000	Anheuser Busch Inbev	111.37	24,500.89	105.44	23,196.80	0.1	-1,304.09	-5.32
aapl	1,704.183	Apple Inc	99.06	168,818.19	115.82	197,378.44	0.7	28,560.25	16.92
ariaOLD	600.000	Ariad Pharmaceuticals (acquired 02/17/17)	5.88	3,528.00	12.44	7,464.00	0.0	3,936.00	111.56
t	200.000	At&t Inc	37.22	7,444.75	42.53	8,506.00	0.0	1,061.25	14.26
bac	3,918.000	Bank Of America Corp	17.85	69,934.14	22.10	86,587.80	0.3	16,653.66	23.81
bku	861.000	Bankunited Inc	32.70	28,158.32	37.69	32,451.09	0.1	4,292.77	15.25
055262505	79.000	BASF AG Spons ADR	101.71	8,035.09	92.57	7,313.03	0.0	-722.06	-8.99
072730302	192.000	Bayer Ag Sponsored ADR	140.37	26,951.13	104.28	20,021.76	0.1	-6,929.37	-25.71
084670702	300.000	Berkshire Hathaway Inc Cl B	136.69	41,008.10	162.98	48,894.00	0.2	7,885.90	19.23
bhp	76.000	BHP Limited	64.79	4,923.73	35.78	2,719.28	0.0	-2,204.45	-44.77
biib	8.000	Biogen Inc	299.29	2,394.32	283.58	2,268.64	0.0	-125.68	-5.25
blk	91.000	Blackrock 2001 Term Tr Inc	335.46	30,527.21	380.54	34,629.14	0.1	4,101.93	13.44
bx	102.585	Blackstone Group LP	23.56	2,416.86	27.03	2,772.88	0.0	356.02	14.73
bp	1,158.433	Bp Plc Spons Adr	37.43	43,356.08	37.38	43,302.24	0.1	-53.84	-0.12
bmy	100.747	Bristol-Myers Squibb Co	60.69	6,114.69	58.44	5,887.68	0.0	-227.01	-3.71
cof	34.000	Capital One Financial Corp Com	82.49	2,804.66	87.24	2,966.16	0.0	161.50	5.76
cbg	100.000	CBRE Group Inc	26.53	2,652.55	31.49	3,149.00	0.0	496.45	18.72
celg	75.000	Celgene Corp	103.84	7,787.90	115.75	8,681.25	0.0	893.35	11.47
lng	147.000	Cheniere Energy Inc	77.37	11,373.39	41.43	6,090.21	0.0	-5,283.18	-46.45
cvx	421.000	Chevron Corp	110.90	46,689.53	117.70	49,551.70	0.2	2,862.17	6.13
cmg	15.000	Chipotle Mexican Grill - Cl A	630.30	9,454.57	377.32	5,659.80	0.0	-3,794.77	-40.14
ci	19.000	Cigna Corp	132.29	2,513.42	133.39	2,534.41	0.0	20.99	0.84
csco	493.000	Cisco Systems Inc	25.86	12,747.57	30.22	14,898.46	0.1	2,150.89	16.87
c	454.000	Citigroup Inc	50.64	22,988.31	59.43	26,981.22	0.1	3,992.91	17.37
ko	410.000	Coca-Cola Company	40.54	16,623.02	41.46	16,998.60	0.1	375.58	2.26
20030n101	520.000	Comcast Corp Cl A	55.61	28,915.65	69.05	35,906.00	0.1	6,990.35	24.17
clb	100.000	Core Laboratories Nv	153.20	15,320.00	120.04	12,004.00	0.0	-3,316.00	-21.64
cost	20.000	Costco Wholesale Corp-New	128.20	2,564.04	160.11	3,202.20	0.0	638.16	24.89
cvs	468.000	CVS Health Corp	82.65	38,681.13	78.91	36,929.88	0.1	-1,751.25	-4.53
233825108	173.000	Daimler Ag- Spn ADR	81.91	14,170.43	74.35	12,862.55	0.0	-1,307.88	-9.23
deck	50.000	Deckers Outdoor Corp	66.90	3,344.90	55.39	2,769.50	0.0	-575.40	-17.20
dal	93.000	Delta Air Lines Inc	40.00	3,720.03	49.19	4,574.67	0.0	854.64	22.97
dvn	41.000	Devon Energy Corp New	43.53	1,784.75	45.67	1,872.47	0.0	87.72	4.91
dfs	49.000	Discover Financial	58.12	2,847.88	72.09	3,532.41	0.0	684.53	24.04
dis	460.000	Disney Walt Co	90.49	41,623.31	104.22	47,941.20	0.2	6,317.89	15.18
dg	25.000	Dollar General Corp	64.60	1,615.01	74.07	1,851.75	0.0	236.74	14.66

DISCLAIMER: Any cost basis information contained herein is provided for informational purposes only. Please consult your tax advisor before utilizing this information with respect to any of your tax reporting obligations

Matrix Trust Company

Portfolio Appraisal – Orig Cost Basis

December 31, 2016

Security Symbol	Quantity	Security	Unit Cost	Total Cost	Price	Market Value	Pct. Assets	Unrealized Gain/Loss	Pct G/L
dow	47.000	Dow Chemical Corp	54.13	2,544.34	57.22	2,689.34	0.0	145.00	5.70
dps	15.000	Dr Pepper Snapple Group Inc	60.63	909.43	90.67	1,360.05	0.0	450.62	49.55
dhf	5,000.000	Dreyfus High Yield Strateg	4.28	21,400.00	3.36	16,800.00	0.1	-4,600.00	-21.50
etn	51.000	Eaton Corp PLC	64.76	3,302.64	67.09	3,421.59	0.0	118.95	3.60
ebay	379.000	Ebay Inc	21.28	8,064.36	29.69	11,252.51	0.0	3,188.15	39.53
eix	58.000	Edison Intl	62.14	3,603.85	71.99	4,175.42	0.0	571.58	15.86
ew	27.000	Edwards Lifesciences	92.44	2,495.83	93.70	2,529.90	0.0	34.07	1.37
epd	109.635	Enterprise Products Pptns LP	30.02	3,291.61	27.04	2,964.53	0.0	-327.08	-9.94
eog	155.000	Eog Resources Inc	89.80	13,918.38	101.10	15,670.50	0.1	1,752.12	12.59
el	328.000	Estee Lauder Cos Cl A	86.79	28,465.94	76.49	25,088.72	0.1	-3,377.22	-11.86
xom	234.750	Exxon-Mobil Corporation	91.29	21,430.72	90.26	21,188.54	0.1	-242.19	-1.13
fb	682.000	Facebook Inc-A	98.00	66,838.09	115.05	78,464.10	0.3	11,626.01	17.39
fdx	25.206	Federal Express Corp	150.45	3,792.20	186.20	4,693.28	0.0	901.08	23.76
fslr	100.000	First Solar Inc	60.08	6,008.41	32.09	3,209.00	0.0	-2,799.41	-46.59
fisv	27.000	Fiserv Inc.	66.16	1,786.23	106.28	2,869.56	0.0	1,083.33	60.65
fcx	525.000	Freeport-Mcmoran Inc	18.19	9,550.63	13.19	6,924.75	0.0	-2,625.88	-27.49
gut	4,000.000	Gabelli Util Tr	7.15	28,600.00	6.30	25,200.00	0.1	-3,400.00	-11.89
ge	1,458.000	General Electric Co	27.19	39,644.33	31.60	46,072.80	0.2	6,428.47	16.22
gild	183.746	Gilead Sciences Inc	91.76	16,859.64	71.61	13,158.07	0.0	-3,701.57	-21.96
gsk	501.000	Glaxosmithkline Plc Ads	44.78	22,434.50	38.51	19,293.51	0.1	-3,140.99	-14.00
gs	239.453	Goldman Sachs Group Inc	165.66	39,668.23	239.45	57,336.97	0.2	17,668.74	44.54
hal	128.008	Halliburton Company	48.34	6,188.09	54.09	6,923.94	0.0	735.85	11.89
hp	24.000	Helmerich & Payne	62.84	1,508.11	77.40	1,857.60	0.0	349.49	23.17
hes	72.000	Hess Corp	67.65	4,870.55	62.29	4,484.88	0.0	-385.67	-7.92
hpe	116.000	Hewlette Packard Enterprise	18.03	2,091.31	23.14	2,684.24	0.0	592.93	28.35
hd	362.824	Home Depot Incorporated	92.20	33,450.65	134.08	48,647.46	0.2	15,196.81	45.43
hon	445.000	Honeywell International	103.69	46,143.36	115.85	51,553.25	0.2	5,409.89	11.72
hpq	185.000	HP Inc	15.48	2,863.19	14.84	2,745.40	0.0	-117.79	-4.11
hsbc	426.000	Hsbc Hldgs PLC	54.29	23,127.54	40.18	17,116.68	0.1	-6,010.86	-25.99
intc	994.000	Intel Corporation	33.40	33,203.56	36.27	36,052.38	0.1	2,848.82	8.58
ibm	81.693	Intl Business Machines Inc	165.40	13,512.05	165.99	13,560.24	0.0	48.19	0.36
isrg	3.000	Intuitive Surgical	479.13	1,437.38	634.17	1,902.51	0.0	465.13	32.36
jhi	2,500.000	John Hancock Invest Trust	20.37	50,925.00	16.60	41,500.00	0.1	-9,425.00	-18.51
jnj	522.378	Johnson & Johnson	102.12	53,344.42	115.21	60,183.16	0.2	6,838.74	12.82
jpm	972.000	JPMorgan Chase & Co	56.43	54,848.99	86.29	83,873.88	0.3	29,024.89	52.92
kmb	51.812	Kimberly Clark	105.74	5,478.79	114.12	5,912.83	0.0	434.04	7.92
kr	122.000	Kroger Co	27.39	3,341.61	34.51	4,210.22	0.0	868.61	25.99
502117203	290.000	L Oreal Co Adr	33.65	9,758.50	36.41	10,558.90	0.0	800.40	8.20
lllOLD	23.000	L3 Technologies Inc (lll 01/03/17)	117.79	2,709.07	152.11	3,498.53	0.0	789.46	29.14
lyg	4,748.000	Lloyds Tsb Group Plc ADR	4.96	23,550.08	3.10	14,718.80	0.1	-8,831.28	-37.50
lulu	150.000	Lululemon Athletica Inc	62.85	9,427.16	64.99	9,748.50	0.0	321.34	3.41
502441306	452.000	Lvmh Moet Hennessy Adr	33.80	15,276.76	38.00	17,173.74	0.1	1,896.98	12.42
lyb	125.000	Lyondellbasell Indus A	79.68	9,960.08	85.78	10,722.50	0.0	762.42	7.65
mgnx	400.000	Macrogenics Inc	22.17	8,868.00	20.44	8,176.00	0.0	-692.00	-7.80
mga	32.000	Magna Int'l Inc.	52.96	1,694.60	43.40	1,388.80	0.0	-305.80	-18.05
mro	400.000	Marathon Oil Corp	23.05	9,221.20	17.31	6,924.00	0.0	-2,297.20	-24.91
ma	341.000	Mastercard Inc A	80.67	27,507.74	103.25	35,208.25	0.1	7,700.51	27.99
57886p103	200.000	Mazor Robotics Ltd-Spon ADR	17.85	3,569.75	21.92	4,384.00	0.0	814.25	22.81
mck	16.000	Mckesson Hboc Inc	189.71	3,035.41	140.45	2,247.20	0.0	-788.21	-25.97
mrk	219.000	Merck & Company Inc	58.59	12,831.37	58.87	12,892.53	0.0	61.16	0.48
mgm	1,480.000	MGM Resorts International	21.54	31,874.50	28.83	42,668.40	0.1	10,793.90	33.86
msft	1,974.000	Microsoft Corporation	47.08	92,944.54	62.14	122,664.36	0.4	29,719.82	31.98
mdlz	732.000	Mondelez International Inc	39.11	28,631.49	44.33	32,449.56	0.1	3,818.07	13.34
nwl	741.000	Newell Brands Inc	38.26	28,353.42	44.65	33,085.65	0.1	4,732.23	16.69
nlsn	46.000	Nielsen Holdings PLC	51.21	2,355.46	41.95	1,929.70	0.0	-425.76	-18.08
nke	434.861	Nike Inc.	52.16	22,682.04	50.83	22,103.98	0.1	-578.05	-2.55
ni	78.000	Nisource Inc	23.71	1,849.37	22.14	1,726.92	0.0	-122.45	-6.62
noc	14.000	Northrop Grumman Corp	159.93	2,238.96	232.58	3,256.12	0.0	1,017.16	45.43
nvs	186.000	Novartis Ag Sponsored Adr	87.34	16,245.24	72.84	13,548.24	0.0	-2,697.00	-16.60
nvo	480.000	Novo-Nordisk As	47.32	22,712.31	35.86	17,212.80	0.1	-5,499.51	-24.21
nyld	1,690.000	Nrg Yield Inc-Class C	17.96	30,352.91	15.80	26,702.00	0.1	-3,650.91	-12.03
omf	50.000	Onemain Holdings Inc	23.28	1,164.19	22.14	1,107.00	0.0	-57.19	-4.91
orcl	503.345	Oracle Corp	40.52	20,394.02	38.45	19,353.60	0.1	-1,040.42	-5.10
osk	24.000	Oshkosh Corp	55.93	1,342.44	64.61	1,550.64	0.0	208.20	15.51
panw	230.000	Palo Alto Networks Inc	163.35	37,570.45	125.05	28,761.50	0.1	-8,808.95	-23.45
pypl	300.000	Paypal Holdings Inc	30.33	9,100.28	39.47	11,841.00	0.0	2,740.72	30.12

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pep	191.000	Pepsico Inc	92.28	17,624.91	104.63	19,984.33	0.1	2,359.42	13.39
pfe	2,004.000	Pfizer Incorporated	29.14	58,401.51	32.48	65,089.92	0.2	6,688.41	11.45
718172109	317.000	Philip Morris International	85.09	26,973.30	91.49	29,002.33	0.1	2,029.03	7.52
pdi	200.000	Pimco Dynamic Income Fund	28.12	5,624.55	27.70	5,540.00	0.0	-84.55	-1.50
rcs	2,900.000	Pimco Strategic Income Fund Inc	10.55	30,595.00	8.79	25,491.00	0.1	-5,104.00	-16.68
pht	1,800.000	Pioneer High Income Trust	18.31	32,958.18	10.21	18,378.00	0.1	-14,580.18	-44.24
pcln	2.000	Priceline Group Inc/The	1,179.76	2,359.51	1,466.06	2,932.12	0.0	572.61	24.27
pg	516.534	Procter & Gamble Co	82.29	42,505.98	84.08	43,430.19	0.1	924.21	2.17
pgr	70.000	Progressive Corp	33.08	2,315.67	35.50	2,485.00	0.0	169.33	7.31
qcom	315.000	Qualcomm	74.76	23,549.40	65.20	20,538.00	0.1	-3,011.40	-12.79
771195104	465.000	Roche Hldg Ltd -Spons Adr	36.73	17,078.15	28.53	13,266.45	0.0	-3,811.70	-22.32
rost	20.000	Ross Stores Inc	50.47	1,009.30	65.60	1,312.00	0.0	302.70	29.99
sny	477.000	Sanofi - Aventis Sa Adr	52.85	25,209.45	40.44	19,289.88	0.1	-5,919.57	-23.48
803054204	211.000	Sap Aktiengesellschaft Adr	77.08	16,263.88	86.43	18,236.73	0.1	1,972.85	12.13
sbacOLD	320.000	Sba Communications Crp (sbac 01/17/17)	105.56	33,778.09	103.26	33,043.20	0.1	-734.89	-2.18
slb	841.020	Schlumberger Ltd	88.17	74,155.77	83.95	70,603.60	0.2	-3,552.18	-4.79
see	41.000	Sealed Air Corp	52.39	2,147.90	45.34	1,858.94	0.0	-288.96	-13.45
826197501	106.000	Siemens AG ADR	122.95	13,032.70	122.42	12,976.52	0.0	-56.18	-0.43
sbux	219.742	Starbucks Corp.	51.45	11,306.40	55.52	12,200.10	0.0	893.70	7.90
swft	1,719.000	Swift Transportation Co	17.26	29,661.35	24.36	41,874.84	0.1	12,213.49	41.18
syf	102.000	Synchrony Financial	29.76	3,035.85	36.27	3,699.54	0.0	663.69	21.86
tmus	46.000	T-Mobile US Inc	46.86	2,155.54	57.51	2,645.46	0.0	489.92	22.73
ttoo	600.000	T2 Biosystems Inc	18.35	11,012.90	5.26	3,156.00	0.0	-7,856.90	-71.34
gim	2,500.000	Templeton Global Income Fund	8.05	20,125.00	6.48	16,200.00	0.1	-3,925.00	-19.50
tsla	15.000	Tesla Inc	187.85	2,817.72	213.69	3,205.35	0.0	387.63	13.76
tso	50.303	Tesoro Corp	87.49	4,401.24	87.45	4,398.99	0.0	-2.25	-0.05
txn	50.000	Texas Instruments Inc	65.87	3,293.55	72.97	3,648.50	0.0	354.95	10.78
tmo	222.000	Thermo Fisher Scientific Inc	123.34	27,381.11	141.10	31,324.20	0.1	3,943.09	14.40
tcon	300.000	Tracon Pharmaceuticals Inc	12.66	3,797.95	4.90	1,470.00	0.0	-2,327.95	-61.29
twlo	225.000	Twilio Inc - A	42.29	9,514.91	28.85	6,491.25	0.0	-3,023.66	-31.78
twtr	150.000	Twitter Inc	41.02	6,152.80	16.30	2,445.00	0.0	-3,707.80	-60.26
tsn	41.000	Tyson Foods Inc Cl A	64.46	2,642.79	61.68	2,528.88	0.0	-113.91	-4.31
ubs	1,390.000	UBS Group AG	17.67	24,561.30	15.67	21,781.30	0.1	-2,780.00	-11.32
904311107	150.000	Under Armor Inc - Cl A	38.60	5,789.80	29.05	4,357.50	0.0	-1,432.30	-24.74
utx	757.000	United Technologies Corp.	104.38	79,015.30	109.62	82,982.34	0.3	3,967.04	5.02
unh	26.000	Unitedhealth Group Inc	109.07	2,835.93	160.04	4,161.04	0.0	1,325.11	46.73
usb	88.000	US Bancorp - Del	41.54	3,655.60	51.37	4,520.56	0.0	864.96	23.66
vz	84.000	Verizon Communications	48.30	4,056.82	53.38	4,483.92	0.0	427.10	10.53
v	1,045.069	Visa Inc Class A Shares	54.12	56,555.77	78.02	81,536.24	0.3	24,980.47	44.17
wmt	272.033	Wal-Mart Stores Inc	72.00	19,585.23	69.12	18,802.93	0.1	-782.30	-3.99
wfc	791.000	Wells Fargo & Co New	50.38	39,849.85	55.11	43,592.01	0.2	3,742.16	9.39
xwmfx	75.000	Western Asset Middle Market Inc Closed End	1,030.00	77,250.00	784.38	58,828.50	0.2	-18,421.50	-23.85
wea	1,800.000	Western Asset Premier Bond	14.90	26,820.00	12.95	23,310.00	0.1	-3,510.00	-13.09
wy	175.000	Weyerhaeuser Co	32.30	5,652.25	30.09	5,265.75	0.0	-386.50	-6.84
wfm	256.272	Whole Foods Market Inc.	45.04	11,542.13	30.76	7,882.93	0.0	-3,659.20	-31.70
xrx	281.000	Xerox Corp	11.65	3,272.26	8.73	2,453.13	0.0	-819.13	-25.03
xlnx	59.000	Xilinx Inc	44.93	2,650.95	60.37	3,561.83	0.0	910.88	34.36
				3,223,078.56		3,493,966.56	12.0	270,888.00	8.40
MUTUAL FUNDS									
ircy.x	1,806.692	AB International S/C-Adv	9.54	17,240.65	10.08	18,211.46	0.1	970.81	5.63
scry.x	1,230.246	AB Small Cap Core-Adv	10.04	12,351.32	11.73	14,430.79	0.0	2,079.47	16.84
aemg.x	2,199.104	Acadian Emerging Mkts Port	19.67	43,249.72	16.48	36,241.23	0.1	-7,008.49	-16.20
acax.o	8,406.788	ACAP Strategic Fund	13.03	109,522.83	12.93	108,699.77	0.4	-823.06	-0.75
alar.x	47,002.098	Alger Capital Appre Instl	27.65	1,299,622.34	26.41	1,241,325.41	4.3	-58,296.93	-4.49
chcy.x	1,439.253	AllianceBernstein Discovery Growth Fund, Inc. - Advisor	9.46	13,617.49	9.29	13,370.66	0.0	-246.83	-1.81
abys.x	609.429	AllianceBernstein Discovery Value Fund - Advisor	21.49	13,096.86	22.01	13,413.53	0.0	316.67	2.42
anay.x	20,041.569	Alliancebernstein Gl Bd Adv	8.52	170,810.95	8.35	167,347.10	0.6	-3,463.85	-2.03
rgae.x	3,472.989	Amer Funds Grth Fund R4	43.32	150,449.00	41.69	144,788.91	0.5	-5,660.09	-3.76
rlbe.x	4,723.439	American Balanced Fund Cl R-4 Shs	24.65	116,420.04	24.76	116,952.35	0.4	532.31	0.46

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rbfe.x	8,367.327	American Bond Fund Of America - R4	13.00	108,816.20	12.72	106,432.40	0.4	-2,383.80	-2.19
rire.x	4,580.899	American Cap Inc Builder -R4	59.49	272,528.62	57.63	263,997.21	0.9	-8,531.41	-3.13
rcwe.x	801.735	American Cap World Bond R4	19.76	15,843.57	18.95	15,192.88	0.1	-650.69	-4.11
rwie.x	5,957.106	American Capital World G&i-4	46.83	278,986.80	43.73	260,504.25	0.9	-18,482.55	-6.62
rdwb.x	609.497	American Dev Wld G&I-R2	10.68	6,507.26	8.98	5,473.28	0.0	-1,033.98	-15.89
rdwe.x	845.909	American Dev Wld G&I-R4	10.33	8,739.64	9.01	7,621.64	0.0	-1,118.00	-12.79
rerf.x	16,468.132	American Europacific Grth-R5	50.07	824,554.86	45.01	741,230.62	2.6	-83,324.24	-10.11
rppe.x	10,104.187	American Fds Preserve-R4	10.04	101,423.68	9.87	99,728.33	0.3	-1,695.35	-1.67
rfne.x	2,516.532	American Fundmntl Invst-R4	51.91	130,642.96	54.33	136,723.18	0.5	6,080.22	4.65
rige.x	1,254.047	American Funds International G&I R4	32.21	40,391.90	28.28	35,464.45	0.1	-4,927.45	-12.20
rgbe.x	2,529.730	American Global Bal-R4	30.29	76,625.79	29.44	74,475.25	0.3	-2,150.54	-2.81
ride.x	6,163.084	American Income Fd Amer-R4	21.50	132,522.55	21.63	133,307.51	0.5	784.96	0.59
rmfe.x	4,186.418	American Mutual Fund-R4	36.55	153,031.40	36.72	153,725.27	0.5	693.87	0.45
rnwe.x	2,028.322	American New World Fund-R4	55.06	111,678.65	51.17	103,789.24	0.4	-7,889.41	-7.06
snem.x	595.453	Bernstein Emerg Mkts Val	29.20	17,384.61	24.66	14,683.87	0.1	-2,700.74	-15.54
snid.x	12,587.691	Bernstein Intermediate Duration Portfolio	13.69	172,368.31	13.04	164,143.49	0.6	-8,224.82	-4.77
stey.x	3,981.339	Bernstein Intl Strat-Adv	9.56	38,068.18	10.12	40,291.15	0.1	2,222.97	5.84
simt.x	4,112.036	Bernstein Intl Val II	16.44	67,622.31	14.74	60,611.41	0.2	-7,010.90	-10.37
bhyi.x	7,690.507	Blackrock High Yield Portfolio	7.85	60,364.12	7.64	58,755.47	0.2	-1,608.65	-2.66
blrx.o	108.038	Blackstone RE Income Fund I	998.40	107,864.90	986.05	106,531.11	0.4	-1,333.79	-1.24
cddr.x	3,276.582	Columbia Dividend Income Fund R5	18.93	62,041.54	19.39	63,532.92	0.2	1,491.39	2.40
cekr.x	16,774.689	Columbia Emerging Markets Fund R5	9.96	167,014.64	9.49	159,191.80	0.5	-7,822.85	-4.68
dfem.x	492.121	DFA Emerging Markets I	26.50	13,039.17	22.73	11,185.91	0.0	-1,853.26	-14.21
dems.x	814.592	DFA Emerging Markets Small Cap	21.19	17,260.84	18.55	15,110.68	0.1	-2,150.16	-12.46
dfev.x	477.152	DFA Emerging Markets Value	27.82	13,275.78	23.95	11,427.79	0.0	-1,847.99	-13.92
dfgb.x	3,135.465	DFA Five Year Global Fixed Income	10.99	34,467.69	10.87	34,082.50	0.1	-385.19	-1.12
dfge.x	1,627.951	DFA Global Real Estate	10.44	16,994.49	10.40	16,930.69	0.1	-63.80	-0.38
disv.x	542.291	DFA International Small Cap Value	20.19	10,951.44	19.02	10,314.37	0.0	-637.06	-5.82
dfis.x	930.279	DFA International Small Company	18.40	17,114.60	17.27	16,065.92	0.1	-1,048.69	-6.13
dfiv.x	1,095.040	DFA International Value	18.57	20,333.99	16.76	18,352.87	0.1	-1,981.12	-9.74
dfih.x	3,237.058	DFA One-Year Fixed-Income	10.32	33,412.66	10.29	33,309.33	0.1	-103.34	-0.31
dffg.x	2,534.903	DFA Short Term Government Port	10.68	27,071.73	10.59	26,844.62	0.1	-227.10	-0.84
dfgf.x	3,351.499	DFA Two-Year Global Fixed Income	10.00	33,510.11	9.94	33,313.90	0.1	-196.21	-0.59
dflv.x	1,226.736	DFA US Large Cap Value	33.58	41,187.68	35.09	43,046.17	0.1	1,858.48	4.51
dfus.x	2,103.590	DFA US Large Company Inst Index	15.92	33,488.43	17.40	36,602.47	0.1	3,114.04	9.30
dfst.x	1,835.436	DFA US Small Cap	30.85	56,623.27	33.84	62,111.15	0.2	5,487.88	9.69
dffv.x	2,103.332	DFA US Targeted Value Portfolio	22.96	48,294.28	24.01	50,501.00	0.2	2,206.72	4.57
dhsc.x	2,474.637	Diamond Hill Small Cap Fd A	35.13	86,935.02	34.39	85,102.77	0.3	-1,832.25	-2.11
dspi.x	11,239.259	Dreyfus Institutional S&P 500 Stock Index Cl I	42.33	475,721.67	45.15	507,452.54	1.7	31,730.87	6.67
dier.x	1,570.949	Dreyfus Intl Eqty Fnd-I	30.85	48,457.26	32.52	51,087.26	0.2	2,630.00	5.43
pesp.x	851.968	Dreyfus Midcap Index Fund Inv	37.53	31,972.57	35.06	29,870.00	0.1	-2,102.57	-6.58
diss.x	745.623	Dreyfus Sm Cap Stk Indx Fund Inv	28.19	21,015.85	30.11	22,450.71	0.1	1,434.86	6.83
fhei.x	2,014.686	Fidelity Advisor Real Estate-Class I	23.26	46,857.93	22.61	45,552.05	0.2	-1,305.88	-2.79
fcnt.x	56.650	Fidelity Contrafund	101.38	5,743.14	98.46	5,577.76	0.0	-165.38	-2.88
fdgr.x	48.738	Fidelity Growth Company	130.46	6,358.28	136.78	6,666.38	0.0	308.10	4.85
fmcs.x	146.180	Fidelity Mid-Cap Stock	38.05	5,561.97	34.62	5,060.75	0.0	-501.22	-9.01
fesg.x	67.157	First Eagle Sogen Glbl C	54.37	3,651.31	52.50	3,525.74	0.0	-125.57	-3.44
fmij.x	4,416.329	Fmi International Fund	29.15	128,731.93	29.88	131,959.91	0.5	3,227.98	2.51
gtll.x	7,920.959	Glenmede Large Cap Growth PT	22.34	176,952.22	25.87	204,915.21	0.7	27,962.99	15.80
gtcs.x	2,723.480	Glenmede S/C Equity Port-Adv	27.52	74,945.26	28.82	78,490.69	0.3	3,545.43	4.73

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gsrr.x	260.123	Goldman Sachs Rising Div-R	21.27	5,532.10	20.52	5,337.72	0.0	-194.38	-3.51
hili.x	3,088.792	Hartford Intl Value Fund-I	12.56	38,799.16	14.83	45,806.79	0.2	7,007.63	18.06
rigb.x	193.715	Intl Growth & Income FD R2	33.65	6,517.66	28.16	5,455.01	0.0	-1,062.65	-16.30
oiei.x	12,521.531	JPMorgan Equity Income Fund A	13.84	173,344.31	14.96	187,322.10	0.6	13,977.79	8.06
oier.x	104,388.942	JPMorgan Equity Income R5	13.93	1,453,796.90	15.20	1,586,711.92	5.5	132,915.01	9.14
jsvu.x	4,106.690	JPMorgan Small Cap Value Fund R6	27.43	112,663.31	31.62	129,853.54	0.4	17,190.23	15.26
liso.x	3,312.838	Lazard Fds Inc Intl Str Eq Op	15.34	50,812.33	12.55	41,576.12	0.1	-9,236.21	-18.18
minj.x	1,232.491	MFS® International Value Fund R6	35.29	43,500.33	35.00	43,137.19	0.1	-363.14	-0.83
mgci.x	2,946.495	Mirae Asia Great Consumer-I	12.85	37,864.36	10.73	31,615.89	0.1	-6,248.47	-16.50
oigi.x	566.990	Oppenheimer Intl Growth Fd-I	37.07	21,020.07	34.68	19,663.21	0.1	-1,356.86	-6.46
prbl.x	2,401.407	Parnassus Inc Equity Inc	39.69	95,319.96	39.29	94,351.28	0.3	-968.68	-1.02
pfor.x	14,596.022	Pimco Foreign Bond Instl	10.62	154,984.12	10.46	152,674.39	0.5	-2,309.73	-1.49
prri.x	3,402.122	Pimco Real Ret Bd Inst	10.79	36,696.03	10.92	37,151.17	0.1	455.14	1.24
picy.x	17,641.141	Pioneer Bond Fund Y	9.70	171,140.30	9.53	168,120.07	0.6	-3,020.23	-1.76
ppca.x	3,720.025	PNC Small Cap A	20.97	78,006.66	23.26	86,527.78	0.3	8,521.12	10.92
saoo.x	15,658.429	Sanford C Bern Overlay A-1	12.66	198,190.75	11.67	182,733.87	0.6	-15,456.88	-7.80
sboo.x	15,010.962	Sanford C Bern Overlay B-1	10.74	161,210.73	10.32	154,913.13	0.5	-6,297.60	-3.91
swpp.x	455.388	Schwab S&P 500 Index	31.67	14,420.08	34.42	15,674.45	0.1	1,254.37	8.70
swts.x	4.346	Schwab Tot Stk Mktidxsel	36.56	158.87	39.74	172.71	0.0	13.84	8.71
parf.x	6,528.937	T Rowe Price 2050 Retire-ADV	13.11	85,586.73	13.04	85,137.34	0.3	-449.39	-0.53
tbci.x	74.520	T Rowe Price Blue Chip - I	72.72	5,418.85	72.62	5,411.64	0.0	-7.21	-0.13
prgt.x	26,079.379	T Rowe Price Global Technology	13.43	350,259.18	13.22	344,769.39	1.2	-5,489.79	-1.57
parg.x	12,412.147	T Rowe Price Retire 2005 Adv	13.01	161,485.66	12.82	159,123.72	0.5	-2,361.94	-1.46
para.x	1,040.767	T Rowe Price Retire 2010-ADV	16.43	17,102.48	17.28	17,984.45	0.1	881.97	5.16
parh.x	3,606.139	T Rowe Price Retire 2015 A	14.63	52,757.92	14.13	50,954.74	0.2	-1,803.18	-3.42
parb.x	47,411.566	T Rowe Price Retire 2020-ADV	20.57	975,339.87	20.28	961,506.56	3.3	-13,833.31	-1.42
parj.x	45,685.913	T Rowe Price Retire 2025 Adv	15.56	710,656.41	15.43	704,933.64	2.4	-5,722.77	-0.81
parc.x	37,725.953	T Rowe Price Retire 2030-ADV	23.18	874,336.90	22.35	843,175.05	2.9	-31,161.85	-3.56
park.x	86,347.333	T Rowe Price Retire 2035 Adv	16.78	1,449,329.42	16.22	1,400,553.74	4.8	-48,775.67	-3.37
pard.x	10,205.580	T Rowe Price Retire 2040-ADV	23.61	240,978.81	23.02	234,932.45	0.8	-6,046.35	-2.51
parl.x	109,717.234	T Rowe Price Retire 2045 Adv	16.03	1,758,625.45	15.54	1,705,005.82	5.9	-53,619.63	-3.05
paro.x	193,109.820	T Rowe Price Retire 2055 Adv	13.37	2,582,332.19	13.10	2,529,738.64	8.7	-52,593.55	-2.04
tibr.x	395.702	Thornburg Inv Income Builder R3	21.62	8,554.59	19.95	7,894.25	0.0	-660.34	-7.72
vfia.x	4,329.649	Vanguard 500 Index Adm	186.88	809,104.63	206.57	894,375.59	3.1	85,270.96	10.54
vgel.x	2,537.068	Vanguard Energy Adm	95.76	242,951.15	100.69	255,457.38	0.9	12,506.23	5.15
vigr.x	591.836	Vanguard Gr Idx	53.50	31,662.24	57.32	33,924.04	0.1	2,261.80	7.14
rmoy.x	1,644.149	Victory RS Mid Cap Growth Fund Y	20.74	34,105.43	21.90	36,006.86	0.1	1,901.43	5.58
vevi.x	4,039.412	Victory Sycamore Established Value Fund I	34.96	141,224.53	36.16	146,065.14	0.5	4,840.60	3.43
isoz.x	2,051.205	Voya SmallCap Opportunities Fund Class R6	51.98	106,615.82	59.07	121,164.68	0.4	14,548.86	13.65
				19,923,740.58		19,804,012.58	68.2	-119,728.01	-0.60
COLLECTIVE FUNDS									
oaax.s	2,428,105.387	AUL GTD Benefit Unalloc GRP Ret Annuity Stable Value Fund A	1.08	2,620,050.69	1.11	2,687,715.99	9.3	67,665.30	2.58
EXCHANGE TRADED FUNDS									
xlp	500.000	Consumer Staples Select Sector Spdr	44.85	22,425.00	51.71	25,855.00	0.1	3,430.00	15.30
faz	200.000	Direxion Daily Financial Bear 3X Shares	68.28	13,656.00	21.72	4,344.00	0.0	-9,312.00	-68.19
tza	312.000	Direxion Daily Small Cap Bear 3X Shares	60.36	18,832.32	19.85	6,193.20	0.0	-12,639.12	-67.11
feeu	307.000	FI Enhanced Europe 50 ETN	122.30	37,546.10	87.67	26,914.69	0.1	-10,631.41	-28.32
figy	524.000	FI Enhanced Global High Yld	124.39	65,177.77	129.60	67,912.55	0.2	2,734.78	4.20
flge	360.000	FI Large Cap Growth Enhanced	101.00	36,360.00	138.85	49,985.57	0.2	13,625.57	37.47
rhs	150.000	Guggenheim S&P 500 Equal Weight	96.60	14,490.00	119.42	17,913.00	0.1	3,423.00	23.62

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Matrix Trust Company

Portfolio Appraisal – Orig Cost Basis

December 31, 2016

Security Symbol	Quantity	Security	Unit Cost	Total Cost	Price	Market Value	Pct. Assets	Unrealized Gain/Loss	Pct G/L
ryu	200.000	Guggenheim S&P 500 Equal Weight Utilities ETF	72.65	14,530.00	80.78	16,156.00	0.1	1,626.00	11.19
jjg	300.000	IPath Bloomberg Grains Subindex Total Return ETN	38.81	11,643.00	28.14	8,442.00	0.0	-3,201.00	-27.49
tlt	335.000	iShares 20+ Year Treasury Bond	113.09	37,885.15	119.13	39,908.55	0.1	2,023.40	5.34
ciu	150.000	iShares Intermediate Credit Bo	110.14	16,521.00	108.19	16,228.50	0.1	-292.50	-1.77
slv	500.000	ISHARES SILVER TRUST ISHARES	20.08	10,040.00	15.11	7,555.00	0.0	-2,485.00	-24.75
ihf	100.000	iShares U.S. Healthcare Provid	105.66	10,566.00	125.28	12,528.00	0.0	1,962.00	18.57
idu	200.000	iShares US Utilities ETF	107.02	21,404.00	121.83	24,366.00	0.1	2,962.00	13.84
pty	1,500.000	Pimco Corporate & Income Opportunity Fund	18.52	27,780.00	14.31	21,465.00	0.1	-6,315.00	-22.73
pci	400.000	Pimco Dynamic Credit and Mortgaga Income Fund	23.46	9,384.00	20.22	8,088.00	0.0	-1,296.00	-13.81
phk	2,000.000	Pimco High Income Fund	13.44	26,880.00	9.17	18,340.00	0.1	-8,540.00	-31.77
pth	80.000	PowerShares DWA Healthcare Momentum Portfolio	48.01	3,840.80	48.00	3,840.00	0.0	-0.80	-0.02
pjp	150.000	Powershares DYN Pharmaceutic	60.89	9,133.50	56.03	8,404.50	0.0	-729.00	-7.98
dog	1,800.000	Proshares Short Dow30	24.56	44,208.00	19.04	34,272.00	0.1	-9,936.00	-22.48
sh	275.000	Proshares Short S&P 500	45.50	12,512.50	36.54	10,048.50	0.0	-2,464.00	-19.69
skf	192.000	Proshares Ultrashort Financials	58.56	11,243.52	30.60	5,875.20	0.0	-5,368.32	-47.75
qid	121.000	Proshares Ultrashort QQQ	44.18	5,345.78	23.93	2,895.53	0.0	-2,450.25	-45.84
twm	276.000	Proshares Ultrashort Russell 2000	45.33	12,511.08	23.72	6,546.72	0.0	-5,964.36	-47.67
sds	572.000	Proshares Ultrashort S&P 500	24.09	13,779.48	15.11	8,642.92	0.0	-5,136.56	-37.28
schb	1,844.333	Schwab US Broad Market	49.06	90,484.01	54.18	99,925.93	0.3	9,441.92	10.43
xlu	600.000	Select Sector Spdr Utilities	42.65	25,590.00	48.57	29,142.00	0.1	3,552.00	13.88
xbi	300.000	SPDR Biotech ETF	86.48	25,944.76	59.19	17,757.00	0.1	-8,187.76	-31.56
gld	40.000	SPDR GOLD TRUST GOLD SHS	125.62	5,024.80	109.61	4,384.40	0.0	-640.40	-12.74
ips	200.000	Spdr S&P Int Consumer Staple	42.06	8,412.00	39.55	7,910.96	0.0	-501.04	-5.96
iry	80.000	Spdr S&P Intl Health Care	48.86	3,908.80	43.50	3,480.00	0.0	-428.80	-10.97
ipu	1,300.000	Spdr S&P Intl Utilities Sect	19.88	25,844.00	14.84	19,288.10	0.1	-6,555.90	-25.37
vwo	100.000	Vanguard FTSE Emerging Market	44.86	4,486.00	35.78	3,578.00	0.0	-908.00	-20.24
vpu	250.000	Vanguard Utilities ETF	93.02	23,255.00	107.01	26,752.50	0.1	3,497.50	15.04
				720,644.37		664,939.32	2.3	-55,705.05	-7.73
NOTES/MISC ASSETS/TRUST DEEDS									
particip		Master Participant Loan		532,608.26		532,608.26	1.8		
CASH AND EQUIVALENTS									
bern		Bernstein Cash		2,780.53		2,780.53	0.0		
retire		Cash		14,062.24		14,062.24	0.0		
dwcash		Morgan Stanley Cash Acct		1,687.50		1,687.50	0.0		
permm		Pershing Cash Account		84.00		84.00	0.0		
rjcash		Raymond James Cash Acct		50,542.48		50,542.48	0.2		
schwab		Schwab Cash Account		1,030.44		1,030.44	0.0		
swmxx		Schwab Money Market Fund		1,283,872.35		1,283,872.35	4.4		
scottcash		Scottrade Financial Services Cash Acct		334,605.11		334,605.11	1.2		
				1,688,664.65		1,688,664.65	5.8		
Total Portfolio				**28,865,210.43**		**29,028,330.67**	**100.0**	**163,120.24**	**0.57**

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